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AMBASSADORS GIRLS SCHOLARSHIP PROGRAM

GIRLS' MENTORING RESOURCE GUIDE

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AFRICA EDUCATION INITIATIVE

AMBASSADORS GIRLS SCHOLARSHIP PROGRAM

Girls account for the majority of the 33 million children in Africa who do not attend school because of economic hardship or other adverse circumstances. To address this gap in girls' education, the Africa Education Initiative - AMBASSADORS GIRLS SCHOLARSHIP PROGRAM (AEI-AGSP) was launched to provide scholarships and mentoring to girls in sub-Saharan Africa. AGSP provides necessities such as school fees, books and supplies, and uniforms as well as mentoring in HIV/AIDS and life skills for mostly primary-school children.

The program targets academically motivated girls who are orphaned or otherwise vulnerable, including those from economically disadvantaged families, who are physically disabled, and/or who are adversely affected by HIV/AIDS. Because many boys fall into these categories, scholarships and mentoring for 21,000 boys were added to the program in 2007.

Mentoring activities promote strong academic results, self esteem, and goal-setting. Homework clubs, workshops, field trips, sports, drama, and cultural activities give children opportunities to learn and grow. Mentors serve as positive role models and educate students about preventing the spread of HIV/AIDS. Individual counseling provides the extra support that vulnerable children need to succeed.

The objectives of AGSP are to encourage the enrollment and retention of the most vulnerable children in school, as well as to promote HIV/AIDS awareness and gender-equitable development. The program also strives to build local partner capacity and to increase democratic, transparent participation in education. Forty countries participate in the program and over 300,000 scholarships have already been awarded to scholars in Africa.

The US Agency for International Development (USAID)—Bureau for Africa, Office of Sustainable Development, Education Division—implements AGSP. USAID currently carries out the program through three US-based nonprofit organizations—the Academy for Educational Development (AED), Winrock International, and World Education. These organizations work closely with more than a hundred local partners, maintaining contact and managing the identification, awarding, and tracking of scholarships and mentoring activities for the children. American embassies, USAID missions, and others provide advice on the implementation of the program in the various countries.

Three cross-cutting themes—mentoring, HIV and AIDS, and parent and community participation—are woven into all elements of the program. Where possible, children affected by HIV/AIDS are given special consideration for scholarships. Scholarships and awareness-raising during mentoring increase the understanding of HIV/AIDS and mitigate its impacts. Community participation is strongly encouraged. Community members and parents often participate in local scholarship selection panels and in mentoring programs.

AEI-AGSP scholarships are changing lives. Scholarship recipients are excelling in school and in many cases achieving higher levels than their peers. The focus on education and the visible success of girls are changing attitudes within families and communities. The addition of boys will create a greater consensus on the need for gender-equitable development across the continent.

NOTE TO OUR READERS:
This resource guide is made possible by the support of the American People through the United States Agency for International Development (USAID).

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ACKNOWLEDGMENTS

The creation of this *Girls' Mentoring Resource Guide* could not have been possible without the support of several organizations and individuals dedicated to girls' education and women's leadership development. I would like to thank those who work with us to implement USAID education programs in Africa, our local partners in Africa and the girls and boys for whom the guide is intended. Most importantly, I would like to express profound appreciation to the women and men who mentor children, who inspired this guide and for whom it was compiled. The mentors' ideas and experiences have been woven into the fabric of the *Resource Guide*; their continued work and dedication to girls is priceless.

As a mentor, you have the opportunity to profoundly impact lives. A mentor is someone a girl or boy can look to for advice and support, about school, personal life, or career decisions. Moreover, at a time when HIV/AIDS affects so many communities, mentors can serve as role models who provide guidance that will help young people make healthy choices about their future.

The *Resource Guide* is designed to provide a training tool for adults who mentor pre-adolescent and adolescent children, particularly girls, in Africa. The content is based on experiences working with girls, as well as feedback received from organizations and people who have participated in the AMBASSADORS GIRLS SCHOLARSHIP PROGRAM (AGSP), an Africa Education Initiative program implemented by the US Agency for International Development (USAID). AGSP has provided scholarships and mentoring to thousands of girls throughout sub-Saharan Africa, thanks in great measure to the work of local non-governmental organizations which have helped implement this important program since 1999.

The *Resource Guide* is designed both for adults who have extensive experience mentoring girls and those who are new to their role as mentors. It provides mentors with information and resources about a variety of topics faced by girls. The easy-to-follow outlines for each activity and detailed questions for further discussion will help mentors translate

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WINROCK INTERNATIONAL/MASOYI HOME-BASED CARE

information into fun, interactive, and dynamic exchanges with girls. Mentors are strongly encouraged to adapt these activities to the experiences and culture of girls in their communities, and to adapt them for boys as well.

Being a mentor takes time and energy. At times, it may not be an easy role. We hope that the issues presented here stimulate discussion among girls, as well as dialogue between girls and their mentors, about the challenges and joys in girls' lives today. As mentors, we believe you are able to provide girls with the support they need to grow up healthy and make sound decisions about their future, and grow to achieve their full potential.

I would like to acknowledge the contributions made to this *Resource Guide* by individuals who help implement AGSP. I would like to start with the staff of Winrock International who developed and field tested the guide: Martha Saldinger, Alison Pflepsen, Julia Miller, Pamela Woodard George, Carol Michaels O'Laughlin, Jaimie Bleck, Isidore Boutchué, Aminata Fall Diaw, Alissa Karg, Maggie Range, and Mary Taylor Hassouna.

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Finally, I would like to express my appreciation to our visionary US Ambassadors who champion girls' education in Africa, and the USAID Mission Directors and Education Officers who work tirelessly to promote educational development across the continent.

Thank you for your commitment to helping Africa's next generation of leaders.

—Dr. Sarah E. Moten
Education Division Chief
USAID Bureau for Africa

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INTRODUCTION TO USING THE *RESOURCE GUIDE*

The Africa Education Initiative - AMBASSADORS GIRLS SCHOLARSHIP PROGRAM (AEI-AGSP) *Girls' Mentoring Resource Guide* was originally conceived to provide activities, information, and ideas to those men and women who provide mentoring to the girls in the program. The *Resource Guide* targets scholarship recipients from ages 10 and older. It was designed to offer these girls the skills, knowledge, and ability to navigate everyday life and to prepare for a healthy adulthood.

In 2007, however, USAID announced the expansion of the program to reach vulnerable boys with scholarships and mentoring. Much of the content in these lessons is equally applicable to boys. For example, boys have just as great a need as girls to understand human reproductive systems, career questions, or how to resist peer pressure. The sessions on topics such as gender and the importance of girls' education can also help boys by enabling them to play a more positive and supportive role in their families and communities.

New supplementary materials are being developed that provide suggestions for adapting these materials for boys. New modules will address some topics not covered in the *Resource Guide* or expand on certain key issues included here. Although the activities in the present *Resource Guide* are certainly adaptable for boys or mixed groups, the original language that refers to participants as girls has been preserved.

Finally, while this book is aimed at mentors, it is also a useful tool for those in organizations who are seeking to train mentors or other youth leaders.

Getting Started

Before you begin facilitating activities in the *Resource Guide*, we recommend the following preparations:

1. **Familiarize yourself with the *Resource Guide*.** The first thing you should do is read through the *Resource Guide* so that you understand both its content and structure. This will give you a good idea of its overall goal, individual session objectives, and the kinds of activities and discussions you are expected to facilitate.

2. **Read Module 1.** This module provides an in-depth explanation of a mentor's role. **Organizations can use sessions 1–4 during a workshop for the training of mentors.** If this is not possible, consider gathering other mentors in your area and doing the exercises yourselves as a group. Otherwise, you, the mentor, can read and reflect on the exercises on your own. However, we highly encourage you to do the activities with a group of mentors or other youth leaders, as your discussions will provide insight into your roles as mentors. **Session 5 of this module was designed for the first meeting between mentors and the students or "mentees."**

3. **Seek the consent of participants' parents or guardians.** Before you begin any mentoring activities, make sure to inform parents, guardians, teachers, community members, or others involved in girls' education. **Some of the modules contain information on sexuality and HIV/AIDS prevention, so obtaining the consent of parents is extremely important.** You may want to officially "launch" your mentoring program with an introductory session for these individuals. At this session, the facilitator or lead mentor should explain: the concept and importance of mentoring; the mentoring program; parents', caregivers', and teachers' roles; and the benefits for the girls and their caregivers and teachers. After the initial program launch, the mentors may want to provide periodic updates to this group to ensure their continued support.

4. **Decide with whom you will meet and when you will hold meetings.** The activities and discussions are designed for girls ages 10 and up. However, you may choose to include other girls based on your program requirements. We recommend that you conduct activities with a **small group of girls** (about 10–30) and that you **meet at least twice a month,** if possible. This will keep the information fresh in girls' minds as you progress from one session to another. You should encourage girls to attend every session. However, girls do not have to attend every session in order to continue participating. Also, be sure to select a location that is safe, accessible, and comfortable; for example, it could be a school, a place of worship, or a community center.

Structure of the *Resource Guide*

Each topic is presented in a separate module, or chapter, which contains detailed instructions on preparing and facilitating the session. Each session is made up of anywhere from two to six activities.

Module 1 begins by explaining mentors' roles and how they can develop a positive mentoring relationship. Modules 2–4 cover gender and girls' rights, the importance of girls' education and empowerment, and leadership. Modules 5 through 8 focus on a range of adolescent and young-adult issues, including relationships, stress management, reproductive health, and HIV/AIDS. Module 9 addresses jobs and careers, and an optional module found in Annex 8 introduces the subject of computers and internet technology.

At the beginning of each session, you will find the session's objectives, a list of materials necessary for the activities, preparation you should do before the session, and key terms. Each session is written in outline format, with step-by-step instructions for facilitating activities and discussions. At the end of each module, you will find suggestions for additional activities. You may choose to do these at another time depending on girls' interests. Annex 1 also contains resources for each module, including Internet web sites and the names of organizations that may be able to provide information or assistance.

All activities in the *Resource Guide* can be facilitated by one person. However, a co-facilitator is encouraged whenever possible. For mixed groups of girls and boys, it is best to have one male and one female facilitator. For some sessions, you will find that we recommend engaging the assistance of a health professional or another person familiar with that particular topic. You will need to read through the material several times to familiarize yourself with the activities before facilitating a session.

Mentoring Overview

A mentor is a person who serves as a role model and provides guidance, support, and encouragement to another person. An AGSP mentor is a woman or man who is: committed to the education and advancement of young people, a good role model, and willing to invest time and energy in working with students in individual or group settings to encourage, motivate, and support them in their school work and life.

Mentoring has always been important in Africa. Formal mentoring as presented in this *Resource Guide* is particularly necessary now for a variety of reasons. In many African communities, most upper-primary and secondary-school teachers are male. These years are extremely important for the development of girls' self-identity, self-esteem, and physical, emotional and mental maturity. Having a female mentor can help girls succeed in this phase of their lives.

Mentored girls have the opportunity to develop an open dialogue with someone they can trust. They have opportunities to learn by participating in activities that are interesting and fun. Particularly in the case of orphans, mentoring provides the type of support and encouragement that they may not find at home. Mentored girls gain a role model to provide guidance as they grow, mature, and plan their futures.

While boys may have more role models in the form of male teachers, they may not always be able to establish mentoring relationships with their instructors. Boys need the same guidance, support, and positive role models as girls.

Facilitating Mentoring Sessions

Although the *Resource Guide* was developed for girls ages 10 and older, **mentors should review each session and consider adapting the sessions and activities depending on the students' age, education level, culture, time available, and whether the students are girls, boys, or a mix of both.** Addressing issues of sexuality is best done in single-sex sessions. Some of these topics and the issues they raise may be difficult for young people and their mentors to discuss. Consequently, mentors are advised to seek assistance from other professionals and community leaders as needed. The manual should be viewed as a dynamic rather than static document, to be modified to address the girls' needs, experiences, and interests.

The sessions in the *Resource Guide* are designed to be conducted in the order in which they appear, as later sessions build on earlier ones. However, depending on girls' experiences or interests, you may choose to conduct some of them in a different order. (For example, you may decide to conduct the module on computers at any time.)

Key Tips for Facilitating Successful Sessions:

- Activity and discussion times are estimated and may vary. Depending on the girls' energy level or interest in a particular subject or activity, you may have to divide a session into two separate sessions, or combine sessions if you are able to meet with participants over an extended period of time.
- If possible, try to hold a variety of mentoring activities, including group discussions, individual meetings, home visits, and field trips to places of interest in the community. Group debates, guest speakers, and creative activities (drawing, writing poetry or songs, and acting) will keep students more engaged in learning and growing. You may also encourage students to investigate a topic in the community and present their findings to the group.
- Arrange seating in a circle, if possible. This will ensure that participants can see and hear each other, as well as avoid recreating a school-like atmosphere.
- Consider making a suggestion/question box for participants to raise questions or issues anonymously.

Key Tips for Facilitating Successful Sessions (Continued)

- Before beginning a session, conduct an icebreaker. An icebreaker is a short game or activity that energizes participants and helps them to feel comfortable with each other. (See Annex 2 for ideas.) You also may need to take breaks or conduct a short game between activities to re-energize participants.
- You should establish set ground rules together with the girls at the beginning regarding respectful behavior, attendance, confidentiality, and punctuality. Remind girls that they should respect each other's opinions. No one should laugh at or make fun of anyone's questions or comments.
- Keep mentoring discussions confidential. Some girls may share very personal information with you or ask private questions. You should keep all of this information to yourself in order to establish mutual trust. However, in cases where a girl may be in danger or at risk of abuse, you should share the information with someone else, such as a school administrator, parent, or local official who can help remove the girl from danger. In addition, the girls themselves should make an agreement not to share confidential information with anyone outside the group.
- Keep good records of all girls' personal information (name, contact information, age, school, grade level, and anything else of importance) and mentoring activities. Provide a sign-in sheet for each session and note the mentoring topic and any guest speakers. This will help you keep track of the topics you have already addressed and areas that may need further exploration. You may also note those activities that went well and those that may need adjusting. This will help both you and your local organization to organize successful mentoring sessions in the future.
- Be sure to seek girls' feedback on a regular basis regarding session topics, for example through the collection of end-of-session questions. You may find they want to spend more time or less time on particular topics. Remember that the mentoring program is for them and must respond to their needs.
- Other mentors can be a great resource of information, experience, and collaboration! Be sure to contact your fellow mentors if you have questions or concerns while facilitating sessions.

Community Involvement and Participation

It is essential for the success of mentoring programs to involve the entire community, including parents, teachers, and community representatives. Community participation will raise awareness of the importance of education for all and help avoid potential problems in carrying out the mentoring program. Community involvement can take a variety of forms, such as inviting guest speakers and/or parents to help plan and attend mentoring events, or inviting the community to participate in awareness campaigns for girls' education or HIV/AIDS. The following groups can be particularly helpful in ensuring program success:

Parents or Guardians and Teachers

Parental involvement helps the entire family to understand the purpose and benefits of mentoring and may ensure that girls will attend mentoring events. The involvement of teachers and school administrators can give the mentor a better understanding of the challenges a girl is facing in school. Involving parents and school staff helps open lines of communication to address any problems or concerns and provide unified support.

Community Members

Mentoring activities should seek to directly include community members in order to increase awareness as well as provide additional support for the girls in the program. For example, a field trip for the girls to a local government ministry office could educate the girls on a possible future in public service and politics, while helping to illustrate the importance of girls' education to the ministers. This shared relationship between the girls and the community will increase the chances for the long-term success of AGSP and the goal of education for all.

The Role of Men and Boys in Supporting Girls' Education

Achieving gender equality includes girls' education but also requires other changes: at home, at work, at school, in politics, and in the media. In societies where males have a real or perceived social, cultural, financial, legal, or political advantage over females, the involvement of men and boys is essential to gaining the support of the entire community for change and progress.

When men and boys help educate and empower women and girls, they support the improvement of society as a whole. Men and women should be partners in the family and the community. Men and women can learn to jointly discuss key issues such as education, food security, HIV/AIDS, gender-based violence, and family spending. Parents can also promote equal sharing of agricultural and domestic chores that often fall entirely on girls. It is also very important that all men and women, boys and girls work together to develop positive relationships and prevent gender-based violence.

Mentors can provide girls with vital support and encouragement. We hope that this *Resource Guide* will help you as you give your time to nurturing and mentoring girls in your community.

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GLOSSARY OF TERMS

Active listening: Listening to someone in a way that demonstrates that you understand the person's feelings, thoughts, or ideas

Adolescence: A period of physical and psychological development, beginning with the onset of puberty, that lasts until maturity. Adolescence generally lasts between ages 10–19.

AIDS (Acquired Immuno-deficiency Syndrome): A collection of diseases caused by HIV

Anal sex: Sex during which a man's penis is inserted into his partner's anus or rectum

Arousal: The act of becoming sexually excited

ART (Anti-retro viral therapy): Treatment for HIV, which can include several different ARVs

ARVs (Anti-retro virals): A type of medicine used to treat (but not cure) people with HIV. There are several different types of ARVs.

Birth control: A term often used to describe contraception

Birth spacing: Regulation of the frequency of pregnancies to help ensure the health of the mother and child

Career: A chosen field of work, or profession, usually followed for several years

Communication: Transmission or exchange of ideas through talking, writing, listening, and nonverbal behavior

Consensual marriage: Marriage that is mutually and freely agreed by both partners

Contraceptive/Contraception: A natural method or an artificial device, such as a condom or birth-control pills, used to prevent pregnancy

Convention: An agreement between states for regulation of matters affecting all of them

Corporal punishment: The causing of physical pain on someone convicted of committing a crime or breaking a rule

Cure: A form of medicine that can completely eliminate a disease from a person's body. There is no cure for HIV.

Depression: A mental disorder marked especially by sadness, inactivity, difficulty in thinking and concentration, a significant increase or decrease in appetite and time spent sleeping, feelings of hopelessness, and sometimes suicidal tendencies. Depression can also be just a general state of feeling sad.

Discriminate: To treat someone differently based upon a certain characteristic

Discrimination: Unfair treatment of a person or group of people based on ethnicity, religion, sex, or other defining characteristics

Division of labor: The way that tasks or jobs are often classified based on whether they are traditionally performed by men or women

Early marriage: Marriage before a person has become an adult (approximately age 18)

Ejaculation: The rapid discharging of sperm from a man's penis

Empathy: Understanding a person's feelings or thoughts from his or her perspective

Empower: To enable another person to accomplish something

Enforcement: The effective carrying out of a rule or law

Erection: The hardening, swelling, and rising of the penis as it fills with blood when a man becomes sexually excited

Facilitate: To lead activities and discussion in a workshop or teaching session

Family planning: Using contraceptives or birth control to regulate the frequency and number of pregnancies

Fertilization: When a sperm and egg cell unite, usually resulting in a pregnancy

Forced marriage: Marriage in which one or both partners does not consent

Gender: The division of men and women based on cultural expectations and roles and responsibilities

Gender discrimination: Unfair treatment of a person or group—male or female—based on gender

Gender role: A characteristic, job, or quality assigned to either a man or a woman that is considered to be either "masculine" or "feminine"

Genital discharge: Fluid or mucus released from the genitals. A person with an STI may have discharge that is yellow or green, or smells different than normal.

Goal: Something that a person works to accomplish

HIV (Human Immuno-deficiency Virus): The virus that causes AIDS

HIV-: Symbol used to indicate that someone has tested negative for the HIV virus

HIV+: Symbol used to indicate that someone has tested positive for the HIV virus

Human rights: Rights (such as freedom from unlawful imprisonment or torture) regarded as belonging fundamentally to all persons, regardless of nationality, place of residence, sex, national or ethnic origin, color, religion, language, or any other status

Immune system: The body's natural defense mechanism against sickness

Infatuation: Intense, often temporary, feelings of love or physical attraction for someone

Infertile: Physically unable to have children

Job: A particular task or activity, usually done in return for payment

Kissing: When one person's lips touch another person's lips

Law: A binding custom, community practice, or a rule of conduct set down or formally recognized as compulsory or enforced by an authority

Leader: A person who influences or motivates others within a particular community; a role model

Leadership: The ability to influence or motivate others

Legal rights: Something to which one has a just claim under the law

Love: Strong affection for another arising out of kinship or personal ties; attraction based on sexual desire, or affection and tenderness felt by lovers; affection based on admiration, benevolence, or common interests

Masturbation: An act during which a person touches his or her own genitals to stimulate pleasure

Mature: Characteristic of or suitable to a grown-up individual or adult; based on slow careful consideration

Men's work: Work or jobs that are usually performed by men

Menstruation: Discharge of blood and other fluids from the uterus due to a lack of pregnancy. Usually begins during puberty and occurs approximately once every month.

Mentee: Someone who receives guidance or instruction from someone else

Mentor:
Noun: An adviser or role model, such as a teacher or someone active in the community
Verb: To advise or counsel someone

Mentoring: A process through which one person acts as a role model and offers guidance and support to another person

Mutual masturbation: When two people touch each other's sexual organs with their hands to stimulate pleasure

Non-traditional job: For women, it means a job that is not usually performed by women; for men, it would mean a job not usually performed by men.

Nonverbal behavior: Actions used to communicate without using words

Obstacle: Something that prevents something else from happening

Opportunistic infections: The name for diseases and illnesses (like tuberculosis and diarrhea) that a person with HIV is likely to catch because of his or her weak immune system

Oral sex: Sex during which a man's mouth or lips come into contact with a woman's genitals, or a woman's mouth or lips come into contact with a man's penis or genitals

Ovulation: When a woman's ovaries release a mature ovum (egg) each month. The period of ovulation is when a girl or woman is most likely to become pregnant.

Ovum: The female sex cell (egg)

Peer: A person close to your age who has similar life experiences

Peer pressure: Pressure from friends or other peers to do certain things or to act in a certain manner

Platonic relationship or platonic friendship: A relationship or friendship marked by the absence of romance or sex

PLWHA: People living with HIV/AIDS

Port of entry: A place on a person's body where HIV can enter, such as an open wound or the lining of the vagina

Prevalence: In medical terms, prevalence is the percentage of a population that is affected with a particular disease at a given time.

Profession: A chosen field of work requiring specialized knowledge and often long and intensive academic preparation

Puberty: The time of life when a girl's body develops into that of a woman and a boy's body develops into that of a man. These changes usually begin around ages 10–11 and last until age 17–21. (Boys may experience puberty later than girls.)

Put-down: a word, phrase, expression, statement, gesture, or situation that results in a person feeling not good enough, not important, not capable, or less valued or significant than before

Reproductive health: A person's well-being in relation to reproduction's physical, emotional, and social aspects

Respect: High or special regard, esteem

Right: something to which one has a just claim

Self-confidence: Feeling confident in oneself or competent in one's abilities

Self-esteem: A confidence and satisfaction with oneself, self-respect

High self-esteem: Good feelings about oneself. People with high self-esteem know they are worthy of love and respect.

Low self-esteem: Poor feelings about oneself. People with low self-esteem do not expect love and respect from others because they feel unworthy of it.

Sex: The biological condition of being male or female

Sexual abstinence: Not having any type of sex, including vaginal sex, anal sex, or oral sex

Sexual abuse: The forcing of undesired sexual acts by one person on another

Sexual exploitation: Any abuse of a position of vulnerability, difference in power, or trust for sexual purposes; this includes profiting monetarily, socially, or politically from the sexual exploitation of another.

Sexual harassment: Uninvited and unwelcome verbal or physical behavior of a sexual nature, especially by a person in authority toward a subordinate (such as an employee or student)

Sexual intercourse: Sexual intercourse occurs when a man inserts his erect penis into a woman's vagina.

Sperm: The male sex cell that combines with the female ovum (egg) in the process of fertilization

Sperm production: When a boy's or man's body (the testes) produces sperm

STI: Sexually transmitted infection (also sometimes referred to as STD, sexually transmitted disease)

Stigmatize: To negatively describe or identify a person or group based on a particular characteristic

Strategy: A plan to overcome an obstacle and accomplish a goal

Stress: Mental, physical, or emotional reactions resulting from various situations we encounter in our lives

Transmit: To pass something from one person to another

Treatment: A form of medicine that can decrease the effects of a certain disease, but not eliminate the disease. As the treatment for HIV, ARVs can make an HIV-positive person healthier but not cure or get rid of the disease.

Vaginal sex: Sex during which a man's penis is inserted into a woman's vagina; also known as "sexual intercourse"

Validate: To recognize or affirm the worthiness or legitimacy of something or someone

VCT (Voluntary counseling and testing): The process whereby a person goes for an HIV test and receives pre- and post-test counseling

Women's work: Jobs that are usually performed by women, such as cooking and taking care of children

USAID
FROM THE AMERICAN PEOPLE

GIRLS' MENTORING RESOURCE GUIDE

MODULE 1: BECOMING A GOOD MENTOR

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MARTHA SALDINGER/WINROCK INTERNATIONAL

Becoming a good mentor takes time and experience. Some people may be naturally skilled at talking to young people and motivating them to do well. However, most people need guidance and training before they become mentors.

Module 1 is designed for both new mentors and those with some experience. The sessions will help mentors understand their roles, their responsibilities, and the mentoring process. The activities also will provide mentors with an opportunity to share ideas about mentoring. In addition, the activities and discussions will give mentors a chance to learn and practice specific mentoring skills, including how to facilitate good communication and provide support and guidance to girls. The last session in the module will allow mentors and girls to come together to discuss their mentoring relationship and define expectations and roles.

Note to facilitator:

Sessions 1–4 are two-hour sessions intended for training mentors. Organizations may wish to use these during a workshop for training their mentors as a group. If this is not possible, consider inviting other teachers or adults in your area who supervise after-school student groups or activities to do the training together. Otherwise, you may read these sessions on your own and reflect on the exercises and your own responses. While some activities are best done with a group or partner, individual mentors will also benefit from reading through the material and performing the exercises. **Session 5** is designed for the first meeting between the mentors and the students/mentees.)

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SESSION 1:
UNDERSTANDING A MENTOR'S ROLE

Time allotted: 2 hours

Objectives

- Facilitate communication and collaboration among mentors
- Define mentoring, mentoring goals, and a mentor's role
- Identify the mentors' skills and goals
- Identify characteristics of a good mentor
- Discuss a mentoring agreement
- Exchange mentor contact information

Key Terms

- **Facilitate:** To lead activities and discussion in a workshop or teaching session
- **Mentee:** Someone who receives guidance or instruction from someone else
- **Mentor:**
  - **Noun:** An adviser or role model, such as a teacher or someone active in the community
  - **Verb:** To advise or counsel someone
- **Mentoring:** A process through which one person acts as a role model and offers guidance and support to another person

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants (if they are not expected to bring their own)
- Pens or pencils for taking notes
- Paper to collect participants' names and contact information
- **Handout 1: Mentoring Agreement Worksheet, Handout 2: Mentoring Guidelines, Annex 2: Icebreakers**

Preparation

1. Select a discussion facilitator. (This can be a mentor, teacher, or qualified community member.)
2. The facilitator should review the entire session in advance to become familiar with the content.
3. Gather materials.
4. Write objectives and definitions of key terms as listed above on chalkboard or flipchart paper.
5. Bring **Handout 1: Mentoring Agreement Worksheet** and **Handout 2: Mentoring Guidelines** and make copies for all participants if possible.
6. Select an introduction game as an icebreaker from **Annex 2** to start the meeting.

Remember: During the session, make a sign-up sheet and ask each participant to write his or her contact information, including name, title/profession, home or work address, telephone numbers, and e-mail address. Make copies of the contact information and distribute it to mentors so they can contact each other.

INTRODUCTION

Time allotted: 15 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. **Overview explanation for participants:** This session is designed to bring together both new and experienced mentors of pre-adolescent and adolescent girls to discuss their mentoring roles. New mentors can ask questions, and the more experienced mentors can share ideas and information. The end goal is to have a unified understanding of the mentor's role (especially if the mentors will be working with girls from the same school or area).
3. Ask mentors what they hope to get out of this session. Record their expectations on a chalkboard or flipchart paper. Compare session objectives with mentors' expectations and acknowledge what can be addressed in the session.

Activity 1: Defining "Mentoring"

Time allotted: 25 minutes

Facilitation Steps:

1. Discuss the questions below in small groups. Explain that the answers to the questions below may be different for each individual. Ask one person per group to report back on the group's answers. Allow each group 15 minutes to discuss the following questions:
   - How do you define mentoring?
   - How do you define "mentor"?
   - Who can be a mentor?
2. Invite each group to share its answers with the large group.
3. Explain: For some people, a mentor is someone in a position of power who teaches others how to excel in school, a job, or career. To others, a mentor is someone who provides advice and acts as a role model. Another group may think that a mentor is someone who helps people solve their problems. In reality, a mentor can be some or all of those things. A mentor may be a village elder, a religious leader, a friend or family member, or a schoolteacher. A mentor may be employed or unemployed, literate or unschooled. Of course, it would be difficult for someone who has not studied mathematics to mentor someone in physics, but not all mentoring skills are the same. For example, a girl can have several mentors, each with different experiences or skills. A teacher may mentor the girl in her school work, and the girl's aunt may be her role model for leadership.

FUN FACTS

Fun Fact: The word "mentor" comes from Greek mythology. Mentor was the name of the person who cared for the child of the Greek hero Odysseus. According to legend, Mentor embodied both traditionally male and female qualities. But in the end, Mentor revealed herself to be the Greek goddess Athena in disguise!

4. Share the following mentoring ideas with the participants. Encourage mentors to discuss the following points:

- Mentoring is a process in which one person guides, advises, supports, and/or acts as a role model for someone else.
- A mentoring relationship sometimes embodies characteristics found in a professional relationship (such as that between a teacher and student, or a supervisor and her assistant), but it can also contain elements of a friendship.
- Usually, a mentor is older and more experienced than the mentee. However, the mentor, too, often learns from the mentee. Peer mentors who are close in age to their mentees can also provide valuable guidance and encouragement.
- A mentee and mentor have respect for each other and usually agree on certain guidelines for their relationship. Their relationship can last anywhere from a few months to several years.

Activity 2: Why Become a Mentor?

Time allotted: 20 minutes

Facilitation Steps:

Overview: It is important to understand why you want to become a mentor and what you hope to get out of a mentoring relationship. Usually, someone wants to be a mentor to help others—to share his or her expertise, experience, guidance, and advice.

1. Ask participants to write the numbers 1–5 on a piece of paper. They may want to keep this paper for future reference and inspiration when they are mentoring girls.

Note to facilitator:
If you decide to have mentors write their answers, allow them some time to reflect on their answers individually.

2. Read the following questions and ask the participants to write their responses next to each number. Some possible answers you may use to guide your discussion are in parentheses after each question.

   1) **Why is mentoring important?** (*Possible answers:* Mentors act as role models, motivate girls, provide advice to help girls succeed, serve as tutors or support girls academically, help girls understand puberty and adolescence, etc.)

   2) **Why do you want to be a mentor? What are your mentoring goals?** (*Possible answers:* To help girls to succeed, use my skills to help others, to mentor girls the way I was mentored while I was growing up, etc.)

   3) **What skills and experiences do you have that make you a good mentor?** (*Possible answers:* I like to motivate others, believe in the importance of girls' education and achievement, work well with children, have experience as a teacher or working with administrators, can provide resources for girls and I am a role model in my community, have experience organizing activities such as career fairs, and/or am skilled in a particular subject such as biology, language, etc.)

4) **What would you like to learn about mentoring?**

5) **What personal or other rewards do you expect from being a mentor?** (*Possible answers:* Help a girl to pass final exams or into the next grade, help girls to overcome obstacles, learn more about myself, gain skills in working with children, learn how to give advice and help others, etc.)

3. After you have read all the questions, ask people if they would like to share their answers with the group.

4. Remind mentors that one benefit of being a mentor is that it gives them an opportunity to share their expertise and experience with youth. It also helps them understand young people so they are better able to meet their needs. Most importantly, many mentors often find much personal satisfaction in helping another person succeed.

Note to facilitator:

Depending on what the mentors would like to learn, you may want to spend more time on certain sessions/activities than others. You may also want to organize additional sessions and/or invite someone with a particular skill to facilitate the session. Remember to be flexible!

Scholarship students in Obock, Djibouti

MELISSA CRUTCHFIELD/AED/AURORA ASSOCIATES INTERNATIONAL

Activity 3: What Does a Mentor Do—and Why?

Time allotted: 20 minutes

Facilitation Steps:

Overview: Now you will expand upon some of the issues the mentors may have raised about why they have chosen to mentor girls. Not all mentors play the same roles or have the same responsibilities. This session explores the various roles that mentors play.

1. Ask the group to think about what a mentor does. Individually, in partners, or as a large group, ask mentors to take five minutes to brainstorm and write a list of things they think a mentor should be or do. (They may write answers on flipchart paper or the chalkboard, or have them write individual lists.)

2. Call on the mentors to share items from their list and to explain their answers.

3. Make a list of the mentoring tasks on the chalkboard or flipchart paper. During the discussion, refer to the following list of roles, characteristics, and qualities commonly associated with mentors:

   - Act as role models
   - Help girls cope with changes at school, at home, or with their personal or physical development
   - Serve as liaisons between mentees, teachers, parents, or caregivers
   - Assist girls in dealing with problems (academic, with friends, with family, etc.)
   - Promote girls' confidence and self-esteem
   - Provide resources for girls
   - Provide advice in making decisions
   - Organize activities for girls, such as a career day or an HIV/AIDS discussion
   - Expose girls to new ideas, places, or people
   - Advocate for girls' education and girls' rights; encourage the girls, their parents, and community members to promote girls' education

4. **What is the goal of mentoring?** Ask participants *why* mentors do those things. Possible answers may include items from the list above, as well as the following:

   - Provide girls with information and guidance that allows them to make good decisions
   - Enable and empower them to accomplish their goals and dreams
   - Foster friendships between girls and women

Activity 4: What Does it Take to Be a Good Mentor?

Time allotted: 25 minutes

Facilitation Steps:

Overview: This activity will help define characteristics of a good mentor.

1. Refer back to the list of mentors' tasks or responsibilities. For each task or job listed, ask fellow mentors what they think a mentor could do, or what characteristics the mentor would need to have, to accomplish this task.

   For example, how could a good mentor help a girl cope with changes at school? How does a good mentor serve as a role model? What qualities or characteristics would they add to this list? What mentor characteristics or skills are most important to people in your group?

2. Refer to the list below while leading the discussion:

   Characteristics of a good mentor:

   - Listens to mentee's concerns and doesn't do all the talking
   - Asks questions (without making the mentee uncomfortable)
   - Doesn't judge (but provides constructive feedback or advice)
   - Doesn't pick favorite students among mentees
   - Respects the mentee's confidentiality; does not repeat what is said in mentoring sessions
   - Encourages mentee in her schoolwork and goals
   - Empowers mentee to make good decisions and supports her
   - Helps mentee find solutions to her problems, but doesn't tell her the answers
   - Respects the mentee's decisions
   - Helps develop mentee's strengths and skills
   - Refers mentee to other people or resources when necessary, such as health or social workers
   - Acts as a positive role model
   - Respects the mentee's ethnic and religious background
   - Shows interest in the mentee's life, activities, and thoughts
   - Arrives on time for all mentoring activities
   - Talks on a level that the mentee can understand
   - Shares experiences with mentee (when appropriate)
   - Advocates for the mentee at school, at home, and in the community

3. After mentors have brainstormed their own list, distribute **Handout 2: Mentoring Guidelines**. Discuss the items on the handout.

"If you find it in your heart to care for somebody else, you will have succeeded."

–MAYA ANGELOU, AMERICAN AUTHOR

Activity 5: Creating a Mentoring Agreement

Time allotted: 25 minutes

Facilitation Steps:

Overview: This activity trains mentors on how to develop mentoring ground rules.

1. While a mentoring relationship is not something bound in written law, it may help to explore the terms of the mentoring relationship in advance. A mentor and the mentee should discuss their individual expectations for the relationship. (See Session 5: Establishing the Mentoring Relationship.) This will clarify the relationship's goals and terms.
2. Writing a mentoring agreement will ensure that both parties clearly understand their responsibilities and expectations. Mentors should be sure to discuss the mentoring agreement with their mentee's parents or guardians.
3. As a group, review and comment on the mentoring agreement in **Handout 1: Mentoring Agreement Worksheet**. Discuss how you would adapt it to your particular community or situation.

Remember: Mentoring is a two-way street. Both mentors and mentees must understand each other's expectations to make the relationship beneficial, fun, and positive!

Activity 6: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask mentors for their feedback on the discussion.
   - Did the session meet their expectations?
   - Were all the objectives accomplished?
   - Are there any topics that participants would like to discuss in further detail at another time?
   - Would they like to continue meeting regularly to share mentoring experiences and ideas?
2. Establish the next meeting date and time. Appoint a meeting organizer/facilitator.
3. Thank the participants for their active involvement.

SESSION 2:
COMMUNICATING WITH YOUR MENTEE

Time allotted: 2 hours

Objectives

- Learn and practice good listening and communication skills

Key Terms

- **Active listening:** Listening to someone in a way that demonstrates that you understand the person's feelings, thoughts, or ideas
- **Communication:** Transmission or exchange of ideas through talking, writing, listening, and nonverbal behavior
- **Empathy:** Understanding a person's feelings or thoughts from his or her perspective
- **Nonverbal behavior:** Actions used to communicate without using words

Recommended Materials

- Location with sufficient space for small-group discussions
- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- Small pieces of paper to write examples of mentoring scenarios

Preparation

1. Gather materials.
2. Write key terms (but not definitions) on chalkboard.
3. Write lines of dialogue from mentoring scenarios (from Session 2, Activity 1) on slips of paper.
4. Review activities and discussion points.

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (**See Annex 2** for ideas.)
2. Ask participants if they have any questions from the last session. Answer questions accordingly.
3. **Overview explanation for participants:** This session is designed to give mentors the tools and strategies needed to establish and maintain good communication with their mentees.

   Sometimes mentors do not always know how to communicate well with mentees. This might be because people of different generations do not usually speak to each other about problems or personal issues. However, the mentor needs to know how to communicate because good communication is essential to fostering a good relationship with her mentee.

Activity 1: Communication and Listening Skills

Time allotted: 1 hour

Facilitation Steps:

1. Lead a discussion using the following questions as guidelines. Depending on the group's size, you may want to conduct the activity in small groups. Write the main part of each question on a chalkboard so groups can refer to the questions during discussion time. Sample questions:

   - How do people communicate in your community? (For example, do women often gather at certain times or places? Is information exchanged orally, in written form, or by dance or song?)
   - What type of information is acceptable and not acceptable to communicate with others? Will this affect your mentoring relationship? If so, what strategies might mentors use for overcoming this barrier to communication?
   - What are acceptable forms of communication *among* and *between* people of various groups? (For example, how do girls generally communicate with each other? How do they communicate with parents and teachers? Are their certain expectations or taboos against various forms of communication between groups?)
   - How are girls expected to communicate with mentors? Will certain expectations or taboos affect communication between girls and mentors? How do mentors expect to communicate with girls?

2. Explain that learning to be a good listener is at the heart of good communication. Good listening skills are not something with which everyone is born. It takes time to learn how to be an empathetic listener—someone who pays careful attention to another person's words and seeks to understand that person's feelings. But being a good listener will help you be a good mentor. Girls already get lectured in school, and sometimes even at home. You are the girl's audience for expressing herself. Your role as a mentor is to listen, help your mentee focus her thoughts, and discuss possible solutions. In addition, you will help support and empower your mentee to reach her own decisions.

Scholarship recipient in Mali

KADIATOU COULIBALY/ WORLD EDUCATION

A few communication tools will help you demonstrate openness to the thoughts and experiences of your mentees, including nonverbal behavior, empathy, and active listening:

a) **Nonverbal behavior:** Ask mentors if they can define the term "nonverbal behavior." Refer to the K*ey Terms* list for definitions.

Explain to mentors that awareness of nonverbal behavior will allow them to interpret messages that mentees may share. As a mentor, you can also use nonverbal behavior to demonstrate that you are listening, that you understand and that you are committed to providing support. Nonverbal behavior includes gestures, eye contact, body position, facial expressions, voice intonation, and other sounds.

Ask mentors to demonstrate some examples of these nonverbal behaviors that promote or discourage open communication. Make sure to point out that expressions of nonverbal behavior and emotions differ across cultures and individuals. For example, in some cultures, it is very important to look someone directly in the eyes to demonstrate that you are listening to him or her. In other cultures, this is considered rude.

Ask mentors in the group:

- **How is this nonverbal behavior interpreted in your culture?**
- **How do you show your mentee that you are listening without using words?** Use the examples listed below to explain the concepts.

b) **Empathy:** When you show empathy, you show that you accept what the person is saying. When you try to understand a situation from her viewpoint, the mentee will feel like she is understood and may be willing to share more of her thoughts and feelings. You can show that you are listening and understand your mentee's feelings, emotions, and thoughts by using the basic expression, "I understand that you feel this way, given your experiences." This communication tool is useful because it does not force your mentee to think or feel a certain way. In practicing empathy, you recognize what the person is saying given *his or her* experiences, not your own.

Share the following example with mentors. Call on a volunteer to pretend to be the mentee.

Example: Your mentee tells a story about being afraid that she might fail her mathematics test even though she has been working for two hours every night reviewing for the test.

Showing empathy: "I understand that you are nervous about your test despite the time you have spent studying. Would you like to talk some more about this?"

Not showing empathy: "You shouldn't worry about that. You always get good grades."

When the mentor shows empathy, he or she shows understanding for the mentee's feelings. By asking a follow-up question, the mentor gives the mentee an opportunity to continue to share her concerns. In the second example, although the mentor shows that she is listening, her words tell the mentee that she doesn't take the concerns seriously. She does not allow the mentee to continue to express her concerns or help her find a solution.

When exploring feelings or emotions with your mentee, it is important to remember that:

- **Silence can be important!** Sometimes, the mentee might find it difficult to share something. Give her time to collect her thoughts. Don't pressure her to speak before she is ready.
- **One feeling or emotion can cover up another one.** For example, a girl may be angry at her best friend, but is really afraid of rejection. It is important to try to identify the real feeling.
- **People may have ambivalent or conflicting feelings about a situation.** For example, a girl can be afraid of someone she admires.
- **You sometimes may be hurt, angry, or frustrated by what the mentee says.** Be conscious of how these feelings could affect your support of the mentee.
- Empathic expressions should only be used when you really understand what the person is saying. If you don't understand, it is better to ask for more information than to tell the person you do understand.

c) **Active listening:** Active listening uses both nonverbal and verbal communication to show interest and concern for a person. One active listening tool is to try to summarize the person's situation or feelings to check for understanding. For example, you might comment, **"If I understand you well, you are saying…"** This technique will make you pay attention to the speaker so you can summarize correctly.

Example: "My little sister is driving me crazy! I caught her trying to steal my best school pen again the other day. She always uses them to scribble and wastes all the ink. She's such a pest."

Summarizing (good focus): "So if I understand you correctly, you are frustrated when your little sister uses your pens."

Summarizing (poor focus): "So I understand you do not take care of your school supplies?"

Some additional questions might be used to explore and facilitate the expression of feelings and emotions. Open-ended questions are those with many different answers and often begin with **what, why, could, would, and how**. On the other hand, closed questions require short answers, such as "yes" or "no." Open-ended questions are often more useful to gather information because they allow the person to express themselves more freely than by just giving a short answer.

Note to facilitator:
Be careful when asking questions using "why." It might make the person feel like you are asking them to justify their feelings or thoughts.

Share the following example with the mentors in your group. To make the activity more interesting, invite a volunteer to be the "mentee." Before the session, write what the mentee should say on a piece of paper and give it to the volunteer.

Ask mentors to discuss the differences in the three different responses. After you have listened to their responses, provide the following information to summarize the example:

Mentee: "It is nice to have a boyfriend, but sometimes it is difficult."

Exploring question: "You mention good and bad things about having a boyfriend. Can you give me examples of those good and bad things?"

Exploring question (open): "Could you tell me more about your situation?"

Exploring question (closed): "Why is it nice to have a boyfriend?"

a) The first exploring question addresses the mentee's first statement that having a boyfriend is nice but sometimes difficult. It allows the mentor to better understand what the mentee means when she says that it is nice and difficult to have a boyfriend.

b) The second exploring question tries to get the mentee to explain why she brought up this topic. Is it because she's happy with her boyfriend, or perhaps because she is experiencing difficult times? The mentor won't know unless he or she asks an open-ended question.

c) The third example doesn't allow for the mentee to freely explain the relationship's positive or negative aspects. Instead, the mentor has "led" her to talk about the positive points, when she might have really wanted to discuss her problems in the relationship.

3. Explain to the mentors that sometimes your mentee may simply want to share her story or feelings with someone she trusts. However, she may also approach you to help find a solution to a problem or concern. After you have **listened, identified, and explored** the concern with your mentee, you may want to find out if she would like to discuss possible solutions or outcomes.

The following questions may help this exploration:

- What solutions can you think of to this problem/issue?
- What might happen as a result of these different solutions?
- Given what you've told me, what would you like to have happen now?

After you have discussed one or several solutions and possible outcomes, it may be useful to help your mentee determine what steps might be taken to reach those solutions and identify potential resource people to help her.

Scholarship girls in Kikwit, Democratic Republic of Congo

AED/ INSTITUT TECHNIQUE ET PROFESSIONNEL DE KIKWIT

Activity 2: Role-Play

Time allotted: 1 hour

Facilitation Steps:

1. Divide participants into groups of three. Explain that each group will conduct a role-play. A role-play is a short drama in which people pretend to take on the roles of other people. In this role-play, one person in the group plays the mentee, another person is the mentor, and the third person is the observer.

2. Assign each group one or two of the scenarios listed below, depending on the number of groups. Ask them to dramatize the following situation:

a) Your mentee is at boarding school and recently learned of her mother's death.

b) Your mentee recently learned that she has won a secondary school scholarship.

c) Your mentee is angry with her best friend because she was talking with a boy she likes.

d) Your mentee is waiting to get the results back from her final school exam.

e) Your mentee learned that her best friend and fellow classmate is pregnant.

f) Your mentee learned that she will travel to stay with her aunt in the city during school vacation.

Have the mentee approach the mentor for support and feedback on the assigned issue(s) and explore possible solutions/actions to be taken. For each scenario, the mentors should practice using nonverbal behavior, empathy, and questioning to talk about the issue with the mentee. The mentees should add details to make the role-play interesting.

3. Discuss the following questions as a group:
   - What did the observer see?
   - What communication techniques were used (active listening, empathy, etc.)?
   - What would you recommend doing differently?
   - What did it feel like to be the mentee? The mentor?

4. Invite each group to enact its role-play for the large group, if time permits. Share observations, feelings, and recommendations with the larger group.

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask mentors for their feedback on the discussion.
   - Were all the objectives accomplished?
   - Are there any topics that participants would like to discuss in further detail at another time?
2. Establish the next meeting date and time. Appoint a meeting organizer/facilitator.
3. Thank the participants for their active involvement.

SESSION 3:
EMPOWERING GIRLS

Time allotted: 1½ hours

Objectives

- Understand self-esteem and self-confidence

Key Terms

- **Empower:** To enable another person to accomplish something
- **Self-confidence:** Feeling confident in oneself or competent in one's abilities
- **Self-esteem:** A confidence and satisfaction with oneself, self-respect
- **Validate:** To recognize or affirm the worthiness or legitimacy of something or someone

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes

Preparation

1. Gather materials.
2. Review activities and discussion points.

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (**See Annex 2** for ideas.) Ask participants if they have any questions from the last session. Answer questions accordingly.

2. **Overview explanation for participants:** This session will help them understand their role in motivating girls and acting as a role model.

Activity 1: What Does it Mean to Empower Someone?

Time allotted: 15 minutes

Facilitation Steps:

1. Ask participants if they have ever heard the term "empower." What does "empower" mean to them? Discuss some possibilities.

2. "Empowering" someone means to enable him or her to accomplish something. Empowerment can happen in many different ways. For example, a teacher can empower a student to do well on a mathematics exam by helping her with her homework, congratulating her on a good test score, and encouraging her to do her best.

A scholarship student in Mali

KATIE MARTOCCI/ WORLD EDUCATION

3. Ask participants to share other examples of a mentor, parent, or teacher empowering a child. Ask them for examples of things that adults can say or do to girls to empower them. Write answers on the chalkboard or flipchart paper.

Activity 2: Why is it Important to Empower Girls?

Time allotted: 15 minutes

Facilitation Steps:

1. Introduce the topic by explaining that girls are often not encouraged to achieve in school or to pursue their dreams. In many cultures, girls learn from an early age that their needs and wants are second to those of their parents, brothers, and husbands. Instead of hearing positive messages, they are often discouraged against setting high goals.

2. Explain that mentors play an important role in encouraging girls to have goals and helping them achieve them.

3. Read the following example:

   A girl tells her aunt she wants to attend university. Her aunt tells her that she is being silly—no girl in the family has ever gone to university. Besides, the aunt says, there's no way the family could ever afford it. She tells her niece that a woman will never use her education anyway because she will spend most of her time taking care of her husband and children.

4. Ask the group: How could the aunt have responded differently? *Possible responses:*

   - Instead of telling her niece that going to university had *never* been done and what would *never* be done by a girl in the family, she could have encouraged her niece to study hard and get good grades so she could maybe earn a scholarship.
   - She could have told her niece that she would talk to the girl's parents about the importance of her education.
   - She could have explained that a girl can use her education in many ways, and will even help her in marriage and family life.

   By acknowledging the importance of the girl's dream, the aunt would help give her niece the self-confidence to achieve it. She would have validated, or reaffirmed, the girl's goal of attending university.

   Acknowledging and validating a mentee's goals and dreams is a first step in helping to empower girls to accomplish their goals. When mentors empower their mentees, they instill self-confidence and self-esteem in them.

5. Ask participants to define "self-confidence" and "self-esteem." Refer to the definitions in the *Key Terms* box. Ask them how people exhibit, or show, their self-confidence or self-esteem.

Activity 3: Motivating Messages

Time allotted: 30 minutes

Facilitation Steps:

1. Ask mentors to think of a person in their life who empowered or instilled self-confidence in them. Ask the mentors the following questions:
   - Who was that person?
   - What was the person's motivating message?
   - What effect did it have on you?
2. Give mentors 10 minutes to write their memories of the person who motivated them and the "motivating message."
3. Then ask mentors to share their motivating messages and how they affected their lives.
4. Ask mentors to write a motivating message to a young girl or mentee. After 10 minutes, ask the mentors to share their messages.
5. Ask each mentor the following questions:
   - Why did the mentor select that message?
   - Did the mentor receive that message from someone when he or she was young?
   - Is the message the mentor wrote one that the community as a whole sends to young women? Why or why not?
   - How would the mentor re-enforce that message with actions? (Remember, actions often "speak louder" than words!)

Activity 4: The Look of Self-Confidence

Time allotted: 25 minutes

Facilitation Steps:

1. A self-confident person is someone who is empowered and motivated to do well and accomplish his/her goals. She believes in her abilities.
2. **What does a self-confident person look like?** Ask the participants this question. Ask a mentor to come to the chalkboard or flipchart paper and draw their idea of a self-confident person. Ask another volunteer to add to the picture.
3. Ask the group to discuss the following questions:
   - How does a self-confidence person walk? Talk?
   - What kind of expression does the person have on his or her face?
   - How does the person interact with others?
   - What are some of the feelings the person may have?

4. Raise these discussion points:
   - A self-confident person feels she can accomplish her goals (although she can still experience doubts or ask for assistance).
   - She is confident of her abilities and isn't afraid to meet new people or try new things.
   - A self-confident person is also confident enough to ask for help when she needs it.
5. Summarize the session by reviewing how mentors will assist their mentees in becoming self-confident.

Remember: Self-confidence comes from the inside and shows on the outside!

Activity 5: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask mentors for their feedback on the discussion:
   - Were all the objectives accomplished?
   - Are there any topics that participants would like to discuss in further detail at another time?
2. Establish the next meeting date and time. Appoint a facilitator.
3. Thank the participants for their active involvement.

Scholarship recipients proudly wear their new school uniforms in South Africa.

MICHELLE SALMEN/ WINROCK INTERNATIONAL

SESSION 4:
MENTORING TECHNIQUES

Time allotted: 2 hours

Objectives

- Practice good listening and communication skills
- Practice empowering others
- Share mentoring experiences with other mentors

Recommended Materials

- Notebook paper for participants
- Several sheets of paper for Activity 2
- Pens or pencils
- Scenarios
- **Annex 3: Practice Mentoring Scenarios**

Preparation

1. Gather materials.
2. Prepare Activity 2. Write scenarios from **Annex 3** on separate pieces of paper; alternatively you can make a photo copy of the annex and cut the different scenarios into separate strips.
3. Review activities and discussion points.

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Ask participants if they have any questions from the last session. Answer accordingly.
3. **Overview explanation for participants:** As with any skill, mentoring requires practice and dedication. The activities in this session will allow them to practice what they learned in previous sessions and to improve their mentoring techniques.

Activity 1: The "Dos and Don'ts" of Mentoring

Time allotted: 30 minutes

Facilitation Steps:

1. Explain that being a good mentor involves more than being a good and empathetic listener. Review **Handout 2: Mentoring Guidelines** and discuss the guidelines as a group.
2. Ask participants if there are any items with which they strongly agree or disagree. Are there any items mentors think should be added to the list?
3. Discuss the importance of **setting boundaries with mentees.** Remind them that being a good mentor does **not** mean you have to do whatever your mentee asks. You do not have to give her money or do anything that you are not comfortable doing. Conversely, mentors should understand that they are not a mentee's parent and must respect other relationships in the girl's life. Mentors are not supposed to tell a girl what to do. Rather, they are supposed to help a girl navigate the relationships in her life and make good decisions.
4. **Important reminder:** In cultures where men and girls do not normally interact, male mentors should be especially careful to ensure that their actions and intentions are not misunderstood. For example, they should meet with their mentee only in appropriate, public settings and not in private.
5. **A final note:** Respecting confidentiality is critical to establishing and maintaining trust with your mentee. Confidentiality means that the mentor does not share private information about the mentee with others unless the mentee's health or well-being is at risk.

Activity 2: Putting Concepts into Practice

Time allotted: 70 minutes

Facilitation Steps:

1. Discuss issues that may be raised the first time a mentee comes to a mentor with a problem. This experience can be nerve-wracking for both people. The mentee may be nervous about sharing personal information with the mentor. The mentor might not know how to respond or may be afraid of giving the girl bad advice.

2. The scenarios in **Annex 3** describe situations that a mentor might face; they are designed to help mentors practice good listening techniques and communication skills, and to help them adjust to their role. Using these scenarios, participants dramatize, or act out, a possible outcome. Afterwards, mentors discuss how the mentor in the scenario handled the issue or tried to solve a particular problem.

Note to facilitator:
Before this activity, copy each scenario onto a piece of paper or make a photocopy of the annex and cut the scenarios into separate strips.

3. Divide the group into pairs and hand out a slip of paper with a scenario written on it. Each pair of mentors should decide who will play the "mentor" role and who will be the "mentee." The mentors and mentees have 10–15 minutes to come up with a dialogue and proposed outcome to the assigned scenario. Remind mentors to use the communication and listening skills from Activity 2 and to refer to the list of mentoring "Dos and Don'ts."

4. After 15 minutes, each pair takes turns acting out its scenario for the rest of the group. The group comments on the role-play and lists advantages or disadvantages of the solution that each pair proposed.

5. **See the facilitation notes below and discuss the following questions in relation to each scenario:**

   - How did the mentor assist the mentee in resolving the problem?
   - What was the result?
   - What would you have done differently, if anything?
   - What is some advice for mentors who might encounter this same issue?

6. After you have finished discussing the proposed scenarios, ask participants to share any other mentoring experiences or difficulties they encountered, being sure to maintain the confidentiality of mentees.

Note to facilitator:
The following notes are to help you facilitate the discussion of the scenarios. The full text of the scenarios can be found in Annex3.

Facilitator's Notes for Annex 3 Scenarios

Scenario 1: Jealousy erupts over scholarship benefits.

Girls who receive scholarships may find that other classmates or children are jealous of their award. Moreover, the girls may feel pressured to give some money or school supplies to others. You should first ask your mentee how she feels about the situation. She may want to give things to her friends because it is culturally expected or because she is afraid of losing friends. You should remind your mentee that she earned the scholarship and that she is not obligated (and may even be forbidden) to share benefits. You could suggest that she tell her friends how important the scholarship is to her because she wants to go to school. You may want to help her budget her

scholarship funds. Through this exercise, your mentee may realize she will not have enough money to cover her school costs if she gives money to friends. You may also want to emphasize that true friends will understand if she needs the benefits for her studies.

Scenario 2: A possible upcoming marriage threatens to take a girl from school.

Many mentors may be hesitant to get involved in a family issue such as marriage. Remind them that their role is to support and encourage girls' education, something that early marriage can severely—and negatively—impact. First, at the beginning of a mentoring relationship, mentors should take time to meet with a girl's parents. This will make it easier to talk to them later if a difficult situation arises. Mentors should try to talk to their mentees' parents about the benefits of education and delayed marriage. If necessary, a mentor may want to ask another mentor, or a religious or community leader, for support.

Scenario 3: Getting tested for HIV

If a mentor suspects that a girl may be at risk for HIV/AIDS, he or she should immediately find out what community resources are available to assist her. Intervening in such a case may require specialized training in counseling, so a mentor should know where to seek assistance. If a mentee asks the mentor about HIV testing, the mentor could refer her to a testing center in the area, if one is available. If it is not possible to be tested in the area, the mentor should find the location for the nearest health clinic. The mentor may be able to assist the girl in arranging transportation. Some HIV testing centers require parental consent for children under 18, although others do not. Find out what the rules are at the center in your area. Testing is often free or is offered at a reduced price for students. Most importantly, the mentor should realize that the girl has reached out for help and the mentor's intervention could have life-changing results for the girl. The mentor should not judge the girl negatively and should always remember to keep information confidential.

Scenario 4: A mentee's family can no longer feed themselves and she has asked her mentor for money.

Providing financial assistance to mentees will always be a personal decision based on a mentor's relationship with the girl, cultural ideas about giving, and particular circumstances. While it should be made clear from the beginning that a mentoring relationship does not necessarily include financial assistance, mentors may find themselves in a situation where they are expected to provide monetary support. The mentor should think about the consequences (both positive and negative) of giving money and whether providing financial support will be expected to continue. There may be an expectation that the mentor will continue to give money, jealousy from other girls who need financial support as well, and a devaluation of the relationship's mentoring aspect.

Scenario 5: A girl's father controls her scholarship funds.

Ideally, scholarships should be given directly to the school to pay for fees. However, in some cases, funds may be awarded to girls to purchase their own supplies. If you find that a family member is using your mentee's scholarship inappropriately, you may first consider contacting someone who works for the organization sponsoring the scholarship. This person would be in a better position to ask the parent how the scholarship is used. You may want to talk to the parents about how

the scholarship is supposed to be spent and explain how the girl will be negatively affected if it is not used appropriately. In certain situations, a female mentor may prefer that a male mentor accompany her to speak with a mentee's father.

Scenario 6: A teacher is pressuring a student to have sex.

This scenario addresses an issue that is all too common for female students. During the discussion, the facilitator should emphasize that the mentor's priority should be the girl's safety and health. Girls should be able to attend school without being harassed or pressured into a relationship out of fear that their grades may be affected.

By coming to the mentor, the girl has shown that she trusts the mentor and needs help with the situation. The mentor should discuss the importance of reporting the teacher's behavior to school authorities. If a teacher has assaulted or harassed a girl, the mentor also should discuss the possibility of filing a report or talking to an educational official who acts as the teacher's supervisor. The mentor also may want to advise the girl to tell her parents and assist her in doing so. If the mentor is a teacher and feels that reporting a fellow teacher may jeopardize his or her job, he or she may consider asking someone else to assist the girl, reporting the incident anonymously, contacting an "ally" or confidante who will not seek retribution, or encouraging the girl to contact a school authority directly. However, the mentor should remember that if she or he does not intervene, the girl may feel abandoned and think the mentor does not care about her well-being. (Some school districts may have a person designated to assist teachers with these issues. Moreover, schools may have a policy against teacher-student relations. Contact school officials to find out what support is available for those who report fellow teachers.)

Sometimes, girls are tempted to establish relationships with older men (including teachers), often called "sugar daddies" or "big men." A girl may think the relationship will provide her with financial support or material goods. This may be particularly important if the girl comes from a very poor family. If you think your mentee is involved with an older man, be sure to talk to her about this relationship. Although the girl may be happy to receive gifts or money, such a relationship can be extremely dangerous. An older man is more likely to take advantage of the girl and to expose the girl to risks such as HIV/AIDS.

Scenario 7: Mentor suspects a girl is having sex.

Sometimes, a mentor may not agree with a girl's beliefs or actions, especially with regards to sex. Even though mentors play an extremely important role in acting as role models and providing guidance, they should not allow their personal beliefs to affect the support they give to their mentees. If a girl trusts you enough to talk about a relationship or sexual matters, you should recognize how highly she views your advice. Talk to her about the risks of having sex, such as pregnancy and HIV infection. Tell her the importance of being emotionally mature enough for sex. Think about the consequences if the mentor does not talk to the girl about sex. For example, a mentee might decide to have sex without a condom and contract an STI. Remind the girl that she has her entire life ahead of her and that even one sexual encounter can negatively impact her life.

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask mentors for their feedback on the discussion.
   - Were all the objectives accomplished?
   - Are there any topics that participants would like to discuss in further detail at another time?
2. Establish the next meeting date and time. Appoint a meeting organizer/facilitator.
3. Thank the participants for their active involvement.

A group of scholarship students in Niger

MELISSA CRUTCHFIELD/AED/AURORA ASSOCIATES INTERNATIONAL

SESSION 5:
ESTABLISHING A MENTORING RELATIONSHIP

Time allotted: 1½ hours

Note: *The following activity is meant to be done during the first meeting between the mentors and the mentees. It can be done one-on-one with your mentee, or with several mentees.*

Objectives

- Define the mentee's and mentor's roles
- Identity the mentee's expectations of the mentor
- Establish the mentor's expectations of the mentee

Key Terms

- **Mentee:** Someone who receives guidance or instruction from someone else
- **Mentor**
  - **Noun:** An adviser or role model
  - **Verb:** To advise or counsel someone
- **Mentoring:** A process through which one person acts as a role model and offers guidance and support to another person

Materials Needed

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- **Annex 4: Planning an Event and Facilitating Discussion**
- **Handout 1: Mentoring Agreement Worksheet**

Preparation

1. Gather materials.
2. Write objectives on chalkboard or flipchart paper.
3. Review **Annex 4: Planning an Event and Facilitating Discussion.**
4. Make copies of **Handout 1: Mentoring Agreement Worksheet.**
5. Review activities and discussion points.

INTRODUCTION

Time allotted: 20 minutes

Facilitation Steps:

4. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)

5. **Overview explanation for participants:** They have all been asked to participate in the meeting because of their involvement in the program (scholarship, after-school or life-skills programs, etc.). The meeting is to give them a chance to meet each other and to meet the mentors with whom they will be meeting throughout the year. They will be discussing their expectations of the mentoring relationship with their mentors.

6. Assign one student to be the record keeper and write down the answers on the chalkboard or flipchart paper.

Activity 1: What is Mentoring?

Time allotted: 35 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask how many participants have ever heard of the terms mentor, mentee, or mentoring. Ask them to define the following terms:

   - **Mentor**
   - **Mentee**
   - **Mentoring**

2. Explain that mentoring is the process of counseling or advising someone else. A mentoring relationship sometimes embodies characteristics found in a professional relationship (for example, between a teacher and student, or a boss and her assistant). However, it also can contain elements of a friendship. A mentee and mentor have respect for each other and usually agree on certain guidelines for their relationship.

3. Ask the girls to name someone who acts as a mentor:

   - Why does the girl consider the person to be a mentor?
   - What activities does the girl do with her mentor?

4. Ask each girl to take out a piece of notebook paper. Write the questions below on the chalkboard or read them from your notes. Ask each girl to write a short response. Once the girls are finished, call on volunteers to share their answers.

Note to facilitator

Depending on the grade level or time you have for this session, you may decide to simply ask girls to discuss the answers in small groups or as one large group rather than in writing.

- Why is having a mentor important to you?
- What expectations do you have for your mentor? (Example: Do you want your mentor to assist you with schoolwork? Are you looking for career advice or advice on personal issues?)
- What topics would you like to discuss with your mentor?
- How often would you like to meet with or talk to your mentor?
- What expectations do you have for yourself, the mentee?

5. **Be sure to bring up the following issues during your discussion:**

   - **Expectation of confidentiality.** The mentor will not share private information unless the mentee's health or well-being is at risk. Examples might include reports of abuse or illegal behavior.
   - **Maintaining boundaries.** Both the mentor and mentee will maintain appropriate boundaries. For example, a mentor who is not qualified to counsel a mentee on a topic such as pregnancy will refer the mentee to a health professional. Mentees, too, will not expect personal financial assistance from the mentor.
   - **Remind girls that if they feel their mentor is doing anything inappropriate, they should tell a parent, teacher, or another trusted adult immediately and that the mentee does not have to continue seeing that mentor.**
   - **Honoring expectations.** Both mentors and mentees will be expected to meet the conditions that the mentor and mentee have agreed upon. If a mentor or mentee is not able to fulfill his or her obligations, he or she will let the other know in advance.
   - **Encountering difficulties.** If the relationship between the mentor and mentee is not working, someone else may be contacted to mediate. If a problem cannot be solved, the mentee or mentor may request that the relationship be severed or that another mentor/mentee be assigned.

Activity 2: The Mentoring Agreement

Time allotted: 35 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Following the discussion, each girl should make a list of her expectations for her mentor. (If there is not enough time to do this during the group discussion, each girl should be asked to complete the list on her own time.)
2. The mentor should then review the list and discuss each point with the girl and give the girl a list of his/her expectations. The list of expectations should be very clear. For example, if the mentee expects to meet with her mentor often, the number of days per week or month and the length of each visit should be specified. Since mentees and mentors may not live in the same area or town, they should discuss where they will meet and how they will arrange transportation.
3. Explain that each girl and her mentor may write their expectations into the mentoring agreement worksheet to ensure that both people have the same understanding of the relationship.

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask mentors and girls for their feedback on the discussion.
   - Were all the objectives accomplished?
   - Are there any topics that participants would like to discuss in further detail at another time?
2. Establish the next meeting date and time (either for the whole group or between individual mentors and mentees).
3. Thank the participants for their active involvement.

ADDITIONAL ACTIVITIES:

- Arrange regular mentor meetings so mentors can meet and share experiences.
- Communicate via e-mail with mentors from other regions or countries. Mentors can be a great source of information and support for each other!
- If there is a US Peace Corps office in your country, contact the office to find out how Peace Corps volunteers in your community can assist with a girls' mentoring program and related activities.

NOTES:

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FROM THE AMERICAN PEOPLE

GIRLS' MENTORING RESOURCE GUIDE

MODULE 2: GENDER AND GIRLS' RIGHTS

Session 1: Understanding Gender Roles 1
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INSTITUT TECHNIQUE ET PROFESSIONNEL DE KIKWIT/ACADEMY FOR EDUCATIONAL DEVELOPMENT

Often a girl's future is determined by the fact that she is a girl. In many communities, girls are not encouraged to pursue their education or nontraditional jobs or careers, especially those related to mathematics and science. As a result, they do not think they are capable of performing the same tasks or of having the same careers as boys or men. Boys and men also have culturally defined roles that they are expected to fulfill and that influence their interaction with girls and women.

This module is designed to give girls an understanding of how culture influences the roles that men and women play in a community. It also informs girls of their rights and the laws that protect (or in some cases fail to protect) the rights of women and girls. Finally, the activities and discussions aim to encourage community awareness about the importance of girls' rights.

Note to facilitator:

For **Session 3**, you may wish to invite a speaker who is familiar with the issue of girls' and women's rights in your country.

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SESSION 1:
UNDERSTANDING GENDER ROLES

Time allotted: 1 hour

Objectives

- Define and understand the terms "gender" and "gender roles"
- Identify gender roles in your community

Key Terms

- **Division of labor:** The way that tasks or jobs are often classified based on whether they are traditionally performed by men or women
- **Gender:** The division of men and women based on cultural expectations and roles and responsibilities
- **Gender role:** A characteristic, job, or quality assigned to either a man or a woman that is considered to be either "masculine" or "feminine"
- **Sex:** The biological condition of being male or female

Recommended Materials

- Chalkboard and chalk, or flipchart paper
- Several sheets of A4 paper
- Wall space to hang paper
- Markers
- Tape or other adhesive
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Write words for Activity 1, below, on individual slips of paper.
2. Gather materials.
3. Review activities and discussion questions.
4. Prepare answers to girls' questions from the previous session.
5. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Today's session will investigate the various roles that men, women, girls, and boys have in your community. You also will discuss how these roles are decided and what effects they have on people's lives, their relationships, and their roles in society.

Activity 1: Whose Role is it?

Time allotted: 50 minutes

Recommended for Ages: 10 and older

Note to facilitator:

Before the activity begins, post two flipchart papers with the words "Men" and "Women" or else write these words on the chalkboard. Prepare slips of paper with the terms listed below under #3. You will also need a roll of tape to complete the activity below.

Facilitation Steps:

1. Ask the girls if any of them has heard of the term gender. (*Possible answers:* it is how languages such as French and Portuguese classify words as either "feminine" or "masculine;" it has to do with women's rights; gender is the difference between men and women.)

Scholarship students at Flamingo Primary School in South Africa

TRACEY YUDITSKY/WINROCK INTERNATIONAL

2. Tell the girls that people often confuse the word "gender" with "sex," but that they are not the same. The sex of a girl or a woman is female. The sex of a boy or a man is male. Gender, however, refers to the jobs, roles, and characteristics attributed to men and women, boys and girls. Tell the girls that they will now perform an activity that will help illustrate the difference between "sex" and "gender."

3. *(Below are the terms that should be written on the small slips of paper, one term per piece of paper.)*

Decision making	Modest	Violent
Nurse	Honest	Protector
Politics	Cooking	Gentle
Sports	Serving others	Childcare
Driving a car	Village chief	Boastful
Teacher	Laundry	Fetching water
Pregnancy	Religion	Respectful
Source of family income	Family decisions	Wise
Physical strength	Sexual desire	Intelligent
Farming	School principal	Religious authority
Caring for the sick	Doctor	Hardworking
Police officer		

Note to facilitator:
You may want to omit or add terms based on your community. You may also need to hand out more than one term per girl if the group is small.

4. Explain to the girls that they will get slips of paper with various terms on them, and that after reading the terms they should run to the chalkboard and tape each slip of paper to the board under the "Men" or "Women" column. Ask them to do it as quickly as possible and without talking to each other. Distribute the slips of paper, with one term per piece of paper, and ask the girls to begin.

5. Once the girls have returned to their seats, read the terms one at a time and ask participants to explain why they placed each term under "Men" or "Women." If some girls put the terms in between the two, ask why they did so. Ask the girls if they agree with the placement of each term. Move terms if the girls decide that it is appropriate after discussing the issue at hand.

   You may find that this sparks debate depending on the girls' various beliefs. Ask the girls if they see any major differences between the jobs and characteristics assigned to men and women. **Ask the girls why there is a difference.** (*Possible answers:* It is natural; society expects or encourages men and women to perform certain jobs or take on certain roles; some jobs may only be open to men or women.)

Note to facilitator:
For some roles, a girl may place a term under both "Men" and "Women" because she believes both are capable of the job. If this happens, ask girls to think about the reality in their community.

Ask the girls who actually performs the job. Is this different from the person who is capable of performing the job? *(Be sure to point out any differences in what is physically or biologically possible and what is practiced.)*

6. Explain that assigning jobs to men or women is called a **division of labor** and ask girls why they think men and women are expected to perform certain tasks. Emphasize that very few jobs or roles, such as childbearing, depend on biology. Both women and men are capable of most jobs. However, culture and custom often influence who does certain jobs or assumes certain roles in the community.

7. After the girls have agreed on card placement, ask them where the cards should be placed b**ased solely on whether a man or woman is biologically capable of performing the task**. Move the terms accordingly. For example, if girls decide that biology is not a factor, move the term to the middle to signify that both men and women are capable of doing it. Once the task is completed, ask the girls if any of the cards changed position. If so, ask them to explain why.

8. Ask the group to reflect on the relationship between **sex** and **gender roles** with regard to each activity. Ask someone to provide the definition for the term "sex." The answer should be "male or female." Now ask the girls to explain "gender roles." Refer back to the activity if no one offers a definition. Why were certain jobs or characteristics placed under "Men" or "Women"? Point out that the first time the cards were placed, the girls probably did not think about who was biologically capable of the job or quality. Rather, the cards were placed based on the gender roles, or who usually performs the task. Ask the girls if they can now give you a definition of gender. Explain that gender is defined as "roles or characteristics assigned to men or women based on what is believed to be 'masculine' or 'feminine.'" Gender is something that evolves based on people's beliefs.

9. Gender roles sometimes differ by society. This is why a girl or boy raised in one society may be expected to perform different jobs than a girl or boy in another society. Often, we "learn" gender roles from the time we are born. For example, a girl might learn at a young age that she is responsible for taking care of her younger siblings and doing house chores, while her brother may help with some outdoor chores but is allowed more time to play football with his friends. Ask the girls to name other examples of how and when people learn various gender roles.

10. Explain to the girls that because gender roles are learned, they can change over time. Ask the girls if they can think of examples of a gender role—either boys' or girls'—that has changed over time. Forty years ago, there were no women who served as doctors or government ministers in Africa, but now there are women doctors, government ministers, and even a woman president!

11. To summarize, gender roles are learned from family members, at school, through messages received by the media or in books, and through a community's beliefs and practices. At the end of the discussion, emphasize that girls and boys are capable of the same things, including sports, mathematics, and performing household chores. Traditional gender roles should not prevent a girl from becoming educated or from pursuing the career of her choice.

KADIATOU COULIBALY/WORLD EDUCATION

Malian scholarship recipients mentor each other.

Activity 2: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed. For the next session, ask the girls to think about the effect that gender roles have on them and other people in their community.
   - Are these effects good or bad?
   - Can people participate in activities or take on jobs not traditionally expected of them? Why or why not?
   - If not, what can be done to change this?
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 2:
THE IMPACT OF GENDER ROLES

Time allotted: 2 hours

Objectives

- Understand how gender roles influence our lives
- Define your community's expectations of girls (and boys)
- Identify strategies for overcoming barriers based on gender roles

Key Terms

- **Discrimination:** Unfair treatment of a person or group of people based on ethnicity, religion, sex, or other defining characteristics
- **Gender discrimination:** Unfair treatment of a person or group—male or female—based on gender

Materials

- Notebook paper for participants (may not be necessary for this session)
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Review activities and discussion questions.
3. Prepare answers to girls' questions from the previous session.
4. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Today you will talk about how gender affects people's behavior and how they treat other people. You will also discuss how gender may influence the work people do.

Activity 1: Gender Scenarios

Time allotted: 45 minutes

Recommended for Ages: 10 and older

Note to facilitator

Depending on the group's size, the following scenarios could be performed as a skit or read aloud and discussed.

Scenario 1: The government has announced that it is conducting a survey of your area to assess what services and structures in your community need to be improved. Everyone has been invited to a public meeting to take place before lunch. At this time, most of the older children in the village are at school. Most of the women are preparing lunch and watching over the younger children. Very few women attend the meeting. The ones who are at the meeting sit in the back and do not speak up. A town elder, a man, facilitates the meeting. Even though women have often complained that there is only one water pump in town, no one talks about this problem at the meeting.

Discussion questions:

- **Were women encouraged to attend the meeting?** Why do you think so few women went to the meeting? (*Possible answers:* Women were not encouraged to attend the meeting, as it was held during a time when they had to prepare lunch. They also had to take care of the young children because the older children were at school.)
- **How did gender roles influence who participated in the meeting?** (*Possible answers:* Women are expected to prepare the meals and take care of the children, which made them unable to attend the meeting. Men have traditionally been more involved in politics than women have.)
- **How might the lack of women in attendance influence the priorities that will be set by the government?** (*Possible answers:* Women's concerns or problems may not be included in the discussion. Thus, any community development plans may not address their needs.)
- **What could have been done differently to ensure women's participation?** (*Possible solution:* The meeting could have been held at a time more convenient for women. Meeting leaders could have specifically asked about women's concerns. The women could make sure they speak up during the meeting.)

Scenario 2: Halima and her twin brother, Ahmet, are both in primary school. Every morning, Halima gets up 30 minutes before her brother so she can fetch water from the well in her neighborhood. During the afternoon break, Halima helps her mother finish preparing lunch while her brother takes a nap. After school is over for the day, Ahmet plays football with his friends while Halima helps her mother iron, cook dinner or supervise her younger brother and sister. In the evening, Ahmet reviews his lessons, but Halima is too tired and goes to bed directly after dinner.

Discussion questions:

- **Describe the similarities and differences between Ahmet and Halima.** (*Possible answers:* Ahmet and Halima both attend school. However, Halima has many more chores than Ahmet. She gets up earlier than Ahmet to fetch water, comes home to prepare lunch, and goes to bed earlier than Ahmet because she is tired.)
- **How do gender roles affect Ahmet's and Halima's lives?** (*Possible answers:* Traditional gender roles mean that Halima is responsible for a variety of household chores that take time away from her studies. Halima's responsibilities also make her too tired to study.)
- **How might the twins' different schedules affect their schoolwork?** (*Possible answer:* Since Halima is too tired to study, she may not do as well in school as Ahmet.)
- **What could be done differently to ensure that Halima has time to study too?** (*Possible answer:* Ahmet and Halima could share the household chores so that neither is responsible for everything.)

Scenario 3: Zuri is the third of four children in her family. She has been attending school with her brothers. She does well in school and enjoys it. Zuri got her period for the first time recently and her mother has been keeping her at home lately. She has told Zuri that she may withdraw her from school. Her mother has started talking a lot about a neighbor's uncle, an older man with two wives already, who has just moved to the village. Zuri has seen the neighbor's uncle come to speak to her father. She suspects that she may be forced to marry soon, and does not know what to do. Zuri has gone to her auntie who has said not to worry, that everything will work out.

Discussion questions:

- **Describe Zuri's problem. How do gender roles influence her situation?** (*Possible answers:* Traditional gender roles mean that Zuri is expected to marry the person her parents choose, whenever they decide, even this means that she will have to drop out of school and face a risky early pregnancy; Zuri will also expected to obey her husband's wishes.)
- **Describe the gender roles that women and men in Zuri's culture are expected to fulfill.** (*Possible answers:* Men who can afford to are expected to take more than one wife; older men can pick their own wives; girls are expected to marry young and marry the boy or man their parents choose; girls are not expected to go far in school or have a career; Zuri's brothers do not have to get married as soon as they reach puberty; girls who get married are expected to drop out of school.)
- **What would you advise Zuri to do?** (*Possible answers:* She could talk to someone else in her family who might intervene on her behalf; if this does not work, she could speak to a trusted teacher, school director, sympathetic local or religious authority, or a social worker.)

Scholarship students respond to a question in a Djibouti classroom.

MELISSA CRUTCHFIELD/AED/AURORA ASSOCIATES INTERNATIONAL

Facilitation Steps:

1. After girls have performed the skits or have discussed them as a group, ask them if they have heard of the term **discrimination**. Explain that the term refers to unfair treatment of a person or group of people.

2. Discrimination can be based on many things, such as ethnicity or religion. It also can be based on sex. In many parts of the world, girls and women are **discriminated** against simply because they are female. They are not given the same rights that men receive, such as the rights to divorce, inherit property, or run a business.

3. **Gender discrimination** has many negative consequences. One is a lack of power to make decisions. Another is lack of access to resources, such as education, land, rights, credit, or a job. For example, because of gender discrimination, Halima did not have the same opportunity as her brother to study at home. Instead, she was expected to help with the housework. As a result of gender discrimination in Scenario 3, Zuri did not have the power to decide for herself what is best for her.

4. Ask the girls to provide other examples of how gender discrimination affects girls' and women's access to opportunities. (*Possible answers:* Families send sons but not daughters to school; women are often unable to inherit land or property; women are often unable to participate in community development plans.)

Activity 2: Expectations of Girls

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls to name some expectations that their community, culture, or religion has of them, for example, expectations of what girls should do for their families, how they should act, what they should wear, or how long they should go to school.

2. Make a list on the board. Use the following questions to guide the discussion:

Scholarship students in Tuvwananyi, Zambia

MICHELLE SALMEN/ WINROCK INTERNATIONAL

- Who decides what girls should do or how they should act?
- Have expectations changed over time? (For example, between the girls' generation and their grandmothers' generation.)
- What do they think of these expectations? Are some positive and others negative? Do they agree with all of them? Are there some expectations with which they do not agree? Why or why not?

- How easy or hard is it to fulfill these expectations?
- If a girl does not fulfill the expectations, what happens? Do the girls know of anyone who has not "fulfilled" traditional expectations? (For example, a woman who refused to get married at a young age or who became a doctor, even though girls are expected to be midwives.)
- Do any of these expectations conflict with each other? (For example, men in many cultures are attracted to women who dress or act "sexy," yet they often place a high value on modest dress and behavior for their wives and family members.)

3. Explain to the girls that the point is to think about where expectations come from and the effects (both positive and negative) they have on both men and women. Remind girls that fulfilling society's expectations should not compromise their health or well-being. However, acknowledge that it can be very difficult to challenge cultural expectations and norms regarding gender roles.
4. Ask the girls to think of ways in which they and other people in the community can work to ensure that society has realistic expectations of girls.
   - What can be done to combat the discrimination faced by Halima, Zuri, and other girls and women? (*Possible answers:* Women in the community could form an association to defend women's rights; boys could be educated about the importance of helping their sisters with housework; parents could be educated about their daughters' right to stay in school and to decide when and whom they marry; teachers could talk to parents about allowing their daughters time to do their homework.)
   - Are there people in your community who work to help women and girls? What do they do? What effect do you think their work has?
   - How could you become involved in their work?

Activity 3: A Perfect World

Time allotted: 35 minutes

Recommended for Ages: 10 and older

Note to facilitator:
If you are running short of time, this activity may be done during a third session.

Facilitation Steps:

1. Divide the girls into groups.
2. Ask each group to come up with a description of the ideal world for girls and women as well as boys and men. Encourage them to draw a picture, write a poem, or create a skit that expresses their ideas.
3. Have each group present its ideal world for the rest of the group. Ask each group how gender roles might be different in a perfect world.

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

A Rwandan scholarship recipient raises her hand to answer a question.

ALEXI ZEKAS/AED

SESSION 3:
GIRLS' AND WOMEN'S RIGHTS

Time allotted: 1 hour

Objectives

- Identify local, national, and international laws that give rights to girls and women
- Identify areas where laws could be improved to protect girls' and women's rights

Key Terms

- **Convention:** An agreement between states for regulation of matters affecting all of them
- **Corporal punishment:** The causing of physical injury on someone convicted of committing a crime or breaking a rule
- **Enforcement:** The effective carrying out of a rule or law
- **Human rights:** Rights (such as freedom from unlawful imprisonment or torture) regarded as belonging fundamentally to all persons, regardless of nationality, place of residence, sex, national or ethnic origin, color, religion, language, or any other status
- **Law:** A binding custom, community practice, or a rule of conduct set down or formally recognized as compulsory or enforced by an authority
- **Legal rights:** Something to which one has a just claim under the law
- **Right:** something to which one has a just claim

Recommended Materials

- **Handout 3: International Rights Conventions**
- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Invite someone familiar with women's rights in your country or community to speak to the girls. (For example, you might find someone by visiting your government office, contacting a lawyer, or visiting an organization knowledgeable about women's rights.)
2. If possible, find out if your country has ratified the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW).
3. If possible, make a copy of **Handout 3: International Rights Conventions** for each girl.
4. Gather materials.
5. Review activities and discussion questions.
6. Prepare answers to girls' questions from the previous session.
7. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Today you will talk about various laws that help protect the rights of girls, women, and children. It's important that girls know about them so that they can insist that their rights are respected.

Activity 1: Laws that Protect Women, Girls, and Children

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Explain to the girls that more and more, international conventions and the law are being used to combat gender discrimination and ensure that women, girls, and all children have the same rights as men and boys regarding education, health, marriage, divorce, and inheritance.
2. 185 countries in the world have ratified the UN's **Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).** CEDAW explains in detail **all the rights to which women around the world are entitled.**
3. A second document is called the **Convention on the Rights of the Child**. This agreement, which almost every African country has signed, **outlines children's basic human rights**, including the right to full participation in society and the right to be protected from abuse and exploitation. The convention also sets standards for children's education, health care, and other living conditions. Countries that signed the convention have agreed to work to meet these standards.
4. Another document, the **African Charter on the Rights and Welfare of the Child**, affirms the commitment of countries that belong to the African Union. By signing the agreement, which became effective in 1999, countries pledge to adopt legislation or take any other measures necessary to achieving the goals of the charter, including free basic education, with special attention to girls' education needs. **The charter discourages "any custom, tradition, cultural, or religious practice that is inconsistent with the rights, duties, and obligations" of the document.**
5. Ask for a volunteer to read the summarized rights from the CEDAW and the Convention on the Rights of the Child, found on **Handout 3: International Rights Conventions.** Use the following questions to lead a discussion:
   - What parts of the documents do they find most interesting or important?
   - How have the documents affected (or not affected) women's and girls' lives in their communities? Why or why not?

   Explain to the girls that each country develops its own laws and that not all rights guaranteed by international conventions can be found in national law, or they may be written in law but not enforced.

Activity 2: Knowing Your Rights

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Ask the girls to think about their legal rights in their own country. Do they know what their rights are?

2. Ask the girls to make a list of all the rights they would like to know about. Afterward, leave time for the resource person to answer the girls' questions.

Note to facilitator

You may want to brainstorm these questions ahead of time and give them to the presenter before the session to give him or her time to prepare answers.

A local implementing partner poses with scholarship students in Lesotho.

TRACEY YUDITSKY/WINROCK INTERNATIONAL

3. Some important legal issues to discuss include:

   - What documents, if any, are required for a child to attend school?
   - At what age must you start school? For how many years is a girl or a boy required to attend school?
   - What is the legal age for marriage of girls and boys?
   - What rights does a woman have once she is married?
   - What rights do women have in the case of divorce? (This may differ depending on who asks for the divorce.)
   - What are the property laws in the community or country?

- What are the requirements to vote? Who is allowed to vote?
- What rights do women have to inherit property?
- What services is the government required to provide for its citizens?
- Is corporal punishment in school legal?
- What are the laws regarding rape and sexual violence?

  Now discuss whether these legal rights are enforced in the girls' community. If so, ask who enforces these laws. Ask what happens if something is illegal, but it still goes on and is accepted. (*Possible answers:* Spouses hitting each other; corporal punishment in school; parents abusing their children; girls being taken out of school, etc.) Invite girls to brainstorm ways to address the issue of enforcing laws. Ask the girls if there is anything being done in their community to enforce or enact laws?

4. When the session ends, be sure to discuss where girls and women can learn more about their rights, or where they can go for help, advice, or legal services. If possible, take a field trip to an organization that works for women's rights or visit a local government office to familiarize girls with services that are available.

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

ADDITIONAL ACTIVITIES:

- Celebrate International Women's Day on March 8. Organize a conference, seminar, or other event to draw attention to girls' and women's rights.
- Visit an organization that works for girls' or women's health, rights, economic empowerment, or another issue.
- Have the girls make a presentation to a school or community group on girls' (and children's) rights. Encourage community dialogue and action on the issue.
- Select a specific girls' rights issue, such as early marriage, to take action on in your community.

NOTES:

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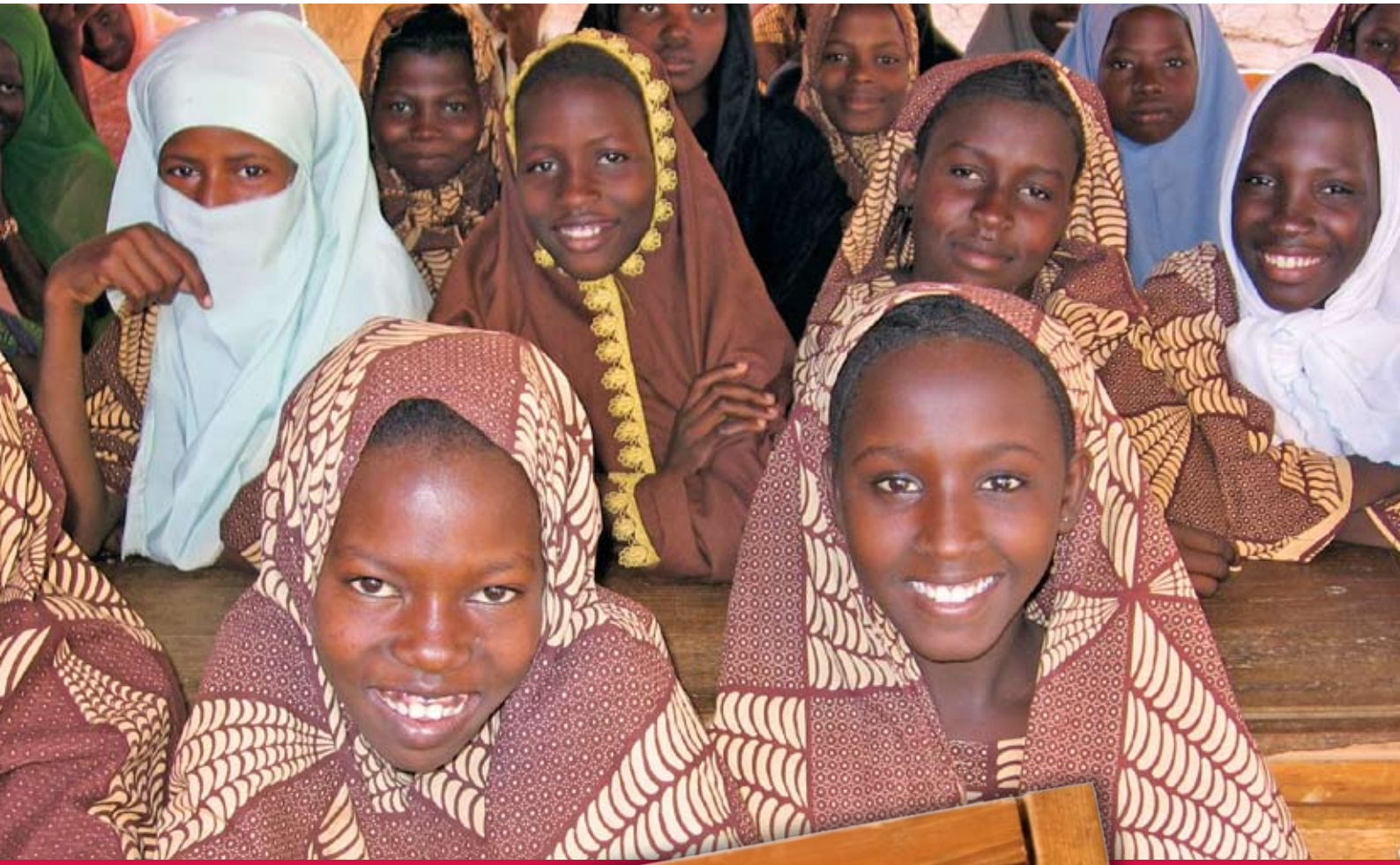
FROM THE AMERICAN PEOPLE

GIRLS' MENTORING RESOURCE GUIDE

MODULE 3: THE IMPORTANCE OF GIRLS' EDUCATION AND EMPOWERMENT



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KATIE MARTOCCI/WORLD EDUCATION

The right to education was first set down in writing in 1948 in the United Nations' Universal Declaration of Human Rights. Since then, the right of boys and girls to receive a quality education has been reemphasized in several documents, including the 1989 Convention on the Rights of the Child. Most recently, the United Nations made girls' education a key Millennium Development Goal, stating that it hopes to achieve universal primary education—for both boys and girls—by 2015.

African leaders emphasized this goal's importance at the April 2000 World Education Forum in Dakar, Senegal. At the conference, participants adopted a Framework for Action, which includes Goal 5: "Eliminating gender disparities in primary and secondary education by 2005, and achieving gender equality by 2015, with a focus on ensuring girls' full and equal access to and achievement in basic education of good quality." After the forum, 13 agencies, including the World Bank, UNICEF, and the World Health Organization (WHO), formed the United Nations Girls' Education Initiative to work toward this goal.

But why is educating girls important? Does it matter if a girl attends school or not? What can be done to increase girls' enrollment and retention in school? The following sessions are designed to help mentors, girls, and communities answer these important questions.

"…There is no tool for development more effective than the education of girls."

–Kofi Annan, former Secretary-General of the United Nations

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SESSION 1:
WHY IS IT IMPORTANT TO EDUCATE GIRLS?

Time allotted: 2 hours

Objectives

- Understand the benefits of educating girls
- Define obstacles to girls' education
- Explore strategies for increasing girls' school enrollment and retention

Recommended Materials

- Chalkboard and chalk
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- **Handout 4: Two Letters, Two Lives**
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Review statistics specific to your country. (See **Annex 1** for a list of web sites with country-specific information.)
2. (Optional) Make copies of **Handout 4: Two Letters, Two Lives** to hand out to the participants.
3. Gather materials.
4. Review activities and discussion questions.
5. Prepare answers to girls' questions from the previous session.
6. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 10 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)

2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask girls if they have any more questions and provide accurate responses.

3. Introduce the session by writing the following statistics on the board or by reading them aloud. Be sure to include statistics specific to your country or region.

   - Sub-Saharan Africa is home to barely one-sixth of the world's children under age 15, but fully half the world's uneducated children.[1]

   - Of all the regions in the world, sub-Saharan Africa has the lowest primary school enrollment rate, with only 70 percent of children in school. That means that for every 10 children, only seven of them are in school.[2]

   - With nearly 33 million children of primary school age still not enrolled in school, sub-Saharan Africa was home to 45% of the world's out of school children in 2005, of whom 54% were girls.[3]

   - Differences in school enrollment between boys and girls have been reduced (particularly in primary school), but not eliminated. Only two sub-Saharan African countries have achieved similar level of access to education for boys and girls (Mauritius and the Seychelles).[4]

   - Literacy is a basic human right yet it remains a major challenge in sub-Saharan Africa, where as of 2004 150 million adults—62% of them women—could not read or write.[5]

4. Ask girls for their reaction to these statistics.

5. **Overview explanation for participants:** Tell them that activities in the next few sessions are designed to explore the importance of girls' education and how they can work to increase enrollment and retention of girls in their communities.

1. Sharon LaFraniere, "Crowds of Pupils but Little Else in African Schools," The New York Times, December 30, 2006.
2. UNESCO, "Education for All by 2015: Will We Make it?: 2008 EFA Global Monitoring Report, Regional Overview: Sub-Saharan Africa," http://unesdoc.unesco.org/images/0015/001572/157229E.pdf (accessed on 24 March, 2008).
3. Ibid.
4. Ibid.
5. Ibid.

AED/INSTITUT TECHNIQUE ET PROFESSIONNEL DE KIKWIT

Congolese primary-school scholarship recipients recite their numbers.

Activity 1: "To Educate a Girl…"

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Considering the large number of girls out of school, a person might think that education isn't very important. But a common saying about girls' schooling emphasizes its benefits:

   "To educate a girl is to educate a family."

   Discuss this phrase with the girls. Ask them to list the advantages of education. Are there any disadvantages? If so, what are they?

2. After the girls have shared their ideas, tell them that many studies have proven the value of education for girls. Read each point below aloud to the girls. After each one, ask them why going to school results in the particular positive outcome stated below:

   - Educated girls are more likely to be healthy because they learn how to prevent diseases and to take care of their health. (*Possible answers:* Girls who are educated know the value of protecting their health through good hygiene, and, later in life, they are more likely to seek family planning services and proper pre- and postnatal care.)[6]

6. UNFPA, "Empowering Women Through Education," http://www.unfpa.org/gender/empowerment2.htm (accessed on 9 March, 2008).

- Educated girls grow up to have healthier families than girls who are not educated. (*Possible answers:* Educated girls know how to protect the health of their children, for example through good hygiene, pre- and postnatal care, vaccinating their children, sleeping under bed nets, etc.; they may have better jobs and therefore have the means to pay for health care.)[7]
- Educated girls tend to marry and have children at a later age, which leads to fewer health complications during and after pregnancy (as well as fewer deaths due to childbirth). (*Possible answers:* Educated girls want to continue their studies and perhaps pursue careers; they know the negative health consequences of early marriage and childbirth; they seek proper pre- and postnatal care.)[8]
- Educated girls are more likely to take measures to prevent HIV/AIDS infection. (*Possible answers:* Educated girls have the knowledge to prevent HIV/AIDS; they are better able to avoid abusive relationships and risky behaviors that lead to HIV infection.)[9]
- Educated women tend to take greater roles in decision-making processes in the family and in the community. (*Possible answers:* Educated women stand up for themselves and command more respect in the family and community; they may have better paying jobs that give them more financial independence.)[10]

Students learn and enjoy themselves at Life Centre's mentoring camp in South Africa.

TRACEY YUDITSKY/WINROCK INTERNATIONAL

7. Ibid.
8. Ibid.
9. UNFPA, "The Education Factor," http://www.unfpa.org/gender/empowerment2.htm (accessed on 9 March, 2008).
10. UNICEF, "The State of the World's Children 2007," http://www.unicef.org/sowc07/docs/sowc07.pdf (accessed on 24 March, 2008).

- Educated mothers are more likely to send their children to school. (*Possible answers:* Educated women know firsthand the value of education and seek to ensure that their children get the same benefits; they may have better paying work that allows them to invest more in their children's education.)[11]

- Countries that have greater educational equality between men and women are more likely to experience greater economic productivity than similar countries with less educational equality. (*Possible answers:* Smaller, healthier, more educated families can work and earn more, contributing to the development of national well-being.)[12]

Activity 2: Overcoming Obstacles to Girls' Education

Time allotted: 45 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. If your group is large, have the girls break into groups to discuss the following questions. Assign one girl to be the record keeper and to report back with the group's answers.

2. Facilitate a discussion using the following questions as guidelines:

a) **What obstacles to girls' education exist in your community?**

Examples that may or may not apply to your community include:

- People do not think girls are as smart as boys.
- Girls are expected to take care of younger siblings.
- Girls are responsible for the majority of household chores, so they either do not go to school or do not have time for their homework.
- Girls are married at a young age and do not return to school.
- Educating a girl is not seen as a good investment or a priority because girls will eventually marry and leave the family.
- Families lack financial resources to support girls' education.
- There is a lack of safety for girls at school.

b) **What roles do religion, traditions, politics, or other factors play in preventing girls from continuing their education?** Do the same ideas apply to boys in your area? Why or why not? Is girls' education supported and encouraged in your community?

c) **What strategies can be used to overcome obstacles or barriers to girls' education?** Examples include:

- Girls could form a study club to tutor each other. (A teacher could volunteer to help them.)

11. Ibid.
12. Teresa Hartnett and Ward Heneveld, "Measuring the Gap: Female Education in Sub-Saharan Africa," Findings, Africa Region, No. 6, November 1993, http://www.worldbank.org/afr/findings/english/find06.htm (accessed on 24 March, 2008).

- Older girls could arrange a time to visit a primary school, and primary school girls could visit a middle or high school. (At a school in Senegal, for example, a group of high school girls even "adopted" primary school girls. The older girls helped the younger ones with homework and made sure they had school supplies.)
- Communities could establish savings clubs to pay for girls' educational costs.
- Parents could work with schools and community governments to increase girls' safety at school, as well as to and from school.
- Encourage parents not to overburden girls with chores and to divide chores evenly between sons and daughters.

d) **What activities could be done in your community to increase people's awareness of the importance of girls' education?** (Remember to think about individual and community actions.) Examples include:

- Teachers and mentors could visit parents and families to explain the benefits of educating children, including girls. They could also talk to village elders, or get village elders to talk to parents about the importance of girls' education.
- Students and teachers could make speeches to parents' or community associations explaining the importance of girls' education.
- Students, village elders, and teachers could discuss the importance of delaying marriage until a girl has finished her education.
- Teachers or schools could hold an essay contest on the importance of girls' education or how to increase girls' enrollment.
- Students could organize discussions or theater presentations about the importance of girls' education.
- Girls could write letters to local newspapers or radio stations to talk about the importance of girls' education.
- Celebrate "Education For All Week," which UNESCO sponsors. (Visit its web site, www.unesco.org, for more information.

Remember: Every child has a **right** to attend school.

Activity 3: Two Letters, Two Lives

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. If possible, distribute one copy each of **Handout 4: Two Letters, Two Lives** to the participants. Otherwise, have a girl read the two letters aloud from your copy.

2. Use the following questions (and suggested answers) to lead a discussion:

a) **What is the relationship between Mariama and Haby? How did they get to know each other? Where do they live now?** (*Answers:* Mariama and Haby are friends from elementary school. Haby lives in a rural village, while Mariama lives in a bigger city.)

b) **What are the differences in Haby's and Mariama's lives? Are there any similarities? Describe each woman's family situation.** (*Answers:* Haby's husband works abroad, while Mariama's husband lives with her and works in the same city. Haby's husband is looking for a second wife. Haby has four children, and Mariama only has two. Haby cannot afford medical treatment for her daughter, while Mariama was able to take her child to the doctor and send money to Haby. Haby does not work outside the home, while Mariama has a job as an assistant accountant. Mariama appears to be much more educated than Haby.)

c) **How would you describe the tone of each letter? Explain your answer.** (*Answers:* Haby seems to be worried that she cannot pay to take her child to the doctor. She also apologizes for her poor writing and grammar. She seems a bit embarrassed. Mariama seems very happy with her job and her family's accomplishments—her husband's job, her son's achievements, and the arrangement she has with a neighbor to take care of her children. Her letter is upbeat and positive.)

d) **How has education played a role in Mariama's life? In Haby's life? In the lives of their husbands and children?** (*Answers:* Mariama continued to go to school, while Haby did not. Mariama also studied mathematics and has used her education to get a job. She is able to take care of her children's health needs because of the money she earns as a result of her education. Mariama's husband also appears to be educated and now runs his own business. However, Haby is unable to work, and her husband has had to leave the country to find work. Mariama's children are all in school, but Haby might have to take her daughter out of school.)

e) **Is either one of these women's situations common in your community? Why or why not?**

f) **What are the advantages or disadvantages of Mariama's life? Of Haby's life?** (*Answers:* Mariama is able to earn her own money and afford to take her children to the doctor. Haby is not able to take care of her own children.)

g) **If you were Haby or Mariama, how would you feel?** (*Possible answers:* Haby might feel embarrassed to ask her friend for money. She also may feel sad or disappointed that she does not have the same opportunities as Mariama and that she is not able to provide for her children's medical needs. She may be angry. Mariama, on the other hand, may be happy with her family because she has a job that allows her to provide for it. She also may feel sad that her friend does not have the same opportunities.)

h) **Is there any advice you would offer to either Mariama or Haby?** (*Possible answers:* Haby could try to continue her studies through adult-education courses. She also could learn a trade or skill so she can earn her own income. She could find a way to get a small loan to assist her in starting her own business. Mariama could assist her friend with her efforts.)

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

Senegalese scholarship students focus on their lessons.

MARCO SOTELINO/WORLD EDUCATION

SESSION 2:
SELF-ESTEEM AND GOAL SETTING

Time allotted: 1 hour

Objectives

- Define self-esteem
- Identify positive qualities about self
- Know ways to improve self-esteem and to help others to do so
- Define goals and the characteristics of a good goal
- Identify the basic steps in achieving goals

Key Terms

- **Goal:** Something that a person works to accomplish
- **Put-down:** a word, phrase, expression, statement, gesture, or situation that results in a person feeling not good enough, not important, not capable, or less valued or significant than before
- **Self-esteem:** Describes how people feel about themselves
  - **High self-esteem:** Good feelings about oneself. People with high self-esteem know they are worthy of love and respect.
  - **Low self-esteem:** Poor feelings about oneself. People with low self-esteem do not expect love and respect from others because they feel unworthy of it.

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- **Handout 5: Goals Worksheet**
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Review activities and discussion questions.
2. If possible, make copies of **Handout 5: Goals Worksheet**.
3. Prepare answers to girls' questions from the previous session.
4. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Today's session will explore self-esteem, which is the way people feel about themselves. It is important to have good feelings about oneself because it can help people set goals and lead healthy, empowered lives.

Activity 1: What is Self-Esteem and Why is it Important?

Time allotted: 50 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask girls if they have ever heard the term "self-esteem." Ask them what it means. (*Possible answers:* Some girls might say that it's being confident; others might say that it means to be conceited or arrogant.) Explain that people with good self-esteem love and respect themselves. When people feel they deserve love and respect, they expect it from others and are not likely to accept being mistreated or disrespected.
2. Then explain to the girls that how people feel about themselves affects their actions towards others and what they can accomplish in life. Ask them to brainstorm how a person with good self-esteem acts. Write their ideas on the chalkboard or on a flipchart and be sure to include the following points.

   People with high self-esteem:

   - accept their mistakes and keep going;
   - accept new challenges and try new activities, and thereby gain self-confidence;
   - are more comfortable with others;
   - believe that they can succeed and set goals to do so;
   - feel more confident in their decisions and make choices based on their own desires and values, not those of others.

   Inform the girls that the opposite is also true. People with low self-esteem may be more likely to fall under the influence of others, not trusting their own values or decisions.
3. Point out that people are not born with self-esteem. Children learn self-esteem when they feel loved and valued. As children hear positive remarks including praise, encouragement, and reassurance about themselves and the things they do, their self-esteem is strengthened over time.

Parents and family play a crucial role in building or damaging a young person's self-esteem and helping a child to grow up believing that he or she is both lovable and capable.

4. Point out that high self-esteem is different from being conceited. People with high self-esteem like themselves, but that does not mean that they think they are perfect or better than other people. Ask girls if they can think of ways people can improve their self-esteem. Write their responses on the blackboard and include the following ideas:

"You can work on your self-esteem every day by…"

- Not comparing yourself with others. Setting your own goals, and not judging yourself according to someone else's achievements.

A scholarship student smiles brightly in Benin.

KATIE MARTOCCI/WORLD EDUCATION

- Recognizing your special talents and appreciating yourself the way you are. Make a list of the things you do well. Are you an artist, athlete, singer, storyteller, footballer or dancer? In what subjects do you excel in school? What things do you do well at home?

- Thinking about the kind of person you are and making a list of your best qualities: What do you like about yourself? Are you generous? Do you have a good sense of humor?
- Being aware of the things you would like to improve about yourself, but not being overly critical of yourself.
- Being realistic. Set achievable goals so that you can be satisfied when you accomplish them.
- Believing in yourself. Tell yourself: "I can do it!"
- Spending time with people who care for you, make you feel good about yourself and boost your self-esteem.
- Staying away from people who damage your self-esteem, particularly if they do it on purpose. Self-esteem protects you. When someone treats you poorly, your sense of self-esteem shouts: "This is wrong. I do not want to be treated like this!"

Activity 2: Treasure Yourself

Time allotted: 55 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Explain that we are born with an imaginary empty treasure chest. As people love us, compliment us, appreciate us, spend time with us, and learn with us, we build up our treasure. As people criticize us, shout at us, and put us down, we lose our treasure. Explain that as the put-downs accumulate, the treasure chest can empty and that prevents us from feeling good about ourselves and others.
2. Read the following statements aloud one at a time. Ask learners to write a response to each statement.
   - What do you think is your greatest personal achievement to date?
   - What do you like most about your family?
   - What do you value most in life?
   - What are three things you are good at?
   - What is one thing you would like to improve about yourself?
   - If you died today, what would you most like to be remembered for?
   - What do your friends like most about you?
3. Divide the girls into groups of three or four and ask them to share two or three of their responses with their group.

Primary-school scholarship students in Swaziland

NICOLE DRISCOLL/WINROCK INTERNATIONAL/WEIDEMANN ASSOCIATES INC.

4. Ask learners to name different aspects of self-esteem. Write their suggestions on the board as they list them. When they have finished, discuss the following with them:

- **Know Ourselves:** It is important for us to know who we are—our values, goals, dreams, and priorities—so that we can accept ourselves and interact better with others.
- **Respect Ourselves:** Some people can do certain things better than others. Our friends may play football better, work better, or learn faster. They are not better, just different. Never compare yourself to others.
- **Love Ourselves:** We must love ourselves before we can love others. When we have a good relationship with ourselves, our relationship with others will improve.
- **Value Ourselves:** Instead of hating ourselves for what we are not or have not done, we should give ourselves credit for what we are and what we have done.
- **Trust Ourselves:** Trusting ourselves means knowing that we can be our own teacher, our own guide, and our own decision maker for matters relating to us.
- **Accept Ourselves:** Accept ourselves as we are. Of course we can always try to improve some things about ourselves, but we should not judge ourselves too harshly.
- **Show Ourselves:** Let people know who we really are. A healthy personality is based on being honest about who we are.

- **Stretch Ourselves:** As we grow up we develop a mental picture of ourselves called a "self-image." Our self-image is not easy to change, but it is possible. By trying new things, our mental picture of ourselves can slowly be expanded, enlarged, and embellished.
- **Self Discipline:** Staying focused and having control over our actions helps to achieve our goals.
- **Nourish Ourselves:** Take good care of our mind, body, and feelings.
- **Be Ourselves:** Sometimes people feel that they should try to be like other people. It is important to be ourselves and be proud of who we are.
- **Share Ourselves:** Once we feel good about ourselves, our time spent with others will be more satisfying and fulfilling. Sharing our life with others will help us to feel better about ourselves.

MICHELLE SALMEN/WINROCK INTERNATIONAL

Community gatherings offer opportunities for girls to express their pride and joy.

Activity 3: Factors that Lower Self-Esteem

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Explain that there are reasons why many young people have low self-esteem. Very often, the "negative" things about people are highlighted while the "positive" things are not spoken.

   Ask participants to explain the meaning of the word "put-down," then write it in large letters on the board:

2. Put-down: a word, phrase, expression, statement, gesture, or situation that results in a person feeling not good enough, not important, not capable, or less valued or significant than before.

3. Ask learners to give examples of put-downs and write them on the board. Possible examples include:

   - "That's a stupid idea."
   - "I suppose that's the best you can do."
   - "What idiot would do that?"
   - "That's typical of you."

   Ask participants to list put-downs such as gestures or other nonverbal put-downs such as talking to one person in a way that excludes or ignores another.

4. Write the responses on the board. Then ask the participants to discuss whether it is only other people who put us down, or whether we also do it to ourselves and how. Write participants' responses on the chalkboard. Some examples of ways we can put ourselves down include:

   - Not accepting compliments. "Oh, I'm not really that good, I was just lucky."
   - Giving credit to others when it rightfully belongs to us. "You did all the work, I just helped a little."
   - "I couldn't do anything without him."
   - Giving others opinions before our own. "Our teacher always says…" "My friend thinks…" "I really don't know but my mother says…"
   - By responding when someone says, "Hey, stupid!"
   - By accepting nicknames like "shorty," "fatty," or "thick-head."

5. Discuss the following questions with the girls:

   - How do put-downs affect us?
   - How are we likely to feel about ourselves if we believe put-downs?
   - If someone is continually put down, how are they likely to behave towards themselves and others?

6. Emphasize that people who are used to being put down often:

- Find it difficult to interact with others or meet new people because they are afraid of rejection
- Are easily influenced or do things they do not want to do in order to be accepted
- Cannot stand up for their rights
- Are shy, lack confidence
- Find it difficult to make decisions

7. Close the discussion by asking the girls what they could do to limit the damage that put-downs can do to themselves and others. Write their responses on the chalkboard. (*Possible answers:* Recognize them as put-downs and therefore not take them to heart; challenge people when they put you or others down; do not put others or yourself down.)

Cameroonian high-school scholarship recipients gladly receive school supplies.

MELISSA CRUTCHFIELD/AED/AURORA ASSOCIATES INTERNATIONAL

Activity 4: Goal Setting

Time allotted: 1 hour

Recommended for Ages: 10 and older

Note to facilitator:
If possible, make copies of **Handout 5: Goals Worksheet**. If not, write the headings from the worksheet onto the chalkboard before the session starts. Have students copy them into their notebooks and then fill in their answers.

Facilitation Steps:

1. Explain to the participants that one of the ways that they can build their self-esteem is to set a goal and then meet it. A goal is something that a person works to achieve. People who accomplish their goals usually define what it is that they want and pursue it in a realistic way. Goals can be divided into the following two types:

   - Long-term goals: are goals that can only be accomplished over a longer period of time, such as a year or more; examples include going to university or having two children.
   - Short-term goals: are goals that can be accomplished in within six months, such as cleaning the house today or passing my exams in two months.

2. Next let the participants know that the best goals are said to be "**SMART**," meaning that they are:

   Specific – You should know exactly what you want to accomplish

   Measurable – You should be able to gauge progress towards goals

   Achievable – The goal should be something you can achieve

   Realistic – You should be able to achieve the goal within the time frame

   Time bound – You should set time limits to reach the goal

3. Explain to the girls that goal setting is important because it:

   - gives meaning and direction to one's activities
   - serves as a guide for decision making
   - increases one's self-esteem if goals are attained
   - provides motivation, especially when things are difficult

4. Next, distribute copies of the **Handout 5: Goals Worksheet** to each participant. Alternatively, have students copy the headings from the chalkboard into their notebooks. Ask that they not fill them in at this point. Tell them that you will review them together briefly. Using a sample goal to guide you, go through each section of the worksheet, explain the heading, and provide examples.

MICHELLE SALMEN/WINROCK INTERNATIONAL

A scholarship recipient displays the painting she made in gratitude for American support for education in Africa.

a) **Identify your goals.** Suggest "Pass my exams" as an example of a short-term goal.

b) What are some of the **good things that I will get if I reach my goal?** In our example, "I will be able to proceed to the next grade and may then have a chance at a university scholarship."

c) **What stands between me and my goal?** "If I do not like to study or do not study enough, this could be an obstacle to passing my exams." Similarly, "If I am required to work too long in the fields (or at my job) so that I do not have time to study, this may keep me from reaching my goal."

d) **What do I need to learn or do?** "I need to register for the exam with the school. I also need to learn my mathematics and English in order to do well on the exam."

e) **Who will encourage me?** "I know that my mother and my teacher really want me to do well, so I will ask them to check in with me to make sure I am studying and achieving some success."

f) **What is my plan of action?** "First I will register for the exam with the school. Next I will create a study schedule for myself. Then I will begin to study three hours each day until the exam."

g) **Completion date.** When will I be finished with this goal? "The exams are being held in three months, so I will be finished on_____." (Write in the date of the exams in this area.)

Make sure that the participants understand the use of the Goals Worksheet; then ask them to think about one important short-term goal and one long-term goal. Encourage participants to plan the attainment of those goals using the worksheet. Circulate through the room and assist students as necessary.

5. Invite the girls to share their plans with a partner; then ask if anyone would like to share their plans with the whole group.

Activity 5: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask the girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask the students if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 3:
ACTING OUT

Time allotted: 1 hour

Objectives

- Give girls an opportunity to speak out about girls' education

Recommended Materials

- Various theater props, as needed (See activity description.)
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Review activities and discussion questions.
3. Prepare answers to girls' questions from the previous session.
4. Prepare slips of paper for questions. (See final session activity.)

Note to facilitator:
Drama is a strong tradition in Africa and often a good way for people to express themselves freely. By playing a different role, a person can express him- or herself without actually taking "credit" for what is said. Drama and role-play can be especially useful methods for talking about sensitive or taboo subjects. They can also help younger people "talk" to older people in a non-threatening way.

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Ask girls what theater means to them or in your culture. Explain to girls that drama, or theater, is an art form that can help convey a message. In today's session, girls will use drama to convey their ideas about girls and education.

Activity 1: Solange's Problem

Time allotted: 1 hour

Recommended for Ages: 10 and older

Facilitation Steps:

1. In this session, girls will create a drama that addresses a problem—or a success—regarding girls' education in their community. Below is an example, which you may adapt to fit your community and culture. (*Possible options include:* seeking support from a family member or school official, seeking help with chores from brothers and sisters, etc.)

Solange's Problem

Solange is 15 and an outstanding student at her school. Because her mother just had a fifth child, Solange's parents want her to stay home and help with chores. Solange wants to stay in school.

What should she do?

Have the girls act out a series of skits that explore Solange's various options.

2. In a follow-up session, invite girls to use props and costumes to make their drama more interesting. Ask the girls where and for whom they would like to perform their drama. A few ideas:
   - Perform the drama for other classmates or at a school festival.
   - Perform the drama at a village or town meeting for parents and community members.
   - Make an audio recording of the drama and send it to a local radio station to air.

Activity 2: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time, as well as logistics for publicizing the drama.

Malian NGO partner awards scholarship to student.

AMSS/WORLD EDUCATION

SESSION 4:
TAKING ACTION IN THE COMMUNITY

Time allotted: 1 hour

Recommended for Ages: 10 and older

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Ask the girls to select an activity from Session 1 that addresses the problem of girls' education in their community.
3. Work with them to come up with a concrete action plan to implement their idea.

ADDITIONAL ACTIVITIES:

- Form girls' tutoring groups so girls can help each other with homework. Invite a teacher to provide support.
- Discuss a newspaper article, radio broadcast, or television show that deals with girls' education or another issue that affects girls.
- Take a group of girls to visit an elementary school to encourage girls' education.
- Encourage older girls to "adopt" a primary school girl and help her with her homework.
- Encourage girls to talk to women's groups or village associations about the importance of girls' education.
- Work with school officials to establish a "Student of the Month" award program based on performance, attendance, and leadership.
- Sponsor an essay contest with a theme related to the importance of girls' education.
- Celebrate "Education for All" week by holding a special event at your school or in your community to highlight the importance of education, especially for girls. To find out more information, visit the UNESCO web site: (www.unesco.org/education/efa/efa_week/index_new.shtml).

NOTES:

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FROM THE AMERICAN PEOPLE

GIRLS' MENTORING RESOURCE GUIDE

MODULE 4: LEADERS AND LEADERSHIP

Session 1: What Does it Take to be a Leader? 1
Session 2: Becoming a Leader 8
Session 3: Leadership in Action 11

KADIATOU COULIBALY/WORLD EDUCATION

A mentor plays a key role in helping a young girl develop her leadership potential. Strengthening girls' leadership skills will help ensure that the next generation of African leaders includes girls and women. To achieve this, mentors must actively cultivate a girl's particular skills or strengths (such as science, music, or literature), increase a girl's self-confidence, and encourage the girl to take a leadership role at school and/or in the community. This module is designed to expose girls to leadership principles and women in leadership positions, so that the girls develop skills to become leaders in their communities.

"…If you want to develop Africa, you must develop the leadership of African women."

–Soukeyna Ba, president of Women's Development Enterprise in Africa

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SESSION 1:
WHAT DOES IT TAKE TO BE A LEADER?

Time allotted: 2 hours

Objectives

- Identify good leadership characteristics
- Identify various leadership styles
- Explore strategies for becoming a community leader

Key Terms

- **Leader:** A person who influences or motivates others within a particular community; a role model
- **Leadership:** The ability to influence or motivate others

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Plain paper
- Colored pencils, markers, or crayons
- Large open space
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Review activities and discussion questions.
3. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.) Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.

2. **Overview explanation for participants:** This session is designed to get the girls to think about why it is important to be a leader in the community. They will also explore various strategies for becoming a community leader.

Activity 1: Definition of a Leader

Time allotted: 15 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Write the word "leader" on the chalkboard. Ask girls to define it.

2. Lead a discussion using the following questions:

a) **Who can be a leader?** (*Possible answers:* A person who has the skills necessary for the task that they are leading; someone who is motivated; someone who is respected by the community; someone who believes in a particular cause or goal.)

b) **What skills or education does a leader need to have?** (*Possible answers:* A leader must be good at working with others. Depending on the task, the person may need to know a lot about a particular subject, such as agriculture, or be skilled in writing or in mathematics.)

c) **How does this person act?** (*Possible answers:* Respectfully toward others, confident, caring)

d) **What qualities does the person need to have?** (*Possible answers:* Honesty, diplomacy, knowledge about a particular subject or issue, self-confidence)

e) **What qualities should the person not have?** (*Possible answers:* Dishonesty, bossiness, self-interest, a lack of confidence)

f) **Why and how do people become leaders?** (*Possible answers:* Some people have certain personality traits that make them take on leadership roles; a certain crisis, event, or cause may inspire a person to become a leader; people learn the skills necessary to take on leadership roles.)

3. Ask the girls to answer the following questions:

   - **What is the definition of leadership?** (Refer to Key Terms, above, for a concise definition.)
   - **Why is it important to be a leader?** (*Possible answers:* Leaders are able to accomplish goals; leaders are able to make a difference in their communities.)
   - **Why is it important for girls and women to be leaders?** (*Possible answers:* Girls and women are affected by decisions made at all levels, including at school, in their community, and by the government.)

Traditionally, women and girls have not always been allowed to take on leadership roles, especially in religion and politics. But this does not mean that women have not served as leaders.

4. Ask the girls what leadership roles women fill in their community. Remember that leaders do not always have titles like mayor, imam, or school director. They can be people who are influential in maintaining traditions, or who perform a function necessary to the community. **Emphasize that there are no leadership positions for only men or women.**

   - Are there any leadership positions open only to men or only to women? If so, why is this?
   - Do the girls agree with this division of leadership roles by sex?

"A leader is the head of authority, the heart of perception, and the tongue of justice."

–EGYPT, 2300 BC

Joyful scholarship students at ESB Secondary School in Rwanda

ALEXI ZEKAS/AED

A scholarship recipient in Sierra Leone

MARCO SOTELINO/WORLD EDUCATION

Activity 2: Women Leaders

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls to think about a woman they admire. Have them draw a picture of this woman and write down her qualities, skills, and accomplishments.
   - Ask each girl to think about why she selected that particular woman.
   - Is this person considered a community leader? Why or why not?
   - Invite the girls to share their responses.
2. Explain the difference between a **role model** (someone admired for a particular trait or traits) and a **leader** (someone who influences or motivates others in a particular community).
3. Ask the girls to name female leaders they know in their community or in the world at large.
   - Why do they consider these women leaders?
   - Do they help other girls and women?
4. After all the girls have shared their answers, ask them if the characteristics they listed describe only women leaders, or male leaders as well. Ask them to explain their answers.

- If the girls say that the characteristics they listed do not describe men who are leaders, ask them to describe a male leader's characteristics.
- Are the characteristics listed for male and female leaders different?

Note to facilitator:
Be sure to point out that men and women leaders may be perceived differently due to cultural expectations about men's and women's behavior or traditional roles.

- How do the girls view these different leadership qualities for men and women?

5. Continue the discussion by asking girls which leaders in the community (or outside the community) they would like to emulate and why.

Activity 3: The Big Knot

Time allotted: 1 hour

Recommended for Ages: 10 and older

Facilitation Steps:

1. Divide girls into groups of 5–8. Have each group stand in a circle. Instruct each girl to extend her right arm into the circle and take the hand of another girl, but not a girl standing next to her. Have the girls repeat the action with their left hands. Tell them that they are now in a **Big Knot** that they must "untie" without letting go of each other's hands. They may step over and through each other's hands, but they are not allowed to let go of each other. They have 10 minutes to complete the task. The first group to untie itself wins. Be sure to monitor their progress!
2. After the girls have untied their knots, ask them to answer the following questions:

a) **How were they able to untie the knot?** (*Possible answers:* They figured out how their hands were tangled and worked together to untangle them; one person acted as the leader.)

b) **If they weren't able to untie the knot, why not?** (*Possible answers:* They couldn't figure out the knot; people wouldn't work together; people got frustrated and gave up.)

c) **What problems did they encounter?** (*Possible answers:* One person gave all the instructions and didn't listen to others' ideas; some people wouldn't work as a group.)

d) **Did any of the girls take on a leadership role? If so, what did this person do?** (*Possible answers:* She gave instructions, organized the group, or encouraged others.)

3. Ask the girls to reflect on the leaders they have discussed during the session.
   - Does each person lead in the same way?
   - Ask girls to name various leadership styles. What are the advantages and disadvantages of each?
4. Provide the following information on **leadership styles.**

   1) **Authoritarian** or autocratic leaders lead without taking other people's ideas into account, and may rely on force to get things done. The authoritarian style is sometimes used when a decision must be made quickly, or if the beliefs of the majority may lead to a decision that harms the minority.

2) A leader who uses a **participative**, or democratic, approach takes other people's ideas into account before making a decision. This leadership style allows others to help make decisions, although the leader usually still makes the final decision. This is generally the most effective leadership style for ensuring that others feel respected and included in the decision-making process. Moreover, the final decision is more likely to be accepted because people feel that their voice has been heard.

3) With a **laissez-faire** (or "free reign") style, a leader allows others to make decisions for him or her. As a result, other people may feel empowered to make decisions. This style can be useful if the leader does not have time to make all decisions. However, a leader who relies too much on this approach may find that others are doing things that he or she does not approve, or that people feel like they are not receiving enough guidance.

4) **Leadership by example** is serving as a role model for others and allowing their actions to speak louder than words.

After you describe the leadership styles, ask girls if they have examples of the different types of leaders. What did they like or dislike about that leader's style? Were these leaders able to get the support of those around them?

A mentor speaks to scholarship recipients in the Democratic Republic of Congo.

AED/INSTITUT TECHNIQUE ET PROFESSIONNEL DE KIKWIT

5. **Ask the girls what kind of leadership style they used during the Big Knot game.** Ask them to describe the relationship between the leader and the rest of the group.

6. **Discuss what skills a leader should have.** Possible answers include:

   - Be able to face and manage challenges
   - Be committed to life-long learning
   - Be able to work with others, including those who are different from him or her
   - Be able to motivate others

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.

2. Thank the participants for their active involvement.

3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.

4. Establish the next meeting date and time.

SESSION 2:
BECOMING A LEADER

Time allotted: 1 hour

Objectives

- Identify strategies and obstacles to becoming a leader
- Discuss how girls can become community leaders

Key Terms

- **Obstacle:** Something that prevents something else from happening
- **Strategy:** A plan to overcome an obstacle and accomplish a goal

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- **Handout 6: Aminata's Story**
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. (Optional) Make copies of **Handout 6: Aminata's Story**.
3. Review activities and discussion questions.
4. Prepare answers to girls' questions from the previous session.
5. Prepare slips of paper for questions. (See final session activity.)

Mentors from Pemba Island, Tanzania

ALEXI ZEKAS/AED

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

5. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
6. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
7. **Overview explanation for participants:** Today's session will help girls identify challenges that leaders face, as well as ways they can overcome them.
8. Ask girls to name a few of the female leaders they said they admired and why they admired them. Ask if they think it was easy for the women to do what they did. (The girls will probably answer "no.") Explain that it's not always easy to be a leader.

Activity 1: Overcoming Obstacles to Leadership

Time allotted: 25 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Remind the girls about the various female leaders they admire. Ask them to reflect on the difficulties they encountered when trying to untangle the Big Knot. How are these difficulties similar to obstacles that leaders sometimes face? (If the group is large, divide the girls into small groups and have each group make a list.)
2. Write the girls' ideas on the chalkboard. (A more active, alternative activity would be to ask each girl or each group to write an obstacle on a piece of paper, then tape it to the chalkboard.)

Ask them if any obstacle or challenge is particular to girls. If not, are there any obstacles to becoming leaders that girls face? Why or why not?

3. Once the group has agreed on a list of obstacles for girls, ask the girls to think of strategies to overcome these obstacles. (Again, if the group is large, assign one obstacle to each group and have one student report back on the group's findings.)

4. Which of these strategies can a girl accomplish on her own? Which strategies must involve other girls, teachers, parents, or community members? Have any of the girls tried to overcome a particular obstacle? If so, ask her to share her experience.

Activity 2: Leading for Change

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Have one of the girls read **Handout 6: Aminata's Story** out loud. If the group is large, divide students into groups of 3–4 people to discuss the questions at the bottom of the handout. After approximately 10 minutes, ask students to share their answers with the entire group.

"You must be the change you wish to see in the world."

–MAHATMA GANDHI

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.

2. Thank the participants for their active involvement.

3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.

4. Establish the next meeting date and time.

SESSION 3:
LEADERSHIP IN ACTION

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Note to facilitator:
This activity may require additional follow-up sessions.

Facilitation Steps:

1. Divide girls into small groups. Ask them to identify a problem at their school or in their community that they would like to address.
2. Ask them to discuss the following questions in their group:
   - Discuss a few issues or problems at your school. Select one problem or issue you would like to solve.
   - What do you think causes this problem?
   - Based on these causes, what do you think can be done to solve the problem?
   - What community resources could you use to solve the problem? (These resources could be people or things.)
   - Is there anyone who could help you solve the problem?
   - What are some specific actions you could do to solve the problem? Make a list, or plan, of what you would do to address the problem.
   - What skills and leadership qualities are needed to carry out your plan?
3. Have each group share its ideas. If possible, select one or two of the girls' ideas to implement. This will give the girls hands-on experience in being a leader.

Congolese mentors participate in a training workshop.

AED/ECOLES CONVENTIONNÉES CATHOLIQUES

ADDITIONAL ACTIVITIES:

- If possible, help the girls join an online discussion on the United Nation's Voices of Youth web site about issues young people face around the world. Girls can send their ideas and thoughts to the discussion. (www.unicef.org/voy/voy.html)
- Learn about and discuss important women who are leaders in your community or country.
- Sponsor an essay contest on girls' and women's leadership at your local school or in the community. Contact a school to work with you, select a topic, and advertise the essay contest on the radio or at various schools. Offer a small prize for the best essay. (You may want to work with a teacher who may be able to offer extra credit for the essays, or who could use it as an assignment in a language class.)
- Have girls write poems, songs, or skits about girls' leadership. Have them perform or submit their works for publication or broadcast.
- Organize a leadership seminar. Invite local leaders to share their experience and advice with young leaders.
- Establish an annual community leadership award. Arrange for a committee to select a girl and/or a boy from the community who has exhibited leadership during the year.

NOTES:

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GIRLS' MENTORING RESOURCE GUIDE

MODULE 5: COPING WITH STRESS

Session 1: Defining and Identifying Stress 1
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KADIATOU COULIBALY/WORLD EDUCATION

Sometimes we assume that childhood and adolescence are times of relative freedom from responsibilities and work that can result in the physical and emotional response we call "stress." However, young people worldwide increasingly talk about the feelings of stress that are affecting them. Without the tools to manage daily short-term stress, young people can become overwhelmed and may choose behaviors that are harmful to their health and well-being.

Girls need to be aware of what causes stress in their lives, and to identify their responses to stress. They need to understand the positive role stress can play in their lives, but also learn how to manage and prevent the negative effects of too much stress.

Mentors can help girls develop helpful practices to manage the stress that comes into their lives. The following activities will help girls to: understand the role stress plays in our lives; identify stresses in their own lives; and provide tools to manage stress as part of a healthier, happier life.

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SESSION 1:
DEFINING AND IDENTIFYING STRESS

Time allotted: 1½ hours

Objectives

- Define and understand the term "stress"
- Understand various causes for stress, as well as reactions to stress

Key Terms

- **Depression:** A mental disorder marked especially by sadness, inactivity, difficulty in thinking and concentration, a significant increase or decrease in appetite and time spent sleeping, feelings of hopelessness, and sometimes suicidal tendencies. Depression can also be just a general state of feeling sad.
- **Stress:** Mental, physical, or emotional reactions resulting from various situations we encounter in our lives

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Several pieces of paper cut into strips (See Activity 2.)
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Cut paper into slips of paper. (See Activity 2.)
3. Review activities and discussion questions.
4. Prepare answers to girls' questions from the previous session.
5. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Explain to girls that this session will help them to better understand the causes and types of stress in our lives. Stress can play a useful role in that it motivates us to action and brings awareness of new opportunities. It also can play a negative role, if the reaction results in depression, health problems, rejection, or negative behavior.

Students from Benin pose in the colorful raincoats they received as part of their scholarship.

KATIE MARTOCCI/WORLD EDUCATION

Activity 1: Defining Stress

Time allotted: 15 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls to define stress. They may find that stress is easier to describe than to define. Explain that stress is what happens to our body, mind, and emotions when we encounter change of any kind. Write the girls' ideas on the chalkboard or on flipchart paper.

2. Stress can result from either good or bad causes: birth, death, receiving an award, failing an exam, illness, moving, money problems, expecting a visitor, etc. The level, or intensity, of a person's reaction can range from high to low. The way in which people react to stress can also differ. Different people react to stress in different ways. One person may cope with stress by eating more, while another may stop eating. Another person might sleep more to avoid stress, while someone else cannot sleep due to the stress.

3. Learning how we react as individuals can lead us to understand how stress impacts our lives.

Activity 2: Breaking Down Stress

Time allotted: 45 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Sometimes we only recognize our reactions to stress and do not take time to identify the root cause of the stress. It is important to first determine what causes stress in order to find ways to cope with it.

2. Have the girls sit in a circle. Ask them to name the causes of stress in their lives, or in the lives of people they know. Assign two or three girls to write the answers on individual pieces of paper.

3. When the girls start to run out of answers, encourage additional responses by adding causes they may not have named, such as:

Illness or death of parent or relative	Pregnancy	Puberty
Divorce/abandonment	Marriage	Engagement
Trouble at school	Exams or homework	Illness
Taking care of a sick relative	Lack of school fees	Holiday
Fight with a friend	Menstruation	Lack of sleep
Household responsibilities	Pressure to have sex	Being Head Girl
Taking care of brothers/sisters	Parent remarries	Financial problems
Moving to new village/town	Loneliness	Losing a game or debate
Getting tested for HIV	School breaks	Harassment at school
Presence of HIV/AIDS in the family	Living with HIV	

4. Once the girls have come up with a list of stress causes, divide them into partners. (If there are not enough girls, you can continue the exercise in one large group.) Now ask the girls to think about how people react to stress. Give each partner 2–3 pieces of paper listing a different cause of stress. Ask them to discuss the following questions:

   - Would this event create a lot of stress or a small amount of stress in a person's life?
   - How might a person react to this event?

Answers can relate to **physical, mental, or emotional** changes. (*Possible answers:* Loss of appetite, hair falling out, high blood pressure, confusion, irrational behavior, lack of energy, aggression, depression, anxiety, crying, fear, anger, or excitement. Sometimes, stress can cause people to drink alcohol, smoke, or use drugs. Stress can even lead to suicide.)

5. After about 15 minutes, invite each set of partners to share responses. Encourage other girls to add their thoughts. Note any differences in how people might react to the same event.

Note to facilitator:
If alcohol or drug abuse and/or youth suicide happens in your area, you may want to devote more time to discuss these serious issues. Talk specifically about why young people drink alcohol, use drugs, or commit suicide. Suicide, for example, may result from extreme depression, hopelessness, shame, trauma, or fear. Invite participants to discuss how they can create a supportive environment for peers so that they do not resort to suicide. For example, they can support people living with HIV/AIDS so that they do not feel stigmatized. You may also invite a health professional or someone who works with people who have drinking or drug problems to talk to the group.

6. At the conclusion of the discussion, collect the pieces of paper. Designate one corner of the room as "low," another as "medium," and a third as "high." When you read off each of the causes of stress, all girls should run to the corner of the room that best describes the level of stress the event would cause.

7. Invite the girls back into a circle and ask them if any would like to share one or two ways that they like to deal with stress. (*Possible answers:* play sports, talk with friends, cry, dance, sing, write, read, pray.)

Activity 3: Relaxation Game (or Other Traditional Game)

Time allotted: 15 minutes

Recommended for Ages: 10 and older

Note to facilitator:
Leave time at the end of this session for a fun, stress-reducing game or dancing. One example is the "Thunderstorm Massage," described below.

Facilitation Steps:

1. Tell girls to sit in a circle. Instruct each girl to turn to her right so that she is facing the back of the girl in front of her. Invite girls to gently put their hands on the shoulders of the girl in front of them. Tell them to gently massage the girl's shoulders. This should be a relaxing massage; it should not hurt or make the girl uncomfortable.

Note to facilitator:
You will probably find that the girls will start to laugh and some may feel uncomfortable. Remind them to relax and to be very gentle with each other.

2. Explain that a nice massage is like a bright day filled with sunshine and no stress.

3. Explain that sometimes, a sunny day can turn cloudy, just like our happiness can sometimes turn into stress. It can even start to rain. (At this point, instruct the girls to lightly tap on the back of the girl whom they are massaging. This should feel gentle, like raindrops falling on her back.)

4. Tell them that little bit of rain can turn into a storm, just like events in our lives can cause a lot of stress. (Now instruct each girl to use the palms of her hand to pat the back of the person in front of her, simulating a "thunderstorm" on the person's back.)

5. Explain that the thunderstorm, like stress, eventually goes away. (Girls should again lightly tap their fingers on the other person's back.)

6. Tell them that in the end, stress goes away and the sun comes out again! (Tell them to gently massage the other girls' shoulders for a few minutes before ending the exercise.)

7. Once the girls have stopped massaging each other, ask them how the massage made them feel.

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.

2. Thank the participants for their active involvement.

3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.

4. Establish the next meeting date and time.

Scholarship students and mentors enjoy dancing in Malawi.

MARTHA SALDINGER/WINROCK INTERNATIONAL

SESSION 2:
MANAGING STRESS

Time allotted: 1½ hours

Objectives

- Identify tools to manage stress
- Understand the need to manage stress in our lives

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- **Handout 7: Tips for Managing Stress**
- Pens or pencils for taking notes or drawing
- Pieces of paper for girls' questions
- Small notebooks (or blank paper) to make pages for stress diary
- Blank paper (preferably strong paper) for cover of diary
- Markers, scissors, glue
- Items to decorate covers (markers, crayons, paint, pieces of fabric or colored paper, seeds, buttons, etc.)
- String to secure pages into diary cover
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Assemble materials needed to construct stress diaries. (See Activity 3.)
3. If possible, make a copy of **Handout 7: Tips for Managing Stress** for each girl.
4. Review and practice demonstrating relaxation and imaging techniques.
5. Review activities and discussion questions.
6. Prepare answers to girls' questions from the previous session.
7. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Now that girls have a better understanding of what stress is and have identified the causes of stress in their own lives, it is time to present how stress can be managed in practical ways.

   Stress can be managed by:

   - Eliminating, avoiding, or reducing the causes of stress
   - Developing ways of coping that reduce the intensity of our reaction to stress, as well as any harmful effects of stress.
   - Life will never be stress-free. We can only attempt to equip ourselves to deal better with it.

Two girls play games at Heartbeat's after-school mentoring center in South Africa.

MARTHA SALDINGER/WINROCK INTERNATIONAL

Activity 1: Why Manage Stress?

Time allotted: 25 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls to list the benefits of managing stress. (*Possible answers:* Increased energy, improved health, increased confidence, better relationships, better performance on exams.)

2. Make a list of the girls' responses on the chalkboard or flipchart paper.

Note to facilitator:
A more interesting way to present the girls' responses is to write girls' answers on pieces of paper cut into circles. Tape these circles into the shape of a cluster of balloons or flowers on the wall. The design will be a reminder to girls of the reasons why it is important to manage stress.

3. Ask girls why we don't just try to eliminate stress from our lives. (*Possible answers:* Some stress is good; stressful events such as death, exams, or illness can be difficult to control.)

Girls show off their t-shirts from mentoring camp in South Africa.

TRACEY YUDITSKY/WINROCK INTERNATIONAL

Activity 2: Tool Kit for Managing Stress

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Note to facilitator:
If possible, make a copy of **Handout 7: Tips for Managing Stress** for each girl. If not, you can pass your copy out to girls and have them take turns reading the tips aloud.

Facilitation Steps:

1. Tell girls that this activity should help the girls identify techniques to manage the causes of stress and their reactions to stress. Ask girls to brainstorm a list of ways in which they deal with stress. For example, do they take a walk or talk to a friend or mentor? Write their responses on the board, or have girls write individual responses on small pieces of paper, then tape them around the room.

2. Optional Activity: Have the girls choose a stressful situation common to girls in the community that they can perform as a drama. Have girls act out the drama and discuss it afterward.

3. Have girls review the techniques listed in step 1. You may find that they fall into certain categories, such as the ones listed below. Present the following techniques for reducing stress and point out into which category the girls' responses fit:

   Get Organized: Often our environment is so disorganized, it causes stress. We cannot find things we need when we need them, our clothes are wrinkled because we fail to hang them up or fold them properly. We forget important instructions or appointments. Thus, one way you can manage stress is by making a plan to organize your room or dormitory space. Another way to "get organized" is to analyze where you need to spend your money and where you are spending your money: Do you spend it on snacks and phone cards, or do you make sure that essential items are covered first? Make a budget to see where your money is going.

   Plan Ahead: Pressure over classroom assignments and exams is often caused by putting things off till the last minute, lack of planning, or inaction. To avoid this, make a study plan to ensure that you have assignments completed on time or ahead of time. Make a date to start studying for exams early. Study with a classmate or seek help from a teacher, mentor, or tutor. Keep a weekly or monthly calendar of assignments, activities, and appointments to make sure you do not get behind.

   Divide and Conquer: Do you find household work or taking care of brothers and sisters stressful? To avoid becoming stressed, do not think about the entire list of things to do at one time. Break up the work in 10–15 minute periods or divide the work into individual tasks. Give yourself a small reward or break after completing each one (take a drink of water, listen to music, stretch or relax, etc.). Ask for help with your chores, or divide the work between you and your siblings, neighbors, or friends.

   Seek Assistance: Hiding our stress from other people or trying to cope with it alone often causes even more stress. Sometimes we simply need help coping with a situation and our feelings of stress. Tell girls they should never be ashamed to ask for help or advice in coping with stress. Just talking to someone about your feelings will often make you feel better. Remember that friends, family members, teachers, mentors, and trusted adults can often help you solve your problem or decrease your stress.

Mentoring provides strong female role models for scholarship girls.

WORLD EDUCATION/AED

Accept It: Sometimes we must accept that the cause of our stress cannot be changed or eliminated. What we can do is make a decision that the level of stress that results will not be as high as it was when we first were exposed to the cause. We also can try to change our reaction to be less emotional. We have to try to find positive aspects to the situation and sometimes adopt a more moderate view. For example, think of exams as a way to pass to the next grade. Instead of trying to be perfect in all your school subjects, accept that there may be subjects in which you do not excel. Think about the good memories you have with your friend rather than a recent argument.

4. Explain to the girls that some other techniques for reducing stress involve strengthening our physical and mental muscles. We can prepare ourselves to be more resistant to stress by being physically and mentally prepared.

5. If possible, distribute a copy of **Handout 7: Tips for Managing Stress** to each girl. If you do not have copies, pass around your handout around and ask each girl to read one of the tips out loud.

6. Now ask the girls reflect individually. Ask them to close their eyes and to think of something that is causing stress in their lives. Read the following questions out loud one by one. Give the girls time between each question to answer the questions silently to themselves.

- How have you reacted to the stress?
- Have you tried to do something about the stress? If so, what?
- Can you avoid or eliminate the cause of the stress? Why or why not?
- What can you do to eliminate the source of stress?
- If you cannot eliminate the cause of the stress, what can you do to decrease the amount of stress you are feeling?
- Name two things you will do this week to try to cope with this stressful situation.
- Now imagine yourself without that stress. Remember this image as you strive to cope with stress!

Once you have finished reading the questions, tell the girls to open their eyes. Encourage the girls to try to picture themselves without that stress as they go through the coming days.

Activity 3: Making a Stress Diary

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Note to facilitator:
If supplies are not available, you can either substitute pieces of paper folded into a diary for the girls or disregard the activity. Please note that diaries are confidential and should not be read unless a girl specifically asks you to.

Facilitation Steps:

1. Explain to girls that they will create a diary in which they can write about the stress they experience in their lives. Writing about stress can help them pinpoint what is causing stress in their lives, as well as help them understand their reactions and find ways to manage their stress. Each day or each week, girls can write in their diaries about the stress in their lives, the positive or negative effects on them, and how they have dealt with stress. The contents of the diaries may be shared at a later session or kept for the girls' own reference.
2. Pass out notebooks, paper, glue, tape, scissors, crayons, markers, and items to decorate the notebooks. If supplies are limited, provide the girls with pieces of paper that they can fold into a diary.
3. Each diary should have enough pages to write an entry for each week that you meet. (If you expect girls to write in the diary every day, you may need more pages.) Each page should have a space to describe the cause of the stress, the level, and the girl's reaction
4. Allow approximately 30 minutes for girls to create their diaries.
5. Give girls the option of taking the diaries home or allowing you to keep them until the next session. Also remind girls that you will not read their diaries unless they give you permission. (Some girls may want their mentor to read their diaries because they view written communication as less intimidating.)

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

Secondary-school scholarship recipients from Ethiopia

ALEXI ZEKAS/AED

NOTES:

USAID
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GIRLS' MENTORING RESOURCE GUIDE

MODULE 6: ADOLESCENCE, REPRODUCTION, AND RELATIONSHIPS

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MELISSA CRUTCHFIELD/AURORA ASSOCIATES INTERNATIONAL/AED

Growing up can be fun and exciting. However, for many young people, it's also a time of anxiety as they try to cope with changes in their bodies and their emotions. Sometimes it can be hard for adolescents to talk about these changes with parents and elders. But the more adults talk to children about puberty and adolescence, the more they will show these young people that they support them and want them to be healthy and safe. As a mentor, the more open and honest you are with young people, the more comfortable they will be coming to you for advice and help.

Unfortunately, millions of girls experience unintended pregnancies and sexually transmitted infections (STIs) because they are not informed about the risks of early sexual activity and unprotected sex. While this may be a sensitive or taboo topic to discuss with young people, research has shown that talking to young people about adolescence, sex, pregnancy, HIV, and other "taboo topics" is essential because it gives youth the information and skills necessary to delay sexual activity.

Mentors can play an important part in helping girls make informed choices about their reproductive health. The following activities are designed to help mentors facilitate discussions and activities about adolescence and reproduction. The information and discussions will help girls make safe and healthy choices regarding their reproductive health and future.

Note to facilitator:

Due to the sensitive nature of the material, you may want to have a female mentor or health worker facilitate or help facilitate activities. Some activities/information may need to be adapted depending on the girls' ages. At the beginning of each session, remind the girls that the issues you are going to discuss may make them feel uncomfortable. Remind them that they are free to ask questions, and that they should not make fun of others' comments or questions. Be sure to discuss how your culture, religion, or community views each issue.

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SESSION 1:
CHANGES IN OUR BODIES

Time allotted: 2 hours

Objectives

- Understand puberty and its physical and emotional changes
- Explain and understand the menstrual cycle

Key Terms

- **Adolescence:** A period of physical and psychological development, beginning with the onset of puberty, that lasts until maturity. Adolescence generally lasts between ages 10–19.
- **Ejaculation:** The rapid discharging of sperm from a man's penis
- **Fertilization:** When a sperm and egg cell unite, usually resulting in a pregnancy
- **Menstruation:** Discharge of blood and other fluids from the uterus due to a lack of pregnancy. Usually begins during puberty and occurs approximately once every month.
- **Ovulation:** When a woman's ovaries release a mature ovum (egg) each month. The period of ovulation is when a girl or woman is most likely to become pregnant.
- **Puberty:** The time of life when a girl's body develops into that of a woman and a boy's body develops into that of a man. These changes usually begin around ages 10–11 and last until age 17–21. (Boys may experience puberty later than girls.)
- **Sperm production:** When a boy's or man's body (the testes) produces sperm
- See **handouts** for additional key terms.

Recommended Materials

- Small pieces of paper (for Activity 3)
- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- **Handout 8: Female Internal Reproductive Anatomy** and **Handout 10: External Reproductive Anatomy**
- **Handout 11: Caring for Yourself during Menstruation**
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Copy role-play scenarios from Activity 3 onto small pieces of paper. (Do not include possible solutions.)
3. If possible, make a copy of the handouts for each girl.
4. Review activities and discussion questions.
5. Prepare answers to girls' questions from the previous session.
6. Prepare slips of paper for questions. (See final session activity.)

Adolescent girls contemplate important questions at Heartbeat's after-school mentoring center in South Africa.

MARTHA SALDINGER/WINROCK INTERNATIONAL

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Today's session is about puberty and adolescence, something they have all probably heard about. Tell them that the issues you are going to discuss may make them feel uncomfortable. However, it is important to discuss puberty and adolescence because they affect both their physical health and mental well-being. Remind girls that they are free to ask questions aloud or to write them on a piece of paper to put in the question container at the end of the session. Girls should respect each other's comments.

Activity 1: What is Puberty?

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls to define the word puberty.
   - What happens during puberty?
   - What physical changes happen to boys and girls?
   - What other changes occur, such as emotional changes, changes in family relationships, and changes with friends?

   Make a list of the girls' responses on the board. Refer to the table below for more ideas.

GIRLS	BOYS
• Breasts develop	• Hair appears under arms and on chest
• Hair appears under arms	• Growth spurt occurs
• Pubic hair appears	• Pubic hair appears
• Ovulation and menstruation begin	• Sexual organs enlarge
• Growth spurt occurs	• Voice deepens
• Hips usually become larger	• Shoulders broaden
• Skin and hair may become oily	• Sperm production and ejaculation begin
• Vaginal secretions may begin	• Skin and hair may become oily

2. **Dealing with change:** Ask the girls if some of these changes (physical, emotional, or social) are easy or difficult to go through.

- Do girls and boys fear going through puberty, or is it something to which they look forward?
- How do girls cope with or celebrate the changes?

3. Suggestions to emphasize include:
   - It is important to learn about body changes so that you understand them.
   - Talk to an adult, such as your mother, aunt, or a trusted teacher, about how you feel. Ask them questions about anything you don't understand. Ask them to discuss how they coped with going through puberty.
   - Maintain good personal hygiene to manage body odor or oily skin.
   - Do safe and healthy things that make you feel good about yourself.
4. Ask the girls to define **adolescence**. Lead a discussion about adolescence using the following questions as guidelines:
   - Does your community or culture recognize adolescence? (In some cultures, for example, once girls begin to menstruate, they are considered adults.)
   - Do people in your community or culture celebrate adolescence with ceremonies or other traditions? If so, what is the significance of these ceremonies? (For example, among the Akan tribe in Côte d'Ivoire and Ghana, ceremonies marking adolescence mean a young person can socialize with friends, have a boyfriend or girlfriend, or get married.)
   - What emotions are associated with puberty and adolescence (shame, excitement, confusion, happiness, uncertainty, stress, etc.)? How can we help each other manage these emotions? (For example, friends can provide support to each other or ask each other for advice.)
   - Are boys and girls viewed or treated differently during or after adolescence? If so, how does this affect how they feel about themselves? Does adolescence increase or decrease a girl's opportunities or freedoms? What about boys? (Be sure to point out that boys often gain more freedom as they mature. However, for girls, sexual maturation may cause fear among parents and lead to restrictions in what the girls can do. Moreover, adolescent girls are sometimes discouraged from pursuing non-traditional activities such as sports, mathematics, or science, and encouraged to limit themselves to their roles as wives and mothers.)
   - What other changes occur in a girl's or boy's life during adolescence besides physical changes? (For example, a family may begin to discuss marriage; a young person might feel like his or her family does not understand him or her; parents may allow or forbid their adolescent children to socialize with the opposite sex; a girl or boy may decide to have sexual relationships with peers.)
   - How do parents and adults react to changes in their daughters and sons as a result of puberty? Are these reactions positive or negative? (Be sure to point out if these reactions result in unfair treatment of boys and girls.)
   - How do boys and girls react to each other as they go through adolescence? (For example, boys might start making sexual advances towards girls, and girls might become interested in boys.)

   Dealing with the opposite sex is one of the most confusing, exciting, and scary parts of adolescence. During adolescence, boys and girls often start to feel physically attracted to each other, but they don't always know how to deal with their feelings. Tell girls that you will discuss relationships in detail in another session.

Activity 2: What is Menstruation?

Time allotted: 35 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. **Overview:** For most girls, puberty's defining moment is when she begins to menstruate, or bleed from her vagina approximately once a month. In most societies and cultures, menstruation is a big milestone in a girl's life. Once menstruation begins, a girl is often considered a woman. With this new status come many physical and mental changes, but also changes in the way society views a girl. These changes can be confusing and stressful. Moreover, because of menstruation's taboo nature, girls do not always receive accurate or detailed information about how to care for themselves during their period.

Scholarship students at Flamingo Primary School in South Africa

TRACEY YUDITSKY/WINROCK INTERNATIONAL

2. As you lead the following discussion, remember to keep in mind how the local culture interprets and deals with menstruation. However, be sure to **emphasize** that menstruation does not affect a girl's ability to learn or to play sports. Moreover, a girl **should not** be viewed as "dirty" or "inferior" to boys and men because she menstruates.

3. Ask girls to define **menstruation**. Ask if they know what causes menstruation. Distribute **Handouts 8 and 10**. Be sure to ask the girls to keep these handouts and to bring them to the subsequent sessions in this module. Using the diagrams, explain the female reproductive system. Explain the menstrual cycle, as follows:

a) Each girl is born with two ovaries, each of which contains thousands of egg cells, or ova. Once these eggs have matured, one egg, or ovum, is released per month in a process called ovulation.

(The right and left ovaries alternate releasing the egg each month.) Different girls' eggs mature at different times, which is why not all girls start menstruating at the same age. The egg is so small that it cannot be seen without a microscope.

b) The egg travels through the Fallopian tube to the uterus. During this process, the egg may be fertilized by a man's sperm. If the girl or woman has sexual intercourse, the man's sperm may fertilize, or unite with, the egg. If the woman is healthy and the right conditions are present, the egg will develop into a fetus (an unborn baby inside a woman's womb).

Mentoring includes fun activities such as dancing in Malawi.

MICHELLE SALMEN/WINROCK INTERNATIONAL

c) While the egg is waiting to be fertilized, the woman's uterus begins to prepare itself to nurture the fetus by strengthening its inner lining with layers of padding. This "pillow" of padding is composed of blood and tissue, and lines the wall of the uterus. If the egg is fertilized, it will attach itself to this uterine lining and begin to grow into a fetus.

d) If the woman does not have sexual intercourse (or the egg is not fertilized because the woman used contraception such as a condom), the uterine lining deteriorates. The woman's body will get rid of it via the woman's vagina. Menstruation is the monthly release of this padding of blood (and other fluids), as well as the unfertilized egg.

e) Everyone's menstrual cycle is different and can last 2–8 days per month. While most women have a menstrual cycle once every 28–30 days, the timing can vary due to eating habits, stress, or amount of physical exercise. A girl's first few menstrual cycles usually do not happen regularly. Girls usually begin menstruating between ages 10–15, although this can vary greatly among girls.

f) A woman will continue to menstruate monthly until she becomes pregnant or reaches menopause. Menopause is the period in a woman's life when she can no longer become pregnant because she no longer has fertile eggs.

4. **Managing your period:** Menstruation can sometimes cause stress, anxiety, or shame. It also can be accompanied by abdominal pain, aches, cramps, and changes in emotions. Before a girl's period begins, she may experience tenderness in her breasts or mood changes, such as sadness or anger. Some girls do not experience these symptoms at all. That is normal also.

5. Ask girls how menstruation is treated in their community. Are there special traditions surrounding it? Discuss how girls can take care of themselves during their period:

   - What kind of menstrual pads or napkins do girls use, and how do they buy them?
   - How do girls manage their period at school? (For example, are there separate latrines or toilets for girls?)
   - What can girls do for menstrual cramps? Is medication available?
   - How can girls support each other and not feel ashamed during menstruation?

   Distribute **Handout 11: Caring for Yourself during Menstruation** and discuss the ways in which girls can take care of themselves during their period.

Activity 3: Role-Play

Time allotted: 40 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Each of the scenarios below deals with a particular aspect of puberty and adolescence. Assign one of the role-play scenarios below to a pair or small group of girls. (If there are other scenarios more appropriate to your community, be sure to add them.) **Do not include the possible solutions.**

2. Ask each group to discuss how it would deal with the situation. (The girls may modify the situation to fit their own experiences.)

3. Give each group 15 minutes to discuss the situation and possible solutions. Afterward, ask each group to act out its solution as a role-play, or short drama.

Note to facilitator:

If you do not have enough time or if the girls have performed several role-plays, you could conduct the activity as a group discussion instead.

4. Discuss the role-play with the rest of the group.

   - What aspect of adolescence is addressed in each role-play?
   - What would be the possible consequences of their actions?
   - Do others agree with how the girls dealt with the situation and the conclusion reached?

Role-Play Scenarios:

1. **At school one day, you notice that you have started your menstrual bleeding. What do you do?** (*Possible solutions:* You ask your friend for a feminine napkin; you ask a (female) teacher if you can go home to change clothes and return to school.)

2. **Your parents have just told you that you may no longer socialize with boys your age or older, or leave the house to go out with friends on weekends. What do you do?** (*Possible solutions:* You ask your parents why they have made this decision; you work with your parents to come up with a compromise, such as only going out with other girls or staying out until an agreed-upon time; you ask a teacher or mentor to help you talk to your parents.)

3. **You've started to feel attracted to your neighbor, a boy you've known your whole life. You don't understand where the feelings come from or what to do about them. What should you do about these feelings?** (*Possible solutions:* You ask your mother, aunt, mentor, or a trusted friend what you should do; you tell the boy what you are feeling.)

4. **You've noticed that your breasts are becoming larger and you think you need to start wearing a bra. What should you do?** (*Possible solutions:* You ask your mother or guardian to purchase a bra for you; you save your money and purchase a bra; you borrow a bra from a friend until you can buy one.)

5. **A boy at school has started paying a lot of attention to you. You don't know what you're supposed to do. What should you do?** (*Possible solutions:* You ask your friends if this boy has a good reputation; you ask the boy what his intentions are; you ignore the boy's attention; you ask your parents or mentor for advice; you decide that you like the boy and start dating him.)

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.

2. Thank the participants for their active involvement.

3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.

4. Establish the next meeting date and time.

SESSION 2:
PREGNANCY AND PREGNANCY PREVENTION

Time allotted: 1½ hours

Objectives

- To become familiar with the male and female reproductive systems
- To be able to explain how a pregnancy occurs
- To understand common pregnancy myths and facts

Key Terms

- (See handouts.)

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- **Handout 9: Male Internal Reproductive Anatomy**, and **Handouts 8** and **10** (from previous session)
- **Handout 12: Pregnancy Prevention True or False**
- Small pieces of paper or note cards for Activities 1 and 2
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Invite a midwife, nurse, or other health educator to help facilitate the session. Make sure you meet with the person beforehand to discuss the session objectives and the person's role.
2. Gather materials.
3. Photocopy diagrams of male and female reproductive systems, if possible.
4. Write pregnancy "true" and "false" statements on note cards or small pieces of paper. (See Activity 2, **Handout 12: Pregnancy Prevention True or False**.)
5. Write each summarized pregnancy step onto a separate strip of paper. You should have one complete set of six steps for each small group (of six students). (See Activity 1.)
6. Review activities, diagrams, and discussion questions.
7. Prepare answers to girls' questions from the previous session.
8. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 15 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Today's discussion will examine how a girl or woman becomes pregnant and how pregnancy can be prevented. Remind them that not everyone may understand menstruation and pregnancy, and there is no shame in asking questions. Tell them that the more they know about their own bodies, the better they will be able to take care of them and stay healthy.
4. Introduce the health educator who will assist in the session.

Congolese students listen to their mentor.

AED/INSTITUT TECHNIQUE ET PROFESSIONNEL DE KIKWIT

Activity 1: The Male and Female Reproductive Systems

Time allotted: 40 minutes

Recommended for Ages: 13 and older

Note to facilitator:
Before this activity, you will need to make sets of six strips of paper, each with of the steps of fertilization/pregnancy—arousal, erection, sexual intercourse, ejaculation, fertilization, pregnancy—written on it. When you divide the girls into small groups of six, each member of the groups should receive a strip of paper.

Facilitation Steps:

1. Distribute photocopies of **Handout 9: Male Internal Reproductive Anatomy** and have the girls take out their copies of **Handouts 8 and 10** on the internal and external reproductive systems.

2. As a group, read and review the key terms associated with each diagram. Ask the girls if there is anything they do not understand.

3. Ask the girls if anyone knows how a girl or woman becomes pregnant. Make sure to correct any misinformation. Refer to the diagrams as you explain pregnancy and emphasize the following points:

   Sexual intercourse: Sexual intercourse occurs when a man inserts his erect penis into a woman's vagina.

   Arousal: The act of becoming sexually excited

   Erection: The hardening, swelling, and rising of the penis as it fills with blood when a man becomes sexually excited

   Ejaculation: The rapid discharging of sperm from a man's penis

   Fertilization: When a sperm unites with an ovum (egg), usually leading to pregnancy

   Ovum: The female sex cell (egg)

   Sperm: The male sex cell that combines with the female ovum (egg) in the process of fertilization

a) A girl or woman becomes pregnant as a result of sexual intercourse with a boy or man. Before this can happen, the boy or man must be **aroused**, or sexually excited.

b) His penis then becomes **erect**, or hard.

c) **Sexual intercourse** occurs when the man inserts his erect penis into the woman's vagina.

d) When the man's penis is in the woman's vagina, the man releases—or **ejaculates**—millions of sperm. The sperm from his penis swim up the woman's vagina and into her uterus.

e) If the girl's or woman's body has begun to ovulate or produce eggs, the sperm may encounter the egg in the woman's Fallopian tube. Many sperm may attach themselves to this one egg, called an ovum. The first sperm to reach the egg is the one that will cause the pregnancy. When the sperm unites with the egg, this is called **fertilization**.

f) Once the egg and the sperm have united, it descends from the Fallopian tube into the woman's uterus and attaches itself to the lining. During **pregnancy**, the fertilized egg will develop into a fetus, which will eventually become a baby.

g) If the woman's egg is not fertilized, it will exit her body during menstruation.

4. Ask girls if they have questions. Ask if they've heard of any superstitions or myths regarding pregnancy, and correct any misunderstandings.

5. Once you have explained the process, divide girls into groups of six. Give each member of each group a piece of paper with one of the above steps written on it. When you say "Go," girls should race to put the cards in order. The first group to put the cards in the correct order wins.

Activity 2: True or False?

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Ask the girls to write a statement regarding pregnancy or pregnancy prevention on a slip of paper. For example, "Only girls who've slept with a lot of boys or men will become pregnant," or, "A girl can't get pregnant the first time she has sex." Tell the girls not to share their statements with anyone else.

2. Collect the girls' statements and mix them with the statements you have already prepared. (Refer to **Handout 12: Pregnancy Prevention True or False**.)

3. **Playing True or False.** Divide the group into two teams. They will be playing a game to see which team has learned the most about pregnancy prevention. Each team will have the opportunity to answer a question regarding pregnancy. The team answering the question must explain its answer. If a team gets the answer and explanation right, it will win a point. If the answer is wrong, the other team will get a chance to explain the correct answer and earn a point.

4. Begin by selecting a team to go first. Read a statement aloud. When the team answers, ask a member to explain the team's answer. If the team gets the answer wrong, give the other team a chance to correctly answer and win a point. **Emphasize the correct answer for each statement.** Rotate teams until all questions are answered. Afterward, tally the points and declare a winning team.

5. You should mention the harmful effects of early pregnancy, which will also be discussed in detail in Module 7. Some consequences of early pregnancy include:

   - Psychological trauma as a result of unwanted premature sexual activity
   - Health problems due to early and prolonged pregnancy and childbearing (Among 15- to 19-year-old girls, pregnancy complications are the leading cause of death. Girls younger than 15 are five times more likely than women in their 20s to die during childbirth; girls 15–20 are twice as likely.)
   - Lack of ability to adequately care for children (Young, less educated mothers tend to have less healthy children and families than older, more educated mothers.)
   - Lack of opportunity to develop a sense of self

A scholarship student completes a grammar exercise at the blackboard.

MARC VALENTIN/WINROCK INTERNATIONAL

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 3:
FRIENDSHIPS AND PEER PRESSURE

Time allotted: 2 hours

Objectives

- Discuss aspects of a good friend
- Understand the concept of peer pressure
- Discuss strategies for coping with peer pressure

Key Terms

- **Peer:** A person close to your age who has similar life experiences
- **Peer pressure:** Pressure from friends or other peers to do certain things or to act in a certain manner

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Review activities, diagrams, and discussion questions.
3. Prepare answers to girls' questions from the previous session.
4. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** One of the most important aspects of puberty and adolescence is the relationships young people form with each other. Friends can be a source of fun and support. However, young people often find that there is a lot of pressure from friends and people their age to do certain things. Today, you will talk about what makes a good friend, as well as how young people can cope with negative pressure from friends.

Activity 1: Friends and Friendship

Time allotted: 25 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Invite the girls to form pairs or groups of three people. Ask them to think about the friendships in their lives. Each girl should describe to her partner (or small group members) a good friend she has had. **What made this person a good friend?** Allow 15 minutes for girls to share their experiences with their partners.
2. Once participants are back in a large group, ask each girl to share her partner's story. Talk about common themes and characteristics. **What makes a good friend? What are your expectations of a good friend?** The discussion should cover qualities such as honesty, understanding, trust, kindness, and respect.
3. Next, ask the girls to discuss in small groups the traits of someone who is **not a good friend**. Answers may include dishonesty, meanness, disrespect, unkindness, pressuring friends to participate in certain activities. After 10 minutes, invite each pair or group to share their answers with the rest of the group. Discuss common themes.

Activity 2: Conflicts among Friends

Time allotted: 25 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Friends sometimes disagree or have arguments. Other times, a friend may hurt the other friend's feelings. This does not necessarily mean the friendship has to end. However, it does mean that the friends have to communicate and work toward finding a solution. Discuss the following questions:
   - Have you ever had a conflict or disagreement with a friend? If so, how did you resolve the problem?

- What can you do if your friend does something that makes you sad, angry, or upset? (*Possible answers:* Tell your friend why you are upset; ask for an apology; find a compromise if you disagree; ask a mentor, teacher, family member, or friend for advice.)
- Has a friend ever asked you to do something that you did not want to do? What did you do?
- What should you do if you no longer want to be friends with someone who is not a good friend? (*Possible answers:* Explain to the person why you are uncomfortable being her friend; spend more time with other friends.)

Girls play an outdoor game at a mentoring camp in South Africa.

TRACEY YUDITSKY/WINROCK INTERNATIONAL

Activity 3: Peer Pressure

Time allotted: 60 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Ask girls to define the term "peer." Explain the definition. Peers are people of your same age who have similar experiences. Everyone has a peer group, from the time they are born to the time they are old. Not all peers are friends, but most people's friends are people from their peer group.
2. Peers are very important people. They are the people we grow up with and with whom we often form strong friendships and other relationships. Peers support us as we grow from children to adults.
3. Peers can also put pressure on one another to do certain things. This especially happens during adolescence. Sometimes this pressure can be good, such as peer pressure to get good grades in school.

4. Other times, peer pressure can be negative. Ask girls to describe any forms of negative peer pressure they have seen at school or in your community. (*Possible answers:* wear certain clothes or listen to certain music; use certain words or language; have a boyfriend; have sex; drink alcohol, smoke, or use drugs; do anything else that you do not want to do.)

5. **What are some consequences of negative peer pressure?** (*Possible answers:* Peer pressure can lead a person to do something that angers or disappoints his or her parents, or gets him or her in trouble at school. Pressure to drink or use illegal drugs can have negative health consequences. Pressure to have sex can lead a person to become infected with an STI, to get HIV, or to become pregnant.)

6. Now that you have discussed various types of peer pressure and their consequences, it's time to talk about how young people can cope with these situations. If you have a large group, divide girls into groups and have each group develop a short drama about a particular peer-pressure topic. (If you do not have enough people for a dramatization, each group may simply discuss the situation.) Here are some case studies you may choose to dramatize, or adapt to your community:

Scenario 1

Ndiyakupi and Selma have been best friends for many years. Ndiyakupi has a boyfriend who is several years older than she is. He bought her a cell phone and new clothes. Ndiyakupi keeps telling Selma that she needs to find an older boyfriend, too, so she can have nice clothes and new things. Selma does not agree, but Ndiyakupi teases her and tells her she must be a "baby" if she does not want an older boyfriend.

Scenario 2

Charity and Josiah have been girlfriend and boyfriend for one year. Josiah often pressures her to have sex, but Charity tells him that she is waiting until marriage. Charity's friends tell her that no one waits to have sex until marriage. They tell her that if she does not have sex with Josiah, he will have sex with another girl.

Scenario 3

Cecilia is 12 years old. One of her classmates, Flora, is an orphan. Everyone at school says that Flora's parents died from AIDS, so she must have HIV. No one will sit next to Flora because they are afraid they will become infected. Cecilia feels badly for Flora. She knows that HIV cannot be transmitted by sitting next to someone. She tries to be as nice to Flora as possible. She gave her a pen and walks home from school with her. Now, everyone has started to talk about Cecilia behind her back. Cecilia's friends tell her they will not be friends with her if she continues to be nice to Flora.

Scenario 4

Esperance is second in her mathematics class. She hopes to become a scientist. Esperance's friends always tell her not to worry about her homework, but to spend more time with them listening to music, visiting boys in their class, and having fun. Esperance is afraid to lose her friends, but she also enjoys mathematics and wants to become a scientist.

Scenario 5

Omar and David are 17 years old and good friends. Lately, David has been drinking beer every Saturday night. Omar, however, does not like to go to bars. David and his other friends make fun of Omar and say he is not a "real" man unless he drinks.

Scenario 6

Fati attends boarding school with many girls who come from wealthy families. Fati's family cannot afford to buy her nice clothes to wear on the weekends and outside of school. The girls who come from rich families make fun of Fati for wearing clothes that are old and not fashionable. Fati's friends tell her not to pay attention to the teasing, but she is starting to dread going to school and her grades are suffering.

7. Discuss the following questions after each dramatization:
   - Explain what happened in the scenario.
   - What would happen if the person "gave in" to peer pressure? What are the consequences for a girl? For a boy? Would they be different?
   - What advice would you give the person experiencing negative peer pressure?

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 4:
RELATIONSHIPS, SEX, AND SEXUAL ABSTINENCE

Time allotted: 2½ hours

Note to facilitator:

The following session deals extensively with young people's sexual behavior. Although this is a subject that can make both young and old people feel uncomfortable, it is important that you discuss these issues. Even though adults often do not think that young people are engaging in sexual activity, many of them are. In several regions around the world, the age of sexual maturity is decreasing and "sexual debut" is happening earlier in young people's lives.[1] One study estimated that around half the girls in sub-Saharan Africa had engaged in pre-marital sexual activity.[2] Talking about the risks of sexual activity will help young people to decide to delay sex and to protect themselves against unwanted pregnancy and STIs including HIV/AIDS.

Objectives

- Discuss various aspects of boy-girl relationships
- Understand why young people may or may not engage in sexual relationships
- Identify the consequences of sexual activity
- Identify strategies for coping with peer pressure regarding sex
- Identify strategies for delaying sexual activity

Key Terms

- **Infatuation:** Intense, often temporary, feelings of love or physical attraction for someone
- **Love:** Strong affection for another arising out of kinship or personal ties; attraction based on sexual desire, or affection and tenderness felt by lovers; affection based on admiration, benevolence, or common interests
- **Mature:** Characteristic of or suitable to a grown-up individual or adult; based on slow careful consideration
- **Platonic relationship or platonic friendship:** A relationship or friendship marked by the absence of romance or sex
- **Respect:** High or special regard, esteem
- **Sexual abstinence:** Not having any type of sex, including vaginal sex, anal sex, or oral sex

Suggested Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- (Optional) Copies of "Grace and Aloyo" scenario (See Activity 1.)

1. UNFPA, "State of the World Population 2003," http://www.unfpa.org/swp/2003/english/ch2/page2.htm (accessed on 11 March, 2008).
2. Ibid.

- Pieces of paper for girls to write scenarios on and one photocopy (optional) of **Annex 5** for Activity 6 ("Ask Aunty Amina")
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. We recommend that a female mentor or health professional facilitate this discussion.
2. Gather materials.
3. Review activities and discussion questions.
4. Prepare slips of paper for questions. (See final session activity.)
5. Prepare answers to girls' questions from the previous session.

Skits and drama are excellent vehicles for communicating important messages to community members.

MARTHA SALDINGER/WINROCK INTERNATIONAL

INTRODUCTION

Time allotted: 5 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Remind girls that because sensitive issues will be discussed, confidentiality must be respected during this session.
3. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask girls if they have any more questions and provide accurate responses.
4. **Overview explanation for participants:** Today's discussion will focus on relationships between girls and boys. As part of the discussion, you will discuss sex, something that may make them feel uncomfortable. The reason you are discussing sex is because it is important for you to understand the choices, consequences, and the facts related to relationships and sexual activity. This information will enable to make healthy, informed decisions as you grow and develop.
5. While not all girls and boys become involved in sexual relationships, it is important to talk about sex and to understand how it can affect a girl's life.

Remember: Just because someone talks about sex does not mean that a person has sex. Being knowledgeable about sexual matters and having accurate information does not make a girl "loose" or promiscuous.

Note to facilitator:
Be sure to ask girls which language they would prefer to use to talk about these issues. This may affect how comfortable they are talking about these sensitive issues.

Activity 1: Physical Attraction and Relationships

Time allotted: 25 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Discuss the concepts of temporary physical attraction or infatuation compared to a relationship with the girls. Explain that physical attraction or infatuation are terms some people use to describe their intense feelings for someone of the opposite sex. (See *Key Terms*.) Often, these feelings come and go. As they go through adolescence, girls may find that they are attracted to boys and want to develop relationships with them. A relationship usually lasts longer than infatuation or simple physical attraction and involves deeper feelings.

Note to facilitator:
Make sure to emphasize that it is **normal** if a girl is not interested in boys! Not all girls become infatuated or have relationships with boys. However, the discussion may provide useful information for girls in the future.

2. Divide girls into pairs. Read aloud the scenario "Grace and Aloyo," or make copies for each pair of girls. Give them time to practice the role-play, or short drama. After 10–15 minutes, invite a pair of girls to act out the role-play.

Note to facilitator:
If you do not have time to practice the role-play, simply read the scenario out loud and then discuss.

Grace and Aloyo

Grace and Aloyo are best friends. Grace tells Aloyo that she really likes Michael, who she says is the best-looking boy in school—and smart too! Michael has started to pay attention to Grace and buys her a soft drink sometimes after school. He seems very nice and has not even tried to touch her. Aloyo has heard Michael bragging in class about how well he can play football. She even saw him walking with another girl from school last weekend. Grace tells Aloyo that is no big deal. Michael is very caring toward her and she plans to meet him this weekend to go for a walk by the river. Aloyo tells her she might want to tell him she can't go. Grace tells Aloyo not to be silly—Michael is a nice boy and she has nothing to worry about. Because Aloyo isn't really interested in boys anyway, she thinks Grace might be right.

3. **Discussion questions:** Begin a discussion with the girls by asking the questions below. Possible answers are listed for each question.

- **Why do you think Grace likes Michael?** (*Possible answers:* Grace may like Michael for several reasons, including the way he looks, his intelligence, because he is nice to her, or because he buys her refreshments. It's okay to like a boy for all these reasons, but a girl should be careful that she does not like a boy only for superficial reasons, such as only his looks or only because he buys her things. It is also very important that the boy like her for more than superficial reasons and demonstrate respect for her.)
- **What do you think are Michael's feelings for Grace?** (*Possible answers:* Michael seems to like Grace because he spends time with her and buys her refreshments. However, since he has been seen with another girl, he may not be faithful to her. On other hand, Aloyo might assume something that is not true. Grace should ask Michael or other people more about the situation.)
- **Why do you think Aloyo is not interested in boys?** (*Possible answers:* She may be more interested in friendships, school, or other activities. She may not have met a boy she likes.)
- **Do you think she should give Grace advice about boys?** (*Possible answers:* Aloyo is Grace's friend and may be able to offer her advice because she knows Grace so well. She may also want to help her friend make good decisions.)
- **What do you think of Grace's decision?** (*Possible answers:* Grace may want to go for a walk where there are other people. Grace should find out if Michael is seeing another girl. Grace should think about why she likes Michael. Is it because he buys her refreshments and because he is cute, or because he treats her well and respects her?)

Activity 2: Boy-Girl Relationships

Time allotted: 20 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. After the role-play, invite girls to share their ideas about boy-girl relationships. Be sure to respect everyone's opinion. Here are some questions to discuss, as well as points the facilitator should address if they are not brought up by participants:

a) **What types of relationships are acceptable between boys and girls in your community? Can boys and girls be "platonic" friends? Do boys and girls date in your community? Is it acceptable behavior?** It is normal for boys and girls to become interested in each other during adolescence. Sometimes, a boy or a girl may have intense feelings for another person. This is known as infatuation. These feelings may be confusing, and a person may not know how to express them. Young people sometimes confuse infatuation with love because the feelings are so intense. Being infatuated with someone is perfectly normal. However, girls should not let their feelings lead them to do things that they may not be ready for, such as having sex.

b) **What is good about friendships and relationships?** Being in a relationship can make a girl feel good about herself. Friends (whether they are boys or girls) can help each other with problems, provide support, and share experiences. And of course, friends have fun with each other!

c) **What are the qualities of a good boyfriend and a happy relationship?** (*Possible answers:* Honest, respectful, faithful, hard working, not violent, etc.) Remind girls of the qualities of a good friend that they discussed in the previous activity. Emphasize to girls that a boyfriend—and eventually a husband—should respect a girl's feelings and ideas.

d) **Do girls sometimes like boys because they buy them things or give them money? Is this a good idea? Why or why not? Is it acceptable for girls to have relationships with older boys or men? What are some possible consequences of these types of relationships?** A relationship based on money or gifts can make a girl very vulnerable. Such a relationship is not good because it is not based on respect, kindness, and honesty. A girl also may think that she has to do what the boy or man asks (including have sex) so that he will continue to buy her things or give her money. Girls who are in a relationship with an older man will have limited or no decision-making power because of their age and lack of authority. Girls involved with older men are also more likely to have an unwanted pregnancy and/or to contract a sexually transmitted infection, such as HIV.

e) **What are some qualities of a bad relationship?** This is an important question to discuss because girls—and women—sometimes get trapped in relationships that are emotionally and physically abusive. Some characteristics of a bad relationship include: One person is disrespectful of the other; the boy/man is possessive of the girl/woman and will not let her socialize with friends or leave the house alone; one person is not faithful; one person is emotionally or physically abusive; one person insults the other. **Emphasize that physical and emotional abuse is never acceptable behavior.**

Ugandan scholarship recipients with their mentor

ALEXI ZEKAS/AED

Note to facilitator:
Discuss what constitutes abuse and what support and assistance may be available for protection.

f) **What are some challenges associated with relationships? How can a relationship affect a girl's education?** Sometimes friendships and relationships face difficulties due to a lack of communication, different expectations about the relationship, or disagreements about a particular issue. Working through these difficulties is part of a relationship, but a girlfriend or a boyfriend should not pressure you to do anything that makes you feel unsafe or is against your beliefs. Remind girls that it can sometimes be very difficult to balance a boyfriend and schoolwork. Girls should not let a relationship get in the way of their studies. A girl should remember that engaging in a sexual relationship may lead to a pregnancy, which could force her to drop out of school, as well as an STI such as HIV.

Activity 3: Defining Sex and Sexual Activity

Time allotted: 20 minutes

Recommended for Ages: 13 and older

Note to facilitator:
For additional support and if you feel it is appropriate, we recommend that you invite a health professional to discuss this topic. As noted above, you may want to omit the following activity depending on the age of the girls. Keep in mind that adults sometimes do not realize that young girls are exposed to the following ideas. It is important for girls to learn about

sex before they become sexually active. Such knowledge could even delay sexual activity. As a mentor you may know at what age girls become sexually active in your community. Please use this session with girls slightly below that age. This means that you may share explicit information in some cases with girls as young as 10 or 11. The sooner girls become aware of the risks of different sexual activities, the more likely they will be to avoid them.

Facilitation Steps:

1. Tell girls that you are going to start out by defining the word "sex." Although we may think we know what sex is, the word can mean many different things to different people. In order to discuss sex—and also HIV—it is important that everyone have the same information. Girls should respect others' opinions and should not laugh at anyone's comments.

2. Ask girls to name any types of sexual activities they can think of. Tell them they shouldn't be embarrassed to say the names of body parts that you talked about in the earlier sessions about adolescence and puberty. Write what they say on the chalkboard.

Note to facilitator:

If girls do not respond, you may have to simply write the following terms on the board and ask for definitions. Be sure to correct any misinformation.

After writing each of the terms below, write the definitions provided.

Vaginal sex: Sex during which a man's penis is inserted into a woman's vagina; also known as "sexual intercourse"

Oral sex: Sex during which a man's mouth/lips come into contact with a woman's genitals, or a woman's mouth/lips come into contact with a man's penis/genitals

Anal sex: Sex during which a man's penis is inserted into his partner's anus/rectum

Masturbation: An act during which a person touches his or her own genitals to stimulate pleasure

Mutual masturbation: When two people touch each other's sexual organs to stimulate pleasure

3. Explain that vaginal, oral, and anal sex are all types of sexual intercourse. Masturbation, mutual masturbation, and kissing are activities often associated with sex, but they are not sexual intercourse.

4. Next, ask girls which of these activities is acceptable in their culture. Go down the list one by one and ask them to raise their hands if they think the activity is culturally acceptable. Ask them to discuss their opinions.

Note to facilitator:

You will probably find that vaginal sex is considered the most traditional or "normal" type of sex.

5. Make the following summary:

   - Place a " * " in front of vaginal sex. This is the only type of sex that can lead to pregnancy. Vaginal sex is also the most common way that HIV is transmitted.

   - Circle vaginal, anal, and oral sex. These types of sex can all lead to STI infection, including HIV/AIDS. You will discuss this in more detail at a later time.

- Masturbation, mutual masturbation, and kissing, however, cannot transmit HIV or cause pregnancy.

Tell girls that the point of this activity is to make sure they know about different sexual activities. Not all people will have all types of sex; each person has to decide for himself or herself which type of sex is appropriate. For example, some people may decide to never have anal sex, while other people will decide to. **Most importantly, we need to know the risks associated with different types of sex. Always remember: No one should be forced to participate in any sexual activity!**

Learners at Delportshoop Intermediate School in South Africa enjoy dancing and singing together.

MARTHA SALDINGER/WINROCK INTERNATIONAL

Activity 4: "Why Should I Care?"

Time allotted: 20 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. On the chalkboard, write these two questions:
   - "Why do young people say 'yes' to sex or sexual activity?"
   - "Why do young people say 'no'?"
2. Ask girls to list the reasons why young people in your community decide to have sex. (If the group is large, you may want to divide them into small groups so they feel more comfortable discussing these issues.) Make a list on the chalkboard. If the following reasons aren't mentioned but are applicable to your community, add them to the list:

Why young people say "yes" to sex:

- They want to prove their love for each other.
- One partner pressures the other.
- They fear being ridiculed by peers.
- The person feels he or she is mature enough to have sex.
- The person is afraid of losing his girlfriend/her boyfriend.
- Sex seems like the next step in the relationship.
- They are curious.

Leave this list on the board as you will return to it in the next activity.

3. Remind the girls that sex is a big event in anyone's life. It can change relationships, a person's feelings about himself or herself, and a person's physical health. Sexual intercourse can be a wonderful thing under the right circumstances, but if you are not physically or emotionally mature enough, it could be damaging to your health and sense of well-being.
4. Young people often say sex is "no big thing" or "everyone does it." Ask the girls if they think this is true. Ask them to name some of the consequences and risks associated with sexual intercourse. These can be both "good" and "bad" things.
5. Pose the question, "If a girl has sex…." and ask the girls to complete the sentence. Write their responses on the chalkboard.

Note to facilitator:
You may also ask them to write their responses anonymously.

If a girl has sex…

…she may contract HIV or a sexually transmitted infection (STI).

…she may be happy because she feels closer to her boyfriend.

…she may feel ashamed.

…her parents may find out and be mad at her or disown her.

…she may become pregnant and have to drop out of school.

…she may become pregnant and be forced to get married.

…her friends or the community might think she will sleep with anyone.

As girls list the consequences of engaging in sexual behavior, be sure to pose the following questions:

- What do people think of girls or boys who have sex before marriage? Do their opinions differ for boys versus girls? If so, why do you think this is?
- What happens to a girl in your community if she becomes pregnant before marriage?
- What happens to the boy or man who made her pregnant? What do you think of this?

Point out that girls are often viewed much more negatively than boys for the same sexual behavior. Ask girls if this is this true in their culture. What do they think of this?

6. **Emphasize that one of the greatest risks of early sexual activity is contracting an STI, or sexually transmitted infection, such as HIV/AIDS.** Today in Africa, young people are becoming infected at alarming rates. Girls and young women are particularly susceptible to sexually transmitted infections—including HIV—because of various biological factors, but also because they are less likely to have control over whether or not condoms are used during sexual intercourse. Some girls also engage in activities they think are not sex—like oral sex or anal sex—but which **do** put them at risk for STI infection, including HIV. These issues will be discussed in more detail in future sessions.

Activity 5: Saying "No" to Sex

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Now that you have discussed the reasons that young people choose to have sex and the consequences of engaging in sexual activity, ask the girls to explain why a person would choose not to have sex.

2. Next to your list of answers to the question "Why young people say 'yes,'" create a list of the reasons they might also say "no" to having sex. (Be sure to add the following if they are not mentioned.)

   Why young people say "no" to sex:

   - They don't feel emotionally or physically ready.
   - They fear getting pregnant.
   - Premarital sex is against their religion or other social values.
   - Parents disapprove.
   - They haven't met the "right" person.
   - They want to wait until marriage.
   - They are afraid that sex will be physically painful.
   - They fear contracting an STI, including HIV.

3. Not having sex is sometimes called "sexual abstinence." Ask girls to define **sexual abstinence**. You will probably find that the term can mean different things to different people. To some people, it means abstaining from any type of sexual activity, such as kissing or touching of genitals. For other people, however, sexual abstinence means not having vaginal intercourse, but other types of sexual behavior are acceptable.

An AGSP scholar and her mother and younger brother stand in the doorway of their home in Morro Peixe, São Tomé.

JAIMIE BLECK/WINROCK INTERNATIONAL

4. **Emphasize that sexual abstinence means not having any type of sex, including vaginal, oral, or anal sex.** All three of these activities are types of sex. While only vaginal intercourse can lead to pregnancy, all three types of sex put a person at risk for the transmission of HIV or other STIs. It is important that girls realize that if they engage in these types of sex, they are putting themselves at risk for HIV infection. You will discuss HIV transmission in more detail in Module 8.

5. **Game:** Divide girls in teams. Ask them, "How can boys and girls, or men and women, show their affection for each other—without having sex?" Give each group a piece of paper and a pen or marker. Give them a time limit, such as five minutes. Once time is up, collect the papers. Share answers. Tally the number of answers for each group. The group with the most ideas wins! (*Possible answers:* Go for a walk; watch television or a movie; play sports; meet friends; visit each other's families; go to church or mosque; join a school club together; hold hands.)

Note to facilitator:
This game also works well as an "icebreaker" at the beginning of a session.

6. Tell the girls that you understand that delaying sex is sometimes easier said than done. It can be hard to stick to your beliefs if everyone around you is doing something else. Also, decisions about sex should not be rushed, so it's good to think about them in advance. **Having a plan** is often the best way to make sure you stick to your decision to delay sex. **Ask girls to come up with a list of "tips" on how to delay sex.** (Give them 15 minutes to make the list.)

   Possible Examples:

   - Set your limits regarding sexual activity and communicate them to your boyfriend.
   - Find other activities to do. (See possible answers above.)
   - Talk about ways you and your boyfriend can show affection for each other without having sex.
   - Surround yourself with friends who support your decision.

Activity 6: Ask Aunty Amina

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Note to facilitator:
Before the activity, take the copy that you have made of **Annex 5** and cut up the questions into separate slips of paper so that one question appears on each slip.

Facilitation Steps:

1. In some communities, a mature woman acts as an adviser to young women. Sometimes these wise women even have their own newspaper column or radio program where they respond to girls' concerns. Is there anyone in your community who fills this role?

2. Next the girls are all going to play "Ask Aunty Amina." Aunty Amina is a wise woman who responds to girls' questions on her radio show. Ask the girls to write a question to Aunty Amina. Their questions can be about boys, puberty, or anything else on their minds. The questions can be about them or can be a made-up situation based on a real experience. Give the girls 10 minutes to write their questions.

3. Collect the girls' questions. Tell the girls you are going to add some other submissions to Aunty Amina. (See the scenarios below.) Mix the girls' submissions with the scenarios below. (Be sure to modify them to fit your community.)

4. Read the scenarios aloud. Ask girls to pretend to be Aunty Amina and respond to the questions. Discuss any differences in responses.

Note to facilitator:
You may do this as a large group or in small groups. Encourage girls to really "act" like Aunty Amina!

A group of scholarship recipients in Namibia

WINROCK INTERNATIONAL/FAWENA

- **A boy I know has asked me to have sex with him. He's very nice and buys me things I need, like new clothes and notebooks. What should I do?** (*Possible answers:* First, you need to decide if you like this person only because he is buying you gifts. You also should think about what the boy might think you "owe" him for the presents, such as sex. If you feel the person only buys you gifts because he wants something from you, you should think about ending the relationship.)
- **My boyfriend and I have been seeing each other for a year. I think I want to have sex with him, but I'm not sure. Please give me some advice!** (*Possible answers:* First, you need to think about why you want to have sex with him. Is it because he or your friends are pressuring you? What might happen if you did have sex with him? For example, you could become pregnant or catch a sexually transmitted infection (STI)—including HIV. Discuss with your boyfriend if this is the right decision for both of you. You also should think of other ways that you and he can show affection for one another, such as holding hands, kissing, or being close to each other. Remember that having sex can have consequences that last a lifetime! There are other ways to show your love for each other without having sex.)
- **My parents have told me not to have sex before marriage, but I want to. I know about the risks and I've bought a condom. What do you think I should do?** (*Possible answers:* I am glad to hear you have educated yourself about having sex and that you've bought a condom. However, why do you think you are ready to have sex? Why do you think you cannot wait

until marriage? What role does your boyfriend play in making this decision? Remember how important it is to respect your parents. What would happen if they found out? Think about the consequences of having sex—on your emotions, your family, and health—and then make your decision.)

- **My boyfriend tells me he loves me all the time. I think this means he wants to have sex with me. I love him, too. Help me, Aunty Amina! I don't know what to do!** (*Possible answers:* Just because you love your boyfriend does not mean you have to have sex with him! Your boyfriend might not even want to have sex! Remember that having sex can lead to pregnancy and STIs, including HIV. Talk about other safe ways that you can show each other your love without having sex.)

Secondary-school scholarship recipients from Ethiopia

ALEXI ZEKAS/AED

- **I told my best friend that I do not want to have sex with my boyfriend. She teases me and says, "Everyone does it. It's no big deal." I don't want her to think I'm a baby, but I don't want to lose her as a friend. What do you think I should do?** (*Possible answers:* Real friends do not make fun of each other's decisions about things as important as sex. Explain to your friend why you've decided not to have sex, such as respect for your parents or religion and fear of pregnancy or STIs. Remind her that not all people are ready (or willing) to have sex at the same time. If she continues to make fun of you, she's not a real friend and you're better off without her.)

- **One night, my boyfriend started kissing me and tried to take off my clothes. Now I'm afraid to be with him, but if I tell him I don't want to see him, I know he will tell everyone at school that I'm a bad person. Please let me know what I should do.** (*Possible answers:* In a safe setting, you should explain to your boyfriend why he makes you feel uncomfortable

and that you do not want him to take off your clothes. If he insists that you have sex with him or does anything to make you feel unsafe, you should stay away from him. If he threatens you, talk to your parents, mentor, a teacher, or other trusted adult. You should always be most concerned about your own safety, not what other people think about you. Your real friends will understand.)

Activity 7: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 5:
SEXUAL HARASSMENT, ABUSE, AND EXPLOITATION

Time allotted: 2 hours

Objectives

- Define sexual harassment, abuse, and exploitation
- Identify consequences of sexual harassment, abuse, and exploitation
- Identify ways to address sexual harassment, abuse, and exploitation

Key Terms

- **Sexual abuse:** The forcing of undesired sexual acts by one person on another
- **Sexual exploitation:** Any abuse of a position of vulnerability, difference in power, or trust for sexual purposes; this includes profiting monetarily, socially, or politically from the sexual exploitation of another.
- **Sexual harassment:** Uninvited and unwelcome verbal or physical behavior of a sexual nature, especially by a person in authority toward a subordinate (such as an employee or student)

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

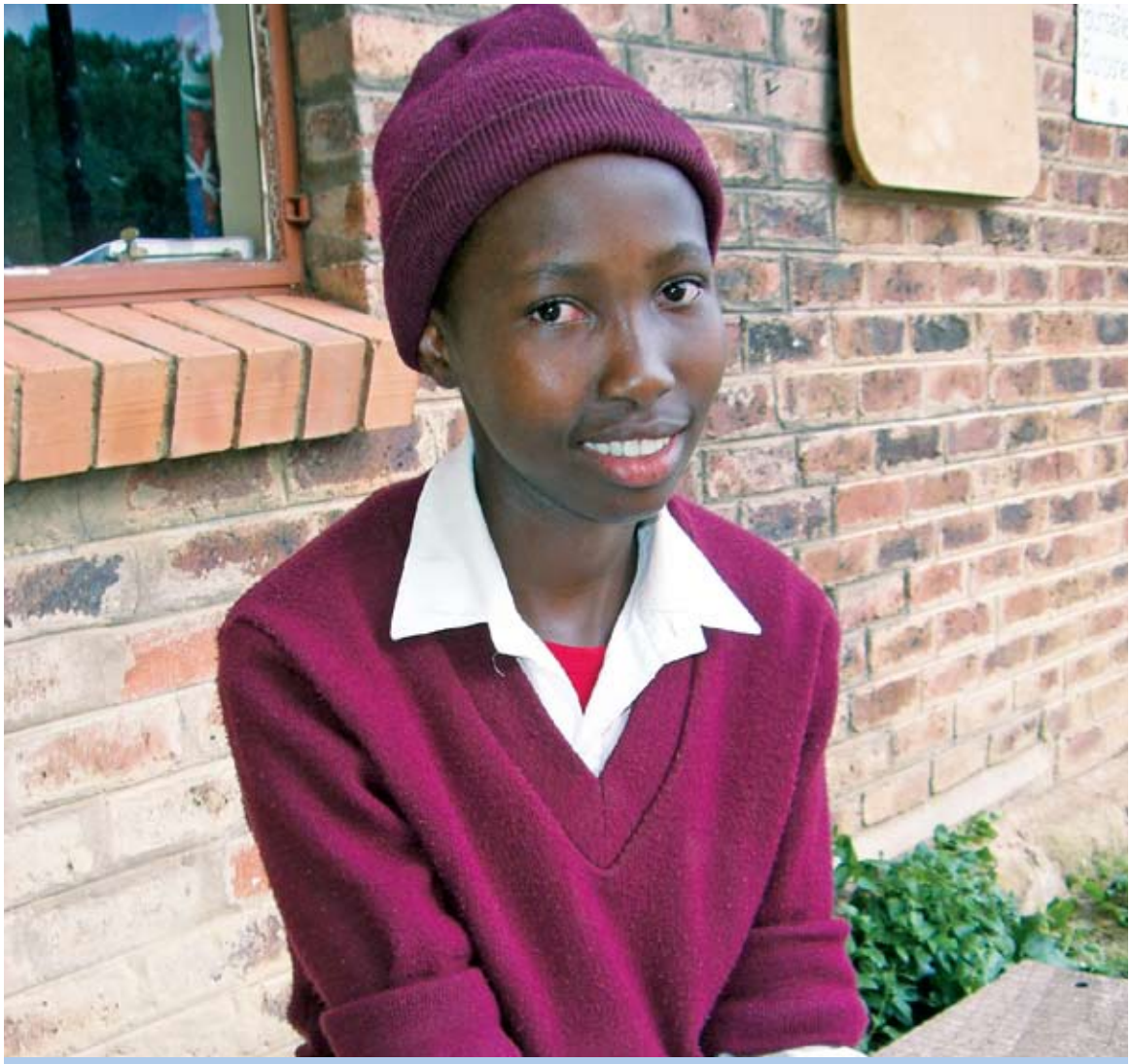
1. Gather materials.
2. Work with four girls to prepare a dramatization of "Musu's Story" to present to the large group. (optional)
3. Review activities and discussion questions.
4. Prepare answers to girls' questions from the previous session.
5. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Tell the girls that today's discussion will focus on topics that are often considered taboo, but which are very important to address. Sexual abuse, harassment, and exploitation are often experienced by girls at school, in their homes, and in their communities. **Tell the girls that you understand that it is often very painful and difficult to talk about it. If they do not wish to participate, they do not have to. However, you hope they will at least listen to the discussion. Remind them that the girls can arrange a time to talk to you privately as well.**



A scholarship recipient in Lesotho.

MICHELLE SALMEN/WINROCK INTERNATIONAL

Activity 1: Musu's Story

Time allotted: 40 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. If you were able to prepare the drama ahead of time, ask participants to act out "Musu's Story" for the entire group. If you were not able to prepare the drama, read it to the group and ask volunteers to "act" the parts as you read them. The four characters are: Musu, Musu's teacher, and Musu's friends Josephine and Agnes.

Musu's Story

Musu is a 15-year-old girl who attends a junior high (middle) school. She is happy to be attending school, even though she has to walk five kilometers every day from her village, because many girls with whom she went to primary school quit because they needed to work at home or get married.

One day, Musu's mathematics teacher, a married man from the city, asks her to stay after class on Friday afternoon. Musu is concerned because she knows that her mother expects her at home to help with cooking and she is afraid that if she stays too long, she may have to walk home in the dark.

Her teacher tells Musu that her grades in mathematics have been dropping. He also tells her that she is turning into a very beautiful young lady and that he'd like her to come to his house for "special lessons" that will improve her grades. He is much bigger than Musu, so when he pulls her closer, she cannot resist. He tells Musu that he would like her to be his girlfriend and that he will change her grades if she agrees to have sex with him.

Musu is very afraid, so she tells the teacher that her father, an important businessman who lives in the city, is coming for a visit and will be very angry if she is not home on time. The teacher finally lets her go, saying that he expects to hear from her the following week.

Musu runs all the way home. She feels very bad about what the teacher asked her. She knows she doesn't want to go with the teacher. She is ashamed to tell her mother what has happened because she is afraid that her mother will blame her. That weekend, she confides in her two best friends, Josephine and Agnes. Josephine tells her that she should do what the teacher wants, but Agnes tells her she should refuse the teacher's advances. Musu is upset and doesn't know what to do.

2. After the dramatization, lead a discussion using the following questions as a guide:
   - What did you observe in the drama/story?
   - Why did the teacher do what he did?
   - How do you think this situation could affect Musu? (*Possible answers:* She could stop going to school and her grades could be affected. She could be emotionally upset.)
   - Why did Musu's friends give the advice that they did?
3. Point out that the teacher has a higher social, educational, and economic position in the community than Musu does based on his age, his resources, his education, and the fact that he is

a man. He is using his superior position and power over Musu to force her to do something she doesn't want to do, perhaps because he can "get away" with his actions.

4. Ask them to share their ideas on the following questions:
   - Why could the teacher's actions be called "sexual harassment?" (*Answer:* The teacher made Musu's learning environment unsafe, and he said he would raise her grades if she has sex with him and perhaps lower them if she does not.)
   - Could the teacher's actions be called sexual abuse? (*Answer:* Yes, he touched her.)
   - Could the teacher's actions also be considered exploitation? Why or why not? (*Answer:* Yes, he is exploiting his position and status as a teacher to force Musu to do something she does not want to do.)
   - Could what happened to Musu happen in your community? Why or why not?
   - How do you think the community would react to Musu and to the teacher if this happened?
5. Ask if the girls have any questions or concerns about the first activity.

Activity 2: Decisions, Actions, and Consequences

Time allotted: 40 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Divide participants into small groups of 3–5 people. Have each group designate one record keeper to report back to the larger group.
2. Have the groups discuss and develop a list of possible outcomes related to the following question:

   What might happen if Musu decides to have sex with the teacher? What might happen if Musu decides not to?
3. One set of girls (Group 1) should discuss the **social and community outcomes**. These are things that Musu might experience in her social life and in her community if she decides to be with her teacher. The other set of girls (Group 2) should discuss the **individual outcomes for Musu**, for her physical and emotional well-being. Allow the groups 15–20 minutes to come up with a list of answers.
4. After participants have completed the exercise, ask a Group 1 representative to present possible outcomes. Ask other Group 1 members to add any other outcomes. (Be sure to add the following outcomes if they are not mentioned by the group: Rejection from parents or friends, isolation, or a bad reputation. She also might have to drop out of school if anyone finds out about their relationship or if she becomes pregnant.)
5. Next, a Group 2 representative presents the possible results of Musu's decision. Ask other Group 2 members to add any other ideas. (If not listed by group members, be sure to add these outcomes: Physical injury, pregnancy, HIV/AIDS or STIs, fear, shame, anger, loss of appetite, nightmares, anxiety, sleeplessness, and depression.)

Activity 3: How Could a Friend Help Musu?

Time allotted: 15 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Ask girls what they would do if Musu came to them for advice and make a list of their ideas on the chalkboard or flipchart paper. Remind them that Musu trusts you to help her. She has overcome her fear and shame to talk to you about her problem.

2. After the girls have shared their ideas, add the following to the list:

   - Listen attentively and show your attention and concern.
   - Remind Musu that it is not her fault. Tell her she should not feel ashamed or guilty.
   - Be patient and sensitive.
   - Ask what you can do to help.
   - Don't spread rumors or gossip about Musu's problem.
   - Remind Musu that you will continue to support her and be her friend.
   - Offer to accompany her to meet with a trusted adult (family member, other teacher, mentor, clergy member, etc.) to discuss the problem.
   - Keep in contact with Musu and the trusted adult until a solution is identified.
   - If you think that Musu might be in danger, inform a trusted adult yourself. (Be sure to ask Musu if you can tell others about her situation. However, if you feel she is in danger, you may want to tell a trusted adult even if she does not give you her permission.)

Activity 4: What Can Musu Do?

Time allotted: 15 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Invite girls to brainstorm a list of actions that Musu or community members can take to stop this abuse. Be sure to talk about the following possibilities: Talk to parents/family members/mentor/trusted adult; ask someone to intervene with the teacher/his peers/his supervisor/the authorities; organize awareness-raising activities on sexual exploitation; avoid visiting the teacher alone.

2. To close the activity, remind girls that sexual abuse, harassment, and exploitation are frequently experienced by girls at school, in their homes, and in their communities. It is very painful and difficult to talk about. Make sure you let them know that you are available to talk with them privately about this issue after the session or at another time.

Remember: Teachers—and especially mentors—have an obligation to support girls and to do everything they can to ensure their academic success and personal well-being. Make

sure you tell girls that they should never be afraid to tell you if they are being harassed at school. Teachers, too, should encourage their colleagues to enforce a "zero tolerance" policy toward harassment and relationships with students/learners. (Zero tolerance means that teachers will not tolerate colleagues who harass or have relationships with students/learners.) Some schools may even have rules prohibiting this type of behavior. If the school in your community does not have such rules, you may want to consult with community members and school officials to work towards establishing them.

Scholarship students pose for a photo in Niger.

MELISSA CRUTCHFIELD/AED/AURORA ASSOCIATES INTERNATIONAL

Activity 5: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

ADDITIONAL ACTIVITIES:

- Organize a discussion with parents about girls and adolescence. Remember that their daughter's adolescence may also be a difficult or stressful time for them. Discuss with them the physical and emotional changes that occur during puberty and how parents can help their daughters handle these changes.
- Before or after each session, have girls record their feelings in a journal. Give them questions to answer to help them understand their voyage through adolescence.
- Organize a school-wide event to raise sexual-harassment awareness. Invite community leaders and teachers.

NOTES:

USAID
FROM THE AMERICAN PEOPLE

GIRLS' MENTORING RESOURCE GUIDE

MODULE 7: MARRIAGE AND FAMILY

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MICHELLE SALMEN/WINROCK INTERNATIONAL

Marriage is one of the most important events for individuals and communities. It celebrates culture and religion, brings together families and communities, and symbolizes an important moment in a young person's life. Yet all too often, girls and young women have little say in choosing a spouse, deciding when to get married, and determining when and how often they will bear children.

In some parts of the world, girls are especially likely to be married without their consent at a very young age, usually to an older man. Unfortunately, many of these marriages take place when young people may not be physically or emotionally prepared. In addition, such unions violate girls' human rights.

Giving girls (as well as those concerned about girls' well-being) the information and tools necessary to make decisions about relationships, marriage, and their reproductive health is important in ensuring that they and their families remain healthy. This knowledge is also important so that girls can pursue all of the life options available to them to secure their well-being. The following sessions are designed to address the causes and consequences of early marriage, the benefits of delaying marriage, and how girls and women can protect themselves against STIs including HIV/AIDS, and unwanted pregnancy.

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SESSION 1:
CEREMONIES AND CUSTOMS

Time allotted: 2 hours

Objectives

- Define marriage
- Explore marriage traditions and practices
- Identify different people's roles in planning a wedding and marriage

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Review activities and discussion questions.
3. Prepare answers to girls' questions from the previous session.
4. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Marriage and raising a family are an important part of many people's lives. The following sessions will give girls a chance to discuss marriage customs in their community and their ideas about marriage.

Young women in Senegal work together to mentor girls in their community.

MARCO SOTELINO/WORLD EDUCATION

Activity 1: What Is Marriage?

Time allotted: 20 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls, **"What is your definition of marriage?"** Talk about different **legal** and **cultural** ideas of marriage, including polygamy if it is practiced in your area. Does marriage also have a **personal definition** for different people? (*Possible answers:* The idea of love is an important aspect of marriage; marriage is important because of the family relationships it creates or strengthens; marriage is important because it represents security, stability, and protection.)

2. Now ask girls to discuss the various ways in which a marriage is decided. Use the following questions as guidelines:

   - Who is responsible for arranging a marriage? (*Possible answers:* Parents or other family members; one person proposes marriage to another.)
   - At what age do young people get married? Is it different for boys/men and girls/women?
   - Are there benefits or drawbacks to these different methods?
   - How does marriage come about in your community? Do you agree or disagree with these methods?
   - How is a marital union recognized in your community? In other words, what does it take for a couple to be considered married? (*Possible answers:* Ceremony with family and friends, religious ceremony, or legal certificate.)

Activity 2: Ceremonies and Customs

Time allotted: 40 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Divide participants into groups. Each group will be responsible for discussing one of the following topics: marriage ceremonies, men's and women's roles, brides and grooms. Allow each group approximately 10 minutes to discuss its topic and the questions provided. Afterwards, invite each group to share its responses.

   Marriage ceremonies

   - Are there any ceremonies when a couple becomes engaged? If so, what are they and how do they differ for men and women?
   - When a couple gets married or engaged, are gifts expected or required? If so, who gives and who receives the gifts? What impact do these gifts have?
   - What marriage ceremonies are common in your community? Are there different ceremonies for men and women?
   - What is your favorite part of the wedding ceremony? Why?
   - Are there any marriage ceremonies or rituals that you do not like? If so, why not?

   Men's and Women's Roles

   - What are girls' and women's roles in planning a wedding or marriage?
   - What are boys' and men's roles in planning a wedding or marriage?
   - Do men's and women's roles differ? Why or why not?

   Brides and Grooms

   - How do brides feel when they get married? Are they happy, sad, fearful, joyful, etc.?
   - How do grooms feel when they get married? Are they happy, sad, fearful, joyful, etc.?

- Do brides and grooms react differently? If so, why?
- What are the reactions and emotions of the wedding guests? Do their feelings differ from the bride's or groom's? Why or why not? (For example, the bride may be scared or sad to leave her family, while everyone else is eating, dancing, and celebrating.)

Activity 3: Three Weddings

Time allotted: 50 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Divide girls into three groups. Each group should create a role-play, or drama, about one of topics listed below.

   Group 1: A grandmother's wedding many years ago

   Group 2: A wedding that could take place today

   Group 3: The group's idea of the perfect wedding in the future

2. After each group presents its "wedding," discuss the following:
   - Are there any differences in the three weddings?
   - Are there any similarities in the ceremonies?
   - What do you like or dislike about the various weddings?

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 2:
EARLY MARRIAGE

Time allotted: 2 hours

Objectives

- Identify changes in marriage practices over time
- Identify the causes and effects of early marriage
- Understand the benefits of delayed marriage

Key Terms

- **Consensual marriage:** Marriage that is mutually and freely agreed by both partners
- **Early marriage:** Marriage before a person has become an adult (approximately age 18)
- **Forced marriage:** Marriage in which one or both partners does not consent

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Review activities and discussion questions.
3. Prepare answers to girls' questions from the previous session.
4. Prepare slips of paper for questions. (See final session activity.)

Mothers of scholarship students in Senegal attend a meeting with their daughters.

MARCO SOTELINO/WORLD EDUCATION

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Explain to participants that marriage means many different things to different people. Today's session will give girls an opportunity to present their definitions of marriage. You also will discuss early marriage and how it can impact a girl's life.

Activity 1: Early Marriage—Causes and Consequences

Time allotted: 25 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. In many places around the world, girls get married at a young age, often after they begin menstruating. Marriage before a person has become an adult (approximately age 18), is called **early marriage (or child marriage).** Early marriages, which are usually arranged by family

members, are most common in sub-Saharan Africa and South Asia. Most often, such marriages occur without girls' consent. In sub-Saharan Africa, more than 40 percent of girls are married before they turn 18, and this number is much higher in several countries.[1] Lead a discussion on early marriage using the following questions as guidelines:

- At what age do girls and boys in your community get married?
- Do you think this is a good age? Why or why not?
- Do laws indicate how old a person must be to get married? Is the law enforced? Why or why not?

2. If early and/or forced marriage is common in your community, ask the girls why they think it occurs. Some common causes to talk about include:

- **Poverty:** Parents cannot take care of all their children, so they are married as soon as possible. Some parents may think that a girl will be better provided for if she is married.
- **Culture and/or religion:** Some cultures may believe that a girl who has started menstruating should be married. Other cultures may highly value large families and thus encourage people to marry early and have many children.
- **Fear of premarital sex, pregnancy, and HIV/AIDS:** Early marriage is sometimes viewed as a way to "protect" girls from sexual activity outside of marriage, pregnancy outside of marriage, and HIV.

Note to facilitator:

Be sure to emphasize that early marriage has not, however, been shown to decrease the rate of HIV/AIDS infections among young girls. In fact, in some places, marriage has actually increased girls' and women's risk of HIV/AIDS infection because married men and women are not supposed to use condoms, even if one partner is not faithful.

- **War and conflict:** In these situations, marriage can be viewed as a way to "protect" girls from harm.

3. Ask the girls to think about the consequences of early and/or forced marriage. What happens to girls and boys who are married before they finish school or while they are still going through puberty and adolescence? Emphasize and discuss the following impacts of early marriage:

- Denial of educational opportunities and growth
- Unhappiness and isolation
- Emotional trauma as a result of leaving home at a young age
- Psychological trauma as a result of premature sexual activity
- Abuse
- Violation of human rights

1. UNFPA, "State of World Population 2005 Child Marriage Fact Sheet," http://www.unfpa.org/swp/2005/presskit/factsheets/facts_child_marriage.htm (accessed on 24 March, 2008).

- Health problems due to early sexual activity and pregnancy (Among 15- to 19-year-old girls, complications from pregnancy are the leading cause of death. Girls younger than 15 are five times more likely than women in their 20s to die during childbirth; girls 15–20 are twice as likely.)
- Lack of ability to adequately care for children (Young, less educated mothers tend to have less healthy children than older, more educated mothers.)
- Lack of opportunity to develop a sense of self and to pursue one's goals
- An increased chance of exposure to HIV/AIDS, since husbands who marry girls under 18 are usually older and more likely to be HIV-positive

4. Once the girls have discussed the causes and consequences of early marriage, ask them to list the benefits of delaying marriage. (*Possible answers:* Opportunities to complete school; physical and emotional maturity; better ability to care for children; respecting girls' right to consent to marriage; a lower likelihood of suffering spousal abuse; better health for children and mother.)

Scholarship recipients in Niger attend a tutoring session.

MELISSA CRUTCHFIELD/AED/AURORA ASSOCIATES INTERNATIONAL

Activity 2: Early Marriage—What Can We Do?

Time allotted: 40 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. If you live in a community or country where girls get married at a young age, discuss what can be done to delay marriage. Ask girls to come up with a list of ideas at the individual and community level. Some examples include:

   - **Encourage and promote girls' education** because educated girls are more likely to delay marriage.
   - **Increase people's awareness** of the harmful health consequences of early sexual activity and pregnancy, as well as awareness of girls' rights to education and to consent to marriage.
   - **Organize a public-education campaign** about the harmful effects of early marriage and the advantages of delaying marriage. Talk to local parents' associations, women's groups, and community and religious leaders about the importance of consensual marriage between adults.
   - **Write letters** to local newspapers, television stations, and radio stations expressing your views on early and/or forced marriage.
   - **Work to ensure realistic minimum-age requirements** are written into law—and enforced.

2. Act out a drama on early marriage using "Njoki's Story" as a guide. (See highlighted text.)

Njoki's Story

Njoki is a senior secondary-school student and one of the brightest girls in her class. Lately, she's heard rumors that her father and mother are arranging for her to be married to a cousin in the family. Njoki doesn't think she is old enough to get married. Besides, she really wants to finish her education.

What can she do?

3. Feel free to use a real-life example from your community or culture, changing the names to protect the identities of those involved. You may wish to address the issue of a girl marrying an older man who already has one or more wives if polygamy is common in your community.

Activity 3: Traditional and Modern Ideas about Marriage

Time allotted: 45 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Explain to the girls that sometimes, traditional customs and more recent, "modern" ideas about marriage cause disagreement between young people and older generations. Some people may think that marriages should be based on tradition, while others think that marriages should reflect current attitudes and changing beliefs.

2. Lead a discussion on the role of "traditional" and "modern" ideas about marriage in your community.
   - Explain the importance of tradition in your community's marriages.
   - Have "modern" ideas or practices influenced marriages in your community? If so, what are these modern ideas? (*Possible answers:* Men and women should decide to get married rather than have their parents arrange the wedding; girls should not get married at a young age; men should not have to pay a bride price; women should be able to manage their own money; couples should jointly decide how many children to have; couples should get tested for HIV before getting married.)
   - Young and older generations sometimes disagree about marriage. Why do you think this is?
   - Do young people in your community view marriage differently from older people? Why or why not?
3. If your differences about "traditional" versus "modern" marriage are particularly strong in your community, hold a marriage debate in which two sides debate the "pros" and "cons," or advantages and disadvantages, of traditional and modern marriages. Divide girls into the following two teams:

   Side 1: "Traditional" Marriage
   First, the group should decide which people in the community it represents. Then, the group should argue that marriages should be arranged based on tradition. This group should list the advantages of following traditional practices. This group should criticize modern ideas about marriage.

   Side 2: "Modern" Marriage
   First, the group should decide which people in the community it represents. Then, the group should argue that marriage should be based on modern ideas about men's and women's equality, and on couples knowing their HIV status. This group should list the advantages of following modern ideas about marriage. This group should criticize traditional practices.
4. Based on the arguments each side presents, discuss the following:
   - What are the advantages and disadvantages of traditional marriage?
   - What are the advantages and disadvantages of modern marriage?
   - Can modern and traditional practices be combined? If so, how?
5. *Additional activity:* Present the debate to a local community group as a way to encourage discussion about marriage practices.

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.

3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.

4. Establish the next meeting date and time.

Scholarship recipients in Equatorial Guinea study into the night.

EUGENE KATZIN/AED

SESSION 3:
PLANNING A FAMILY—PART I

Time allotted: 2 hours

Objectives

- Understand the consequences of early and frequent pregnancy
- Understand the advantages of birth spacing and/or birth control

Key Terms

- **Birth control:** A term often used to describe contraception
- **Birth spacing:** To regulate the frequency of pregnancies to help ensure the health of the mother and child
- **Contraceptive/Contraception:** A natural method or an artificial device, such as a condom or birth-control pills, used to prevent pregnancy
- **Family planning:** Using contraception or birth control to regulate the frequency and number of pregnancies
- **Reproductive health:** A person's well-being in relation to reproduction's physical, emotional, and social aspects

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Pieces of paper for Activity 2 scenarios
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Invite a midwife, nurse, or other health educator to help facilitate the session. Make sure you meet with the person beforehand to discuss session objectives and activities. Emphasize that the session is not designed to be an abstinence lecture, but to provide girls with information about pregnancy prevention methods.
2. Gather materials.
3. Write scenarios from Activity 2 on pieces of paper.
4. Review activities and discussion questions.
5. Prepare answers to girls' questions from the previous session.
6. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Explain to girls that now that you have talked about marriage, you will be talking about how and when people decide to have children and raise families. Today, you will talk about the meaning of the term "family planning." Although this is a subject that can be embarrassing or make people feel uncomfortable, the goal is to provide girls with the information they need to make healthy decisions about their bodies and their future families.

Activity 1: What is Family Planning and Why is it Important?

Time allotted: 20 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Explain to girls that while they may not yet have thought about having children, it's important to think about the consequences of childbearing so that they will make good decisions as they grow older.
2. Explain that the number of children a woman has and the frequency at which children are born have a substantial impact on a family, including the health of the parents (especially the mother) and the children, the family's financial well-being, and the parents' ability to care and provide for their children.
3. Ask the girls if they have heard of the terms **birth spacing** or **family planning.** Ask them to share their definitions and ideas. Tell them that birth spacing is when a woman decides to leave a certain amount of time, such as 2–3 years, between pregnancies. Family planning is deciding when to have children and how many children to have. Tell them that women and men use something called contraceptives, or birth control, to determine when and how often the woman becomes pregnant.

   Tell the students that family planning nowadays also involves getting tested for HIV before marriage. When a couple knows the HIV status of both partners, the couple can go about planning a family. Counseling and medical advice are necessary if one or both partners is HIV-positive.
4. Ask the girls to name some **traditional methods of birth spacing or family planning.** (*Possible answers:* Breastfeeding a child for a certain number of years; medicines made from special plants; temporary sexual abstinence.) Remind the girls that family planning and birth spacing are found in many cultures, and not something new introduced by Westerners. However, some forms of traditional birth spacing methods are not effective and can even be harmful to a

woman's health. (For example, breastfeeding is not 100 percent effective in preventing pregnancy, especially after the infant is six months old.) You will discuss some of the modern forms of birth control during a later session. For now, however, you will concentrate on why people might choose to practice birth spacing or family planning.

5. Ask the girls to think of any **advantages of birth spacing and family planning.** Write "mother," "child," and "family" on a chalkboard and write the advantages for each person or group.

Note to facilitator:
You could also break girls into three small groups and assign "mother" to one group, "child" to another group, and "family" to the third group. Each group should then report back to the others.

Possible answers include:

- The mother's body has more time to "repair" itself after a pregnancy, so it can be in better health to support a second pregnancy.
- It decreases the likelihood of a miscarriage and increases the likelihood of a healthy pregnancy.
- It increases the chance that the baby will be born healthy and not underweight.
- A mother and father will be able to spend more time with each child as the child grows up.
- The mother will be able to devote more time to other activities that will increase family income.
- The family will be able to better care for each child with good food, school supplies, and medicine.
- It prevents overcrowding and depletion of natural resources.

Mentors attend a training workshop in Kampala, Uganda.

ALEXI ZEKAS/AED

Activity 2: Role-Play

Time allotted: 1 hour

Recommended for Ages: 13 and older

Facilitation Steps:

1. If the group is large, divide the girls into groups based on the approximate number of people needed for the scenarios listed below.

Note to facilitator:
If you have a small group, you may just want to read the following scenarios aloud and facilitate a discussion.

2. Assign each group a scenario from the list below or prepare some scenarios of your own. Give each group a piece of paper with the scenario written on it. Allow 15 minutes for each group to prepare a short theater skit. Remind them that they can add characters or adapt the skit to their community and experiences.

3. Ask each group to perform its skit for the rest of the group. After each group performs, ask the rest of the girls what happened and if they agree with the proposed solution.

Scenario 1

Neshani and her husband have two children. The youngest child was born about five months ago. Neshani would like to have another child once her youngest is about 3 years old. She would like to talk to the nurse about practicing family planning, but she is embarrassed to talk to him. **What should Neshani do?**

(*Possible actions:* Neshani could talk to her husband about why she wants to practice birth spacing. She also could seek out another woman for support. Neshani could overcome her embarrassment and decide to talk to the nurse. She also could take a friend with her when she visits the nurse.)

Scenario 2

Amadou is a young man with a wife and child. He would like to use contraception so that his wife will be healthy and strong during her next pregnancy. His wife has never talked to Amadou about family planning, and he is afraid to bring up the subject with her. He is also afraid to go to the store to buy condoms because people will think he is having a relationship outside of his marriage. **What should Amadou do?**

(*Possible actions:* Amadou could discuss the issue with his wife, even though he is afraid. He could also talk to a friend or a health worker about the various types of contraception available. Amadou could ask a friend to buy condoms for him. Someone could tell Amadou that people will not think he is promiscuous if he buys condoms.)

Scenario 3

Lukombo and Jean are married and have one child. They would like to have several children because children are an important part of their culture. Lukombo's aunt tells her that if they want

healthy children, they should space out the birth of their babies to two or three years apart. **What do you think Lukombo and Jean can do?**

(*Possible actions:* Lukombo and Jean could consult a nurse or health worker to find out how they can space their children's births. They may face resistance from friends or family who think that birth spacing is wrong. However, they could also decide that birth spacing will help them have healthier children and they could decide to use a form of family planning.)

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 4:
PLANNING A FAMILY—PART 2

Time allotted: 2 hours

Objectives

- Identify modern contraceptive methods and how to use them
- Understand the advantages and disadvantages of various contraceptive methods
- Identify places in the community to obtain contraception and reproductive health information

Recommended Materials

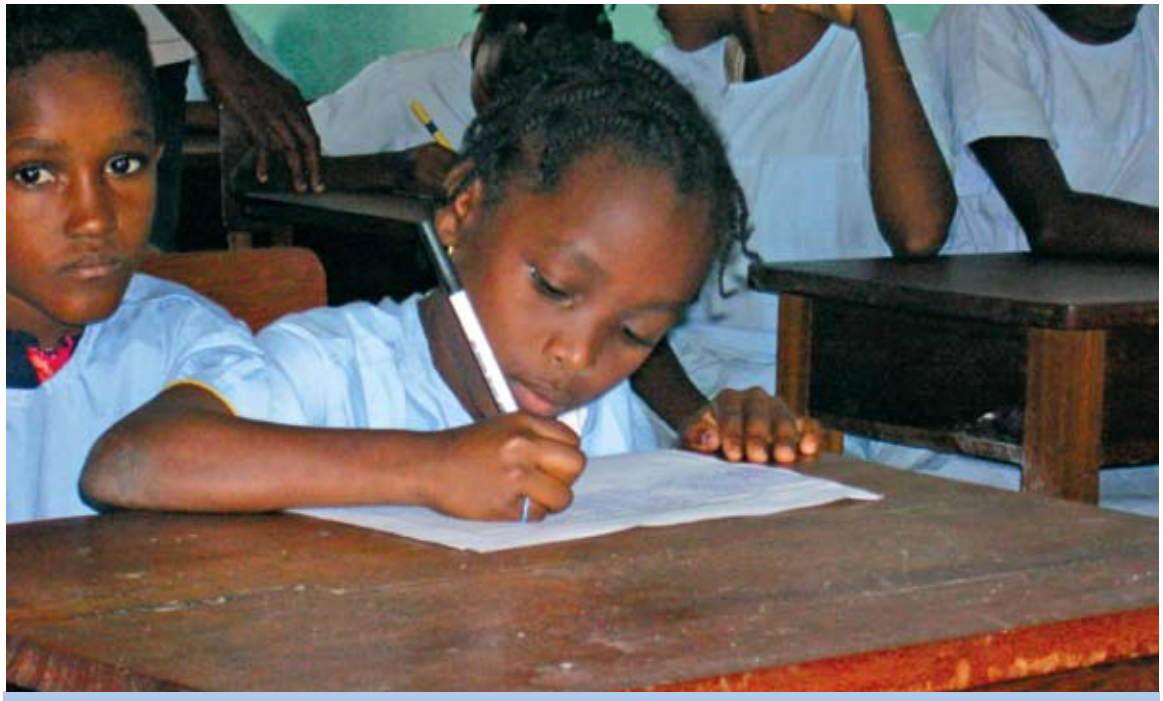
- Chalkboard and chalk, or flipchart paper and markers
- **Handout 13: Facts about Common Contraceptives**
- **Handout 14: Contraceptive Myths and Facts**
- Contraceptive samples (optional)
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Invite a midwife, nurse, or other health educator to help facilitate the session. Make sure you meet with the person beforehand to discuss the session objectives.
2. Gather materials.
3. Obtain a sample of contraceptive methods to show participants, such as birth-control pills and condoms, if possible.

Note to facilitator:
It is recommended that a health professional bring these items. Showing them to girls will decrease the "mystery" surrounding the issue.

4. Write down the statements in the left column of the table in **Handout 14: Contraceptive Myths and Facts** onto separate pieces of paper, or make a photocopy of the handout and cut the statements in the left column into separate pieces of paper. Do not distribute the answers in the right column to students. These are explanations for you to read aloud to them.
5. If possible, make a copy of **Handout 13: Facts about Common Contraceptives** and **Handout 14: Contraceptive Myths and Facts** for each girl.
6. Review activities and discussion questions.
7. Prepare answers to girls' questions from the previous session.
8. Prepare slips of paper for questions. (See final session activity.)



A scholarship student focuses on her writing in a São Tomé classroom.

MARTHA SALDINGER/WINROCK INTERNATIONAL

INTRODUCTION

Time allotted: 10 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the answers to the questions that the girls submitted anonymously at the end of the previous session. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Now that girls have an understanding of pregnancy, today you will talk about some of the ways men and women can regulate when and how often a woman becomes pregnant. Remind girls that a contraceptive is something that prevents pregnancy. You will be discussing how different contraceptive methods work and the advantages and disadvantages of each. Remind them to ask questions during the session whenever they don't understand something or would like more information.

Activity 1: Different Contraceptive Methods

Time allotted: 1 hour

Recommended for Ages: 13 and older

Facilitation Steps:

1. Ask the girls to name all the types of contraceptive methods that they know.
2. One by one, examine the contraceptive samples.

Note to facilitator:
If you do not have samples, try to find a poster with a picture or drawing.

Ask the girls to identify how the contraceptive is used and its advantages or disadvantages. Use **Handout 13: Facts about Common Contraceptives** as a guideline.

Note to facilitator:
Do not give the handout to the girls during the discussion; ask them first if they can provide information about each contraceptive.

Make sure to mention how much each contraceptive costs and how often it must be taken or used to effectively prevent pregnancy.

3. **Be sure to emphasize which methods do and do not protect against sexually transmitted infections (STIs) and HIV/AIDS.**

4. Once you have identified and discussed each contraceptive method, ask the girls if they know where to obtain contraceptives and family planning counseling in their community. Make sure to ask the girls if they have any questions.

Activity 2: Myth or Fact?

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Explain that a lot of times people do not use—or do not correctly use—contraceptives because they do not know the facts about them. Give each girl a slip of paper with a contraception statement from the left column of the table in **Handout 14: Contraceptive Myths and Facts.**

2. Ask each girl to read her statement. After each statement is read, ask all girls to raise their hands if they think the statement is a fact. Then ask all the girls who think the statement is a myth to raise their hands. Provide and explain the correct answer from the right column of the table in the handout.

3. After each statement has been read aloud and discussed, give girls a copy of **Handout 14: Contraceptive Myths and Facts.**

Activity 3: Barriers to Contraceptive Use

Time allotted: 15 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. After you have discussed the advantages of family planning and contraception and the various methods, ask girls, "Why do you think some people choose not to use birth control or practice birth spacing?"

2. Make a list of barriers and possible solutions to these problems. Use the table below in your discussion:

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

ADDITIONAL ACTIVITIES:

- Perform a skit or role-play for other students or local groups addressing the issues discussed in the module.
- Ask girls to talk to a mother, grandmother, aunt, or other older female relative about her marriage. What was the ceremony like? How old was she? What were her emotions before, during and after the wedding? What was expected of brides at the time? Have these expectations changed?
- Discuss girls' concerns about early or forced marriages with village or town associations.
- Visit a police station to find out the marriage laws in your community.
- Conduct a public-education campaign in your community to raise awareness of the benefits of family planning and contraception.
- If possible, visit the UNICEF web site and view a photo essay describing the marriage of Tizalem, a 12-year-old girl from Ethiopia. (www.unicef.org/protection/index_earlymarriage.html)
- Read girls' and young women's thoughts on early marriage and view photos online at the Too Young to Wed Project, sponsored by the International Center for Research on Women. (www.icrw.org/photoessay/html/index.htm)

NOTES:

USAID
FROM THE AMERICAN PEOPLE

GIRLS' MENTORING RESOURCE GUIDE

MODULE 8: HIV/AIDS

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ALEXI ZEKAS/ACADEMY FOR EDUCATIONAL DEVELOPMENT

Sub-Saharan Africa is the region of the world that is the most affected by HIV/AIDS. More than two out of three (68%) adults and nearly 90% of children infected with HIV live in this region, and more than three in four (76%) AIDS deaths in 2007 occurred there. Today, an estimated 22.5 million people in Africa are infected with HIV.[1]

Young people worldwide are particularly affected by the AIDS epidemic. As of 2004:

- About half of all new HIV infections occurred among people aged 15–24.
- An estimated 10 million young people were living with HIV.
- By 2010, 18.4 million children in sub-Saharan Africa—more than one in three orphans—will have lost parents to AIDS.[2]

Girls and young women are especially vulnerable to HIV/AIDS. Women make up about half of all people living with HIV worldwide. In sub-Saharan Africa, where the epidemic is worst, they make up an estimated 57% of adults living with HIV, and three quarters of young people living with HIV on the continent are young women aged 15–24.[3] Moreover, girls and women are less likely than men and boys to have information about HIV transmission and prevention.[4]

Girls and young women must know how to protect themselves from this devastating illness, as well as other sexually transmitted infections (STIs). While talking about HIV/AIDS may be difficult, painful, or embarrassing for some people, the following sessions provide concrete information regarding modes of HIV transmission and prevention. They will also help you to facilitate discussions about the most important topic—how young people can make good decisions that will keep them HIV-free.

1. UNAIDS, "2007 AIDS Epidemic Update," http://data.unaids.org/pub/EPISlides/2007/2007_epiupdate_en.pdf (accessed on 9 March, 2008).
2. UNICEF, "Multiple Indicator Cluster Survey (MICS) HIV/AIDS: Protect and Support Children Infected with HIV and AIDS (last updated March 2006)," http://www.childinfo.org/areas/hivaids/orphans.php (accessed on 9 March, 2008).
3. UNAIDS, "Policy and Practice: Key Populations: Women and Girls," http:/''/www.unaids.org/en/PolicyAndPractice/KeyPopulations/WomenGirls/default.asp, (accessed on 9 March, 2008).
4. UNICEF, "Multiple Indicator Cluster Survey (MICS) HIV/AIDS: Prevention of Infection Among Adolescents and Young People (last updated March 2006)," http://www.childinfo.org/areas/hivaids/young.php (accessed on 9 March, 2008).

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"AIDS today in Africa is claiming more lives than the sum total of all wars, famines, and floods… It is devastating families and communities, overwhelming and depleting health care services, and robbing schools of both students and teachers."

—NELSON MANDELA, FORMER PRESIDENT OF SOUTH AFRICA

Pre-school classes help Basarwa San scholarship girls adjust to going to school.

WINROCK INTERNATIONAL/WEIDEMANN ASSOCIATES INC.

SESSION 1:
WHAT IS HIV/AIDS?

Time allotted: 2 hours

Objectives

- Define HIV/AIDS
- Determine certain myths and facts about HIV and AIDS
- Examine the causes of HIV in your community

Key Terms

- **AIDS** (Acquired Immuno-deficiency Syndrome): A collection of diseases caused by HIV
- **HIV** (Human Immuno-deficiency Virus): The virus that causes AIDS
- **Prevalence**: In medical terms, prevalence is the percentage of a population that is affected with a particular disease at a given time.

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Paper (small pieces and large flipchart paper, if available)
- Notebook paper for participants
- Pens or pencils for taking notes
- Tape
- Bowl, basket, or hat
- **Handout 15: HIV/AIDS Myths and Facts**
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Look up HIV/AIDS statistics specific to your country or region in the HIV surveys in **Annex 6**.
2. Review any national country policies or educational policies related to HIV/AIDS.
3. Understand the difference between HIV and AIDS, and the various modes of transmission.
4. Gather materials.
5. Copy the statements on HIV/AIDS from the left column of the **Handout 15: HIV/AIDS Myths and Facts** on to separate pieces of paper; add any HIV/AIDS myths prevalent in your area. (See Activity 2.)
6. Review activities and discussion questions.
7. Prepare answers to girls' questions from the previous session.
8. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 10 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** The next few sessions address HIV/AIDS. This is a topic that they may or may not have heard a lot about. However, no matter what they have heard, they will have the opportunity to learn more, to ask questions, and to discuss their feelings about this issue.
4. Ask the following questions to find the girls' level of knowledge, as well as what they would like to know about HIV and AIDS:
   - How many of you have discussed HIV in school?
   - Do you have any ideas about what HIV is?
   - How does HIV affect the body?
   - How can you protect yourselves against the pandemic?
   - Are there certain things about HIV/AIDS that you would like to know more about?

Note to facilitator:
Be sure to write down these items for later reference. Because girls may not ask about certain taboo topics, make sure to remind them at the end of the session to write down any other subjects they would like to discuss and submit them anonymously.

5. Explain that today's discussion will be an overview of HIV. Throughout the next few sessions, you will discuss various topics related to HIV/AIDS, including how it is transmitted and how it can be prevented. Tell the girls that some things that you will be talking about may make them feel uncomfortable or embarrassed, but it is important to talk about how girls can keep themselves healthy and safe. Remind them that they should ask questions at any time.

Activity 1: Why Should Young People Care about HIV?

Time allotted: 20 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Read aloud the quotation from Nelson Mandela on the first page of the module. Then present the following statistics. Write the statistics on pieces of paper, then distribute them to the girls to read aloud.

- Of the 33.2 million people worldwide infected with HIV, more than 22.5 million live in sub-Saharan Africa.[5]
- In our country, _____ (*insert number from the HIV surveys in* ***Annex 6***) people are infected with HIV or AIDS.
- In 2007, 1.6 million African adults and children died from AIDS.[6]
- Worldwide, 2.1 million people died from AIDS in 2007, including 330,000 children.[7]
- An estimated 11.4 million children have been orphaned in Africa as a result of AIDS.[8]

2. Inform them that young people—especially girls—have an even greater chance of acquiring HIV/AIDS.

- Presently, about half of all new HIV infections occur each year among young people.[9]
- Women make up about half of all people living with HIV worldwide. In sub-Saharan Africa, where the epidemic is worst, they make up an estimated 57% of adults living with HIV.[10]
- Three quarters of young people living with HIV on the continent are young women aged 15–24.[11]
- Girls and women are less likely than men and boys to have information about HIV transmission and prevention.[12]

3. Ask the girls to think of other reasons why young people should be concerned about HIV. (*Possible answers:* because young people are infected in such large numbers; sick parents can no longer take care of their children; some children become orphans; there may be a shortage of teachers or other professionals.)

Activity 2: Myth or Fact?

Time allotted: 40 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Tell the girls that you will now discuss what HIV is, how it spreads, and how it can be prevented.

2. Write on the chalkboard the words "Myth" and "Fact." Put the HIV/AIDS myths and facts from the left column on **Handout 15: HIV/AIDS Myths and Facts** into a hat, basket, or bowl. (Do not copy the statements in the right column. Those are answers that you will read aloud to the students.) Then invite the girls to select a piece of paper (without looking). Tell them not to show it to anyone else.

5. UNAIDS, "2007 AIDS Epidemic Update," http://data.unaids.org/pub/EPISlides/2007/2007_epiupdate_en.pdf (accessed on 9 March, 2008).
6. Ibid.
7. Ibid.
8. UNAIDS, "Country Responses: Sub-Saharan Africa," http://www.unaids.org/en/CountryResponses/Regions/SubSaharanAfrica.asp (accessed on 9 March, 2008).
9. UNICEF, "Multiple Indicator Cluster Survey (MICS) HIV/AIDS: Prevention of Infection Among Adolescents and Young People (last updated March 2006)," http://www.childinfo.org/areas/hivaids/young.php (accessed on 9 March, 2008).
10. UNAIDS, "Policy and Practice: Key Populations: Women and Girls," http://''/www.unaids.org/en/PolicyAndPractice/KeyPopulations/WomenGirls/default.asp (accessed on 9 March, 2008).
11. Ibid.
12. UNICEF, "Multiple Indicator Cluster Survey (MICS) HIV/AIDS: Prevention of Infection Among Adolescents and Young People (last updated March 2006)," http://www.childinfo.org/areas/hivaids/young.php (accessed on 9 March, 2008).

3. One by one, ask the girls to read the sentence they selected and tape it under "Myth" or "Fact." Continue until all girls have presented their myths or facts. Once all students have taped their myths and facts to the chalkboard, read them individually and ask students to raise their hand if they agree with the placement of the paper. Ask the girls to justify their opinion. Then provide the **correct answer** with an explanation.

Note to facilitator:
You do not need to get into a lengthy discussion. Rather, this is to help you determine the girls' level of knowledge and to make girls aware of what they do not know about HIV.

Activity 3: Why Do We Have HIV in Our Community?

Time allotted: 40 minutes

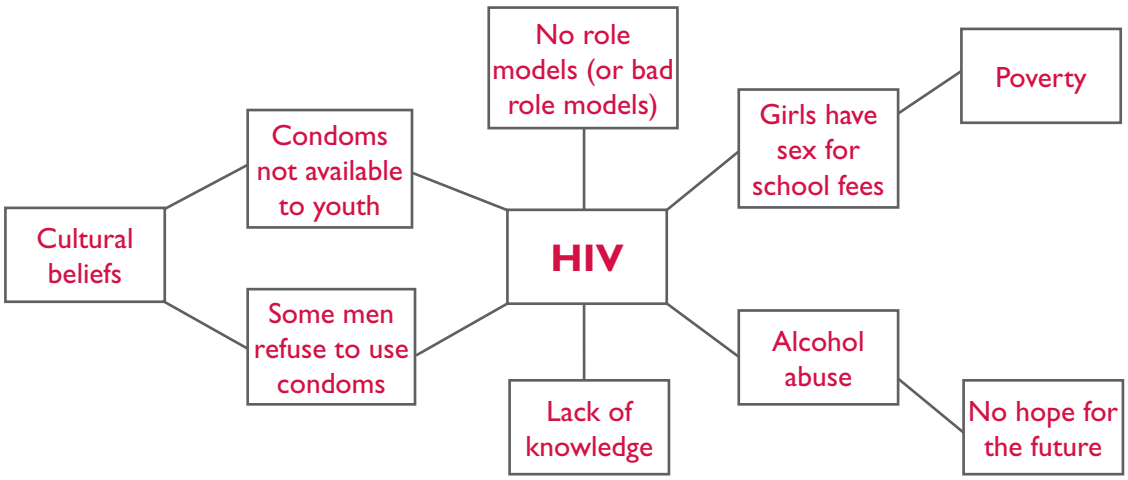
Recommended for Ages: 13 and older

Facilitation Steps:

1. Divide girls into groups of 3–6 people. Give each group a piece of flipchart paper, if available, and a marker.

2. Explain that the goal of this activity is to get them thinking about the causes of HIV in the community. You don't want them to think about the biological reasons (for example, what fluids transmit HIV, which you will discuss in a later session). Instead, you want them to reflect on what social or cultural reasons may be helping HIV to spread. Their answers should be reflected in a diagram, with HIV at the center. Around the word "HIV," they should include words or phrases that explain what causes HIV.

   Example: (Do not show this diagram to girls, as it may influence their responses.)



Activity 4: Questions and Closing

Time allotted: 10 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

Scholarship recipients pose in their new uniforms.

KADIATOU COULIBALY/WORLD EDUCATION

SESSION 2:
HIV TRANSMISSION

Time allotted: 2 hours

Objectives

- Identify modes of HIV transmission
- Identify how HIV spreads throughout a group
- Understand the role that STIs play in facilitating HIV transmission

Key Terms

- **Anal sex:** Sex during which a man's penis is inserted into his partner's anus or rectum
- **Genital discharge:** Fluid or mucus released from the genitals. A person with an STI may have discharge that is yellow or green, or smells different than normal.
- **HIV-:** Symbol used to indicate that someone has tested negative for the HIV virus
- **HIV+:** Symbol used to indicate that someone has tested positive for the HIV virus
- **Infertile:** Physically unable to have children
- **Kissing:** When one person's lips touch another person's lips
- **Masturbation:** An act during which a person touches his or her own genitals to stimulate pleasure
- **Mutual masturbation:** When two people touch each other's sexual organs with their hands to stimulate pleasure
- **Oral sex:** Sex during which a man's mouth or lips come into contact with a woman's genitals, or a woman's mouth or lips come into contact with a man's penis or genitals
- **Port of entry:** A place on a person's body where HIV can enter, such as an open wound or the lining of the vagina
- **Sexual abstinence:** Refraining from (not having) any type of sex, including vaginal sex, anal sex, or oral sex
- **STI:** Sexually transmitted infection (also referred to as an STD, sexually transmitted disease)
- **Transmit:** To pass something from one person to another
- **Vaginal sex:** Sex during which a man's penis is inserted into a woman's vagina

Recommended Materials

- Small pieces of paper for Activity 2
- Pens or pencils
- **Handout 16: Sexually Transmitted Infections—Signs and Symptoms**
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Prepare Activity 2:

- Cut paper into small squares (one square per participant).
- On almost all of the papers, write "vaginal intercourse." Write "anal sex" on two pieces of paper. Write "oral sex" on one piece of paper.
- On about 10 percent of the papers (or 2 out of 20 papers), draw a large plus sign (+). (If the rate of HIV infection in your community is higher than 10 percent, increase the number of squares to correspond to this percentage.)
- Draw a "C" on about 20 percent of the papers (or 4 out of 20 papers).
- Leave the remaining pieces of paper blank.
- Fold the pieces of paper so that the markings are not visible.

3. Review activities and discussion questions.
4. Prepare answers to girls' questions from the last session.
5. Prepare slips of paper for questions. (See final session activity.)
6. Optional: Make copies of **Handout 16: Sexually Transmitted Infections—Signs and Symptoms.** Invite a health worker to talk about this issue.

Scholarship recipients in Botswana take a quiz to test their knowledge of HIV/AIDS.

MARTHA SALDINGER/WINROCK INTERNATIONAL

INTRODUCTION

Time allotted: 10 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Explain that today's discussion will focus on what HIV is and how it is transmitted from person to person. Tell the girls that what you will talk about may make them feel uncomfortable or embarrassed. However, girls need to know how they can keep themselves healthy and safe. Remind them that they should ask questions at any time.

Activity 1: Modes of HIV Transmission

Time allotted: 45 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Ask girls to name the fluids that can transmit HIV. (Write all their answers on the board, even if some are not correct. Later, circle the correct answers as you explain them.)
2. Once they have provided answers, explain that HIV can *only* be transmitted through direct contact with these specific body fluids: **blood, semen, vaginal fluids, and breast milk**. Make sure you explain that semen is what comes out of a man's penis during ejaculation and that vaginal fluid is found in a woman's vagina. Fluids that **cannot transmit HIV** include: tears, saliva, urine, mucous, sweat, vomit, and feces.
3. Ask the girls to explain *how* HIV can be transmitted from one person to another. Ask them to be as specific as possible. Write a list on the board. Answers should include:

HIV Transmission Modes

- **Sexual activity:** During sex, a person comes into contact with semen and vaginal fluid from a person with HIV. This is the most common mode of HIV transmission in Africa. **A person can become infected with HIV by having vaginal sex, oral sex, or anal sex.**
- **Parent-to-child transmission (PTCT):** HIV can be passed from a man to a woman, who can in turn pass HIV to her baby during pregnancy, delivery (childbirth), or while breastfeeding. One out of every three babies born to an HIV-positive mother also becomes infected with HIV. PTCT can happen at three different times:

  a) Unborn babies become infected with HIV while they are in a mother's uterus, or womb.

  b) Newborns become infected during delivery if there is contact with the mother's blood.

  c) HIV-positive mothers pass the virus to infants through breast milk, which can contain HIV.

  d) Emerging studies show that parents' chewing of food for their infants (pre-masticated food) may transmit HIV through blood in the mouth.

- **Blood-to-blood contact:** This mode of transmission occurs when blood from an HIV-infected person comes into contact with another person's blood, usually through open wounds or sores. Common activities that result in blood-to-blood contact include:

  a) Treating another person's wound without wearing latex (rubber) gloves.

  b) Blood transfusion using blood that has been taken from an infected person.

  c) Sharing an unclean razor or knife to shave people's heads, perform tattooing, or perform female genital cutting (FGC).

  d) Sharing non-sterile (unclean) needles during intravenous drug use or medical procedures.

4. Explain to the girls that HIV enters another person through one of these fluids. Just touching the fluids, however, will not give someone HIV. The fluids must enter into the body through a "**port of entry**," or "door." Ask girls to brainstorm some of these "ports of entry." Their answers should include:

   - a cut or an open wound
   - vaginal wall (lining inside the vagina)
   - vulva (soft skin surrounding the vaginal opening)
   - lining on the head of the penis
   - rectum (anus)
   - mouth (sores or openings)
   - lining of the throat (especially in the case of newborn babies who are breastfeeding)

   This is why you can't get HIV from simply eating with someone who has HIV or from sharing the same toilet. **If there is no blood, semen, breast milk, or vaginal fluid, there is little risk of getting HIV**. Moreover, HIV cannot survive outside the body, so a person cannot get the virus from dried fluids. (Dried fluids can, however, transmit other dangerous diseases and should not be touched.)

   In some cultures around the world, adults chew food and then pass the food from their mouths to the mouths of infants to help them digest it. Research has shown that this "pre-chewing" of food can transmit HIV, so it should be viewed as risky behavior.

5. One-by-one, read each transmission mode listed on the board or piece of paper and ask the girls to identify the "door" through which HIV passes from one person to another.

6. Ask girls to again name various types of sexual activity. Ask them if the activities can transmit HIV. The correct answers are:

   - Vaginal sex: yes
   - Anal sex: yes
   - Oral sex: yes
   - Masturbation: no

- Mutual masturbation: lower risk (as long as there are no cuts or sores on hands or genitals)
- Closed-mouth kissing: no risk
- Open-mouth kissing: lower risk (as long as there are no cuts or sores in the mouth)

Emphasize the following points:

- Having **vaginal sex** or **anal sex** without using a condom puts a person at a very high risk of getting HIV if exposed to the virus. This is because vaginal sex involves two fluids that can transmit HIV—vaginal fluid and semen.
- Having "**dry sex**" (vaginal sex while the vagina is not lubricated), also increases a person's risk of HIV infection. This is because the soft tissue (skin) lining the inside of the vagina is more likely to tear, thus creating a port of entry for HIV to enter the body.
- **Anal sex** without a condom is considered very risky in terms of HIV infection because the anus does not produce natural lubrication (wetness) like the vagina does. Thus it remains dry during sexual intercourse. Consequently, the skin inside the anus is likely to tear during sex, thus creating a "port of entry" for HIV to be transmitted from semen.
- The risk of HIV transmission during **oral sex** is considered lower than both vaginal and anal sex. However, **unprotected oral sex can still lead to HIV infection**, especially if one person has a sexually transmitted infection or sores on the genitals or mouth and/or if ejaculation occurs.
- There is **no risk** of getting HIV as a result of masturbation because there is no exchange of fluids. A person who masturbates touches his or her own sexual organs.
- There is **almost no risk** of HIV infection during mutual masturbation because there is no direct exchange of fluids that can transmit HIV. However, a person with cuts on his or her hands who comes into contact with semen or vaginal fluid could become infected. Moreover, some STIs can be spread through skin to skin contact.
- **A person cannot get HIV from closed-mouth kissing, but "deep" open-mouth kissing carries a risk of HIV infection through sores in the mouth.**

The following points provide a useful summary for your discussion:

- Vaginal sexual intercourse is the most frequent and common mode of HIV transmission in Africa.
- Girls should understand that unprotected vaginal, oral, and anal sex **all** put them at risk for HIV.
- Before receiving an injection, always ask if the needle has been sterilized or if it is new. In most countries, needles are sterilized or used only one time per person. Girls should not be fearful of getting a vaccination or injection because they protect people from other important diseases.
- Most blood transfusions are safe where the blood supply is monitored and checked for HIV.
- Pregnant women who think they may have been exposed to HIV should get tested for the virus. Pregnant women who are HIV-positive can transmit the virus to their babies during pregnancy,

during childbirth, or breastfeeding. If a pregnant woman is HIV-positive, she should talk to her doctor immediately about how to avoid transmitting the virus to her baby during pregnancy, childbirth, or breastfeeding. In many countries, pregnant women can receive medication to greatly reduce transmission of the virus to their children.

7. Now that the girls understand how HIV is transmitted, ask them to explain how HIV is **not** transmitted. Make a list on the chalkboard. Be sure to include the following answers.

HIV cannot be transmitted by:

- Eating out of the same bowl as someone who is HIV-positive
- Sharing a toilet with someone who is infected with HIV
- Getting bitten by a mosquito (HIV can only live in people, which is why mosquitoes cannot transmit the virus.)
- Sexual abstinence (not having sex)
- Kissing a person with HIV (as long as it's closed-mouth kissing)
- Hugging a person who is HIV-infected
- Drinking water from the same well or faucet as someone with HIV
- Sharing a desk or table with someone who has HIV
- Masturbating (touching one's own sexual organs)

8. Ask the girls to identify certain practices or places in their community associated with HIV transmission.

Examples may include:

- Older men who have already had sex tend to marry girls or young women who have little sexual experience.
- Men frequent a local bar, truck stop, or market where they pay girls and women for sex.
- Young men leave home to work in large cities or other countries. Some do not use a condom or are not faithful while they are away. As a result, they return to their village or town infected with HIV and transmit the virus to their wives or girlfriends. In addition, their wives or girlfriends may have been unfaithful and become infected in the absence of their husbands or boyfriends.
- Some people believe that condoms reduce sexual pleasure, or will prevent future pregnancies, and refuse to use them.
- Traditional customs whereby a widow is married to her deceased husband's brother.
- Using unclean razors or instruments to cut or pierce the body in any way, such as for tattooing the mouth or gums, male circumcision, or cutting a girl's genitals.
- Belief that an HIV-positive man will be cured if he has sex with a virgin girl or elderly woman.

If some of these points do not emerge in the discussion, you may want to talk about these practices or places and ask the girls why they might be associated with HIV.

Activity 2: The Spread of an HIV Epidemic

Time allotted: 25 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. This activity is most effective with a group of 10–20 people.

2. Invite participants to come to the middle of the room and form a large circle. Tell them to close their eyes and to put out their left hands. Give each participant one of the square pieces of papers that you have prepared. Tell them to keep the paper folded in their hands and **not** to look at it.

3. Once you have distributed all of the papers, tell the girls they can open their eyes (but not look at the paper). Instruct them to move around the room and greet three people with a handshake. Even though all participants will be girls, for this activity they should pretend that they are a mixed group of girls and boys. After the greetings, ask the girls to sit down. Explain to them that the handshake and greeting represented sex (either vaginal, oral, or anal) between two people. **Remind them that HIV cannot actually be transmitted through handshakes or greetings.**

4. Ask the girls to look at their cards. Draw a big "+" on the chalkboard and ask everyone who has "+" on her card to stand up. (Write the number on the chalkboard.) Explain that for the purposes of the game, everyone with a "+" on her card is infected with HIV (HIV+). Then tell the group that anyone who greeted those two people should stand up, too. Explain that these people may also be infected with HIV. (Write the number of people on the board.) Now ask that anyone who greeted those people also stand up. (Write the number on the chalkboard.) They, too, could be infected with HIV. Continue asking people to stand up until almost everyone is standing.

5. Once everyone is standing, draw a big "C" on the board. Ask participants to raise their hands if they have a "C" on their card. Tell them that the "C" stands for condom, indicating that they "used a condom" and are not infected with HIV, even though they had "sex" with a person infected with HIV. Ask those with a "C" on their cards to sit down. (Write the number of people standing on the chalkboard.) However, those without a "C"—those who did not "use a condom"—are infected.

6. Ask all participants to sit down. Remind them that that shaking hands with a person who has HIV cannot lead to HIV infection. They only shook hands for the game. Then lead a discussion using the following questions as guidelines. (Be sure to wait for girls' responses before providing additional answers.)

   - **How did the HIV infection spread among the group?** (*Answer:* People "spread" the virus by "shaking hands" with each other.)

   - **How fast did the virus "spread"?** (*Answer:* Refer girls to the numbers you wrote on the chalkboard. Point out that it increased dramatically after just a few handshakes.)

   - **Is this similar to how HIV can spread throughout a community?** (*Answer:* If one HIV-positive person has sexual intercourse without using a condom, the virus can spread to the other person. That person can, in turn, spread it to someone else if they do not use a condom.)

- **How did you feel when you found out you were "infected" with HIV?** Some girls may be visibly upset when they are told they are "infected" with HIV. Remind them the exercise is only a role-play and they are not really infected. (*Possible answers:* Surprised, angry, sad, or confused.)
- **How do you think people feel when they learn they have HIV?** (*Possible answers:* Common emotional responses include disbelief or denial, anger, shame, and sadness. Family and friends can help people living with HIV/AIDS cope with these emotions by showing their support and not stigmatizing them. They can get help for the person at a local clinic or organization.)
- **How did it feel to be told you did not have HIV?** (*Possible answers:* Some girls may feel lucky, relieved, happy, or sad for their friends who "have" HIV. They may also feel like it was only a matter of chance that they did not "catch" HIV. They may be nervous to realize how easy it for the epidemic to spread.)
- **What could group members have done to protect themselves from getting infected?**
  a) A person could have refused to "have sex" (or in this case, shake hands). In real life, this would be practicing **abstinence**.
  b) A person could have asked to see the other person's card before "having sex" (shaking hands). In the real world, this means asking your partner to **take an HIV test** before you have sex with him.
  c) A person could have decided to only greet one person. This is like deciding to **be faithful** to one partner so as not to increase one's risk of becoming infected.
  d) A person could have "used a **condom**" (or not shaken bare hands).

7. End the activity by asking everyone to sit down.

Activity 3: Sexually Transmitted Infections (STIs) and HIV

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Ask if a girl can define "STI" or "STD." Explain that "STI" is an abbreviation for sexually transmitted infection, also known as a sexually transmitted disease. These are infections people get through sexual activity, usually vaginal intercourse or oral sex. Ask the girls to give the local names for any STIs that they have heard of. Write the names on the board. Next to each name, write the scientific name. Focus on the most common STIs: **gonorrhea, herpes, syphilis, chancroid, and trichomoniasis. HIV is also an STI**—one that causes death. Ask the girls if they can name any signs or symptoms of these STIs. If not, refer to **Handout 16: Sexually Transmitted Infections—Signs and Symptoms.**

Note to facilitator:

It is not important that girls memorize the different STIs, but that they realize how many exist and are familiar with the common symptoms and health risks. Emphasize that symptoms of some STIs aren't noticeable in women until they become severe, which is why they need to take extra precautions to ensure that they do not catch an STI in the first place. If possible, ask a health professional to talk to girls about STIs common in your community.

2. Explain that girls and women need to know about these STIs for several reasons, including:

   - In 1999, it was estimated that 340 million people became infected with curable STIs; 69 million of these infections were estimated to occur in sub-Saharan Africa.[13]
   - Girls and women are more vulnerable to STIs than men because of biological reasons. Women also tend to be more vulnerable to STIs because of cultural and socioeconomic reasons, including a lack of power regarding sexual relations.
   - Most women with an STI do not have symptoms, which often means they do not get treatment.
   - Having an STI significantly increases a person's risk for becoming infected with HIV.

3. **Some people think that STIs are "normal" because "everyone" gets them. Some STIs go undetected for long periods of time, but they are as harmful as those that cause immediate pain. STIs can and should be avoided through abstinence or the use of condoms.** Other consequences of STIs include:

   - STIs can lead to other health problems, including cancer and Pelvic Inflammatory Disease (PID).
   - STIs can make both men and women infertile.
   - A pregnant woman can pass an STI on to her baby during pregnancy or childbirth, resulting in miscarriage, deformities, blindness, and even a child's death.

4. Having an STI also significantly increases a person's risk of becoming infected with HIV. This is because STI symptoms—such as the presence of sores, discharge from genitals, and rashes—act as ports of entry for HIV.

5. Emphasize that a girl or woman who thinks she has an STI should seek treatment **immediately**. She should also tell her partner(s) to seek treatment as well.

6. Ask the girls how they think STIs can be prevented. Answers should include: abstaining from sexual activity and using a condom. Remind the girls that sexual abstinence is the only method that is 100 percent effective in preventing STI transmission. Withdrawal, the birth-control pill, and other family planning methods such as Norplant do not prevent a woman from becoming infected with an STI, including HIV.

7. Discuss how young people view STIs and where they can seek advice and treatment, using these questions as guidelines:

   - **How do young people in your community learn about STIs?** (*Possible answers:* Friends, family, teachers, radio or TV, health worker, and the Internet.) Discuss which sources may be the most reliable and emphasize the importance of not relying on just one person for information.
   - **Where can they go to obtain more information about STIs?** (*Possible answers:* A health facility, a trusted teacher at school, a mentor, or a knowledgeable friend or family member.)

13. World Health Organization, "2001 Global Prevalence and Incidence of Selected Curable Sexually Transmitted Infections," http://who.int/hiv/pub/sti/who_hiv_aids_2001.02.pdf (accessed on 9 March, 2008).

- **Why do young people often not protect themselves against STIs?** (*Possible answers:* They don't think STIs are common in the area; they do not think STIs are harmful; they do not know how to protect themselves; they are embarrassed to ask for information or to purchase condoms.)
- **Why do young people sometimes not seek medical care if they have an STI?** (*Possible answers:* Shame or embarrassment, fear that others will find out, or lack of money to go to a health facility.)
- **What ideas do you have for increasing young people's awareness of STIs?** (*Possible answers:* Organizing an information session at school or with a neighborhood group; visiting a health facility; inviting a health worker to speak at a meeting; and talking informally with friends.)

Activity 4: Questions and Closing

Time allotted: 10 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 3:
EFFECTS OF HIV ON THE BODY

Time allotted: 2 hours

Objectives

- Understand the difference between HIV and AIDS
- Understand what HIV does to the body
- Understand basic HIV treatment information

Key Terms

- **AIDS (Acquired Immuno-deficiency Syndrome):** A collection of diseases caused by HIV
- **ART (Anti-retro viral therapy):** Treatment for HIV, which can include several different ARVs
- **ARVs (Anti-retro virals):** A type of medicine used to treat (but not cure) people with HIV. There are several different types of ARVs.
- **Cure:** A form of medicine that can completely eliminate a disease from a person's body. There is no cure for HIV.
- **HIV (Human Immuno-deficiency Virus):** The virus that causes AIDS
- **Immune system:** The body's natural defense mechanism against sickness
- **Opportunistic infections:** The name for diseases and illnesses (like tuberculosis and diarrhea) that a person with HIV is likely to catch because of his or her weak immune system
- **Treatment:** A form of medicine that can decrease the effects of a certain disease, but not eliminate the disease. As the treatment for HIV, ARVs can make an HIV-positive person healthier but not cure or get rid of the disease.
- **VCT (Voluntary counseling and testing):** The process whereby a person goes for an HIV test and receives pre- and post-test counseling

Recommended Materials

- Large, open space (in classroom or outdoors)
- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Contact a health professional to learn more about VCT (voluntary counseling and testing) in your area.
3. Prepare cards for immune system role-play. (See Activity 2.)
4. Review activities and discussion questions.
5. Prepare answers to girls' questions from the previous session.
6. Prepare slips of paper for questions. (See final session activity.)

A mentoring session at a Congolese primary school

AED/INSTITUT TECHNIQUE ET PROFESSIONNEL DE KIKWIT

INTRODUCTION

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Review game:** For this activity, divide the room into three sections. Designate one side of the room "High," another side "Low" and another "No." One at a time, call out the name of activities that **do** or **do not** transmit HIV. (See list below.) After each item, girls should run to the side of the room that corresponds to whether they think the activity can transmit HIV, as well as if it is a high-risk or low-risk activity. After each item, select a girl to explain her answer. Correct any mistakes and **emphasize correct answers**.

Note to facilitator:
Depending on the girls' age or level of understanding, you may decide to simplify the review game by asking girls to answer "Yes" or "No."

- Vaginal sex without a condom – high risk
- Anal sex without a condom – high risk
- Masturbation – no risk
- Getting bitten by a mosquito – no risk
- Closed-mouth kissing – no risk
- Open-mouth kissing – lower risk (almost no risk if there are no sores in mouth)
- Sharing the toilet with someone who has HIV – no risk
- Oral sex without a condom – risky
- Mutual masturbation – low risk (almost no risk if there are no sores on hands or genitals)
- Vaginal sex with a condom – low risk (almost no risk if the condom is used correctly)
- Sexual abstinence – no risk
- Drinking from the same cup as an HIV-positive person – no risk

4. **Overview explanation for participants:** Now that girls understand what HIV is and how it can and cannot be transmitted, today you will talk about what HIV does to the human body.

Activity 1: What Is the Difference between HIV and AIDS?

Time allotted: 20 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Write the letters H, I, and V on the blackboard, like this:

   H =

   I =

   V =

2. Ask girls if they know what the letters HIV stand for. If they do not reply, fill in "Human Immuno-deficiency Virus."

3. Now ask them to separately define Human, Immuno, Deficiency, and Virus. Tell them to think of a simpler word to replace these more difficult words. For example:

Human	=	person
Immuno	=	having to do with the body's defense against illness
Deficiency	=	lack of
Virus	=	a type of germ

4. Now ask if anyone can use those "easy" words and phrases to define HIV. Call on several girls until you get a simple definition such as, "HIV is a type of germ that causes a person's body to lack protection against illness."

5. Now explain to girls that HIV causes AIDS. It is important to understand that HIV and AIDS are not the same thing. A person who has HIV and a person with AIDS have medically different conditions, for reasons you will discuss later. For now, it is important that they understand that HIV and AIDS are related, but different.

6. Repeat the same definition exercise you did with HIV, this time for the word AIDS. Common answers should include:

A	=	Acquired	=	to get (from HIV)
I	=	Immuno	=	having to do with the body's defense system that attacks germs
D	=	Deficiency	=	lack of
S	=	Syndrome	=	a collection of diseases

   Therefore, AIDS can easily be defined as: "A collection of diseases a person gets from HIV, which causes the person's body to lack the defense system for fighting illness." You will now talk more about the relationship between HIV and the body's immune system.

Activity 2: Immune System Role-Play

Time allotted: 15 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. The next two activities will focus on what HIV does to a person's body. When a person becomes infected with HIV, the virus attacks the person's immune system. Ask girls if they can define **immune system**. The immune system is the part of the body that fights germs, bacteria, and viruses. When bacteria and viruses enter our bodies, the immune system recognizes them and destroys them, which keeps us from getting sick (or helps us to get better if the virus or bacteria does make us sick).

2. Next, the girls will act out how HIV affects a person's immune system. Select one person to play each of the following roles. Give each person a piece of paper with one of the following written on it:

   - Healthy body
   - Immune system
   - HIV
   - Opportunistic infections (3–5 people representing diarrhea, malaria, tuberculosis, pneumonia, or other diseases)

3. Select one girl to represent a healthy body. Ask her to stand in front of the group. Have her hold a piece of paper with the words "healthy body" written on it.

   Explain that the immune system's job is to protect a healthy body against illness. (The girl who is playing the role of the immune system should come up and "protect" the body. (She can illustrate this by putting her arm around her or giving her a hug.)

4. Tell the girls that when a person gets sick with an illness such as a cough, the cough attacks the body. The body may get sick, but the immune system fights against the sickness until it is gone. (Have the person who is playing the part of the "cough" come and "attack" the body. The immune system should "fight" the cough until the body is again healthy.)

5. Continue by explaining that the immune system continues to protect the body against other illnesses. (Have the other "illnesses" come and "attack" the body, while the immune system works to push them away. Encourage girls to act out their illnesses as they "attack" the body.)

   If a body becomes infected with HIV, however, something different happens. HIV is very clever and instead of attacking the body, it attacks the immune system. (Have the person who represents HIV come and "attack" the immune system.)

   The immune system can fight HIV for a while, but eventually HIV is too strong and the immune system becomes weak. This is when all the other sicknesses come in and "attack" the body. (Have all the sicknesses come and "attack" the body at the same time.) The sicknesses are called **opportunistic infections** because they take the opportunity to attack the person's body when the immune system is disabled or weak.

Once the HIV has seriously weakened the immune system, the person can become very sick. At this point, the person is at risk for developing AIDS.

6. Once the role-play is over, ask the girls the following questions and help summarize what happened:

   - How easy or difficult was it for the opportunistic infections to attack the healthy body when there was a healthy immune system? (*Answer:* The opportunistic infections had a difficult time reaching the healthy body when there was a healthy immune system.)
   - How easy or difficult was it for the opportunistic infections to attack the healthy body when the immune system was not healthy? (*Answer:* It was very easy for them to reach the healthy body.)

   Explain that once HIV destroys the immune system and the person has AIDS, his or her immune system becomes too weak to fight illness. The person becomes sick with many different illnesses at one time, which is why AIDS is called "Acquired Immuno-deficiency Syndrome."

   People with AIDS do not, however, die directly from AIDS. Instead, they die from opportunistic infections such as tuberculosis, diarrhea, and malaria, which they have contracted because the immune system was too sick to fight them. (This is why some people might say that a person did not die of AIDS, but another illness. However, it is HIV and AIDS that are indeed the root causes of the death.)

Activity 3: Elephants and Lions Game

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Note to facilitator:
Depending on the animals found in your area, you may want to change the name of the game and type of animals dramatized.

Facilitation Steps:

1. The next activity will help the girls remember the effects of HIV on the body.
2. Ask girls to form a large circle. Ask for 3–4 volunteers to enter the middle of the circle. Tell these girls that they are now baby elephants.
3. Ask for 4–5 volunteers. These girls are the mother elephants. Their priority is to protect the baby elephants.
4. Now ask for two more volunteers. These volunteers will play the part of lions, who like to eat baby elephants. The mother elephants' job is to protect the baby elephants from the lion. To do so, they need to hold hands and make a circle around the baby elephants.
5. Another volunteer should be selected to play the part of the "jungle beast." The jungle beast is a very special actor, whose role will be revealed later in the drama.
6. The remaining girls should play the part of snakes in the trees. These snakes should observe and pay special attention to what happens during the drama.

7. When you say, "go," the lions should try to "attack," or touch, the baby elephants. When you say, "stop," the lions should back away immediately.

8. Next, tell the jungle beast to remove one of the mother elephants from the circle. When you say, "go," the lions should again try to attack, or touch, the baby elephants. Remind the snakes in the trees to pay special attention to what happens.

9. Tell the jungle beast to remove two more mother elephants. The lions should again have the opportunity to touch the baby elephants. Tell the snakes in the trees to observe what happens.

10. After the game, lead a discussion about what happened. Write the following four words in one column on the chalkboard:

    HIV

    Diseases (opportunistic infections)

    Body

    Immune system

    In another column, write these words:

    Baby elephants

    Lions

    Mother elephants

    Jungle beast

11. Ask and discuss the following questions:

    - With regard to HIV, what do the baby elephants represent? (*Answer:* the human body) (Draw a line from human body to baby elephants.)
    - Who do the mother elephants represent? (*Answer:* the immune system, which protects the body) (Draw a line connecting the immune system to the mother elephants.)
    - What are the lions? (*Answer:* illnesses, or opportunistic infections, that attack a person's body, especially when the immune system is weak) (Girls may think that the lions represent HIV, but emphasize that the lions attacked the baby elephants, which represent the body.)
    - In this game, who is HIV? (*Answer:* the jungle beast, who took the mother elephants away from protecting the baby elephants)

    Final Note: Emphasize that HIV breaks down a person's immune system, which leaves a healthy body extremely weakened against disease.

Activity 4: Overview of HIV Testing and Treatment

Time allotted: 15 minutes

Recommended for Ages: 13 and older

Note to facilitator:
This activity provides only a brief overview of HIV testing and treatment. We encourage you to invite a person from a counseling and testing center to help with this session. For more specific information, visit a testing center in your area and consult with a doctor.

Facilitation Steps:

1. Make clear that the only way that a person can find out if he or she is infected with HIV is to get an HIV test. Emphasize to girls that a person cannot tell if another person has HIV/AIDS simply by looking at him or her. Only an HIV test can tell. Everyone who thinks they may have exposed themselves to HIV should get a test.

2. Inform the girls that knowing their status and that of their partner or spouse is one of the most important ways of lowering their risk of exposure to HIV. In sub-Saharan Africa, the number of couples in which one partner is infected and the other is not is high.[14] Such couples should seek counseling, condoms, and other services if available.

3. **Explain "VCT."** VCT stands for Voluntary Counseling and Testing in relation to HIV. It means that HIV testing is **voluntary**, meaning no one can be forced to go. **Counseling** is also part of going for an HIV test. A counselor at the testing center will talk to you before and after the test to provide support and advice, as well as to answer questions you might have. Once you have received counseling, a nurse or doctor will draw a small sample of your blood for testing. When and how you receive your results depends on the type of testing center you go to.

4. Explain that if a person tests positive for HIV, he or she will then see a doctor. The doctor will determine when the person should begin taking medicine to help the body fight HIV. This medicine is commonly referred to as ARVs, or anti-retro viral treatment. This simply means that ARVs are a type of medicine that helps the body fight against HIV. ARVs strengthen a person's immune system, but they **do not** get rid of HIV.

5. Stress to the girls that ARVs are a form of treatment, but not a cure. (See *Key Terms* and write definitions on the chalkboard). **A person who takes ARVs can live many years even though he or she is HIV-positive**. This is why it is very important that people get tested for HIV—the sooner they know their status, or whether they are HIV positive, the sooner they can take ARVs and live longer.

6. Explain that if you have been infected with HIV, it important to "live positively." That means you:

   - take good care of yourself, being sure to eat a healthful, nutritious diet;
   - take your ARVs as prescribed if they are available;
   - take all precautions so that you do not transmit HIV to any other person.

14. World Health Organization, "Essential Prevention and Care Interventions for Adults and Adolescents with HIV Living in Resource-Limited Settings," (Geneva: World Health Organization, 2007).

Activity 5: Questions and Closing

Time allotted: 10 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.

2. Thank the participants for their active involvement.

3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.

4. Establish the next meeting date and time.

Scholarship students in a primary-school classroom in the Democratic Republic of Congo

EUGENE KATZIN/AED

SESSION 4:
GIRLS, WOMEN, CULTURE, AND HIV

Time allotted: 2 hours

Objectives

- Identify cultural, social, and biological factors that make girls and women more likely to be infected with HIV
- Analyze various cultural beliefs and myths that put people at risk for HIV, especially girls and women
- Identify strategies for reducing girls' and women's HIV infection risk
- Develop an activity for increasing community HIV awareness, especially how it affects women and girls

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Pieces of paper for myth exercise (See Activity 2.)
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Prepare myths for Activity 2.
3. Review activities and discussion questions.
4. Prepare answers to girls' questions from the previous session.
5. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 10 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Today's session will examine how our beliefs can often influence our behavior. Sometimes, these behaviors unintentionally spread HIV.

Activity 1: HIV's Impact on Girls and Women

Time allotted: 30 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Explain that girls and young women are especially vulnerable to HIV/AIDS. Cite the following statistics:
   - Adolescent girls and young women make up over 60 percent of all HIV-positive young people worldwide.[15]
   - In sub-Saharan Africa, adolescent girls are two to six times more likely than boys to be infected.[16]
   - Of the 11.8 million HIV-infected youth worldwide, over seven million are female.[17]
2. Ask the girls why they think girls and women have higher HIV infection rates than boys and men. Write their answers on the board and be sure to add the following points if they are not mentioned:
   - Girls are less likely than boys to have basic knowledge about how HIV is transmitted and how to protect themselves.
   - Girls and women often lack the power or authority to make decisions regarding their sexual relations and sexual health.
   - Girls who marry at a young age are less likely to be educated or play an equal role in decisions regarding sexual relations and sexual health.
   - Society accepts that older, more sexually experienced men have sex with young women or girls.
   - Cultural beliefs often emphasize women's inferior status and permit early marriage, which increases women's chances of contracting HIV.

15. UNICEF, "Multiple Indicator Cluster Survey (MICS) HIV/AIDS: Prevention of Infection Among Adolescents and Young People (last updated March 2006)," http://www.childinfo.org/areas/hivaids/young.php (accessed on 9 March, 2008).
16. Lori Ashford, "Young Women in Sub-Saharan Africa Face a High Risk of HIV Infection," http://www.prb.org/Articles/2002/YoungWomeninSubSaharanAfricaFaceaHighRiskofHIVInfection.aspx (accessed on 9 March, 2008).
17. UNAIDS et al, "Young People and HIV/AIDS: Opportunity in Crisis," (2002) http://www.who.int/hiv/pub/prev_care/en/youngpeople_hivaids_en%5b1%5d.pdf (accessed on 25 March, 2008).

- Certain biological factors make it easier for HIV to be transmitted from men to women. HIV is more easily transmitted through the vaginal walls. Young girls' vaginal lining is especially fragile and likely to tear during sexual intercourse, which creates a port of entry for HIV to enter.
- "Dry sex," or sex without natural or artificial vaginal lubrication, can create tears in the vaginal lining that increase a girl's or woman's chance of becoming infected with HIV. (Usually these tears are too small to be seen.)
- Lack of access to HIV-prevention services and methods.

3. For each reason mentioned, discuss with girls what they think girls, boys, parents, and community members can do to address the problems that make girls likely to get HIV. Examples include:
   - Educate yourself about HIV.
   - Decide not to have sex until marriage.
   - Insist that a partner have an HIV test before having sex.
   - Talk to parents about the benefits of delaying marriage.
   - Organize community events that increase people's awareness of HIV and how it affects girls and women.
   - Educate people about condom use.
   - Make sure condoms are available and remember to use them correctly every time.

Activity 2: Myths, Beliefs, and HIV

Time allotted: 70 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Certain myths or beliefs also can help to transmit HIV and "fuel" the epidemic. Explain to girls that a myth is a traditional story that explains a practice. People usually accept it without question. A belief is an acceptance that a statement is true, often without real proof. Give an example of a myth or belief in your community. (It does not have to relate to HIV.) Sometimes, however, beliefs influence people's behaviors, including risky behaviors that can lead to HIV infection.

2. Ask girls to think of various myths and beliefs associated with relationships, sex, HIV/AIDS, men, or girls' and women's expected behavior. You may wish to cite some or all of the examples below to get the group started:

Beliefs/Myths about Relationships:
A man has the right to demand sex from his girlfriend or wife.

Beliefs/Myths about Sex:
If a man or boy gets an erection, he has to have sex.

Beliefs/Myths about Women:
Women who dress "sexy" want sex, no matter what they say.
Women who say "no" to sex really mean "yes."

Myths about HIV/AIDS:
A man with HIV will be cured if he rapes a virgin girl.
Medications can cure AIDS, so it's no big deal if you get infected.
AIDS drugs are poison and are more dangerous than the HIV virus.
When you're on HIV therapy, you can't transmit the virus to anyone.

3. As a large group or in small groups, analyze each myth. Answer the following questions for each myth or belief:
   - Is the myth or belief good or bad? Why?
   - Does it have anything to do with HIV or AIDS? If so, how?
   - Does the myth or belief have a different effect on men than women?
   - Where did it come from?
   - Is it true or not true?

   Invite each small group to share its answers. Encourage other girls to provide feedback. Emphasize that the goal of this session is not to criticize or change people's beliefs, but to examine how some cultural beliefs or myths are helping to spread HIV.

Note to facilitator:
To save time and to ensure that each group discusses a different myth, you may want to come up with the myths and beliefs before the session.

Activity 3: Questions and Closing

Time allotted: 10 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 5:
SUPPORTING PEOPLE AFFECTED BY HIV/AIDS

Time allotted: 1½ hours

Note to Facilitator

One of the best ways to encourage acceptance and compassion for People Living with HIV and AIDS (PLWHA) is to invite an HIV-positive person to speak to young people. The person's story about living with HIV can be extremely powerful. Many organizations exist to support PLWHA. A health worker or someone at an HIV-testing and counseling center may be able to refer you one such organization. Contact the person to arrange a time when he or she could talk to the girls.

Objectives

- Understand the terms discrimination and stigmatization
- Discuss how discrimination impacts People Living With HIV/AIDS (PLWHA)
- Understand the significance of the AIDS red ribbon
- Learn what we can do to support People Living with HIV/AIDS (PLWHA)

Key Terms

- **Discriminate:** To treat someone differently based upon a certain characteristic
- **PLWHA:** People Living with HIV/AIDS
- **Stigmatize:** To negatively describe or identify a person or group based on a particular characteristic

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Several sheets of A4 paper (at least one per participant)
- Markers, crayons, or colored pencils
- Glue or tape
- Red cloth
- Safety pins
- Poster-sized paper
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.

2. Prepare materials for Activity 1: The Color Game. To make "stigmatization dots," use stickers or cut paper into small circles. Color the dots three different colors (red, green, and blue).
3. Make Reaction Cards. (See Activity 2.)
4. Review activities and discussion questions.
5. Prepare answers to girls' questions from the previous session.
6. Prepare slips of paper for questions. (See final session activity.)

Scholarship students at the Colegio Maria Rafols primary school in Equatorial Guinea

EUGENE KATZIN/AED

INTRODUCTION

Time allotted: 10 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
2. **Overview explanation for participants:** Explain that today's session will examine how we treat people who are **infected** with HIV, as well as people **affected** by HIV/AIDS. Make clear that:
   - People **infected** with HIV, or people living with HIV/AIDS (PLWHA), are HIV-positive. (They have the virus in their bodies.)
   - People **affected** by HIV are those whose lives may have changed as a result of the disease. (For example, a child whose father is HIV-positive can be affected by the disease due to lack of family income because the father is too sick to work.)
3. Sometimes people may discriminate on purpose against those infected with or affected by HIV/AIDS, while other times they do not even realize their actions or words discriminate or hurt another person. Remind the girls that as a community, we need to support people both infected and affected by HIV/AIDS.

Activity 1: The Color Game

Time allotted: 15 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Have participants form a circle. Tell them to close their eyes while you place a colored sticker on each person's forehead. (If you made your own color dots, use a glue stick or tape to stick them to people's foreheads.)
2. When everyone has a sticker, ask participants to open their eyes—but not touch the sticker or reveal the color of anyone else's sticker! At the count of three, they should greet people in the following way:
   - Blue dots: greet very nicely, like you are good friends
   - Red dots: ignore; do not shake hands
   - Green dots: act unfriendly
3. After a few minutes, ask the girls to return to the circle. Based on how people treated them, ask them to guess what color sticker they have. Ask girls to share how they felt during the activity. For example, **how did it feel to be ignored while other people were greeted warmly?**
4. Explain that for the purposes of this game, people with **blue stickers represent the general population**. Those with **red stickers represent people with HIV/AIDS.** People with **green stickers represent orphans** or other people affected by HIV/AIDS. The game is a way for the

girls to experience discrimination and stigmatization, the same kind that these groups often experience as a result of HIV/AIDS.

5. Explain the terms "discriminate" and "stigmatize." Ask girls if they can come up with reasons why discrimination is harmful. (*Possible answers:* People may experience fear or loneliness because friends and family stop visiting; a person may feel that they did something bad; children may drop out of school as a result of discrimination; discrimination makes people afraid to get tested for HIV because they are fearful of discrimination.)

Activity 2: Stigma and Discrimination Role-Play

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Choose one girl to play the role of a PLWHA. Remind her and the other girls that she is a PLWHA only for the purposes of this drama. Tape a sign on the person that reads "I have HIV."

2. Select four other volunteers. Give each girl one of the "reaction cards." The reaction cards should have the following written on them:

   - Reaction Card 1: Start to greet the person or touch them, then pull your hand away when you see the sign that says "I have HIV." Run away and pretend like you are washing your hands.
   - Reaction Card 2: Read the person's sign and exclaim, "You are not serious, are you?" Ask the person why she is allowed to go to school if she has a deadly disease. Tell her you are going to talk to the principal to try to get her kicked out of school before she infects other people.
   - Reaction Card 3: Read the sign. Tell the person, "Only bad people get HIV. You should not be able to worship with the rest of us." Walk away.
   - Reaction Card 4: Read the person's sign. Smile and extend your hand to greet the person. Ask the person if she would like to come over to your house to listen to music or visit.

3. Ask the volunteers not to share their reaction cards with anyone else. Ask them to leave the room and to read their card. After a few minutes, invite the volunteers back into the room. One at a time, invite each learner to act out her reaction card.

4. After each person has acted out her reaction card, discuss each situation. Ask the PLWHA how each person's reaction made her feel. Ask those in the audience if the people's reactions were based on facts about HIV, or fear and a lack of understanding.

Activity 3: Red Ribbon Activities

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask girls if they know what the AIDS red ribbon represents. Explain that the red ribbon is the international symbol for people to show their concern about the HIV/AIDS epidemic. People

wear the red ribbon to show that they care about PLWHA and are not afraid of them. The ribbon also reminds others of the need to support PLWHA.

2. Select one of the activities below to do as part of today's session. You may conduct the others as well, or conduct them as part of another session.

   - **Poster:** Students can decorate a piece of paper with red ribbons and other positive messages about HIV/AIDS. Decorate the room with their artwork, or display it at a health center or other public gathering place.
   - **Cloth pins:** Cut red cloth into short, thin strips. Fold the strips into the shape of a red ribbon. Use safety pins to fasten the ribbons to people's shirts.
   - **Greeting cards:** Use colored paper and markers to make greeting cards for PLWHA. Contact a health professional and ask to deliver them to AIDS patients, or display them at a counseling or testing center or in a hospital.
   - **Pin the red ribbon on the learner:**

     a) On a large piece of paper, draw a picture of a learner. Draw a heart (♥) in the left corner of the chest. Tape the drawing to a wall.

     b) Ask for a volunteer to stand about four meters away from the drawing. Cover her eyes with a blindfold and spin her in a circle three times. Give her a red ribbon and ask her to walk toward the drawing and stick the red ribbon on the person's heart.

     c) After the volunteer has stuck the red ribbon on the drawing, she can take off the blindfold and see where she put it. If she pins it on the heart, award a prize! Continue with other volunteers.

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 6:
THE IMPACT OF HIV/AIDS

Time allotted: 2 hours

Objectives

- Understand the impact of HIV/AIDS on a personal and community level
- Share experiences related to HIV/AIDS
- Explore strategies for making decisions that will help prevent the spread of HIV

Recommended Materials

- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation:

1. Gather materials.
2. Review activities and discussion questions.
3. Prepare answers to girls' questions from the previous session.
4. Prepare slips of paper for questions. (See final session activity.)

Note to facilitator:
If you live in an HIV/AIDS-affected community, the following activities may be painful and difficult for some participants. Be sure to explain that sharing experiences is a good way for everyone to learn about the impact of HIV/AIDS, but participants are not required to share if they do not want to. Remind girls that they should only share their own experiences, not talk about others', and that everything shared during the session remains confidential.

INTRODUCTION

Time allotted: 10 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Understanding how HIV is transmitted and what it does to the body is important, but we also need to think about how it affects families and communities. Now that girls know how HIV is transmitted and how it can be prevented, you will talk about the larger impact of HIV/AIDS. Remind the girls that they should be sensitive to other people's opinions.

Activity 1: The Effects of HIV

Time allotted: 25 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. In small groups or as one large group, ask the girls to imagine a community or a nation where 20 percent of the population is infected with HIV/AIDS. Ask them to consider the following questions:
   - **What happens to people infected with HIV/AIDS?** (*Possible answers:* They may become sad, lose hope, be ignored or stigmatized by their family and/or community, become sick, lose their job, become too weak to work or take care of their family.)
   - **What happens to their families, friends, and children?** (*Possible answers:* Their husband or wife may abandon them or may become infected; they may feel sadness and anger over death of family members; the community may stigmatize the family; family income may decrease because the infected person can no longer work.)
   - **What are the effects of HIV/AIDS on schools, hospitals, and the government?** (*Possible answers:* Loss of teachers, students, health professionals, and government employees; health facilities overwhelmed by patients in need of care; social institutions unable to cope with need because of loss of staff.)
   - **What are the effects on farmers and the supply of food?** (*Possible answers:* Decreased food production because fewer people can work the land; decreased family income; decreased nutrition because families do not have enough good food to eat; land falls into disrepair.)
   - **What do you think is the overall effect on the community?** (*Possible answers:* Community members become demoralized; order breaks down as social institutions lose staff; sense of fear, anger, or hopelessness.)

Activity 2: Sharing Experiences

Time allotted: 1 hour (depending on group size)

Recommended for Ages: 10 and older

Note to facilitator:
Due to the sensitive and often taboo nature of HIV/AIDS, learners may not want to share their experiences. Do not force anyone to participate. In place of this activity, you may consider asking a person living with HIV to come speak about his or her experience. You may show a video about HIV/AIDS, such as "Scenarios of the Sahel" or "Scenarios of Africa." See **Annex 1** for details. Other videos specific to your area may be available at health clinics, VCT centers, or the Ministry of Education.

Facilitation Steps:

1. Allow the girls to choose a partner. Invite each girl to share with her partner a story about how HIV or AIDS has affected her, her family, or her community. She does not have to share a personal experience, but her observations about what is happening in the community. Suggest the following as possible ideas: how HIV has impacted the relationships of family members, neighbors, or relatives; economic hardship as a result of HIV; stigmatization of someone with HIV; the impact of HIV at school. Allow the girls approximately 20 minutes to share their stories with each other.

2. Ask the girls to form a circle and to sit next to their partners. Ask for a volunteer to share her partner's story. Afterward, ask the group to comment.

   - How did the story make them feel?
   - Has anyone had a similar experience?
   - Is there advice or encouragement that they could give to the girl?

   Continue around the circle until each girl has shared her partner's story. If a girl does not wish to participate, simply move to the next girl.

Activity 3: Making Good Decisions

Time allotted: 20 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls to close their eyes, sit back, and relax.

2. **Ask them to imagine their lives one year from today**. Pose the following questions, pausing for several minutes after each question to allow girls time to think of an answer.

   - Will you be in or out of school?
   - Will you be living in the same place?
   - Will you have the same friends?

- Will you have a boyfriend? Why or why not? What will this person be like?
- Will you engage in any activities that may put you at risk for STIs or HIV? Why or why not?
- Will anyone in your family or any of your friends have HIV?

3. **Now ask the girls to imagine that they are 20 years old.**
   - Will you be in or out of school?
   - Will you have a job?
   - Who will your friends be?
   - Will you have a boyfriend? Where will you meet him? What will he be like?
   - Will you decide to have sex with your boyfriend? Why or why not?
   - In what ways might you be or not be at risk for getting an STI or HIV?
4. **Now ask them to imagine that they are married with children.**
   - How will you choose your husband? What will he be like?
   - How will HIV affect your life at this time?
   - How many children will you have?
   - What kind of life would you like to provide for your children?
   - How will you talk to your children about STIs and HIV?
   - How will HIV be a part of your children's lives?
5. Tell the girls to open their eyes. Remind them that the decisions they make about friends and boyfriends (and for their children) will all influence whether or not HIV affects their lives.

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 7:
PREVENTING HIV

Time allotted: 2 hours

Objectives

- Identify and analyze methods of preventing HIV

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Long piece of string or chalk (or anything else to make a dividing line on the floor)
- Markers (at least two colors)
- Several sheets of A4 papers for Activity 2
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Large, open space
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Prepare space for Activity 2.
3. Review activities and discussion questions.
4. Prepare answers to girls' questions from the previous session.
5. Prepare slips of paper for questions. (See final session activity.)

Members of a mothers' association participate in a meeting.

KADIATOU COULIBALY/WORLD EDUCATION

INTRODUCTION

Time allotted: 10 minutes

Facilitation Steps:

1. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.

2. **Overview explanation for participants:** The most important part of learning about HIV is knowing how to prevent the spread of this epidemic. Today's session will give girls the chance to think about the different ways in which HIV can be stopped.

Activity 1: HIV Prevention Strategies

Time allotted: 80 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Now that you have discussed the ways in which HIV can and cannot be transmitted, ask girls to think about ways in which they can prevent HIV transmission. Tell them that you will talk about prevention methods that can minimize contact with the four main fluids that transmit HIV.

2. Divide girls into three groups and ask each group to brainstorm prevention methods for each mode of transmission (blood contact, parent-to-child transmission, and sexual transmission). After 15 minutes, ask each group to report back to the large group. Discuss answers.

3. Begin with **blood-contact** transmission. Ask the girls to state the ways that they can minimize blood contact. Provide the following information.

   Possible answers:

   - Avoid coming into contact with another person's blood.
   - In case of injury, give the injured person a towel until you arrive at a health facility, or use latex (or rubber) gloves when performing first aid. If you must perform first aid without latex gloves, be careful not to injure yourself in the process and make sure to wash your hands afterwards.
   - Make sure to use a clean razor to shave a person's head, tattoo, or perform any other cutting procedure.
   - Ensure that health workers do not use the same needle on multiple patients.

4. Talk briefly about **parent-to-child transmission**.

Note to facilitator:
For detailed information on how to prevent parent-to-child transmission, talk to a health worker in your area or consult one of the resources listed in the annexes.

The best way to prevent parent-to-child transmission is for people to know their HIV status.

It is extremely important that a pregnant woman find out her HIV status so that she can take the necessary precautions to prevent transmission of the virus while the baby is still in the womb, or during delivery. The risk of passing HIV to the baby can be minimized the following ways:

During pregnancy: A woman should avoid getting "reinfected" with HIV, which can increase the amount of virus in her body and thus the likelihood that it will be passed to the baby. She also should avoid shock or trauma, which can damage the placenta and expose the unborn baby to the mother's blood. The woman should also be sure to take care of her body by eating healthy foods, not smoking or drinking, and getting plenty of rest. This will help strengthen her immune system and the immune system of the unborn baby. She also may take ARVs (anti-retro virals), medicine for HIV-positive people that can decrease the amount of HIV in the body. In addition, the doctor may give her medicine to take when she begins labor. This drug is a special type of ARV for pregnant women.

During childbirth: A woman should talk to her doctor about the best delivery method to avoid exposing the baby to vaginal fluid and blood, two fluids that contain HIV. The baby also will be given medication to decrease the chance of HIV infection. The baby will be tested twice for HIV, once at birth and then three months later, to determine if he or she is HIV-positive.

While breastfeeding: There are two ways a mother can avoid passing HIV to her baby through breastfeeding:

a) **Do not breastfeed:** This means that the baby will drink formula, or milk from a store, instead of breast milk. There are benefits and disadvantages of this HIV prevention method. While it is 100 percent effective in preventing HIV transmission from breast milk, formula can be very expensive. Moreover, in some areas, a baby is more likely to get sick (and even die) if he or she does not breastfeed. This is because a baby who does not breastfeed may be exposed to unclean water or may drink from bottles that have not been properly sterilized. As a result, the baby can get sick and even die from illnesses such as diarrhea.

b) **Exclusive breastfeeding:** This is a special method of breastfeeding whereby the baby consumes breast milk **only** for the first three months of life. This means that the mother cannot give her baby anything else to eat or drink besides breast milk, even water or juice. After the first three months, the mother must stop breastfeeding **completely** and not feed her baby both breast milk and other foods. There are also pros and cons to this method. While breast milk is free and extremely healthy for the baby, some mothers and babies may find it hard to provide breast milk only—and then abruptly stop after three months. Most importantly, this method is **not** 100 percent effective. Furthermore, the effectiveness of this method also can depend on the mother's health at the time she is breastfeeding.

This information is only a brief summary of the breastfeeding issue and not intended to be a recommendation for anyone. An HIV-positive mother **must** talk to her doctor to help her decide if she should breastfeed or not.

5. The majority of HIV infections are spread through **sexual intercourse** between men and women. Focus on the ways in which young people can avoid becoming infected with HIV

through sexual relations. Write the letters A, B, C, D, and E on the chalkboard. Explain that these letters are sometimes used to help people remember the different ways they can prevent HIV transmission through sexual intercourse.

a) Next to the letter A, write "Abstinence." Ask girls to define abstinence. Some girls may say it means waiting to have sex until marriage, while others might say that kissing is okay. Be sure to emphasize that sexual abstinence means **not having any type of sex: vaginal sex, oral sex, or anal sex**. Emphasize that **abstinence is the only method that is 100 percent effective** in preventing the sexual transmission of HIV from one person to another.

b) Tell them that "B" means to "Be Faithful." This means that a person has sex with **only one person**. This person also must be faithful, or not have sex with other people. (This is type of relationship is also known as "monogamous.") Besides being faithful, the person also should be HIV-negative.

c) Explain that "C" means "Condom." If a person decides to use condoms (either the male or female condom) to avoid HIV infection, he or she must use a condom **correctly** and must use a condom **every time** he or she has sex. This strategy is **not** effective if a person only uses condoms sometimes or does not use them properly. Therefore, people who choose this strategy should discuss condom use ahead of time with their partners and make sure they understand how to properly use a condom (either the male or the female version).

d) "D" means to "Delay Sex." This means that a young person decides to wait until he or she is older—and more physically and emotionally mature—before having sex. It also means that people in a relationship can decide to **delay** having sex until they have both been tested for HIV. Explain to the girls that beginning to have sexual relations early in life can put adolescents at increased risk of unintended pregnancy, HIV, and other sexually transmitted infections (STIs). Be sure to note that early pregnancy (under the age of 18) puts both mothers and their babies at higher risk for complications and even death.

e) A final method of HIV prevention, the "E" is "Early Detection of STIs." STIs create the ports of entry that HIV can pass through and infect a person. Thus, someone who has an STI is more likely to become infected with HIV if exposed to the virus than someone who does not have an STI. People who think they have an STI should seek treatment immediately to decrease their risk of HIV infection.

6. Now that you have defined the letters, lead a discussion about the four most important forms of prevention: Abstinence, Being Faithful, Condom Use, and Delaying Sexual Relations. You may do this exercise as a large group, or divide participants into three smaller groups. Each group will answer *all* of following questions in relation to one mode of prevention. After 20 minutes, invite each group to share their responses with other participants.

a) What is the chance that a person will become infected with HIV if he or she uses this method?

b) Is this method of HIV prevention acceptable in your community?

c) Do young people usually follow this method of prevention? Is there a difference between boys and girls?

d) Why would this method be a good way to prevent HIV infection?

e) Why might this method be difficult for some people?

f) What can be done to help young people follow this method of HIV prevention?

7. Emphasize that different people may choose to prevent HIV transmission in different ways at different times in their lives.

ABSTINENCE

1. What is the chance that a person will become infected with HIV if he or she practices sexual abstinence? (*Answer:* Abstinence is 100 percent effective in preventing sexually transmitted HIV infection.)

2. Is abstinence acceptable in your community?

3. Do young people usually abstain before marriage? Does this differ between boys/men and girls/women? (*Possible answers:* Girls are expected to abstain until marriage, while boys and men are allowed to have sex.)

4. Why is abstinence a good way to prevent HIV infection? Write the benefits of abstinence on the chalk board or on a piece of paper. (*Possible answers:* It is 100 percent effective in preventing HIV transmission; it prevents pregnancy; girls and boys may not be emotionally ready to have sex; it may be a culturally preferred method of HIV prevention in a given place.)

5. What can make it difficult for someone to abstain from sex? (*Possible answers:* Desire to have sex because it feels good; peer pressure; needing to have sex in exchange for money, school fees; hard for girls and women to say "no"; hard for people to abstain when they drink alcohol.)

6. What can be done to help young people abstain? (*Possible answers:* Encourage girls and build their self-esteem so they don't have sex in order to feel "worthy"; learn about other ways to show affection without having sex; assist girls in saying "no" to sugar daddies.)

BE FAITHFUL

1. What is the chance that a person will become infected with HIV if he or she is faithful to his or her partner? (*Answer:* Even if one person in a relationship is faithful, there is still a chance of HIV infection because the other person may not be faithful. However, if both partners are HIV-negative and do not have sex with other partners, there is no risk of infection through sexual intercourse.)

2. Is fidelity (the act of being faithful) accepted in your community?

3. Are people in your community usually faithful to their partners before or during marriage? Does this differ between boys/men and girls/women?

Note to facilitator:
In many communities, it is often more acceptable—and even expected—for boys and men to have several partners, while women who are not faithful are scorned. Discuss this issue.

4. Why is being faithful a good way to prevent HIV infection? (*Possible answers:* A person may have sex yet reduce the risk of getting HIV; it builds trust between partners; being faithful is more realistic than abstaining.)

5. What can make it difficult for someone to be faithful? What are some of the disadvantages of this HIV-prevention method? (*Possible answers:* Even if one partner is faithful, the other might not be faithful; it's not culturally acceptable for men to have only one partner; partners might be living apart in different places.)

6. What can be done to help young people be faithful? (*Possible answers:* Support your friends who want to be faithful; avoid alcohol; educate young people on the facts about sexual activity and things like goal-setting and self-esteem; practice communication skills.)

CONDOM USE

1. What is the chance that a person will become infected with HIV if he or she uses a male or female condom? (*Answer:* If used correctly and consistently, condoms are 99 percent effective in preventing HIV infection.)

2. Is condom use accepted in your community?

Note to facilitator:
Be sure to talk about why condoms are acceptable or not. Does this depend on the age of the person or other factors?

3. Do young people usually use condoms before or during marriage? Does this differ between boys/men and girls/women?

4. Why is condom use a good way to prevent HIV infection? (*Possible answers:* Condoms allow people to express their sexual desire for their partners; condoms are almost 100 percent effective if used correctly; condoms also prevent pregnancy and sexually transmitted infections.)

5. What can make it difficult for someone to use condoms? What are some of the disadvantages of this HIV-prevention method? (*Possible answers:* Culturally unacceptable; some boys and men refuse to use them; lack of access to condoms; lack of knowledge about how to use them correctly; people forget to use them; lack of access to female condoms; leaving the decision in the hands of the male partner.)

6. What can be done to help young people use condoms? (*Possible answers:* Make sure condoms are made available to young people; demonstrate correct condom use; discourage stigmatization of condom use.)

If you have not already discussed condoms, ask girls to talk about condom use in your community.

- Where can condoms be purchased?

- How difficult or easy is it to purchase a condom?
- How much do condoms cost?

It is also useful to demonstrate the proper way to use a condom, or invite a health worker to discuss proper use of condoms.

DELAY HAVING SEXUAL RELATIONS

1. What is the chance that a person will become infected with HIV if he or she delays having sexual relations? (*Answer:* Young people are at no risk of becoming infected with HIV as long as they delay having sexual relations until both partners can be tested. Once they receive their test results, partners should be faithful and choose the appropriate methods to avoid unintended pregnancies and STIs including HIV.)

2. Is delaying having sexual relations acceptable in your community? Is there a difference in what is acceptable for boys and for girls?

Note to facilitator:
Be sure to talk about why delaying sex is acceptable or not. Does this depend on the age of the person or other factors?

3. Why would delaying sexual relations be a good way to prevent HIV infection? (*Possible answers:* Because beginning to have sexual relations early in life can put adolescents at increased risk of unintended pregnancy, HIV, and other sexually transmitted infections (STIs); because as young people get older, they get more mature and more responsible. Be sure to note that early pregnancy [under the age of 18] puts both mothers and their babies at higher risk for complications and even death.)

4. Why might delaying having sexual relations be difficult for some people? (*Possible answers:* Desire to have sex because it feels good; peer pressure; needing to have sex in exchange for money, school fees; hard for girls and women to say "no"; hard for people to abstain when they drink alcohol.)

5. What can be done to help young people delay having sexual relations? (*Possible answers:* Support your friends who want to be faithful; avoid alcohol; educate young people on the facts about sexual activity and things like goal-setting and self-esteem; practice communication skills.)

Activity 2: A Bridge to an HIV-free Future

Time allotted: 20 minutes

Recommended for Ages: 13 and older

Facilitation Steps:

1. Explain to girls that even though people may have the information about HIV transmission and prevention, they still can be at risk for HIV infection. This is because they sometimes make poor decisions or engage in risky behavior. The next activity will help them think of ways they can make healthy decisions and avoid HIV infection.

2. Invite participants to stand on one side of the room. Use a piece of chalk or string to create a wide "river" in front of the girls. (Draw two lines several meters apart. The space in the middle is the "river"; the spaces on either side are the "banks" of the river.) Tell the girls that the side they are standing on represents the current situation in your community. The other side of the river represents a healthy, HIV-free life. In the river, there are stones and there are crocodiles, just like in life there are things that can help us get to a positive, healthy, and happy future—as well as things that cause problems or cause us to make bad decisions.

3. Ask girls to think of all of the "crocodiles" in young people's lives. What are some of the things that can lead young people to make poor decisions or engage in risky behaviors? What can prevent them from making good decisions? Have each person who contributes write her response on a piece of paper (in the same color marker, if possible). Then place it into the river. (*Possible answers:* unemployment, peer pressure, lack of role models, cultural beliefs, no support from parents, pregnancy, sugar daddies, no access to condoms.)

4. Now ask girls to think of all of the "stepping stones" that can help young people avoid the crocodiles. What do young people need to make good decisions and stay HIV-free? Have each girl write her contribution on a piece of paper (make sure the paper or the marker is a different color than the "crocodiles") and place it in the river. (*Possible answers:* role models, jobs, support from parents, access to health care and HIV testing, knowledge about STIs, etc.)

5. Ask volunteers to cross the river, being sure to step only on the stones.

6. Now take out several of the stepping stones. Ask two or three volunteers to try to cross the river. Point out that it was difficult (and perhaps even impossible) to cross the river without all the stepping stones.

7. Summarize by emphasizing the importance of searching out "stepping stones" to help girls make good decisions.

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.

2. Thank the participants for their active involvement.

3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.

4. Establish the next meeting date and time.

MARTHA SALDINGER/WINROCK INTERNATIONAL

A group of scholarship students in Life Centre's program at the Reaipela Primary School in South Africa

ADDITIONAL ACTIVITIES:

- Invite someone with HIV/AIDS to speak to the group. This can be a particularly powerful way to educate young people. You also can invite someone who has been affected by HIV/AIDS to share his or her experiences.
- Obtain copies of the videos *Scenarios of the Sahel* and *Scenarios of Africa*. The videos contain 10-minute plays written and filmed by African youth. After each short film, lead a discussion. You may also show the videos for a large group (boys and girls) and have the girls who have gone through the entire HIV/AIDS module lead the discussion. For more information, visit www.globaldialogues.org, or email scenarios@fasonet.bf
- Learn more about voluntary counseling and testing (VCT) for HIV. Visit an HIV-testing clinic or have someone from a testing center come speak to the group about the testing procedure.
- As a large group or in smaller groups, ask the girls to select an issue about HIV that particularly interests them, such as a myth about how HIV is transmitted or the effect that HIV has on a family. Have them develop a short skit that addresses this issue and put on a performance at their school or in the community. Submit the skits to a radio station, newspaper, or Global Dialogues' *Scenarios from Africa*.

- Come up with an activity that will increase community awareness about HIV, especially its effect on girls and women. Ideas include: talking to a women's group; doing an activity from an earlier session with other classmates or groups; or performing a skit about HIV at school. Have the girls develop a concrete plan and work with them to implement it.
- Conduct a survey of people's HIV/AIDS knowledge and beliefs. Help the girls to write a questionnaire, including questions such as, "Can HIV can be transmitted by drinking from the same cup as someone who has HIV?" Have the girls conduct the survey in their community, compile the results, and announce them publicly, making sure to provide correct information about transmission and prevention.
- Contact a community organization that provides HIV/AIDS education or services. Ask a representative to speak to the girls about their work and the HIV/AIDS situation in the community.
- Provide girls with the names of books, organizations, and web sites with HIV information. Go online and visit some of the web sites listed in **Annex 1**.
- Invite a health educator to talk to students about how to properly use a condom.

NOTES:

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GIRLS' MENTORING RESOURCE GUIDE

MODULE 9: JOBS, PROFESSIONS, AND CAREERS

Session 1: What is Considered Women's Work? 1
Session 2: Career Exploration 6

MARTHA SALDINGER/WINROCK INTERNATIONAL

Around the world, girls and women perform a variety of jobs, including farming, cooking, caring for the sick, and maintaining a home. This type of work is usually labeled "women's work" and is not something women are usually paid to do. However, in the past few decades, more and more women have used their education and skills to enter professional fields such as teaching, business, medicine, law, and engineering, just to name a few.

While millions of women now work outside the home, girls often do not realize the many different types of jobs that are available. They may think they only have the choice between becoming a teacher or a nurse, and are not encouraged to become a principal, a doctor, or something else completely. Moreover, they are not aware of the educational requirements needed to attain a particular job. For example, a girl may not realize the importance of taking science classes if she wants to become a nurse. Often girls are discouraged from pursuing a career and from studying certain subjects that will help them attain particular jobs, especially ones not traditionally associated with women.

The following sessions are designed to get girls thinking about the types of work that girls and women do, learn about a job or career that they would like to have some day, and learn about the various educational and other requirements for a job they like.

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SESSION 1:
WHAT IS CONSIDERED WOMEN'S WORK?

Time allotted: 1½ hours

Objectives

- Discuss the work that girls and women do in the community
- Identify differences and similarities between men's and women's work
- Explore the changes in women's work throughout time

Key Terms

- **Men's work:** Work or jobs that are usually performed by men
- **Non-traditional job:** For women, it means a job that is not usually performed by women; for men, it would mean a job not usually performed by men.
- **Women's work:** Jobs that are usually performed by women, such as cooking and taking care of children

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Container (bag, basket, box, etc.)
- Several sheets of A4 paper (See Activity 1.)
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Prepare Activity 1. Write each job on a separate piece of paper. Put the pieces of paper in a small container or basket. Remember to think about both paid and unpaid jobs. (Jobs in your area might include: tailor, banker, business owner, brick maker, animal herder, bus driver, mechanic, teacher, farmer, religious leader, nurse, midwife, doctor, politician, accountant, hair braider, head of an office, food vendor, shop owner, school director/ principal, secretary, meat seller, vegetable seller, cook, launderer, etc.)
3. Review activities and discussion questions.
4. Prepare answers to girls' questions from the previous session.
5. Prepare slips of paper for questions. (See final session activity.)

Tanzanian scholarship recipients at the Kelema Balai Primary School display their new book bags.

ALEXI ZEKAS/AED

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Explain to the girls that they will be talking about the types of work that women and girls do in your community. You will discuss women's jobs and careers. You will explore how women's work has changed in the past several years, why women work, and its advantages and disadvantages.

Activity 1: What Do Girls and Women Do in Your Community?

Time allotted: 40 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Using the list of jobs you put in the small container, invite a girl to draw a slip of paper out of the container and read the job to the class.

- Ask her, "Is a woman capable of performing this job?"
- Ask how many participants agree with her answer.

Record the number on a chalkboard or a piece of paper. Also record the number of girls who do not agree with her. Repeat the exercise until all of the slips of paper are selected.

2. Ask them to explain their answers. Why are women capable or not capable of certain jobs? Then lead a discussion using the following questions as guidelines:

- **Why are certain jobs performed mostly by women? Why do mostly men perform certain jobs? Do you agree with these ideas about the jobs that men and women are supposed to do?** (*Possible answers:* It's not culturally "appropriate" for women to perform certain jobs; women are not "strong" enough; women do not have the necessary skills or experience; women or men do not want to perform certain jobs.)
- **Is there a difference between who performs a job and who is actually capable of performing the job?** (*Answer:* Yes. Men and women are almost always capable of the same jobs, but who performs them is usually based on gender roles and beliefs.)
- **Is there any situation in which a woman would not be able to do a job a man does, or a man would not be able to do a job that a woman does? If so, why?** (*Possible answers:* Some women may not be able to perform a job that demands a large amount of physical force, but many women do hard physical labor, like farming. Be sure to emphasize that very few jobs can only be performed by men or by women.)
- **Is there anything in common among the jobs that women usually perform? What about the jobs that men usually perform?** (*Answer:* Women have usually performed jobs that require a lower education level, pay less, and can be done inside or near the home or farm.)
- **Why do you think the work women do is not usually paid work?** (*Possible answers:* Women's work is not valued as much as men's work; women are expected to perform household chores and child care and these are not seen as work.)

Activity 2: Women's Work

Time allotted: 35 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. **Changes in women's work over time:** Ask the girls if they think that the work that girls and women do has changed over time. Ask them about the types of jobs that their grandmothers did. Then ask them to think about the work their mothers or aunts did or do. Now ask them to think about the work that they are expected to do and the work they would like to do when they are older. Remember that "work" can include jobs performed both inside and outside the home.

- Are the jobs the same? Different?
- What do people think about the changes in women's and girls' work?
- Do you agree or disagree with these various opinions?

Note to facilitator:
You will probably discover that girls and women are still expected to do the majority of cooking, cleaning, and housework, although more job opportunities outside the home are now open to girls and women.

2. **Working outside the home.** Ask the girls to think specifically about work that women do outside the home. Why do some women choose to work outside the home? Ask them to share their ideas. They may say:
   - Women want to earn money to support their families.
   - Women want to earn money to be able to support themselves.
   - Women want to have their own money to spend or invest.
   - Women are interested in a particular subject or career.
   - Women want to help others.

3. Do men and women spend their money on different things? Why or why not? What kinds of things do men spend their money on? What types of things do women spend their money on?

4. What are the **advantages** and **disadvantages** of working outside the home? Make a list on the board.
   - What do you think about women who work outside the home?
   - What do people in your community think about a woman who works outside the home or who earns her own money? Do you agree or disagree with how the community thinks?
   - Do you plan to work outside the home some day? Why or why not?

A scholarship student smiles after receiving her scholarship materials.

WORLD EDUCATION/APMSS

Activity 3: For the Next Session

Time allotted: 5 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls to think about their skills and interests. Ask them to make a list of the things they enjoy doing and/or think they are good at. Tell them to put their name on their own list.
2. Collect the girls' lists and bring them to the next session.

Activity 4: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 2:
CAREER EXPLORATION

Time allotted: 2 hours

Objectives

- Understand the difference between a job and a career
- Identify girls' skills and interests
- Identify jobs or careers that the girls would like to have in the future
- Identify community resources for learning more about various jobs and careers
- Plan a meeting with people who have various jobs

Key Terms

- **Career:** A chosen field of work, or profession, usually followed for several years
- **Job:** A particular task or activity, usually done in return for payment
- **Profession:** A chosen field of work requiring specialized knowledge and often long and intensive academic preparation

Recommended Materials

- Chalkboard and chalk, or flipchart paper and markers
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Review activities and discussion questions.
3. Read through the options for career activities in Activity 4 and make the appropriate preparations accordingly.
4. Prepare answers to girls' questions from the previous session.
5. Prepare slips of paper for questions. (See final session activity.)
6. Be sure to bring the girls' lists of skills and interests from the last session.

Parents and mentors play an active role in girls' education.

WORLD EDUCATION/AED

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Today's session will focus on exploring the girls' skills and interests, as well as their interest in particular jobs. You will also plan a meeting with someone in a particular career.

Activity 1: What Do You Like to Do?

Time allotted: 30 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Distribute the girls' lists of skills and interests that they completed during the last session. Have they written down all the things that they like to do and/or are good at? These activities can

include skills they learn at school, such as mathematics, writing, speaking another language, science, etc. Their lists can also include skills they use outside school in their homes or communities, such as cooking, hair braiding, playing a certain game, or being a leader.

2. Tell the girls to find a partner or to form groups of 3–4 people. Ask the girls to share their ideas with their partner or small group. Encourage the girls to add items to their lists if someone in the group reminds them of a particular skill.

3. Once the groups have finished sharing, invite them to form one circle. Tell the girls that you asked them to write down their interests and skills so that they can begin to think about a particular job or career that fits their skills and interests. Explain to them that a good way to start thinking about a future job or career is to think about what you are good at, or what you like to do.

Activity 2: Job versus Career

Time allotted: 15 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls if they know the difference between a job and a career. After they provide answers, explain that a job can refer to a specific task, such as cooking lunch or watering a garden. For example, a person might say, "It is my job to cook lunch every other day for my family." A job can also be something that a person does to earn money over a short or long period of time.

   A career, however, is a chosen profession, usually performed over several years. A career often requires that a person become educated in a particular subject. For example, a person might have a career in medicine. This means that they have done various jobs in the medical field. The person might have worked as a nurse, then as a hospital administrator, then as a health educator. Thus, a person can find many jobs within the same career. Usually, people select a career because they are interested in a particular subject.

Activity 3: What Job or Career Would You Like to Have?

Time allotted: 45 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask each girl to write a list of at least three jobs or careers that she thinks she might like to have when she is an adult. Remind the girls to review their lists of skills and interests. Next to each job, ask them to write why they are interested in it. (It might be because they are interested in the subject, or because the job pays well.) Ask each girl to also think about whether the job could lead to a career in a particular subject.

2. Write a list of basic skills required for most jobs, such as:

Reading	Leadership skills
Writing	Ability to work as a team
Mathematics or science	Language skills
Speaking skills	Ability to work individually
Creative-thinking skills	Computer skills
Decision-making skills	Problem-solving skills

3. Ask participants to write a list of skills and the types/levels of education they think are necessary for a particular job or career.

Invite volunteers to share their responses. Make a list on a chalkboard (or on a piece a paper) of the various jobs and careers mentioned.

Note to facilitator:
If you are doing this activity with young girls, or prefer not to have the girls write their answers, you could have the girls discuss these questions as a group.

Positive messages at a mentoring event in Botswana reinforce scholarship students' self-esteem.

MARTHA SALDINGER/WINROCK INTERNATIONAL

3. **Make a list of the jobs that interest the girls.** Discuss the following with the girls:

- Are there any jobs or careers the girls mentioned more than once?
- Are there any similarities in the jobs?
- Are the jobs or careers all found in your community?
- Are the jobs considered "women's work" or "men's work"?
- What skills and education are necessary for those jobs?
- How does a person acquire the skills necessary for a particular job or career?

4. Ask the girls:

- Have you discussed your plans for your future with your family?
- What future do they see for you? Is it different from your own?
- If so, how might you let them know about your ideas?

Give the girls a chance to discuss this as a group and to brainstorm ways to communicate their interests or career goals with their family. Ask the girls if they would like to act out a skit in which a girl discusses her future with her family.

Scholarship students answer questions during a mentoring session.

AED/INSTITUT TECHNIQUE ET PROFESSIONNEL DE KIKWIT

Activity 4: Learning about Different Jobs and Careers

Time allotted: 20 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. The best way to learn about a job or career is to meet with someone who has that job, preferably at the person's place of employment. There are several ways in which you can assist the girls in organizing a "career day" or similar event that allows them to learn about career options. Discuss the three activities listed below with the girls. Decide which career exploration activity would work best for your group. If you decide to plan a "Take Our Daughters to Work Day," follow the steps listed in **Annex 7**. Use the rest of the session to begin planning your event.

2. **Invite female professionals to discuss their careers.** Make a list of various professionals in your community. Contact them and explain that you would like them to talk about their particular professions with a group of girls you mentor. Tell the women how important you think it is that girls be exposed to female role models.

Note to facilitator:

If you are not able to find a woman who performs a job that many girls are interested in, you may think about asking a man to come talk to the girls. Be sure he understands that you want girls to know that they are capable of performing the job.

Depending on your group's size and the amount of time available for the event, you may want to invite several women to share their experiences. Help lead the discussions with questions such as:

- How did you decide to pursue a particular career?
- What do you like best/least about your job?
- What skills are necessary for your job?
- What kind of education is required for your job?
- What advice do you have for girls who are interested in pursuing this career?

If several women attend the session, girls may be able to break into small groups to continue more personal discussions. Afterwards, they can report to the group about what they learned.

3. **Plan field trips to various job sites.** Taking the group directly to job sites is an excellent way to give girls hands-on experience with various jobs and careers. Contact people who you think would be interested in taking the girls on a field trip to their place of employment. Use the discussion questions listed above to guide your discussions with the people you visit.

4. **Plan a "Take Our Daughters to Work Day."** Similar to taking the girls to visit various job sites, "Take Our Daughters to Work Day" is a daylong field trip that allows each girl to spend an entire day with a woman or adult mentor and learn about her job. Every year in April, girls around the world participate in an activity called "Take Our Sons and Daughters to Work." The event, which

was originally named "Take Our Daughters to Work Day," was designed by the Ms. Foundation for Women in the U.S. to give girls the opportunity to learn more about jobs and careers. Now, millions of girls and boys spend a day at work with a parent, friend, or adult mentor.

Activity 5: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time, if the meetings will continue.

Kenyan scholarship students wave and laugh.

MELISSA CRUTCHFIELD/AED/AURORA ASSOCIATES INTERNATIONAL

ADDITIONAL ACTIVITIES:

- Write a skit addressing community attitudes toward women working outside the home or in nontraditional careers.
- Invite a speaker to discuss specific skills, such as public speaking or interview skills.

- Teach students how to write a curriculum vitae, or CV. Obtain an example of a CV and have girls write their own CV based on the skills and jobs they currently have or would like to have. (This is also a good activity to do as part of the optional module on computers and internet technology found in Annex 8.)
- Help a girl arrange an internship during a school vacation. This will give her hands-on experience with and in-depth knowledge about a particular career path.

NOTES:

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MICHELLE SALMEN/WINROCK INTERNATIONAL

A student in front of his home in São Tomé and Príncipe

WINROCK INTERNATIONAL/STEP UP

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SESSION 1:
DRUGS AND ALCOHOL

Time allotted: 4 hours

(This session was adapted from PATH's Tuko Pamoja: Adolescent Reproductive Health and Life Skills Curriculum, pp. 90–95, and the US Peace Corps Life Skills manual, pp. 165–168; changes were made based on field testing and partner feedback.)

Objectives

- Identify the drugs adolescents most often abuse and some signs of substance abuse
- List some of the reasons that young people use alcohol or drugs
- List some of the consequences of alcohol or drug abuse
- Help students think of better ways of dealing with challenges rather than using drugs and alcohol

Key Terms

- **Drug:** a substance other than food intended to affect the structure or function of the body
- **Drug abuse:** nonmedical use of drugs that gets in the way of a healthy and productive life
- **Addiction:** medically, it is the use of a habit-forming substance characterized by tolerance (the need over time for greater amounts of a drug to be used to produce the same effect) and by physical symptoms that occur if the substance is taken away.
- **Psychological dependency:** occurs when a drug has been used habitually and the mind has become dependent on the effects, leading a person to feel unable to do without the drug.
- **Overdose:** taking more of a drug than is recommended. In some cases, this can result in death or serious health problems. Some people overdose accidentally, while others do it on purpose to end their lives.

Materials Needed

- Chalkboard and chalk, or flipchart paper and markers
- Pieces of paper for students' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Gather materials.
2. Read through all activities and discussion questions before implementing them with the students so that you understand the purpose and process of the session.
3. Contact a local health professional, social worker, or counselor and invite him or her to come to help facilitate Activity 1 with the students. Be sure to go over the activity beforehand with your guest speaker so that he or she can prepare and will know what to discuss.
4. Drama is an excellent way to teach about drugs and alcohol. Work with another mentor to include a couple of short skits demonstrating the effects of alcohol or drugs. You may also wish to ask students to perform a skit or two at the end of the session when they have learned the facts about drugs and alcohol.
5. Prepare slips of paper for questions. (See final session activity.)

JULIA MILLER/WINROCK INTERNATIONAL

Girls and boys brainstorm in small groups at a mentoring session on preventing drug and alcohol abuse.

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker or energizer game with the group. (See **Annex 2** for ideas.) If you had the participants submit questions anonymously at the end of the last session, read the questions aloud and provide answers. Ask the participants if they have any more questions and provide answers.

2. Explain to students that this session will give them an understanding of the reasons why some young people use drugs and alcohol, as well as some of the negative consequences of drug and alcohol abuse. It will help students to think of better ways of dealing with challenges than taking drugs and alcohol. Finally, it will also encourage students to think of ways that they can discourage drug and alcohol abuse in their communities.

Activity 1: Drugs and Alcohol—Definitions and Health Impacts

Time allotted: 1 hour

Recommended for Ages: 10 and older, single-sex or coed groups

Note to facilitator:

You may wish to invite a local health professional, social worker, or drugs counselor to come help facilitate this session. This person will probably have detailed information about drugs and alcohol and may make a strong impression on students. Make sure that any of the people facilitating this

session are not known abusers of drugs or alcohol as that would undermine the message of the session. Be sure to stress the types of drugs and alcohol that are prevalent in your area.

Facilitation Steps:

1. Write the terms "drug" and "drug abuse" on the chalkboard. Ask participants to define them. After students have offered their responses, explain that a drug is a substance other than food intended to affect the structure or function of the body, and that drug abuse is the nonmedical use of drugs that gets in the way of a healthy and productive life.

2. Ask participants to name the various drugs that people—especially adolescents—use in their communities.

Note to facilitator:
If students do not respond, you may divide them into small groups for brainstorming.

Write the responses on the chalkboard or flipchart paper. Ask students to name the local or other popular terms for drugs as well.

Make sure that the list includes:

- Medical drugs (i.e., pain relievers, antibiotics, sleeping pills, etc.), which are often abused or used by a person who was not prescribed them by a doctor for a medical condition. Medical drugs include those distributed in the pharmacy and those sold in markets or in the street.
- Alcohol (including commercial beer, wine, and spirits, as well as locally made types of alcohol)
- Marijuana
- Inhalants (things one breathes in such as the fumes from glue, petrol, lighter fluid, etc.)
- Tobacco (including cigarettes and other forms such as snuff)
- Cocaine (a stimulant that people sniff, inject with a needle or smoke)
- Caffeine (the stimulant in coffee, tea, and cola drinks)
- Heroin (a highly addictive drug that is injected, sniffed, or swallowed)
- Valium (a medical drug that is often misused)
- Any locally available stimulants such as kola nuts, khat, etc.
- Amphetamines (stimulants including methamphetamines, "speed," etc.)
- Plants that can cause intoxication or hallucinations (i.e., certain types of leaves or mushrooms), which in certain cultures may be associated with traditional rituals

Ask students if anyone knows what *addiction* means. Define the terms *addiction, overdose, and psychological dependency* for students using the "Key Terms" section at the beginning of this session.

3. You may want to review with students the following physical effects of some drugs and alcohol, particularly the first three substances:

SUBSTANCE	PHYSICAL EFFECTS
Alcohol	Alcohol poisoning (characterized by violent vomiting, unconsciousness, difficulty breathing, dangerously low blood sugar, seizures, and even death); damages the brain, heart and liver; worsens depression and diabetes; causes many car accidents.
Tobacco	Causes cancer, lung disease, and heart attacks, which can kill you; harms athletic performance; can shorten your life by 10 years or more; can cause fertility problems and problems for babies of smokers; aggravates asthma and makes you more likely to fall sick with pneumonia and bronchitis; endangers the health of those around you who must breathe in your smoke.
Marijuana	Like tobacco, it can cause heart attacks, lung cancer, and respiratory illness; by affecting the brain, marijuana can cause distorted perceptions, impaired coordination, difficulty in thinking and problem solving, and problems with learning and memory. This damage can last over time.
Cocaine	A powerfully addictive drug that is snorted, sniffed, injected, or smoked. Injecting cocaine can bring about severe allergic reactions and increase the risk of contracting HIV/AIDS and other diseases. Cocaine abusers can suffer a temporary state of serious mental illness including hallucinations. Cocaine users can also experience heart attack or stroke, which may cause sudden death. Certain famous athletes in the West have dropped dead at a young age from cocaine use. Mixing cocaine and alcohol is particularly dangerous.
Inhalants (petrol, etc.)	Long-term use can cause muscle spasms and tremors or even permanent difficulty with basic actions like walking, bending, and talking; can cause problems in the brain affecting the ability to learn new things, to solve complex problems, to plan ahead; can also cause loss of consciousness, heart damage, liver failure, and muscle weakness.
Heroin	A highly addictive type of painkiller that acts on the brain and spinal cord; can cause a person to stop breathing and die; users who inject heroin run the risk of contracting HIV/AIDS; regular users develop tolerance, meaning that they must have more and more of the drug; withdrawal symptoms include: drug craving, muscle and bone pain, insomnia, diarrhea and vomiting, spasms, and even death.
Valium	Causes drowsiness/depression, poor judgment, slurred speech, dizziness, slowed pulse and breathing, lowered blood pressure; confusion, addiction; damages coordination, memory, judgment; particularly dangerous when mixed with alcohol.
Amphetamines like "speed"	Stimulants that can cause rapid heart rate, irregular heartbeat, and permanent, stroke-producing damage to small blood vessels in the brain; can also cause high blood pressure, shortness of breath, nausea, vomiting, and diarrhea; can also increase body temperature, which can be fatal if not treated rapidly.

4. Explain that this session is not about the medical uses of drugs, but rather about the misuse and abuse of drugs. Point out that some substances, such as vitamins and medicines, promote health when used as prescribed, but that they can be dangerous if abused or taken in excess.

   You may also want to point out the dangers of buying and using drugs that are sold in the streets, markets, or anywhere outside of official pharmacies. These drugs are often expired and/or do not contain the ingredients they should. They may either do nothing to treat your condition or they may cause further health problems. As a rule, you should not take medicines without a prescription from a health care provider and you should always buy them in a pharmacy.

   Finally, you may also wish to ask students about the use of traditional medicines in the community. You may wish to point out that while some traditional medicines may be harmless, others can be quite powerful and that students should be aware of the drugs or medicines they are consuming, whether traditional or modern.

Activity 2: Drugs and Alcohol—Myths and Facts

Time Allotted: 1 hour

Recommended for Ages: 10 and older, single-sex or coed groups

Facilitation Steps:

1. Introduce the next activity by explaining that you are going to see how much students know about drugs and alcohol by playing a game. Read the following instructions out loud:

   - Two teams will compete by saying whether a statement is a myth or a fact.
   - Teams get a point for each correct answer.
   - Individual team members will listen to a statement about drugs or alcohol. After I read the statement, the team member should talk with his or her team to decide on the best answer. You have 30 seconds to answer.

2. Divide students into two teams and have them move to the different parts of the room. Ask the first person from one of the teams to step forward. Read him or her a statement from the myths and facts about drugs and alcohol from the list below. Ask the student to talk with team members to decide whether the statement is a myth or a fact. If the answer is correct, give the team a point and mark it on the chalkboard. **Be sure to read aloud the explanations given for each answer from the sheet.**

3. Ask members of the other team to have a student step forward and repeat the process. Read the next statement on the list and continue going back and forth between teams until all the statements have been read and answered.

   Myths and Facts about Drugs and Alcohol

   - **Drugs and alcohol help people handle their problems better.**

     Myth. Drugs and alcohol may help people forget about their problems or temporarily reduce the pain caused by problems, but the problems do not go away and often get worse with the use of drugs and alcohol.

Scholars attend a study session.

TRACEY YUDITSKY/WINROCK INTERNATIONAL

Myths and Facts about Drugs and Alcohol (Continued)

- **Marijuana makes a person stronger.**

  Myth. Some people in Africa believe that marijuana will make them stronger and therefore better at doing hard labor, such as working in the fields. In fact, smoking marijuana decreases lung capacity, which means that a person can not work as hard, and it also often decreases motivation and coordination.

- **Coffee, tea, and certain soft drinks contain drugs.**

  Fact. Coffee, tea and cola drinks contain caffeine, which is a stimulant. Caffeine is addictive; headaches often occur when people stop using it.

- **Marijuana makes a person smarter.**

  Myth. Marijuana use causes difficulty in thinking and problem solving, and problems with learning and memory. Marijuana's negative effect on learning and memory can last for days or weeks after using it. As a result, someone who smokes marijuana every day may be functioning at a lower intellectual level all of the time.

- **Alcohol is more addictive than tobacco.**

  Myth. Although one can become addicted to alcohol, tobacco (through the drug nicotine, which is found in it) is actually a more powerfully addictive drug.

- **Alcohol is an addictive substance, not a drug.**

  Myth. Alcohol is a drug, as is any substance that affects the mind or body. It is also addictive.

- **Drinking beer is the same as drinking spirits (liquor).**

  Fact. Ethyl alcohol affects anyone who drinks it, and ethyl alcohol is present in beer, as well as in wine and spirits. Drinking beer can cause the same problems as wine or spirits.

- **Smoking cigarettes every now and then is not harmful.**

  Myth. As soon as people start smoking, they experience yellow staining of teeth, bad breath, and a shortness of breath that may affect their physical performance. Addiction to nicotine is quick. People who smoke for any period of time have a greater risk of lung cancer and other lung diseases, cancer of the tongue and throat, and heart disease.

- **Alcohol lowers people's sexual response.**

  Fact. Alcohol, like cocaine and other drugs, actually decreases a person's sexual response. The drug may make you less shy with a sexual partner, but it causes problems such as a loss of sexual feeling. Most importantly, alcohol or drugs may cause a person to engage in risky sexual behavior that he or she would not do when sober.

- **Alcohol becomes a problem only after years of use.**

  Myth. When a person takes a drink, alcohol immediately slows reaction times, affects balance, and decreases coordination. That means an athlete, student, musician, or driver may lose normal ability and his or her performance will be affected.

- **International tobacco companies are targeting women in developing countries so that they will begin to smoke more.**

  Fact. The tobacco industry has already succeeded in getting many men in the developing world to smoke. Now the industry is using Western images of independence, equality with men, glamour, and sophistication to break down traditional taboos against female smoking.

- **It is hard for a young person to become an alcoholic.**

  Myth. Because young people have a higher proportion of body water and lower proportions of fat and muscle than adults, they are affected more by alcohol—and become dependent on alcohol—more quickly than adults.

- **Many drug addicts say that smoking marijuana was the first step in their path to addiction.**

  Fact. According to both researchers and many drug addicts themselves, marijuana often leads to the use and abuse of other more dangerous drugs.

- **Alcoholism is a weakness, not a disease.**

  Myth. Alcoholism is a disease, just as diabetes or epilepsy are diseases. But alcoholism can be treated, so getting help is important.

- **Inhalants (like sniffing petrol) are basically harmless.**

  Myth. Using inhalants (like sniffing glue and petrol) can be extremely dangerous because they can permanently damage organs like the liver, brain, and nerves.

- **Alcohol affects all people the same way.**

  Myth. Factors that influence how alcohol affects the individual include: body weight, amount of alcohol consumed, the presence of other drugs in the system, the general health of the individual, and how recently she or he has eaten.

- **When people stop smoking, they can reverse some of the damage to the body.**

  Fact. If there is no permanent heart or lung damage, the body begins to heal itself when a person stops smoking. It is never too late to stop smoking.

- **Cigarette smoking will hurt a pregnant woman, but will not hurt her baby.**

  Myth. Pregnant women who smoke may give birth to premature babies or babies with low birth weight. Drinking alcohol during pregnancy can have similar negative effects on an unborn child.

- **The same numbers of people die at an early age from smoking in developing countries as in the developed world.**

  Fact. Right now the 4.9 million early deaths due to smoking are about evenly divided between developing and industrialized countries, but experts believe the percentage of deaths occurring in the developing world will jump to 70% by 2020.

4. Now congratulate the winning team and ask students to return to their seats. Discuss the following points with participants:

   - What types of drugs or substances do they think are the most dangerous and why?
   - Which myths do your friends believe? Which myths are the most harmful and why?

A mentor demonstrates an important point to the boy he mentors.

JULIA MILLER/WINROCK INTERNATIONAL

Activity 3: Drugs and Alcohol—Consequences and Signs

Time Allotted: 30–45 minutes

Recommended for Ages: 10 and older, single-sex or coed groups

Facilitation Steps:

1. Introduce the activity by telling students that they have already learned about some of the physical effects of using drugs. Now they will discuss some of the possible consequences or effects of alcohol and drug abuse in their lives. Divide students into groups and ask them to make a list of the negative consequences or effects of drug and alcohol abuse. Give them 5–10 minutes to come up with their responses. Have mentors circulate throughout the room while the students work to make sure that students understand the activity. Then ask a representative from each group to stand up and read their group's list aloud. Make a list of students' responses on the chalkboard or flipchart paper.

   These consequences might include:

   - Poor decision-making
   - Embarrassing, foolish behavior
   - Losing friends and the respect of others
   - Getting HIV/AIDS or an STI
   - Failure in school, having to drop out of school
   - Trouble with the police
   - Problems in the family
   - Addiction to tobacco, drugs, or alcohol, which often turns into a lifelong struggle
   - Wasting money, and eventually stealing to support a drug or drinking habit
   - Having unwanted and/or risky sexual relations
   - Early and/or unwanted pregnancy, or fathering a child
   - Suffering rape or physical abuse, or abusing others
   - Causing a car accident
   - Mental illness
   - Death
   - Suicide

2. Ask students to think about the consequences of drug and alcohol abuse and gender: in other words, the consequences on men and women. Divide students into two groups. Ask one group to draw a picture of a man who abuses drugs and alcohol and to list the consequences on his life. Then ask the other group to draw a woman who abuses drugs and alcohol and ask them to list

the consequences on her life. Give students five minutes, then ask them to share their drawings and lists with the whole group. Ask students the following questions:

- Are the consequences of drugs and alcohol on men and women the same or different? If the consequences are worse for men or for women, why is that?
- Do both men and women abuse drugs and alcohol in your community, or does one sex do it more than the other? If so, why?

Point out that studies show that in sub-Saharan Africa men tend to abuse alcohol more than women do. (See Activity 1 from the session on Young Men, Gender, and Health.) Let the boys know that avoiding destructive and risky behaviors such as drug and alcohol abuse is one of the most effective ways that they can improve their health and well-being.

3. Explain to students that in addition to these broad consequences of drugs and alcohol on people's lives, there are often specific signs of substance abuse, such as changes in behavior. Read the list below to students.

Note to facilitator:
You may wish to write the list on the chalkboard or flipchart and have students copy it into their notebooks.

- Sudden changes in personality without a known cause
- Loss of interest in favorite hobbies, sports, or other activities
- Sudden decline in performance or attendance at school or work
- Changing friends and not wanting to talk about these new friends
- Forgetfulness or difficulty paying attention
- Lack of attention to normal personal hygiene or grooming
- Sudden aggression, anger, nervousness, or moodiness
- Increased secretiveness, unwillingness to answer questions

Tell students that if they start to observe such signs in a friend or family member, they may want to talk to him or her to see if the person is having problems with drugs or alcohol and, if so, to seek help.

Let students know that there may be support groups for teens who are dealing with a parent or other close family member or friend who is abusing drugs and/or alcohol. One such organization with local groups in South Africa is called Al-anon/Alateen. In other countries, religious institutions, social services offices, or other organizations may also offer similar support groups. Alcoholics Anonymous and other groups offer counseling for those people who want to seek help for their own alcohol or drug problems.

MARTHA SALDINGER/WINROCK INTERNATIONAL

These boys preform a skit about the importance of education for the community at an event.

Activity 4: Drugs and Alcohol—Reasons and Alternatives

Time Allotted: 1 hour

Recommended for Ages: 10 and older, single-sex or coed groups

Facilitation Steps:

1. Ask participants some of the reasons that young people in the community start drinking, smoking, or using drugs. Cite a few examples, such as boredom or loneliness. Divide students into small groups and ask them to brainstorm a list of ideas with the group. Give the groups 5–10 minutes to come up with their answers.

   While the students are working, have the other mentors circulate around the room to make sure that the students are on the right track. After students have finished working, have a representative of each group stand up and read his or her group's answers aloud. Write the responses on the left side of a piece of flipchart paper or chalkboard. Leave room to write on the right as you will fill in that space in the next step.

   Possible answers may include:

   - Boredom
   - Loneliness
   - Poverty or feelings of hopelessness
   - Anxiety
   - Family members drinking or using drugs
   - Trying to forget problems

- Trying to act grown up or sophisticated
- Peer pressure
- Trying to "prove you're a man"
- Curiosity
- Poor self-esteem
- The belief in some communities that one can gain magical powers through drug use
- Cultural traditions that involve various substances (coffee or tea rituals; the consumption or giving of kola nuts or khat as a gift; the consumption of palm wine, millet beer, or other locally produced alcoholic beverages as a part of traditional rituals or gatherings)

2. Now ask students to think of more healthy, positive ways that students can address the reasons that they might take drugs or alcohol. Tell them, for example, that if a young person is bored, instead of doing drugs, the person could find an activity he or she enjoys such as reading, playing on a team, or singing in a choir. Ask students what else the person could do to deal with their boredom in a healthy way (for example, learning an income-generating activity or volunteering in the community).

Divide students into small groups again and assign each group two to three reasons that people often use drugs or alcohol (from the list below or from the list that you have already made with the students), and ask each group to think up two or three positive things that students could do instead. Give one or two possible answers as examples to ensure that students understand.

Mentors practice performing a skit on the dangers of drug and alcohol abuse.

JULIA MILLER/WINROCK INTERNATIONAL

REASON PEOPLE USE DRUGS/ ALCOHOL	BETTER WAY TO DEAL WITH THE PROBLEM
Boredom	**Possible answers:** Find activities you enjoy that do not involve alcohol or drugs, such as sports, a hobby, or a small income-generating activity; study harder in school; help others in your family or community.
Loneliness	**Possible answers:** Join a sports team or club; become active in your school, community, or religious institution.
Poverty or feelings of hopelessness	**Possible answers:** Learn a small income-generating activity; talk to friends or a mentor about your feelings; seek help from a mentor, family member, school counselor/teacher, social worker, or religious counselor.
Anxiety	**Possible answers:** Think about the root causes of your worries and try to address those issues; use stress relief techniques [see the Girls' Mentoring Resource Guide module on stress management]; seek help from a mentor, family member, school counselor/teacher or social worker.
Family members drinking or using drugs	**Possible answers:** Talk to your mentor, friends or trusted extended family members; seek help from a school counselor, social worker, or religious counselor; join a support group in your community.
Trying to forget problems	**Possible answers:** Try to resolve directly the problems themselves; use stress relief techniques; get help from friends, family, or a trusted teacher.
Trying to act grown up or sophisticated	**Possible answers:** Find other ways to build your self-confidence and self-esteem; realize that substance abuse is not responsible adult behavior; talk to an adult that you admire and seek his or her advice; observe adults who have drug or alcohol problems and ask yourself if they are "sophisticated" or respected.
Peer pressure	**Possible answers:** Avoid people who pressure you to do things you do not want to do; find different friends; avoid situations in which you will be pressured to do things you do not want to do.
Trying to "prove you're a man"	**Possible answers:** Find more positive ways to earn respect, such as being a supportive member of your family and community, excelling in school, music, sports, art, etc.

Curiosity	**Possible answers:** Learn about and understand the dangers of drug and alcohol abuse to counter curiosity.
Poor self-esteem	**Possible answers:** Pursue things that you are good at and enjoy; avoid measuring yourself against others; set realistic goals and pursue them; befriend people who make you feel good about yourself instead of people who are critical or negative.
Belief that one can gain "magical" powers through drugs or alcohol	**Possible answers:** Ask your local health agent if it is possible to gain magical powers.
Cultural traditions involving drugs and alcohol	**Possible answers:** Think about alternatives that do not involve alcohol, drugs, or other stimulants when participating in traditional gatherings or gift-giving; talk to community members about trying to find more positive ways to celebrate traditions.
[Insert your students' reasons]	**[Ask students to think of positive ways of dealing with the reason stated.]**

Have each group read their responses aloud and write them to the right of each reason. Encourage students to comment on the responses and add other ideas if they have them.

3. Lastly, ask students how they can help friends who are misinformed about drugs and alcohol use. Encourage them to speak to others and, if possible, plan an awareness-raising event including drama, poetry, songs, and dance to get the message out in the community.

   If you have time, ask students to develop a brief skit demonstrating how a student deals with a problem by using drugs and alcohol and then one showing how a student deals with the same problem in a positive way.

Activity 5: Questions and Closing

Time Allotted: 5 minutes

Facilitation Steps:

1. Ask participants to summarize key points. Provide an additional summary as needed.
2. Thank the students for their active participation.
3. Ask participants if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the students to write down any questions they have. They should not write their names on the papers. Have the students place their questions in a box, basket, or envelope as they leave.

ADDITIONAL ACTIVITIES:

- Have students role-play the negative consequences of drugs or alcohol as well as things they can do or say to counter peer pressure to use drugs or alcohol. Encourage students to perform the role-play for other students or youth in the community.
- Encourage students to do a "problem tree" exercise on drugs and alcohol with other youth in the community. Have them draw the tree on flipchart paper and write drug and alcohol abuse on the trunk. Have them facilitate a discussion in which their peers suggest the consequences of such abuse and write them onto the leaves of the tree. Then have scholars ask their peers what the root causes are and write these onto the roots of the tree. Finally, have scholars share strategies for avoiding drug and alcohol abuse, based on what they have learned in this session.
- Bring in a social worker or counselor who specializes in drug and alcohol abuse to talk with students about the subject.
- A social worker or counselor may know a recovering abuser of drugs or alcohol who would be willing to speak to students about his or her personal experiences. Testimonials are very valuable to teens, allowing them to ask questions from someone who has direct knowledge of the dangers of drugs and alcohol abuse.
- If you feel it is appropriate and if you know of a police officer who specializes in anti-drugs education, invite him or her to speak to the students about the negative consequences and potential legal problems resulting from drug sale and use.
- Discuss a newspaper article, radio broadcast, television show, or movie that deals with drug and/or alcohol abuse.
- Ask if there is a group of students that would like to volunteer to research local community resources for young people with substance abuse problems (such as counseling services, rehabilitation clinics, support groups, etc.) and have them report on their research to the other students.
- Students can read more about these issues at: http://www.kidshealth.org/teen/drug_alcohol/

SESSION 2:
YOUNG MEN, GENDER, AND HEALTH

Time Allotted: 5½ hours

(This session was adapted from Kaka Wa Leo: Working with Young Men to Promote Gender Equity and Health, FHI/Promundo's Program H manual for Tanzania, pp. 27–45; changes were made based on partner feedback and observations made during field testing.)

Objectives

- Enable students to think about the links between the way that young men are raised to act and the health risks they face
- Encourage students to think about young men's health in their communities and ways to decrease risky behaviors
- Introduce or review awareness and knowledge of the male and female reproductive systems
- Teach basic hygiene and self-care for boys

Key Terms

(See Activity 3.)

Materials Needed

- Chalkboard and chalk, or flipchart paper and markers
- Slips of paper for Activities 1, 3, and 4
- Pens or pencils for students
- Flipchart paper, tape, markers
- Pieces of paper for students' questions (See final session activity.)
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Prior to Activity 1, write each of the "Gender and Health" questions from the activity on a slip of paper (one question per piece of paper). To find the questions, turn to Activity 1.
2. Prior to Activity 3, write each body part from the men's and women's reproductive systems on a separate piece of paper. Then write the description of each part on a separate piece of paper. Prepare large drawings of the male and female reproductive systems on flipchart paper.
3. Prior to Activity 4, write each question from the "Common Questions about Young Men's Reproductive Health" on a separate slip of paper.
4. Read through all activities and discussion questions before implementing them with the students so that you understand the purpose and process of the session.
5. You may wish to contact a local health professional and invite him or her to come to help facilitate Activities 3 and 4 with the students. Be sure to go over the activities beforehand

with your guest speaker so that he or she can prepare and will know what to discuss.

6. Depending on your situation, you may also wish to inform local authorities (such as a village chief and/or leader of the parents' association at school) of what you are going to discuss with the students and sensitize these authorities so that they will understand the importance of your efforts and be supportive of them.

7. Prepare slips of paper for questions. (See final session activity.)

Scholarship students at the Obra de Caridade da Criança Santa Isabel orphanage in Angola

MICHELLE SALMEN/WINROCK INTERNATIONAL

Mentors can play a strong role in boys' lives.

JULIA MILLER/WINROCK INTERNATIONAL

INTRODUCTION

Time Allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker or energizer game with the group. (See **Annex 2** of the *Mentoring Resource Guide* for ideas.) If you had the participants submit questions anonymously at the end of the last session, read the questions aloud and provide answers. Ask the participants if they have any more questions and provide accurate responses.

2. Explain to students that this session is designed to give students an understanding of the consequences of some young men's health decisions and to get students to think about ways they can discourage risky behaviors.

Activity 1: Caring for Oneself: Gender and Health

Time Allotted: 1½ hours

Recommended for Ages: 13 and older, boys or coed groups

Note to facilitator:
Activity 1 can be done either with boys or with boys and girls together. Activities 2, 3, and 4 are for boys, however.

Facilitation Steps:

1. Review the concept of "gender" with the students. Remind the students that gender can be defined as the different ways that your community expects girls and boys, and men and women, to act and the different tasks they perform. If necessary, ask participants to list the different

chores that boys and girls in your community perform and make a list of them on the chalkboard or flipchart paper. Then discuss the different ways men and women act in your community. Explain that these differences are due to gender.

Note to facilitator:
If necessary, review the explanation of gender roles in the Mentoring Resource Guide, Module 2, Session 1.

2. Next, divide participants into 3–4 small groups and distribute the pieces of paper with the "Gender and Health" questions (see below) that you have written. Each group should receive at least two questions.

"Gender and Health" Questions

1) Who has a shorter lifespan?

2) Who is more likely to die from murder?

3) Who is more likely to die in road accidents?

4) Who is more likely to die from suicide?

5) Who is more likely to kill?

6) Who is more likely to consume more alcohol and get drunk more often?

7) Who is more likely to die from alcohol abuse?

8) Who is more likely to have sexually transmitted infections?

9) Who is more likely to have more sexual partners and more unprotected sex?

10) Who is less likely to seek health services?

3. Explain to the teams that there are three possible answers to each question: men, women, or both. Ask them to discuss each of the questions and to try to come up with the answers as a group. Allow 5–10 minutes for the groups to discuss the questions. As the groups discuss their answers, write the questions on the chalkboard.

4. Read the first question out loud. Ask the group that had that question for its answer and write it on the chalkboard or flipchart paper. Ask the group to explain its answers.

5. Repeat this process with each question. After the groups have presented all of their responses, explain that **the correct answer to each question except #8 is MEN.** Review each question individually, presenting some of the statistics that are included in the answers below and posing the following questions for each health issue:

   - Did you know that men are more at risk of this health problem?
   - Why do you think this is true?
   - How do the ways that men and boys act contribute to this health problem? How does gender affect this problem?
   - Is it possible for young men to avoid this health problem? How?

Be sure to encourage the participants to think about the behaviors and lifestyles associated with the health problem and how they might be prevented or changed.

Note to facilitator:
Possible answers are included below only to help you guide the discussion. Answers for your own particular culture may vary. Be sure to allow for different answers and contributions from participants.)

"Gender and Health" Answers

1) Who has a shorter lifespan? Men

In sub-Saharan Africa, the life expectancy for men is slightly under 45 years, and the life expectancy for women is slightly more than 46 years. Globally, the life expectancy for men is 63 years and 66 years for women.[1]

*(**Possible gender explanations:** Men die younger than women from many of the causes listed here: murder, suicide, alcohol abuse, road accidents, and risky sexual behavior; and they are less likely to get medical attention.)*

2) Who dies more from murder? Men

In sub-Saharan Africa, nearly six out of every 100 deaths among men of all ages are due to murder. Among women, nearly two out of every 100 deaths are due to murder. Globally, approximately eight out of every 100 deaths among men of all ages are due to murder. Among women, two out of every 100 deaths are due to murder.[2]

*(**Possible gender explanations:** Men commit more violence and thus die more often from violence; men are often raised to "be tough" and not to resolve their differences through dialogue; men drink more alcohol and then resort to fighting; men travel to dangerous places and stay out later at night than women.)*

3) Who dies more from road accidents? Men

Globally, 28 in every 100,000 men and 11 in every 100,000 women die from road accidents. In other words, almost three times as many males as females die from road traffic injuries.[3]

*(**Possible gender explanations:** Men travel more often than women and more often drive vehicles; men are raised to take more risks and so perhaps drive faster than women; men drink more alcohol than women and therefore have accidents.)*

4) Who dies more from suicide? Men

In sub-Saharan Africa, the suicide rate for males in 2000 was 6.7 per 100,000, roughly double that of females at 3.1 per 100,000. Globally, 60% of suicides were committed by men in 2002.[4]

*(**Possible gender explanations:** Men are not encouraged to talk about their problems or ask for help; men are more prone to violence; men drink and take drugs more than women and so may resort to suicide more often.)*

1. World Health Organization
2. WHO World Report on Violence and Health, 2002
3. WHO World Report on Violence and Health, 2002
4. The World Bank Group, Disease and Mortality in sub-Saharan Africa, second edition

5) Who kills more? Men

Throughout the world, men carry out the majority of violence, including murder.[5]

*(**Possible gender explanations:** Men are often raised to "be tough" and not to resolve their differences through dialogue; men drink more alcohol and then resort to fighting; men are encouraged to become soldiers and fight wars.)*

6) Who consumes more alcohol and gets drunk more often? Men

In a 1998 study in Tanzania, approximately 24 out of every 100 men and six out of every 100 women reported having consumed alcohol on six or more occasions during the previous month. The quantity of alcohol consumed on the last occasion was twice as high among males compared to females. Globally, men have a higher incidence of periodic excessive drinking.[6]

*(**Possible gender explanations:** Men are not encouraged to talk about their problems and so may drink more as a result; men have more money and free time available to them than women so they can afford to buy alcohol; men feel pressure to buy alcohol for other men as a way to seem powerful.)*

7) Who dies more from alcohol abuse? Men

Globally, among young people aged 15–29, males are more likely than females to die from disorders linked to alcohol abuse.[7]

*(**Possible gender explanations:** See the reasons cited above.)*

8) Who has more sexually transmitted infections (STIs)? Women

Reliable statistics on the prevalence of STIs in sub-Saharan Africa are rare, but studies estimate that women have higher rates of STI prevalence. This may be in part because women's anatomy makes them more vulnerable to STIs and because women's STIs are more readily detected during pregnancy consultations.[8]

*(**Possible gender explanations:** Women and girls are often not able to persuade their male partners to use a condom; men consult health providers less often than women do, so they could spread diseases for a long period before getting treatment; also, because men get health care services less often, statistics on their STIs would be harder to collect.)*

9) Who has more sexual partners? Men

In Zambia, approximately 30 out of every 100 sexually active young men (age 15–24) and four out of every 100 sexually active young women reported having more than one sexual partner in the past year. In Mozambique, 39% of young men had more than one partner, and 8% of women. In Lesotho, the figures were 36% and 9%, respectively.[9]

*(**Possible gender explanations:** Men are encouraged to have more sexual partners to seem more "masculine"; men are usually allowed more freedom in society to go out and socialize; men drink more alcohol, which encourages risky sexual behavior; polygamy allows men more legal sexual partners than women.)*

5. Archer, 1994
6. Alcohol consumption in the rural population of Misungwi Subdistrict in Mwanza Region, Tanzania. Journal of Studies on Alcohol, 1998, 59:146–151, and the WHO Global Status Report on Alcohol, 2004
7. Kaka Wa Leo: Working with Young Men to Promote Gender Equity and Health, Family Health International (FHI) in the United States and Tanzania and Instituto Promundo
8. WHO Global Report on the Prevalence and Incidence of Selected Curable Sexually Transmissible Infections, 2001
9. Zambia DHS Indicator Survey, 2001–02; Mozambique DHS, 2004; Lesotho DHS, 2004

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Students pose for a photo after a mentoring session on good hygiene for boys.

10) Who is less likely to seek health services? Men

Globally, men are less likely than women to seek health services than women.[10]

*(**Possible gender explanations:** Men are not encouraged to talk about their health problems; men view health issues as "women's issues"; men do not get pregnant so they are not forced to seek health services as often as women; health services and health campaigns often target women, but do not involve men and fathers as much.)*

6. Wrap up the discussion by asking the following questions:

- Do young men and women take care of their bodies and health in the same way? How do young men take care of their health?
- When men are ill or sick, what do they do? Do they usually look for help as soon as they feel ill, or do they wait? When women are ill or sick, what do they do?

7. Close the activity by letting participants know that the majority of the causes of death for young men are associated with the often self-destructive behaviors that many men practice. They are therefore often avoidable.

Around the world, men are pressured to act in certain ways. For example, men often take more risks, have more sexual partners, are more aggressive, or are violent in their interactions with others—and all of these behaviors put them and their partners at risk. It is important for young men to think about the ways that they put themselves at risk.

10. UNAIDS, 2001

Explain that boys are often raised to believe that "real men" do not worry about their health and do not to seek help when they feel stress. Being able to talk about one's problems and to seek support are important ways to protect oneself against various negative behaviors, such as substance use, unsafe sexual behavior, and involvement in violence. By thinking about and questioning the way gender affects boys, young men can learn how to take better care of themselves and to realize that health is not just a matter for women.

Activity 2: Good Hygiene Practices for Young Men

Time Allotted: 1 hour

Recommended for Ages: 10 and older, boys

Note to facilitator:

In the following three activities, you will need to speak of the reproductive systems and genitals of men and women. In some cases, words for all of these parts may not exist in the local African languages. In addition, some mentors and students may feel uncomfortable speaking of these body parts in the local language. You may therefore want to teach Activities 3 and 4 in the national language—i.e., English, French or Portuguese. If you teach these body parts in the national language, be sure you review the material with the students afterwards in the local language and make sure all students understand the content.

Facilitation Steps:

1. Introduce the activity by telling participants that they are going to discuss the ways that boys can improve their personal hygiene to protect their health and well-being.
2. Ask the students: *What is hygiene?* Explain that hygiene is "conditions or practices, such as cleanliness, that promote health." Next ask students: *What kind of personal hygiene should men practice?* Then ask the boys what they know about the various subjects below. After each of their answers, read the explanation given about how to maintain good personal hygiene.

Note to facilitator:

You may wish to divide boys into small groups to brainstorm hygiene tips in all of these areas. You may also wish to post these points on a flipchart or on the chalkboard and have students copy the main points in their notebooks.

Washing the Body

Washing the body helps one to stay clean, avoid infection, and avoid becoming sick. Bathe with clean water and soap once or twice per day. Start by washing the cleanest parts of the body, such as the face, and work your way towards the dirtiest parts, such as the feet. Wash hands with soap before and after meals. Washing one's hands with soap after using the toilet is very important to prevent a variety of illnesses and parasites, including serious ones such as cholera and hepatitis. Washing the face at least twice a day with soap and water can help keep acne away or make it less severe.

Smelling Good

Use a locally available product for smelling good under your arms. This can include natural products such as lemons or certain plant leaves or tree oils, or deodorant soap or baby powder.

Note to facilitator:

You may want to brainstorm all of the local plants and trees that can be used to smell good and to moisturize the skin. This is a very effective way of helping boys to realize that it does not take a lot of money to stay clean and take care of one's body.

Hair

Shampoo your hair regularly to keep it clean. Every day or every two or three days or once a week is fine. Boys should talk to a parent, an older brother, or another adult whom they trust about shaving. Not all men shave. This depends on culture and choice. When using a razor on your face or head, make sure that it is new and not used by others. Do not share razors since dirty razors can transmit HIV/AIDS if blood is accidentally drawn.

Teeth and Mouth

Use what is most common in your country to clean the teeth twice a day, including before bed each night. In many sub-Saharan African countries, chewing sticks or twigs from neem trees (or other types of trees) are used, but toothbrushes may also be available. Cleaning teeth helps avoid cavities or rotted teeth. Also avoid sugary sweets and soft drinks, since they cause cavities. Using toothpaste with fluoride can also help to strengthen your teeth. In many countries, ash and salt are used as toothpaste.

Underwear

Wear clean underwear every day to avoid infection and to keep the genital area clean. Wearing clean underwear will also help boys keep their trousers clean and smelling good.

Genital Area

It is important to wash and clean the penis every day. Wash the scrotum, between the scrotum and the thighs, in between the buttocks, and the anus with soap and clean water every day. For uncircumcised boys, it is important to pull back the foreskin and gently clean this area. Being uncircumcised is not in and of itself unhygienic, but uncircumcised boys and young men do need to take extra care in their hygiene. For all boys, it is important to wash and clean the penis and the area around the anus every day. Tell boys that if they find a lump or swelling in their testicles, they should try to visit the nearest health center as such symptoms can be caused by a variety of conditions, some of which are easily treatable and some of which may require more serious medical attention.

Using a Latrine

Try to use a latrine whenever possible when urinating or defecating. This will keep you and your community healthier. If you do not have access to a latrine, it is always best to bury your fecal matter afterwards to keep flies away and limit the spread of diseases. Use pieces of newspaper or leaves to wipe yourself after defecating. This will help to keep your clothes cleaner and smelling better.

Washing your Clothes

If possible, it is best to wash your clothes after each time you wear them. Wearing clean clothes will keep you smelling good and will reduce your chances of getting infections of the skin and intestinal tract.

Clipping your Fingernails

Keep your fingernails short and be sure to clean underneath them to avoid infections of the skin and intestinal tract. Eating food with dirt under your nails increases your chance of getting sick.

3. Ask boys if they have any further questions on the subject of good hygiene. Conclude the activity by asking boys how they can help their brothers and friends to improve their personal hygiene. Encourage boys to share this information with their family and peers.

A scholar attends a mentoring session on boys' health.

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Activity 3: Men's and Women's Reproductive Systems

Time Allotted: 2 hours

Recommended for Ages: 13 and older, boys

Note to facilitator:

Prior to the activity, write the men's and women's anatomy terms presented in this activity on small slips of paper (one term per slip). On other slips of paper, write the description of each of these body parts as presented in this activity below (one term per slip). You will also need to draw large diagrams of the male and female reproductive systems based on the drawings included in this activity, with each body part indicated with a line and/or number. Draw them onto the chalkboard or onto flipchart paper. Do NOT write the name of the body part on your large diagrams. Tape the flipchart paper with the diagrams to a wall or to the chalkboard.

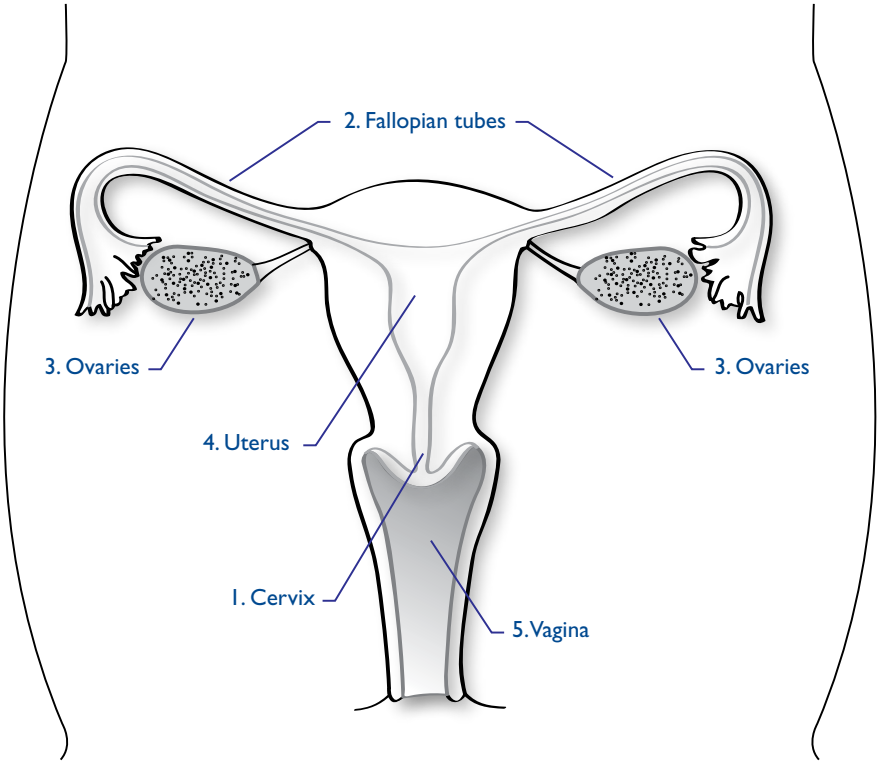
It is important that both mentors and students fully understand the value of teaching this information, which many students in sub-Saharan Africa may not get in school. By understanding how men's and women's bodies work, students can protect their health and well-being as well as avoid negative outcomes such as unwanted pregnancies and sexually transmitted infections (STIs) including HIV/AIDS. Boys will also be able to become more responsible husbands and fathers later in their lives. Finally, you should stress the value of delaying sexual activity until boys are out of school and mature enough to assume all the responsibilities that go with sexual activity, such as family planning, the need to protect oneself and one's partner from STIs and HIV/AIDS, and the need to support one's partner and child should a pregnancy occur. You may wish to have a local health agent present to assist you in facilitating this activity. You may also want to have male mentors, rather than female mentors, facilitate this activity, but female mentors are certainly welcome to be present and may have valuable contributions to add to the discussion.

Facilitation Steps:

1. Introduce the next activity by explaining that you are going to see how much students know about men's and women's bodies. Explain that it is important for boys to know about both their own bodies and those of girls and women so that they can avoid negative outcomes such as unwanted pregnancies and sexually transmitted infections such as HIV/AIDS. Tell them that knowing this information will also make them more responsible husbands and fathers later in life.

2. Divide students into two groups. Give one group the pieces of paper with the names and descriptions for the male reproductive system. Give the other group the set of pieces of paper with the names and descriptions for the female reproductive system.

WOMEN'S REPRODUCTIVE SYSTEM



Women's Anatomy Terms

1) Cervix: The lower, narrow portion of the uterus, which opens into the vagina

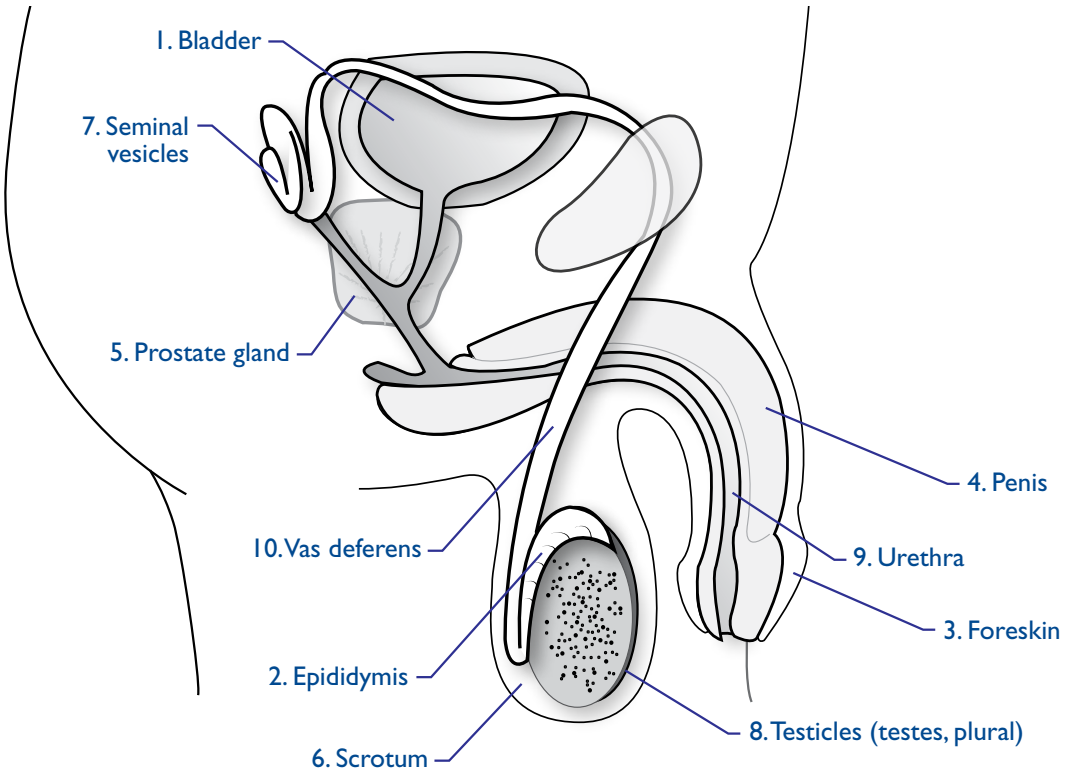
2) Fallopian tubes: Tubes that carry the egg from the ovaries to the uterus

3) Ovaries: Two glands that contain thousands of eggs

4) Uterus: Small, hollow, muscular organ where the fetus develops before birth

5) Vagina: The passageway from the uterus to the outside of the body

MEN'S REPRODUCTIVE SYSTEM



Men's Anatomy Terms

1) **Bladder:** Sac where urine is stored before leaving the body

2) **Epididymis:** Organ where sperm mature after they are produced in the testicles

3) **Foreskin:** The skin that covers the head of the penis

4) **Penis:** External male organ through which semen or urine leaves the body

5) **Prostate gland:** Gland that produces a thin, milky fluid that enables the sperm to swim and become part of the semen

6) **Scrotum:** Pouch of skin behind the penis that holds the testicles

7) **Seminal vesicles:** Small glands that produce a thick, sticky fluid that provides energy for sperm

8) **Testicles (testes, plural):** Male reproductive glands that produce sperm. They also produce a hormone called testosterone, which is responsible for male characteristics such as facial hair, tone of voice, and muscles.

9) **Urethra:** Canal that carries urine from the bladder (the place where urine is collected in the body) and sperm from the testicles to the opening at the end of the penis

10) **Vas deferens:** A long, thin tube that transports sperm away from the epididymis

3. Tell each group to read over the words and descriptions they have received and match the name of each body part with its function or description. Give groups ten minutes to do this.

4. Ask the groups to present each body part with its function or description. Then ask them to identify the body part on the large diagram and to come to the chalkboard or flipchart and tape the papers with the name and description onto the correct spot on the diagram. Invite the participants to ask questions and make corrections if body parts are incorrectly described or identified.

5. When discussing the woman's reproductive system, explain that every female is born with thousands of eggs in her **ovaries.** The eggs are so small that they cannot be seen by the naked eye. Once a girl has reached puberty, an egg matures in one of her ovaries each month and then travels down a **fallopian tube** on its way to the **uterus.** This monthly release of an egg from the ovary is called **ovulation.** The uterus prepares for the egg's arrival by building up a thick and soft lining. If the girl has had sex in the last few days before she ovulates, by the time the egg arrives in the fallopian tube, there might be some sperm waiting to unite with the egg. If the arriving egg is united with the sperm (called **fertilization**), the fertilized egg travels to the uterus and attaches to the lining and remains there for the next nine months, growing into a baby. If the egg is not fertilized, then the uterus does not need the thick lining it has made to protect the egg. It sheds the lining, along with some blood, body fluids, and the unfertilized egg. All of this flows through the **cervix** and then out of the **vagina.** This flow of blood is called the "period" or **menstruation.**

Note to facilitator:

For more information on these processes, see the Girls' Mentoring Manual Resource Guide, Module 6: Adolescence, Reproduction, and Relationships. You may also wish to do Activity 2, Session 2, from Module 6 "Pregnancy Prevention True or False" quiz with the boys.

6. When discussing the man's reproductive system, explain that from puberty on, **sperm,** the male sex cells, are continuously produced in the **testicles** (or **testes**), which are found inside the **scrotum.** As the sperm mature, they move into the **epididymis,** where they remain to mature for about two weeks. The sperm then leave the epididymis and enter a tube called the **vas deferens.** This tube passes through the **seminal vesicles** and the **prostate gland,** which release fluids that mix with the sperm to make **semen.** During the sudden discharge of semen known as **ejaculation,** the semen travels through the **penis** and out of the body by way of the **urethra,** the same tube that carries urine. The **urethral** or **urinary opening** is the spot at the end of the penis from which a man urinates or ejaculates.

7. Ask if the students have any further questions. Then conclude the discussion with the following questions:

   - What were the most difficult organs to identify? Why?
   - Do you think it is important for young men to know the name and function of the male organs? Why?
   - Do you think it is important for young men to know the name and function of the female organs? Why?

- Do young men generally have information about these topics? Why or why not?

Point out that many young men do not know much about their own bodies, and this lack of knowledge often has negative effects on their hygiene and health. Let them know also that it is important to have information about the female reproductive system so that young men can be more involved later in life in discussions and decisions about family planning and reproductive health matters.

Finally, be sure to let students know that they should be careful how and with whom they share the information that they have learned. Students should not discuss sensitive topics in public or with large groups of people.

Activity 4: Common Questions about Young Men's Reproductive Health

Time Allotted: 1 hour

Recommended for Ages: 13 and older, boys

Note to facilitator:
The following lesson contains some topics that are considered taboo in certain cultures. However, these are questions often posed by boys around the world, and it is important to give accurate information so that boys will not be anxious or misinformed. Like the previous activity, this activity is best facilitated by male mentors, and you may wish to have a health agent present to answer further questions.

Facilitation Steps:

1. Tell boys that you are going to discuss some issues that some people may consider to be sensitive, but that they need accurate information about their bodies in order to become responsible and healthy adults.

2. Divide boys into small groups and distribute the slips of paper with the following questions on them. Ask each group to come up with answers to the following common questions that adolescent boys often have regarding their reproductive system:

   Q. Can semen and urine leave a man's/boy's body at the same time?

   A. Some boys worry about this because the same passage is used for both urine and semen. A valve at the base of the urethra makes it impossible for urine and semen to travel through this tube at the same time.

   Q. What is the right length of a penis?

   A. The average penis is between 11 and 18 centimeters long when it is erect. There is no standard penis size, shape, or length. Some are fat and short. Others are long and thin. There is no truth to the idea that a bigger penis is a better penis, so boys need not worry.

   Q. Is it normal to have one testicle hanging lower than the other one? Is it a problem for the penis to curve a little bit?

   A. Most men's testicles hang unevenly. It is normal for a boy or man to have a curving penis. It usually straightens out during an erection.

Q. What are those bumps at the head of the penis?

A. The bumps are glands that produce a whitish creamy substance. This substance helps the foreskin slide back smoothly over the head of the penis. However, if it accumulates beneath the foreskin, it can cause a bad smell or infection. It is important to keep the area under the foreskin very clean at all times.

Q. Is it normal to get erections?

A. Erections are a hardening of the penis that occurs when tissue inside the penis fills with blood. Erections go away on their own or after ejaculation, the release of sperm through the small hole in the tip of the penis. Sometimes boys ejaculate at night while sleeping, sometimes called a "wet dream." This is normal. Erections may be caused by sexual excitement, but they may also happen for no reason, sometimes in a public place. Even though you may think it is embarrassing, try to remember that most people will not even notice the erection unless you draw attention to it. Because erections usually aren't controllable, there is not much you can do about them. As a boy advances through puberty, the frequency of unexpected erections and wet dreams should decrease.

Q. What is masturbation?

A. Masturbation is rubbing, stroking, or otherwise stimulating one's own sexual organs to get pleasure or express sexual feelings. Both men and women can relieve sexual feelings and experience sexual pleasure through masturbation. Some people have religious and cultural objections to masturbation. However, there is no scientific evidence that masturbation causes harm to the body or mind. Masturbation is only a medical problem when it does not allow a person to function normally or when it is done in public. (Note to facilitator: The most important message to communicate to students is that masturbation is a safe sex practice that does not transmit HIV/AIDS.)

Q. Will wet dreams or ejaculation make a boy lose all of his sperm?

A. No. The male body makes sperm continuously throughout its life.

3. Ask the different groups to give their answers and then read aloud the explanation provided. Be sure to clear up any myths or misinformation the boys may have and ask them if they have any other questions they would like to pose. You may find that boys have a lot of questions about issues such as fertility, circumcision, local myths about sexuality that they may have heard, etc.

Note to facilitator:

Depending on local traditions and your awareness of health issues in the area, you may wish to discuss the issue of male circumcision; you may also be questioned by boys on this subject. You might want to explain that while decisions regarding circumcision are often influenced by religion and/or ethnicity, there is growing interest in it as a way to combat HIV transmission. In fact, some recent studies have suggested a potential health benefit of male circumcision in relation to female-to-male sexual transmission of HIV. If boys raise this issue, you should stress that:

- Being circumcised does not guarantee protection against HIV. Some men mistakenly believe that it is a kind of "vaccine" against getting HIV, but circumcised men can still become infected. To be really protected, and in order to protect their partner(s), men must still use condoms (and practice fidelity and abstinence).

- Circumcision is dangerous if it is performed by untrained practitioners or under unsanitary conditions. Circumcision can also transmit HIV if many boys are circumcised at once with the same unsterilized cutting instrument. If circumcision is practiced under such circumstances in your community, you should encourage the boys to speak to a community leader or health professional about taking steps to reduce risks for boys.

It may be a good idea to invite a health professional to speak to the class about circumcision if it is an issue in your community and/or if the boys wish to hear more about it.

4. Then wrap up the discussion by asking the questions below:

- Where can young men in your community go to ask questions about their health or to seek services for health problems?
- What can boys do in their own lives to take better care of their health? What can we do to encourage other young men to take better care of their health?

This scholar from northern Malawi is one of the top students in his class.

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Activity 5: Questions and Closing

Time Allotted: 5 minutes

Facilitation Steps:

1. Ask participants to summarize key points. Provide an additional summary as needed.
2. Thank the students for their active participation.
3. Ask participants if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the students to write down any questions they have. They should not write their names on the papers. Have the students place their questions in a box, basket, or envelope as they leave.

ADDITIONAL ACTIVITIES:

- Plan a visit to a local health facility where the boys can meet and talk with health professionals, or invite a health professional to come to speak to the group.
- Encourage boys to create and carry out a survey on attitudes towards health among young men in their community.
- Students can read more about these issues at: http://www.kidshealth.org/teen/
- Have students create a skit about important issues in young men's health and risky behaviors; encourage them to perform the skit for other students or in the community.

NOTES:

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ANNEX 1:

RESOURCES AND REFERENCES

General Resources

- Find country statistics on issues such as health, literacy, and children at the following Internet sites:
  - UNICEF: www.unicef.org/infobycountry/index.html
  - WHO: www.who.int/country/en/
  - Demographic and Health Surveys: www.measuredhs.com/countries/start.cfm
- Search UNICEF's easy-to-use online database for publications and information at: www.unicef.org/publications/index.html. UNICEF also offers audio and video recordings about children at: www.unicef.org/videoaudio/index.html
- Access best practices, research, program tools, and contact information for your national chapter at the Forum for African Women Educationalists (FAWE) web site: http://www.fawe.org/home/index.asp
- *Facts for Life* is a UNICEF publication containing basic information about a variety of health topics. It is available online: www.unicef.org/publications/index_4387.html
- Find research and publications on women, girls, and gender issues at:
  - UNIFEM (UN agency for women): www.unifem.org/resources/
  - CEDPA (Centre for Development and Population Activities): www.cedpa.org/section/publications
  - International Women's Health Coalition: www.iwhc.org/resources/index.cfm

Module 1: Becoming a Good Mentor

- *Footsteps to Excellence: Guidelines for Mentoring,* Forum for African Women Educationalists (FAWE), Uganda Chapter. A mentoring resource book with sections on relationships and life-skills available at: www.faweu.or.ug
- The National Mentoring Partnership is a US-based organization committed to supporting mentoring relationships between adults and youth: www.mentoring.org
- Mentors Peer Resources provides tips and links. You can also take a test to learn more about your mentoring skills: www.peer.ca/mentor.html
- *Beyond the Classroom: Empowering Girls,* US Peace Corps, 2000. This manual describes fun and educational activities for girls that teachers and communities can organize. The document is online at: www.peacecorps.gov/multimedia/pdf/library/empoweringgirls.pdf

Module 2: Gender and Girls' Rights

Citations

- Session 1, Activity 2: "Whose Role is it?" was adapted with permission from the US Peace Corps' *Life Skills* manual, 2001.

Additional Resources

- Convention on the Elimination all forms of Discrimination Against Women (CEDAW) is available at: www.un.org/womenwatch/daw/cedaw/cedaw
- Learn more about the Convention on the Rights of the Child at: www.unicef.org/crc/
- The African Charter on the Rights and Welfare of the Child can be found at: www.africa-union.org
- Visit UNICEF's web site designed just for teachers. Learn how you can incorporate children's and girls' rights into your lesson plans or join a discussion about other topics at: www.unicef.org/teachers/
- You can also visit the UNICEF office in your country or online: www.unicef.org

Module 3: The Importance of Girls' Education and Empowerment

Citations

- Session 1, Activity 3: "Two Letters, Two Lives," was adapted with permission from *Choose a Future! Issues and Options for Adolescent Girls,* The Centre for Development and Population Activities (CEDPA), 1996. www.cedpa.org
- Dakar Framework for Action, text adopted by the World Education Forum, Dakar, Senegal, April 26–28, 2000. www.unesco.org/education/efa/ed_for_all/dakfram_eng.shtml
- Session 2, Activities 2: "Treasure Yourself" and 3: "Factors that Lower Self-Esteem" were adapted from *Tuko Pamoja: Adolescent Reproductive Health and Life Skills Curriculum,* Program for Appropriate Technology in Health (PATH), Population Council, KARHP, 2006.
- Session 2, Activity 4: "Goal Setting" was adapted from the US Peace Corps' *Life Skills* manual, 2001.

Additional Resources

- "The State of the World's Children 2004 - Girls, Education and Development," UNICEF, provides a good overview of the state of girls' education, as well as country-specific statistics: www.unicef.org/publications/index_18108.html
- *In the Classroom: Empowering Girls,* US Peace Corps, 2001. This must-read guidebook for teachers and others who want to promote girls' education describes activities you can do in the classroom and community: www.peacecorps.gov/multimedia/pdf/library/M0082_inclassempowergirls.pdf
- "Strategies for Girls' Education," part of UNICEF's 2004 report on girls' education, details strategies for increasing girls' school participation, as well as success stories from around the world: www.unicef.org/publications/index_21344.html

- The Forum for African Women Educationalists (FAWE) provides programs, resources, and advocacy to increase girls' school involvement at: http://www.fawe.org/home/index.asp
- Learn more about Rotary International's programs, including scholarships for students in Africa: www.rotary.org
- The Association for the Development of Education in Africa (ADEA) is a network of partners promoting education in Africa: www.adeanet.org

Module 4: Leaders and Leadership

- "Changing Times, Changing Attitudes: Alternative Portrayals of Men and Women" is a collection of radio stories from Africa published by UNESCO. The stories are great to read aloud and discuss with girls: unesdoc.unesco.org/images/0011/001197/119793eo.pdf
- Learn about leadership opportunities for girls at the World YWCA. To see if the YWCA is in your country, visit: worldywca.info/index.php/ywca/world_ywca/national_ywcas
- Read about the women leaders from around the world in CEDPA's guide "Profiles in Women's Leadership": www.cedpa.org/content/general/detail/729/

Module 5: Coping with Stress

Citations

- Information regarding depression comes from: www.nimh.nih.gov/publicat/depression.cfm#ptdep3
- Tips on helping children manage stress adapted from "Stress: Taking Charge," Iowa State University, 1996. www.extension.iastate.edu/Publications/PM1660F.pdf

Additional Resources

- *The Impact of Conflict on Women and Girls in West and Central Africa* and the UNICEF Response, UNICEF, 2005. www.unicef.org/publications/index_25262.html
- *Helping Children Cope with the Stresses of War:* A Manual for Parents and Teachers, UNICEF 2000. www.unicef.org/publications/index_4398.html
- "The Use of Drumming as Cure for Children with Post-Traumatic Stress Disorder (PTSD)," David Otieno Akombo. www.bluegecko.org/kenya/tribes/taita/articles-akombo.htm#intro
- "Indigenous Healing of War Affected Children in Africa," Edward C. Green and Alcinda Honwana, 1999. www.africaaction.org/docs99/viol9907.htm
- UNICEF provides tips on helping children in emergency or disaster situations: www.unicef.org/ffl/13/4.htm
- Common questions and answers about post-traumatic stress disorder (PTSD) can be found at: http://kidshealth.org/parent/emotions/feelings/ptsd.html

Module 6: Adolescence, Reproduction, and Relationships

Citations

- Session 2, Activity 3: "Pregnancy Prevention True or False?" was adapted from *Choose a Future!: Issues and Options for Adolescent Girls,* CEDPA, 1996. www.cedpa.org.

Training Manuals

- *Making Schools a Safe Horizon for Girls: A Training Manual on Preventing Sexual Violence Against Girls in Schools,* M.A. Odhiambo and J. Maganya, ActionAid and the Cradle, 2004. This excellent manual is designed to train teachers to deal with and prevent harassment of girls in school. A section of the guide explains how to be a good counselor. www.eldis.org/static/DOC17763.htm

- "Reproductive Health of Young Adults" is FHI's online training course on how to best meet the reproductive needs of young people. This 95-slide course contains information and a self-test that you can use in discussions with youth: www.fhi.org/en/Youth/YouthNet/rhtrainmat/Reprohealthyoungadults.htm

- "My Changing Body: Fertility Awareness for Young People," FHI and the Institute for Reproductive Health, Georgetown University, 2003. This training manual is designed to teach both boys and girls (aged 10–14) about puberty. The manual contains detailed sessions and activities to complete with young people: www.fhi.org/en/Youth/YouthNet/rhtrainmat/fertilawareyoungpeople.htm

- *Taking Steps of Courage: Teaching Adolescents about Sexuality and Gender in Nigeria and Cameroun,* Andrea Irvin, International Women's Health Coalition, 2000. This document discusses how to teach sexual health education and gender awareness to adolescents: www.iwhc.org/docUploads/takingsteps.pdf

Additional Resources

- Family Health International (FHI) operates programs throughout the world designed to educate young people about reproductive health issues. Learn about their programs, read online publications, and learn facts and statistics about youth health worldwide at: www.fhi.org and www.fhi.org/en/Publications/index.htm. Information on specific contraceptives can be found at: www.fhi.org/en/RH/FAQs/index.htm

- The World Health Organization (WHO) provides information on adolescent health at: www.who.int/topics/adolescent_health/en and www.who.int/topics/youth/en/

- *Adolescence: A Time that Matters,* UNICEF 2002. This book contains easy-to-understand statistics and information regarding adolescent girls and boys worldwide, including health, education, and HIV/AIDS. Read it online at: www.unicef.org/publications/index_4266.html

- Statistics on the health effects of early pregnancy can be found on the International Women's Health Coalition's fact sheet "Maternal Health: Implications for Children and Adolescents" at: http://www.iwhc.org/docUploads/ISRRC_MaternalHealthfactsheet.pdf

- "Dear Auntie Stella" is a fun, interactive activity to facilitate discussions about relationships and other issues with boys or girls: www.tarsc.org/auntstella/index.html

Module 7: Marriage and Family

Additional Resources

- *Too Young to Wed: The Lives, Rights and Health of Young Married Girls,* ICRW 2003. This resource includes statistics on early marriage and strategies for combating it: www.icrw.org/photoessay/html/index.htm

- "Early Marriage: Child Spouses," a report by UNICEF's Innocenti Research Centre, 2001: www.unicef-icdc.org/publications/pdf/digest7e.pdf
- To learn more about breastfeeding and birth spacing, visit Family Health International's web site: www.fhi.org/en/RH/Pubs/factsheets/breastfeeding.htm
- Information about various forms of contraception and reproductive health can be found at Family Health International's web site: www.fhi.org/en/RH/FAQs/index.htm

Module 8: HIV/AIDS

Citations

- Session 2, Activity 2: "Spread of an HIV Epidemic" was adapted with permission from the US Peace Corps' *Life Skills* manual, 2001. www.peacecorps.gov/multimedia/pdf/library/M0063_lifeskillscomplete.pdf
- Session 3, Activity 4: "Elephants and Lions" game was adapted from the US Peace Corps' *Life Skills* manual, 2001.
- Session 5 Activities "The Color Game," "Stigmatization and Discrimination Role-Play," and "Red Ribbon" were used with permission from Lauren Loveland. The activities can be found in "Guide for Contact Teachers," Ministry of Education: Ohangwena and Oshikoto Regions, Namibia, 2005.
- Session 7, Activity 3: "A Bridge to an HIV-free Future" was adapted from the US Peace Corps' *Life Skills* manual, 2001.

HIV/AIDS-related Organizations

- UNAIDS is the branch of the United Nations dedicated solely to the epidemic. To search the web site for publications, visit: www.unaids.org/en/KnowledgeCentre/Resources/Publications/
- UNIFEM, the branch of the United Nations concerned with girls' and women's well-being, provides in-depth information about women and HIV/AIDS, training manuals, and other resources at: www.genderandaids.org and www.unifem.org/resources/listing_by_section.php?WebSectionID=2
- UNICEF, the branch of the UN devoted to children, contains a wealth of information about youth, girls, and HIV/AIDS: www.unicef.org
- UNESCO, the UN branch for education and culture, provides educational materials on HIV/AIDS at: portal.unesco.org/education/en/ev.php-URL_ID=35500&URL_DO=DO_TOPIC&URL_SECTION=201.html
- Family Health International (FHI) offers publications and training manuals related to HIV/AIDS at: www.fhi.org/en/HIVAIDS/pub/index.htm
- The Population Council and the Horizons program publish papers on topics including AIDS orphans, gender, AIDS treatment, youth, and STIs. Many of the publications highlight research from specific African countries: www.popcouncil.org/horizons/horizonspublications.html

General Reports

- 2007 AIDS *Epidemic Update,* UNAIDS, Geneva, 2007. An excellent source of current statistics: www.unaids.org/en/KnowledgeCentre/HIVData/EpiUpdate/EpiUpdArchive/2007/default.asp
- *AIDS in Africa: Three Scenarios to 2025,* UNAIDS 2005. The scenarios are creatively summarized as folktales that can be read with young people: http://data.unaids.org/Publications/IRC-pub06/jc1068-scenarios-execsumm_en.pdf

Fast Facts

- Definitions for HIV/AIDS-related terms can be found at: http://www.engenderhealth.org/res/onc/hiv/glossary/
- Get answers to common questions about HIV/AIDS at UNAIDS's "Fast Facts about AIDS": http://www.unaids.org/en/KnowledgeCentre/Resources/QandA/FastFacts/default.asp
- Answers to frequently asked questions classroom tools on HIV/AIDS can be found at (scroll to "basic knowledge" towards the bottom of the page): http://portal.unesco.org/education/en/ev.php-URL_ID=35500&URL_DO=DO_TOPIC&URL_SECTION=201.html
- Find the HIV infection rate in your country at: www.unaids.org/en//CountryResponses/Countries/default.asp
- Concise facts and statistics about women, girls and HIV: www.iwhc.org/resources/hivaidsfactsheet.cfm
- Facts and information about HIV and African youth are available at the Advocates for Youth web site: www.advocatesforyouth.org/publications/factsheet/fshivaidsaf.htm

Teaching Tools and Activities

- Search UNESCO's international clearinghouse on HIV/AIDS prevention curricula at: http://databases.unesco.org/ibe/aidbib/
- You can find information and documents on HIV/AIDS and education in Eastern and Southern Africa by using UNESCO's online database at: http://www.harare.unesco.org/hivaids/db.asp
- UNICEF provides an excellent list of teaching, training, and resource materials related to HIV/AIDS and life skills: www.unicef.org/lifeskills/index_14926.html
- Visit UNESCO's web site devoted to HIV and AIDS resources, including training manuals, videos, publications and more at: portal.unesco.org/education/en/ev.php-URL_ID=12167&URL_DO=DO_TOPIC&URL_SECTION=201.html
- UNESCO provides HIV education activities for learners at another web site, called FRESH (Focusing Resources on Effective School Health): portal.unesco.org/education/en/ev.php-URL_ID=35500&URL_DO=DO_TOPIC&URL_SECTION=201.html
- *Act Now! A Resource Guide for Young Women on HIV/AIDS,* UNIFEM and AWID, 2002. This resource guide for young leaders provides an overview of the issues surrounding HIV and girls. The guide is based on feedback from young women and includes profiles of their leadership in HIV/AIDS and activities they can do in their community: www.unifem.org/attachments/products/ActNow_eng.pdf

- "Ask Auntie Stella" is an excellent, fun activity you can do to get young people talking about relationships and HIV prevention. It was designed by the Training and Research Support Centre in Zimbabwe for youth ages 13–17: http://www.tarsc.org/auntstella/index.html
- US Peace Corps *Life Skills* manual, 2001. This resource provides detailed activities and discussion topics for youth regarding decision making, goal setting, and HIV/AIDS prevention (also available in French): http://www.peacecorps.gov/index.cfm?shell=library.pubindex
- Resource Package *for School Health Education to Prevent AIDS and STDs:* A Resource Package for Curriculum Planners. This resource for teachers provides step-by-step activities to educate learners about a variety of issues surrounding HIV: http://library.unesco-iicba.org/English/HIV_AIDS/cdrom%20materials/navigation%20pages/School%20Health%20Education.htm
- AVERT (www.avert.org) is an international organization whose goal is to provide HIV and AIDS information. This easy-to-use site has clear information and quizzes on all HIV/AIDS-related topics. A specific part of the web site is devoted to education (www.avert.org/educate.htm). There are also photos and stories about people in Africa living with HIV, as well as country-specific information: www.avert.org/subaadults.htm
- *HIV/AIDS and Human Rights: A Kit of Ideas for Youth Organizations,* UNESCO, UNAIDS: unesdoc.unesco.org/ulis/cgi-bin/ulis.pl?database=ged&set=3EF08E85_0_64&hits_rec=1&hits_lng=eng

Girls and Women

- *Facing the Future Together: Report of the Secretary-General's Task Force on Women, Girls and HIV/AIDS in Southern Africa,* UNAIDS 2004. This 25-page report provides a good overview of the problems girls and women face with regards to HIV/AIDS, as well as proposed solutions: www.unicef.org/publications/index_22222.html
- *Girls, HIV/AIDS and Education,* UNICEF, 2004: www.unicef.org/publications/index_25047.html
- *Women and HIV/AIDS: Confronting the Crisis,* UNAIDS, UNIFEM and UNFPA, 2004: www.unaids.org/html/pub/publications/external-documents/unfpa_unaids_unifem_womenaids_en_html.htm

Youth and Orphans

- *Children on the Brink,* UNICEF, USAID and UNICEF, 2004. A report on children affected by HIV/AIDS in sub-Saharan Africa: www.unicef.org/publications/index_22212.html
- *HIV/AIDS and Young People: Hope for Tomorrow,* UNAIDS, 2003: www.unaids.org/html/pub/publications/irc-pub06/jc785-youngpeople_en_pdf.htm
- *Report on Education – The President's Emergency Plan for AIDS Relief,* PEPFAR, 2006. A report on PEPFAR's work with USAID on programs addressing AIDS, education, and orphans and vulnerable children: http://www.pepfar.gov/progress/76859.htm

Supporting People Affected and Infected by HIV/AIDS

- Catholic AIDS Action publishes several documents on HIV and AIDS, especially with regard to youth and community support for PLWHA. *The Guidebook Building Resilience in Children Affected by HIV/AIDS,* written in South Africa, explains how to provide psychosocial support for children affected by HIV/AIDS. *Community-based Counseling for People Affected by HIV/AIDS* provides easy-to-understand guidance on counseling: www.fhi.org/en/HIVAIDS/pub/guide/caacounseling.htm
- *Caring for Someone with HIV/AIDS at Home,* adapted by UNESCO from the Centers for Disease Control and Prevention (CDC): http://www.ibe.unesco.org/AIDS/doc/FRESH_basic_all.pdf

HIV Counseling and Testing

- UNESCO offers a training manual for adults to talk to youth about voluntary counseling and testing (VCT). Scroll to the bottom of the web page and click on the links for the VCT modules: www.unicef.org/lifeskills/index_14926.html
- *HIV Counseling and Testing for Youth: A Manual for Providers,* Family Health International, 2005. Although this publication is designed for those who provide VCT, it provides an excellent overview of VCT, as well as how to talk to youth about STIs, pregnancy prevention and condom use: www.fhi.org/en/Youth/YouthNet/rhtrainmat/vctmanual.htm

Miscellaneous

- Learn more about mother-to-child transmission and prevention at: http://www.unicef.org/aids/index_preventionMTCT.html
- The Southern Africa HIV and AIDS Information Dissemination Service (SAfAIDS) provides information and a newsletter (Exchange on HIV/AIDS, Sexuality, and Gender) specific to southern Africa: www.safaids.org.zw
- Family Health International (FHI) provides detailed and in-depth information about STIs, presented in easy-to-use learning modules: www.fhi.org/training/en/modules/STD
- The World Health Organization (WHO) has facts and publications on STIs worldwide at: www.who.int/topics/sexually_transmitted_infections/en/
- Find out about local associations of people living with HIV/AIDS who might be willing to come speak to your scholars (available in English, French, and Portuguese): http://www.usaid.gov/our_work/global_health/aids/Publications/docs/hivaidsdirectory.pdf

Module 9: Jobs, Professions, and Careers

Citations

- Session 1, Activity 2 was adapted with permission from *Choose a Future!: Issues and Options for Adolescent Girls,* The Centre for Development and Population Activities (CEDPA), 1996: www.cedpa.org

Additional Resources

- To learn more about "Take Our Daughters and Sons to Work Day," and resources and other materials for girls, parents, teachers, and other adults participating in the event, visit the web site: www.daughtersandsonstowork.org

- Find out more about various jobs at the web site "What do they do?" at: web.archive.org/web/20040404215729/www.whatdotheydo.com/
- The US government provides job descriptions and career information for young people. Go to http://www.kids.gov/ and use the "Grades K–5" or "Grades 6–8" drop-down menus and scroll to "Careers."
- "What interests you?" provides a list of jobs based on children's particular interests: www.bls.gov/k12/
- The Career Exploration Guides and Resources for Younger Students web site contains links to resources for both children and for adults who want to talk to young people about careers: www.khake.com/page64.html

Supplementary Module (Annex 8): Computers and Internet Technology

Using the Computer

- *Information and Communication Technology (ICT) Training of Trainers: Computer and Internet Use for Development,* US Peace Corps, 2002. This step-by-step guide shows how to train others to use computers and the Internet. Read or download the guidebook online at: www.peacecorps.gov/index.cfm?shell=pchq.ol.pubindex. Scroll down the list of publications until you see the link for the pdf file.
- You can also find short tutorials on the basics of using Microsoft Word® at: www.helpwithpcs.com/courses/Course.htm
- Want to know the definition of a particular computer term? Visit: http://www.techterms.com/

Online Encyclopedias and Dictionaries

- Want to know what a word means in English, French, Spanish, Portuguese, or Italian? Visit Dictionary.com's online translator at: http://dictionary.reference.com/translate/

Online Information Sources

- www.encyclopedia.com
- www.m-w.com/dictionary.htm
- www.ipl.org/div/subject/browse/ref32.00.00/

Additional Resources

- Find a list of web sites for children on topics including health, science, history, and math at: www.kidinfo.com/schoolsubjects.html
- News and views about Africa: www.afrol.com; www.africadaily.com; www.channelafrica.org; www.allafrica.com.

ANNEX 2:

ICE BREAKERS

An icebreaker is a short game or activity that can energize people and help them feel comfortable with each other. It is a good idea to conduct an icebreaker at the beginning of each session. Below are a few suggested icebreakers, but you should feel free to create your own based on games, songs, or activities common in your area.

Introduction Games

1. Arrange participants in a circle. Each participant should say his/her name and an adjective that describes him/her. The adjective should begin with the same letter as the person's first name. For example, the first person may introduce herself as "Energetic Esther!" or "Fantastic Fatima!" The next person has to repeat the first person's name and adjective and add her name. Every participant repeats the name of the people before her, then adds her name. (To take the pressure off the person who has to repeat the names, have the entire group repeat the names together.) This is a guaranteed way to remember names and to learn how your friends describe themselves!

2. The object of this small group exercise is to get participants to know each other better. First, ask the participants to form a circle. Explain that different colors are often associated with different things in various cultures. Tell the participants that you are going to state the names and meanings of different colors and then ask each person to state the first thing she/he thinks of. For example, explain that orange is often considered a motivation color. Go around the circle and ask each person to quickly say one thing that motivates her/him. After all the participants have responded, tell them that in some cultures yellow is the inspiration or creativity color. Going around the circle again, ask each person to say the best idea she/he has ever had. Repeat with the following colors and concepts:

   - Explain that blue is the "sky is the limit" color, then ask "What is your favorite fantasy about your future?"
   - Explain that bright pink is an unusual color, then ask "What is the most daring thing you ever did?"
   - Explain that purple is traditionally the color of royalty, then ask "If you were ruler of the universe for a day, what is the first thing you would do?"

3. Arrange participants in a circle. Each participant should share her name and do an action or gesture afterward, such as turn in a circle, jump in the air, or part of a dance. The entire group should repeat the name and action afterwards. The next person adds her name and action. Afterward, the entire group repeats her name and action, followed by the first person's name and action. The game continues around the circle until everyone has shared her name and action. The group continues to repeat everyone's name until they are doing so many actions they are almost dancing! This is a great way to get energized and learn names. *(Note: If you have a large group, you may just want to have the group repeat the name of the person who has most recently shared her name, rather than all names.)*

Line Up

Divide participants into groups. Tell each group to arrange itself according to your directions. The first group to arrange themselves the way you tell them to wins the game! Some common ways to have participants arrange themselves include: By age or birthday; by height (from shortest to tallest or vice versa); by number of letters in their first names; or alphabetically according to their last names. To make the game more challenging, tell them that they can't talk to each other.

Two Truths and a Lie

Have each participant tell the group things about themselves. Two of the items should be true, and the other one should be false. Participants have to guess which item is false. Go around in a circle until everyone has told her/his "two truths and a lie." We guarantee you will learn new things about your friends.

Goal Sharing

Find a small ball or other item that could be tossed from person to person. The person who holds the ball must tell the group one of her goals, likes, dislikes, or something the person is currently learning. For example, a person might say she hopes to become a doctor, while another could share that he is working hard to improve his English. After all participants have shared their goal or dream, ask them to turn to a partner to find out more about what they shared.

What Did You Learn Last Time?

Begin the session by asking each participant to share something she learned during the last session. Vary the game by asking the participants to share something they learned outside of the discussions or something fun they did in the last week.

Word Association

Arrange participants in a circle. Invite one participant to think of a word and share it with the group. The person to the right should immediately say a word related to the first word. Go around the circle until each person has shared a new word. At the end, compare the words that started and ended the game. To make the game more active, toss a ball from person to person to signify who should add the next word.

Create a Story

Arrange participants in a circle. Ask one participant to start a story. She should share a phrase such as, "Once there was a person who…" The next person should continue the story and abruptly stop after a few sentences. The next person must continue the story. Continue until all participants have contributed to the story. The unique story that participants create is guaranteed to make everyone laugh!

Things I Like About You

This is a great activity to do when participants have known each other a while, and a respectful and trusting environment has been established. Using pins or tape, attach a piece of A4 or notebook paper to the back of each participant. Explain that everyone has good qualities or things one does well. Knowing those things can give a person self-esteem and self-confidence. Ask participants to take out a pen or pencil and write on each person's back at least one thing that she/he likes about that person or things that that person does well. Stress that no negative things should be written.

Have participants circulate around the room until everyone has written at least one positive thing on everyone else's paper. Tell participants to remove the papers from their backs and read the comments to themselves. Ask if anyone would like to share with the group some of the compliments she/he has received.

Sara Says (a variation on "Simon Says")

Select one person to be "Sara," the activity leader. (You may choose whatever name you like.) The rest of the group should line up on one side of the room or outdoors. "Sara" will instruct the group to do certain actions, like take two big steps forward, take one step backward, hop on one leg, spin in a circle, clap their hands, and so on. Each time Sara gives instructions, she first says, "Sara says…" The group can only do the action if Sara says, "Sara says…" When Sara only gives a direction but does not say, "Sara says," the group should not do the action. If a person does the action, she must sit down. Have Sara give directions until only one person is left. Declare that person the winner.

Telephone

This game will make participants laugh, as well as help them to better understand the importance of good group communication. Have participants stand in a large circle. Ask for a volunteer to come up with a message to pass along to the rest of the group. Once the person has decided on a message (not too long or too short), tell her to whisper the message into the ear of the person standing to her right. No one else should hear the message. That person must then tell the exact message to the person to her right. The activity continues until the message makes it all the way around the circle. (No one is allowed to ask the message to be repeated.) Once the message has made it around the circle, the last person to receive the message should share the message she/he heard. Then the person who started the message should share her/his original message with the group. You will find that the message changed a lot! Ask participants why they think the message changed. (Possible answers: People did not speak clearly, not paying attention, etc.)

Switching Places

Pass out a piece of A4 or notebook paper to each participant. Invite participants to form a circle around you. Tell each participant to place her piece of paper on the floor and to stand on it. You, the facilitator, will call out a sentence explaining which people in the circle need to switch places immediately after hearing the command. Examples: "Everybody wearing red—switch places!" "Everybody who likes dancing—switch places!" "Everybody who likes *(name of a popular food or musical group)*—switch places!" After calling out the sentence, run to someone's place in the circle and occupy it. The participant who is left without a piece of paper to stand on must go into the center and call out the next order to switch places (and should run to occupy someone else's place after calling out.) Be creative. Repeat until the group is energized.

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ANNEX 3:

PRACTICE MENTORING SCENARIOS

Scenario 1: Jealousy erupts over scholarship benefits.

Naledi comes to you, her mentor, because she has been having trouble with her friends. Naledi tells you her friends are jealous of her because she receives a scholarship. They ask her to give them some of the school supplies she receives each semester or to share her lunch money. They also are jealous of the new uniform she got because of her scholarship. Naledi is sad because some of her friends have even stopped talking to her. Naledi knows that people in her community share what they have with others, but her family is poor and she worked hard to earn the scholarship. Naledi does not want to lose her friends as a result of the scholarship.

How would you help Naledi with this problem?

Points to consider:

- What will happen if Naledi decides to give her friends some school supplies or money? Will other students start asking her for other things?
- What will happen if Naledi does not share with her friends? How could Naledi explain to her friends why she cannot give them anything?
- Are the girls who stop talking to Naledi good friends? What advice could you offer her about friendship?

Scenario 2: A possible upcoming marriage threatens to take a girl from school.

You have heard rumors that a girl whom you mentor is to be married during the holiday vacation. The girl lives in a different village than you do. In your community, girls who get married usually do not come back to school.

As the girl's mentor, what would you do?

Points to consider:

- What would you do first? Would you travel to the girl's village?
- What would be the consequences if the girl gets married? If she does not get married?
- What advice could you give to the girl or her family?
- Who could help you deal with this situation?

Scenario 3: Getting tested for HIV

Isabelle lives with her grandmother and three siblings. Two years ago, Isabelle's father died. Last month, Isabelle's mother passed away. There are rumors in town that she died of AIDS. Isabelle has participated in HIV/AIDS discussions at school and has asked you, her mentor, about getting tested for HIV.

What advice would you offer?

Points to consider:

- Is this an issue you feel you can deal with by yourself? If not, who would you ask for assistance?
- How far away is the testing center? Will the girl be able to get there by herself?
- What is the cost of an HIV test? Who will pay for it?
- If the girl tests positive for HIV, what will be the effects on the girl's psychological and physical well-being? Who could offer her support?
- What other community resources exist to help you and Isabelle cope with this situation?

Scenario 4: A mentee's family can no longer feed themselves and she has asked her mentor for money.

A girl whom you mentor has told you that her family can no longer feed themselves. The girl is a smart learner and has always done well in school. She has asked you for money to buy some food.

What would you do?

Points to consider:

- How would you verify the girl's claims? Would you try to verify the claims at all?
- What will happen to the girl if you refuse?
- If you decide to give the girl some money, what would you do if she asked you again?
- What other family or community resources might be helpful in addressing the girl's problem?

Scenario 5: A girl's father controls her scholarship funds.

You find out that one of your mentees, Kagiso, has not bought all her school supplies, even though she received a scholarship. You ask her why she has not bought the items, and she tells you that her father keeps some of her scholarship money.

What would you do?

Points to consider:

- Would you advise Kagiso to ask her father for the money?
- Would you go to Kagiso's house and talk to the father? Would you ask a teacher to visit with Kagiso's father? Is there anyone else with whom you would consult about this issue?

- Would it make a difference if the mentor were a man or a woman?
- You know that Kagiso's sister has been very sick and has visited the local health post several times in the past few weeks. Would this issue make a difference in how you address the situation?
- What might happen to Kagiso if you intervene on her behalf? What might happen if you do not intervene?

Scenario 6: A teacher is pressuring a student to have sex.

Luisa is a secondary school student in a large town. She gets good grades and is liked by most of her classmates. Because of her good grades, Luisa hopes to attend a technical school next year.

One day, Luisa tells her mentor, a teacher at her school, that another teacher is pressuring her to have sex with him. Luisa earns a small amount of money washing the teacher's clothes and cleaning his house. She uses this money to help support her family, which is very poor.

The teacher has suggested to Luisa that if she does not have sex with him, he will fail her. Luisa has refused him twice, but she is afraid that if she refuses him again, he will give her a bad grade. If she gets a bad grade, she will not be accepted into the technical school she wants to attend after graduation. She is also afraid to go to his house to clean, but she does not want to lose her job.

If you were Luisa's mentor, what would you do?

Points to consider:

- Would you ask Luisa to tell you the name of the teacher?
- What would happen if you reported the incident to regional school authorities?
- What would happen if you did not report the incident to anyone?
- What advice would you give Luisa? (For example, should she tell school authorities or refuse to go to the teacher's house?)
- Pretend the situation is different. You hear that Luisa went to her teacher's house to seek a sexual relationship in return for money. What would you do?

Scenario 7: Mentor suspects a girl is having sex.

Your mentee, Marie, has been talking a lot about her boyfriend. She says she loves him. He gives her gifts like new clothes and money to buy school supplies. You think Marie may be having sex with him and you are worried about the consequences.

What would you do?

Points to consider:

- Should your opinion about sex before marriage influence your advice to the mentee? Why or why not?
- If you ignore this issue, what might happen?

- Should you tell anyone, such as Marie's family, that Marie may be having sex? Why or why not? (Remember the importance of mentor/mentee confidentiality.)
- What subjects might you want to talk about with Marie?
- To what other community resources could you refer Marie? (For example, a health clinic, a life-skills teacher at the school, another mentor who has more experience with this issue, etc.)

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ANNEX 4:

PLANNING AN EVENT AND FACILITATING DISCUSSIONS

Organizing and facilitating a meeting or an event can sometimes be overwhelming. However, breaking the job down into smaller tasks makes it less challenging and more manageable.

Here are a few tips to help you plan your next event:

Before the Event: Prepare!

1. Notify participants ahead of time of the meeting time and location.
2. Select a location and reserve a room that is accessible to everyone, comfortable, and safe.
3. Select a discussion facilitator (another mentor or qualified community member).
4. Review and prepare activities and discussion questions in advance. If necessary, adapt them to fit your group's age, needs, etc.
5. Gather materials.
6. Arrange chairs or desks. If possible, arrange chairs in a circle so participants can all see and hear each other. This arrangement also emphasizes group cohesiveness.
7. Provide snacks, if possible.

The First Meeting

1. At the first meeting with your mentees, you should begin by introducing yourself and the purpose of the mentoring meetings. Then ask participants to introduce themselves. Even if everyone already knows each other, introductions will help "break the ice," or begin the meeting. It's a good idea to play an introduction game. (See Annex 2: Icebreakers.)
2. After introductions, you should explain the purpose of the meeting. You should emphasize that the meetings are for the girls' benefit and that you want to know what they would like to learn and do. Now might be a good time to ask girls what they would like to learn and what types of activities they would like to do.
3. Invite participants to set the group meeting rules. Ask the girls to suggest rules and discuss them. Write them on a piece of paper, have the girls sign their names below the rules, and post them in the room. Possible rules might include:
   - Listen when other people are talking.
   - Respect other people's opinions, even if you don't agree with them.
   - Do not share personal information with others outside the group.
   - Have fun!

If someone breaks a rule, you can remind her that everyone agreed to the rules and they need to be observed.

Facilitating Group Discussion

As a facilitator, your job is to present a topic and to lead a discussion about it. You should spend much of your time asking questions that stimulate dialogue about the topic at hand.

Here are a few tips:

- Speak loudly and clearly to the entire group.
- Present new information, but do not lecture. (Remember, these activities are not supposed to be like school!)
- Do not criticize girls for giving "wrong" answers. Rather, point out that the information is not accurate and provide correct information.
- Be aware of your body language and the attitude or mood you convey to girls.
- Do not "talk down" to the girls.
- Encourage general participation. If you have participants who tend to dominate discussions, make a point of calling on someone else. If necessary, remind the group that everyone's opinions are important and that everyone should get a chance to speak. If a participant is extremely shy and does not voice her opinions, begin by asking her "easy" questions to draw her out.
- Keep the discussion on track, but be flexible if you find that girls are interested/uninterested in a particular topic.
- Summarize information or opinions to make sure everyone is "on the same page."
- Allow for disagreement, but emphasize the importance of respecting other people's views.
- Use the opportunity to learn more about the girls' goals, dreams, attitudes, and needs. The more you know about them, the better you will be able to make discussions applicable to their lives.

Some topics included in this resource guide may be embarrassing to discuss for some people. Your role as a facilitator and a mentor is to explain to girls that the information is important for their health and well-being, both today and in the future. Tell them that no one should laugh or make fun of other people's opinions, and remind them that information discussed with the group should not be shared with others. Most importantly, remember to modify activities and discussions to girls' age, educational level, and interests.

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ANNEX 5:

"ASK AUNTY AMINA" SCENARIOS

Cut the following scenarios below into individual strips with one question each and distribute during the "Ask Aunty Amina" activity. Please note that this activity is intended for girls 13 and older.

1. A boy I know has asked me to have sex with him. He's very nice and buys me things I need, like new clothes and notebooks. What should I do?

---

2. My boyfriend and I have been seeing each other for a year. I think I want to have sex with him, but I'm not sure. Please give me some advice!

---

3. My parents have told me not to have sex before marriage, but I want to. I know about the risks and I've bought a condom. What do you think I should do?

---

4. My boyfriend tells me he loves me all the time. I think this means he wants to have sex with me. I love him, too. Help me, Aunty Amina! I don't know what to do!

---

5. I told my best friend that I do not want to have sex with my boyfriend. She teases me and says, "Everyone does it. It's no big deal." I don't want her to think I'm a baby, but I don't want to lose her as a friend. What do you think I should do?

---

6. One night, my boyfriend started kissing me and tried to take off my clothes. Now I'm afraid to be with him, but if I tell him I don't want to see him, I know he will tell everyone at school that I'm a bad person. Please let me know what I should do.

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ANNEX 6:

Adult (aged 15–49 years) HIV Prevalence*
in Countries that have Conducted Population-based

HIV SURVEYS IN RECENT YEARS (UNAIDS)–SUB-SAHARAN AFRICA

COUNTRIES	POPULATION-BASED SURVEY PREVALENCE (%) (YEAR)	2001 HIV PREVALENCE (%) REPORTED IN 2002 REPORT ON THE GLOBAL AIDS EPIDEMIC	2003 HIV PREVALENCE (%) REPORTED IN 2004 REPORT ON THE GLOBAL AIDS EPIDEMIC	2005 HIV PREVALENCE (%) REPORTED IN 2006 REPORT ON THE GLOBAL AIDS EPIDEMIC
Benin	1.2 (2006)	3.6	1.9	1.8
Botswana	25.2 (2004)	38.8	38.0	24.1
Burkina Faso	1.8 (2003)	6.5	4.2	2.0
Burundi	3.6 (2002)	8.3	6.0	3.3
Cameroon	5.5 (2004)	11.8	7.0	5.4
Central African Republic	6.2 (2006)	12.9	13.5	10.7
Chad	3.3 (2005)	3.6	4.8	3.5
Côte d'Ivoire	4.7 (2005)	9.7	7.0	7.1
Equatorial Guinea	3.2 (2004)	3.4	N/A	3.2
Ethiopia	1.4 (2005)	6.4	4.4	(0.9–3.5)
Ghana	2.2 (2003)	3.0	3.1	2.3
Guinea	1.5 (2005)	N/A	2.8	1.5
Kenya	6.7 (2003)	15.0	6.7	6.1
Lesotho	23.5 (2004)	31.0	29.3	23.2

Continued on next page.

COUNTRIES	POPULATION-BASED SURVEY PREVALENCE (%) (YEAR)	2001 HIV PREVALENCE (%) REPORTED IN 2002 REPORT ON THE GLOBAL AIDS EPIDEMIC	2003 HIV PREVALENCE (%) REPORTED IN 2004 REPORT ON THE GLOBAL AIDS EPIDEMIC	2005 HIV PREVALENCE (%) REPORTED IN 2006 REPORT ON THE GLOBAL AIDS EPIDEMIC
Malawi	11.8 (2004)	15.0	14.2	14.1
Mali	1.3 (2006) 1.7 (2001)*	1.7	1.9	1.7
Niger	0.7 (2006) 0.9 (2002)	N/A	1.2	1.1
Rwanda	3.0 (2005)	8.9	5.1	3.1
Senegal	0.7 (2005)	0.5	0.8	0.9
Sierra Leone	1.5 (2005)	7.0	N/A	1.6
South Africa	16.2 (2005) 15.6 (2002)	20.1	20.9	18.8
Swaziland	25.9 (2006–7)	33.4	38.8	33.4
Uganda	7.1 (2004–5)	5.0	4.1	6.7
United Republic of Tanzania	7.0 (2004)	7.8	9.0	6.5
Zambia	15.6 (2001–2)	21.5	16.5	17.0
Zimbabwe	18.1 (2005–6)	33.7	24.6	20.1

Source: UNAIDS 2007 AIDS Epidemic Update

** In medical terms, prevalence is the percentage of a population that is affected with a particular disease at a given time.*

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ANNEX 7:

TIPS FOR PLANNING A "TAKE OUR DAUGHTERS TO WORK DAY"

1. Ask girls to think about a career or job about which they would like to learn more.
2. Ask them to identify a parent, relative, trusted adult, or mentor who works in this field and who would allow them to visit them at work.
3. If a girl does not know anyone who works in the field she is interested in, contact an organization or company you trust and ask if the girl could spend the day with someone who works there to learn more about a particular job.
4. Ask the girls to make their visits in pairs or groups of three to ensure safety.
5. Select a date for the site visits.
6. If a girl knows the person with whom she will be spending the day, ask her to contact the person directly to explain the activity goal and to ask if the person would be available to participate. You also should contact the person to explain that you are the girl's mentor and are organizing the activity.
7. If a girl does not know a person with whom to spend the day, assist her in finding an appropriate person to visit. Make sure you meet with this person ahead of time and explain the activity goal.
8. Invite all of the prospective hosts (people who will have the girls at their work sites) to a meeting to ensure that they understand that the activity objective is to expose girls to different careers. (If a meeting is not practical, you may also visit them individually.) Tell the hosts that the girls want to learn about the job, the education and skills necessary for the job, and what the person likes about the job. Explain that the girls may want some "hands-on" experience, but this does not mean that they should be expected to be the person's assistant for the day.
9. Contact the girls' parents to obtain their permission. If the girls will miss school, be sure to notify their teachers. You may want to ask the teachers if the girls can make a presentation about what they learn or get credit for a report about their experiences.
10. Before the girls visit their hosts at work, have them write a list of questions they would like to have answered during the day. Tell them to think about what they would like to know about the person's job, such as: What are your responsibilities? What do you do on an average day? What do you like best about your job? What education is necessary for the position?

To learn more about "Take our Daughters and Sons to Work Day" and about resources and other materials for girls, parents, teachers, and other adults participating in the event, visit the web site www.daughtersandsonstowork.org

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ANNEX 8:

COMPUTERS AND INTERNET TECHNOLOGY

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Session 2: Internet and E-mail 7

Today, computers can be found in school classrooms, offices, and in Internet cafés. They can help us learn, make our work easier, and expose us to interesting information from around the world—if we know how to use them. It's important for young people to learn how to use a computer because many organizations and businesses use them to conduct everyday business, such as writing reports, managing budgets, conducting research, and corresponding with other businesses. Students who have computer skills will have an advantage when looking for a job. These sessions are designed to introduce girls to computers and the Internet and to get them excited about this important technology and information that is "at their fingertips."

Note to facilitator:
These sessions are not intended to be a comprehensive course in various computer programs. See Annex 1: Resources and References under "Supplementary Module" for more information. If you do not feel comfortable leading a discussion on computers, ask someone to assist you with this module, such as a person who works at an Internet café or teaches a computer course. If possible, conduct the sessions in a computer classroom or Internet café so that the girls can get hands-on experience. If you would like to conduct more in-depth sessions on using certain computer programs, ask if a computer facility would donate some time for the girls to use the computers.

Remember: Learning about computers can be fun, but it is sometimes a stressful experience. It requires much patience to teach children—or even adults—to use a computer. Make sure you (or the facilitator) explain things clearly and repeat instructions. Allow ample practice time. Do not try to teach too much information in one session. Make sure to give practice assignments that are practical. In the end, you will probably find that young people are very fast learners when it comes to computers.

SESSION 1:
LEARNING ABOUT COMPUTERS

Time allotted:

Objectives

- Understand the advantages of learning about computers
- Learn the basic computer components
- Become familiar with basic desktop layout

Key Terms

- **CD-ROM:** A tool used to store information for computer use
- **Computer:** A machine with a hard drive, keyboard, and monitor that is used to perform functions such as word processing and mathematics problems
- **Cursor:** The blinking arrow or line on the monitor indicating the computer user's location on the desktop
- **Desktop:** The layout of icons and computer programs on the computer monitor
- **Disk:** A square instrument used to store computer data
- **Hard drive:** The "brain" of the computer (usually square or rectangular in shape) that stores information
- **Hardware:** All the physical parts of a computer, including the monitor, hard drive, printer, and scanner
- **Icon:** A symbol representing a particular computer function, document type, or the computer user's location on the desktop
- **Keyboard:** The part of the computer that allows a user to type in information
- **Monitor:** The screen that displays the information inside the computer hard drive
- **Mouse:** A small hand-held tool that is used to navigate within a computer program and to give commands. It is usually small and oval-shaped, and may be attached to the hard drive with a cord
- **Software:** Specific programs installed onto a computer and used to perform specific functions, such as word processing
- **Toolbar:** A bar running across the top and bottom of the computer monitor indicating various program functions. The computer user can "click" on the icons and words listed on the toolbar to perform various functions, such as opening, formatting, and saving a document.

Recommended Materials

- Computer hard drive and monitor (approximately one computer per 2–3 participants)
- Chalkboard and chalk, or paper to write on and attach to the wall
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Contact someone to lead or assist in leading the discussion.
2. Secure the use of a computer/computers.
3. Gather materials.
4. Prepare an information sheet for girls including computer terms and step-by-step instructions for performing functions discussed during the session, such as turning on the computer, creating a new document, saving a document, and shutting down the computer. (You may want to add more items depending on the content of your computer sessions.) This will help them follow along and can assist them when they use computers at a later date.
5. Review activities and discussion questions.
6. Prepare answers to girls' questions from the previous session.
7. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 15 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. To begin the session, ask the girls if they have ever seen or used a computer. Why are they interested in learning more about computers? Ask girls to name some of the advantages of learning how to use a computer.
4. **Overview explanation for participants:** Today, more and more young people need to learn computer skills that will help them in future jobs. They also use computers at school and for fun. The following session is designed to give girls the opportunity to learn more about computers and how to use them.

Activity 1: What is a Computer and What Does it Do?

Time allotted: 20 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. If some girls have used computers before, invite them to share their knowledge with the rest of the group. Ask other girls to share their ideas about how they might use computers, either at school or in a job. Your list may include:
   - Type school papers
   - Write a budget (using a common program called Microsoft Excel®)
   - Write a project proposal or report
   - Write a letter
   - Draw a chart, table, or graph
   - Draw a picture or graphic
   - Write a program for an event
2. Ask the girls if they can name the major parts of a computer. Refer to *Key Terms* for definitions. Explain that a computer is composed of four main parts or units. There is a central unit, called the hard drive, which processes and stores information. Two other "peripheral" units are the keyboard and mouse, which allow the computer user to enter data. The fourth unit, the monitor, allows the user to read information.

Activity 2: Practicing on the Computer

Time allotted: 60 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. The best way to learn about a computer is to use it. If you have secured the use of several computers, divide the girls into groups of two or three. Remind them of a few basic rules for using computers:
   - Do not eat or drink while using the computer.
   - Follow the instructor's directions.
   - Ask questions!
   - Do not turn the computer on or off without following the proper steps.
   - Always cover the machine with a cloth to make sure that dust or moisture does not damage it.
   - Have fun!
2. Invite girls to turn on the computer hard drive and monitor following the proper procedures. Once the screen is on, explain to them that this is called the "desktop." Instruct the girls to take turns holding the mouse and manipulating the arrow icon. Explain how to "click," "double click," "right click," and "left click" the mouse to send commands to the computer.
3. Once all girls have used the mouse, ask one girl in each group to click on the "start" menu in the lower left-hand corner of the monitor. Explain that a "menu" should pop up once they click on "start." In this menu, they will see a list of computer programs and computer functions.
4. For the first session, focus on using Microsoft Word® (MS-Word). Allow time for each girl to click on "start" and to open MS-Word. Explain the basic layout of an MS-Word document. Have them explore the menu toolbar (File, Edit, View, Insert, Format, Tools, Table, Window, Help) and the toolbar of icons, which is a list of shortcuts to various commands and functions.
5. Have the girls open a new MS-Word document by clicking on "File," dragging the cursor to "New," and releasing the mouse. Also have them open a document by clicking on the "New Blank Document" icon on the toolbar (the first icon on the left).
6. Invite the girls to take turns typing their names or a complete sentence. Explain to them how to use the spacebar and return key and how they can format a word by using the **bold,** *italics,* underline, and color functions, both in the icon toolbar and in the menu under "Format/Font."
7. At the end of the first session, invite the girls to save their document. Instruct them to move the cursor to "File" and select "Save As." Direct them to save the document in the appropriate folder. Explain how to name a document.
8. Once the girls' documents have been saved, explain the proper procedure for "shutting down" the computer. Remind the girls to wait until the computer is completely shut down before turning off the monitor. Have the girls cover the computers before leaving.

Activity 3: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time.

SESSION 2:
INTERNET AND E-MAIL

Time allotted: 3 hours

Objectives

- Become familiar with navigating the Internet
- Learn about various Internet tools
- Investigate Internet sites

Key Terms

- **Internet:** A worldwide network of computers that allows millions of people to access the same information
- **World Wide Web (www):** The most commonly used information-exchange service of the Internet
- **Modem:** An electronic device that transmits information through telephone lines. Modems make it possible to communicate via the Internet, e-mail, and fax.
- **Server:** A computer that processes requests from another computer. A server can be used on the Internet to send web pages to another computer.
- **Search engine:** A tool for finding information on the Internet. One of the most common "search engines" is the web site Google (www.google.com).
- **Web site:** A specific set of information accessible via the Internet. A web site is usually composed of one main "page," or "home page," and several other pages of information.
- **E-mail:** The term that is short for "electronic mail," a type of message that can be sent from one computer to another via the Internet.

Recommended Materials

- Computer hard drive and monitor (approximately one computer per 2–3 participants)
- Chalkboard, chalk, or paper to write on and attach to the wall
- Notebook paper for participants
- Pens or pencils for taking notes
- Pieces of paper for girls' questions
- Container (box, basket, envelope, etc.) for collecting questions at the end of the session

Preparation

1. Locate a place where girls may use computers to access the Internet.
2. Contact someone who can conduct, or assist you in conducting, a session on the Internet.
3. Familiarize yourself with various Internet search engines and web sites suitable for girls.

4. Prepare Activity 4. See **Annex I** and "Additional Activities" at the end of this module for web sites and ideas.
5. Gather materials.
6. Review activities and discussion questions.
7. Prepare answers to girls' questions from the previous session.
8. Prepare slips of paper for questions. (See final session activity.)

INTRODUCTION

Time allotted: 5 minutes

Facilitation Steps:

1. Conduct an icebreaker with the group. (See **Annex 2** for ideas.)
2. Read aloud the questions the girls submitted anonymously at the end of the previous session and provide answers. Ask the girls if they have any more questions and provide accurate responses.
3. **Overview explanation for participants:** Explain to the girls that the session will introduce them to the Internet.

Activity 1: What is the Internet?

Time allotted: 15 minutes

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask how many girls have ever used the Internet before.
   - What information can be found on the Internet?
   - Can anyone tell the group what it is or how it works?
2. **Background:** Explain that the Internet is a worldwide network of computers. The Internet was originally created by the US Department of Defense in 1969 to link computers at various universities. The name of the network was ARPANET, or Advanced Research Projects Agency Network. The network's purpose was to provide a safe means of communicating during war. As the network expanded, more and more people began to use the network for research. In 1982, the term **Internet** was first used to describe this system of interconnected computers.

   As the system expanded, private individuals created their own computer networks, the first of which was known as the World Wide Web (www.). Now, the term World Wide Web is often used as a general term for the Internet. The term is used because of how the Internet's structure resembles a spider's web: one computer in the center can connect to hundreds of thousands of other computers!

   Now, millions of people around the world use the Internet to conduct research, play games, communicate with family and friends, and buy products. The Internet is now regarded as one if the world's most significant inventions.

   Computers on the Internet communicate with each other via telephone lines, radio signals, cable lines, and digital networks, although most communication is by telephone. A **modem** acts like your computer's telephone. The modem dials a "server," which receives incoming calls from several computers. The server transmits information from computer to computer.

   The information that appears on the computer screen is often referred to as a web page. An individual or an organization creates a web page to tell people about their work, services, or products. Each web site has its own address, which usually begins with "www."

Activity 2: How to Use E-mail

Time allotted: 1 hour

Recommended for Ages: 10 and older

Facilitation Steps:

1. Ask the girls, "What is e-mail?" Explain that the word is short for "electronic mail," a type of mail message that can be sent from one computer to the other via the Internet.

   - How many have ever used e-mail?
   - How and why do people communicate with each other by e-mail?

   Background: E-mail was first used in 1971 as part of ARPANET. E-mail is a way to send someone an electronic letter, which they will receive almost instantly. E-mail messages are transmitted via the Internet. Now, people can "talk" to each other through "instant messaging," which is even faster than e-mail.

2. Next conduct the following activities:

   - Assist girls in opening a free e-mail account through a provider such as Yahoo!
   - Explain how to send and read e-mail messages.
   - Explain how to send an e-mail attachment.

Activity 3: Exploring the Internet

Time allotted:

Recommended for Ages: 10 and older

Facilitation Steps:

1. Pose the following questions:

   - How does a person begin to use the Internet? Ask students to name any web sites they have visited.
   - How did they find the site? Was it interesting? Was it easy to find information on that site?

2. The Internet is like a giant database of written information, photographs, pictures, and other forms of text. One web site often contains links to another web site, which is another reason why the Internet is called a web of information. "Web surfing" or "surfing the 'Net" are the terms used for moving from one site to the next. "Navigating the web" is another phrase used because, just like a boat captain or an airplane pilot, a person using the Internet needs to make decisions on which way to go.

   Invite girls to visit some of the Internet sites listed at the end of the module to practice surfing the 'Net. Some points you might want to discuss afterwards:

   - What sites did you like best? Why?
   - Are some sites easier to navigate than others? Why?

- Were some sites difficult to navigate? If so, what do you think was the problem?
- What sites should you avoid (such as certain "chat rooms" or sites for adults only)?

Activity 4: Scavenger Hunt

Time allotted: 1 hour

Recommended for Ages: 10 and older

Facilitation Steps:

1. Explain that there is so much information on the Internet, it's hard to know where to start looking!

   Search engines help you find specific information. On a search engine web site, you can type in keywords that tell the search engine what you want to find. For example, if you were looking for information on women architects, you would type in "women architects." The search engine will then scan through a giant database of web sites and, in seconds, will list the ones that might have the information. Sometimes, search engines will list web sites that don't have the information you want. However, they are a great way to start looking for information. Two of the most common search engines today are **Google** and **Yahoo!**. You can also look up various subjects in several online dictionaries and encyclopedias. (See Annex 1: References and Resources under "Supplementary Module" for more information.)

2. **A scavenger hunt** can help you practice using search engines and navigating the 'Net. In a scavenger hunt, people compete against each other to find a certain list of things or information. It can be played over the Internet, too.

   Explain that each girl will each receive a list of questions. They should use Internet search engines to help them find the answers to the questions. The first person or group to find answers to the questions wins!

Note to facilitator:

Scavenger-hunt questions should be difficult enough that girls would probably not know the answer without conducting some Internet research, but not so difficult that they will not be able to find the answers within the allotted time. Make sure you are able to locate the answers yourself.

Sample questions include:

a) What is the tallest building in the world? How tall is it?

b) Who was the first woman to travel into outer space?

c) What is the HIV rate in your country?

d) Who is the secretary-general of the United Nations?

e) What is the earth's circumference?

Activity 5: Questions and Closing

Time allotted: 5 minutes

Facilitation Steps:

1. Ask girls to summarize key points. Provide an additional summary as needed.
2. Thank the participants for their active involvement.
3. Ask girls if they have any questions they would like to share with the rest of the group. Once you have answered these questions, distribute slips of paper and ask the girls to write down any questions they have. They should not write their names on the papers. Have the girls place their questions in a box, basket, or envelope as they leave.
4. Establish the next meeting date and time if there is to be one.

ADDITIONAL ACTIVITIES:

- Let your voice be heard! Join an online discussion sponsored by UNICEF called "Voices of Youth." Share your opinions and read about other young people's lives. (www.unicef.org/voy/voy.html)
- Visit YouthNet, an online health information source for young people throughout the world, sponsored by Family Health International. (www.fhi.org/en/Youth/YouthNet/index.htm)
- Read articles, listen to music, and view slideshows at Afropop Worldwide, a guide to African and world music. (www.afropop.org)
- Learn about adolescent health at TeensHealth. (www.kidshealth.org/teen/)
- Create art online at the Kaleidoscope web site. (www.permadi.com/java/spaint/spaint.html)
- Find a pen pal from another country. (www.ks-connection.org)
- Look up words in English (even if you don't know the correct spelling) and play word games. (www.wordcentral.com)
- Find maps, flags, and information about countries around the world. (http://kids.yahoo.com/reference/world-factbook)
- Watch live video of penguins, sharks, and other ocean animals. (www.mbayaq.org)
- Learn more about animals and send your friends cute animal e-postcards. (www.sandiegozoo.com)

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HANDOUT 1:

MENTORING AGREEMENT WORKSHEET

We, _____ and _____, have
NAME OF MENTEE NAME OF MENTOR
voluntarily decided to enter into a mentoring relationship. We agree on the following guidelines to help make this relationship a rewarding experience for us both:

1. Duration of mentoring relationship

The mentoring relationship will last for _____ .
ONE SEMESTER, ONE YEAR, ETC.

2. Mentoring activities

(Examples: Home visits, individual mentoring, group mentoring, tutoring, meetings with teachers and/or parents, etc. Be as specific as possible about the activities you plan to do.)

We agree that the mentoring relationship will consist of the following activities:

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

3. Meeting frequency

We will meet at least _____ every _____ .
NUMBER OF TIMES WEEK, MONTH, SEMESTER, ETC.

These meetings will take place at _____ .
MENTEE'S HOME, SCHOOL, ETC.

4. Contact information

The mentoring meetings will be a priority for both of us. If either one of us cannot make a meeting, he or she will notify the other person at least _____ in advance
AMOUNT OF TIME
and the meeting will be rescheduled.

Mentor contact information:

_____

Mentee contact information:

_____

5. Mentor responsibilities

Mentors are role models. They also can serve as liaisons between a girl, the school administration, parents, and others. In some cases, a mentor may meet with teachers or parents to monitor her mentee's academic progress and well-being. In other situations, the mentor may organize extracurricular events and activities. We agree that the mentor's role in our mentoring relationship is to:

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

(If applicable) The mentor is expected to report to _____ regarding
NAME OF ORGANIZATION

the mentee's progress and/or activities every _____.
FREQUENCY

The report will be in the following form: _____.

6. Mentee responsibilities

Mentees engage in a mentoring relationship to learn, to receive guidance, and to grow. Mentees play an important part in ensuring the success of the mentoring relationship by stating the expectations they have and by participating in mentoring activities. We agree that the mentee's responsibilities in our relationship are to:

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

7. Termination of the agreement

If the mentee or the mentor violates part of the mentoring agreement, they will work together to decide if the mentoring relationship can be repaired or if it should be terminated. If the mentee and the mentor cannot agree on a way to resolve a problem, another person may be contacted to mediate a solution. The mentoring partnership will be terminated if either the mentor or the mentee believes that the parties can no longer work together.

We hereby agree to the above terms of our mentoring relationship.

_____
MENTOR'S SIGNATURE

_____
MENTEE'S SIGNATURE

_____
DATE

_____
DATE

_____
PARENT OR GUARDIAN'S SIGNATURE

_____
SIGNATURE OF SPONSORING ORGANIZATION

_____
DATE

_____
DATE

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HANDOUT 2:

MENTORING GUIDELINES

1. Work with the mentee to define common goals for your mentoring relationship.
2. Establish regular meeting times. Frequent contact with your mentee will let her know you are there to support her.
3. Show you are interested in your mentee. Ask about her family, her favorite school classes, and her dreams for the future. Without intruding on the girl's privacy or asking for confidential information, you may want to find out more information about your mentee by talking to her teachers or acquaintances.
4. Share your experiences with the girl when appropriate. This way the girl knows something about you, too. She may be inspired by your experiences and feel that she "is not alone."
5. Respect the relationship. Be on time to appointments, prepare necessary materials, and honor the mentee/mentor contract. Do not use your position as mentor to force a girl to do something she does not want to do.
6. Be a good listener. Let the girl do most of the talking. Empathize with the girl and put yourself "in her shoes" to better understand her situation.
7. Foster trust and honesty. If your mentee does not trust you, the relationship will be severely compromised. Don't make promises you can't fulfill.
8. Assist your mentee in finding solutions to her problems. Do not immediately offer a solution that you think is best. Ask questions that will help her come to a healthy, positive solution. Remember that the girl's solution may not be the same as yours.
9. Don't be judgmental or criticize your mentee. Help her assess a situation and make decisions for herself, but do provide guidance.
10. Be a positive role model. Remember that your actions sometimes speak louder than words.
11. Empower the mentee to make good decisions. Remember that a mentee will sometimes learn a valuable lesson by making her own decision, even if it is a poor decision. Your mentee needs to find her own path in life, but you can help point her in the right direction.
12. Determine how your mentee learns best. For example, some mentees will need to talk through their problems, while others will want more feedback from you. Help your mentee assess her strengths and weaknesses.
13. Maintain confidentiality. Do not share information about your mentee with anyone else, unless the girl's health or well-being is in danger.

14. Ask others for advice. If you do not know how to address a girl's particular problem, consult another mentor, a health worker, or other professional in the community. Consult the organization with which you are working to mentor the girl. If you need more information, contact local organizations or do research on the Internet.

15. Be patient! Working with young people is not always easy and sometimes time-consuming, but you'll be surprised by the rich rewards.

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HANDOUT 3:

INTERNATIONAL RIGHTS CONVENTIONS

Convention on the Elimination of all Forms of Discrimination Against Women (Summary of excerpts)[1]

Article 3 guarantees women the same human rights and fundamental freedoms as men.

Article 6 promises to take all appropriate measures, including legislation, to suppress all forms of trafficking in women and the exploitation of prostitution of women.

Article 7 guarantees women the right to vote in all elections and to run for office and serve in the government.

Article 10 guarantees total equality for women in education, including: working to reduce the number of girls who drop out of school; equal opportunity to participate in sports; and access to information on health and family planning.

Article 11 ensures equality for women in employment including equal pay and paid maternity leave; guarantees that women will not be punished or dismissed as a result of pregnancy or marital status.

Article 12 promises equality in health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning.

Article 16 guarantees men and women: the same right freely to choose a spouse and to enter into marriage only with their free and full consent; the same rights and responsibilities as parents, irrespective of their marital status; the same rights to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights; equal property rights for spouses. Finally this article bans the engagement or marriage of children.

Convention on the Rights of the Child ("Child-friendly" version, excerpts)[2]

Article 1 Everyone under 18 years of age has all the rights in this Convention.

Article 2 The Convention applies to everyone whatever their race, religion, abilities, whatever they think or say, whatever type of family they come from.

Article 6 All children have the right to life. Governments should ensure that children survive and develop healthily.

Article 12 Children have the right to say what they think should happen when adults are making decisions that affect them and to have their opinions taken into account.

1. http://www.un.org/womenwatch/daw/cedaw/cedaw.htm
2. http://www.unicef.org/magic/media/documents/what_rights_flyer_english.pdf

Article 19 Governments should ensure that children are properly cared for and protect them from violence, abuse and neglect by their parents or anyone else who looks after them.

Article 23 Children who have any kind of disability should have special care and support, so that they can lead full and independent lives.

Article 24 Children have the right to good quality health care, to clean water, nutritious food, and a clean environment, so that they will stay healthy. Rich countries should help poorer countries achieve this.

Article 28 Children have a right to an education. Discipline in schools should respect children's human dignity. Primary education should be free. Wealthy countries should help poorer countries achieve this.

Article 31 All children have a right to relax and play, and to join in a wide range of activities.

Article 32 The Government should protect children from work that is dangerous, or that might harm their health or their education.

Article 34 The Government should protect children from sexual abuse.

Article 35 The Government should make sure that children are not abducted or sold.

Article 38 Governments should not allow children under 15 to join the army. Children in war zones should receive special protection.

African Charter on the Rights and Welfare of the Child

The African Charter on the Rights and Welfare of the Child recognizes many of the same rights as the Convention on the Rights of the Child. It also specifically protects children from harmful social and cultural practices that may hurt the health or life of the child and customs and practices that discriminate on the basis of sex or other status. This includes child marriage and the betrothal of girls and boys before the age of 18.

HANDOUT 4:

TWO LETTERS, TWO LIVES[1]

Letter 1:

Dear Mariama,

Greetings! I hope you are well. I am sorry I have not written in so long, but I have been so busy taking care of things here. I apologize ahead of time for my poor handwriting and grammar. It's been so long since I have had time to write.

How is your family? How is your husband? I remember that when we were in school together he was always trying to get your attention at football games!

I am not sure exactly where my husband is living at the moment. He left two months ago to find work and I have not heard from him since. I have also heard he is looking for a second wife, now that I have had my fourth baby. My youngest daughter, who is now one year old, has had diarrhea for the last three months and I do not know what to do anymore. Since my husband has not sent money, I cannot take her to the health center. I tried to get a job in a nearby town, but since I never got my diploma like you did, no one will hire me. I do not know how I would have time to work outside the home, anyway. My oldest daughter, who is 10, is in school, but if I have another baby, she will have to stay home and help me with the little ones.

I hope your new job is going well. I look forward to receiving a letter from you soon.

Your friend,

Haby

Letter 2:

Dear Haby,

Greetings! I was so happy to receive your letter, although it made me sad to hear that your husband has left and you are now taking care of the children by yourself. Since he was so much older than we are, I never got to know him, but I am sure he will be in touch with you soon.

My husband is doing fine. He now manages his own Internet café and coaches football in his spare time! Our eldest son is now 6 years old. He has already started playing football with his father! He started school this year and really likes it.

My daughter Binta is now 3. She has had problems with eye infections, but thankfully the doctors were able to treat them. Now she can sees very well now and she runs around the house trying to keep up with her big brother! Binta spends most of the day with our neighbor, who has volunteered to look after her. In exchange for her help, my husband allows her to use the Internet each week. I also look after her children on the

1. Adapted from an activity in *Choose a Future! Issues and Options for Adolescent Girls*, The Centre for Development and Population Activities (CEDPA), Washington, DC, 1996.

weekends when I am not working. I have been working almost full-time now as an assistant accountant at the electric company. I guess those maths classes I took have finally paid off!

A neighbor mentioned he is going to be in your village next week, so I am sending some money with him for you to take your baby to the health center.

I miss you and hope that you can come for a visit soon!

Your friend,

Mariama

Discussion Questions

- What is the relationship between Mariama and Haby?
- How did they get to know each other?
- Where do they live now?
- What are the differences in Haby's and Mariama's lives? Are there any similarities? Describe each woman's family situation.
- How would you describe the tone of each letter? Explain your answer.
- How has education played a role in Mariama's life? In Haby's life? In their husbands' and children's lives?
- Is either one of these women's situations common in your community? Why or why not?
- What are the advantages or disadvantages of Mariama's life? Of Haby's life?
- If you were Haby or Mariama, how would you feel?
- Is there any advice you would offer to either Mariama or Haby?

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HANDOUT 5:

GOALS WORKSHEET

SHORT-TERM GOAL	**LONG-TERM GOAL**
Benefits in reaching my goal	Benefits in reaching my goal
What might stand in my way?	What might stand in my way?
What do I need to learn or do?	What do I need to learn or do?
Who will encourage me?	Who will encourage me?
Plan of action: steps I will take	Plan of action: steps I will take
Completion date	Completion date

HANDOUT 6:

AMINATA'S STORY

One day, Aminata was surprised by all the trash she saw around her high school. She realized the trash came from students and teachers, who get rid of what they do not want by throwing items over the school wall. As a result, paper, plastic bags, and other items blew around the school and into neighboring fields and houses. Surrounded by rubbish, the school looked ugly.

In her health class, Aminata learned that garbage pollutes the environment and often harms animals. She also learned that when children play in the trash piles, they spread germs that make people sick. And they can get hurt from broken glass or aluminum cans. Aminata also had heard some people complaining that they had to pick the trash from of their fields. For all these reasons, she decided that something needed to be done about the problem.

Aminata mentioned to some of her friends that she thought they should stop throwing their trash over the wall. A few of them laughed and told her that everyone in the town throws their trash outside. It was no big deal, they said. Some of Aminata's friends agreed that what they did was bad for the environment and made their school look ugly, but they told her they didn't know where else to throw their trash.

Aminata decided to talk about the garbage issue with her health teacher. The teacher agreed that the school's trash was becoming a big problem. He took Aminata to talk to the school principal, who asked Aminata to speak at the parents' association meeting the next day.

At the meeting, Aminata explained pollution's harmful affects on animals, children, and the environment. It also made the school look dirty. Some parents told Aminata that the garbage had always been there and they didn't think the parents' association needed to do anything about it. Aminata explained that the rubbish affects everyone in the community, even the animals and plants. Finally, the parents agreed to use school association's funds to purchase barrels or bins for the school so that people could throw their trash in one place and burn it regularly.

During the following week, Aminata and her friends went from class to class explaining the harmful effects of garbage and instructing students to throw their trash into the barrels. As Aminata was walking to school one month later, she couldn't believe her eyes: There was no trash blowing in the wind.

Discussion Questions:

- What problem did Aminata identify in her community?
- How did Aminata decide to solve the problem? Did she solve it alone or did she have help?
- What community resources did Aminata use?
- Did Aminata encounter any obstacles while trying to solve the garbage problem? If so, what did she do to overcome those obstacles?
- What leadership characteristics did Aminata display? How would you describe her leadership style?
- Have you ever acted as a leader and helped solve a problem or organize something in your community?
  If so, what did you do? What challenges did you encounter? How did you resolve them?

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HANDOUT 7:

TIPS FOR MANAGING STRESS

Get Your Body Ready for Stress

We know that we cannot avoid stress, so we should be ready for it physically. Here are some **dos** and **don'ts**:

DO get plenty of sleep—at least 8 hours (including prior to exams).

DO eat a nutritious diet.

DO exercise—play a sport, take a walk, etc.

DO try taking slow, deep breaths for 10 minutes; tense your muscles and then relax them, starting with your head and neck, going all the way to your toes; sit quietly, eyes closed, and rotate your head/neck slowly—first to the right, then left, then in a circle.

DO take time to have fun; take breaks from studying and working.

DON'T eat too many sugary snacks or drinks.

DON'T drink too much coffee, tea, or other drinks containing caffeine.

DON'T stay up all night studying for exams.

DON'T smoke, drink alcohol, or use illegal drugs.

DON'T do things that will endanger you physically, like walking alone in dangerous places.

DON'T spend time with people who want to pressure you into making bad decisions or participating in harmful activities.

Get Your Mind Ready for Stress

Here are some things that the girls can try to build up their mental muscles against stress.

DO develop positive friendships and relationships.

DO set realistic goals for yourself.

DO expect difficulties—frustration, failure, disappointments, sorrow, and pain.

DO learn to put difficult situations in perspective. Look for the bright side of situations.

DO practice imagining positive images. Sit quietly, eyes closed, and think of a place you like (a beach, a grove of trees, your grandmother's house). Let go of the stressful feelings and let the peace of these places fill your thoughts.

DO think of what you and your friends will do when you overcome a stressful situation, such as an illness.

DO laugh and sing. Take time to have fun.

DO seek support and understanding from people you trust, including family, friends, mentors, elders, teachers, and spiritual leaders.

DON'T withdraw and quit talking about your feelings.

DON'T start negative behaviors, such as being disruptive at school or disrespectful of elders.

DON'T deny or ignore stress and its effects on you.

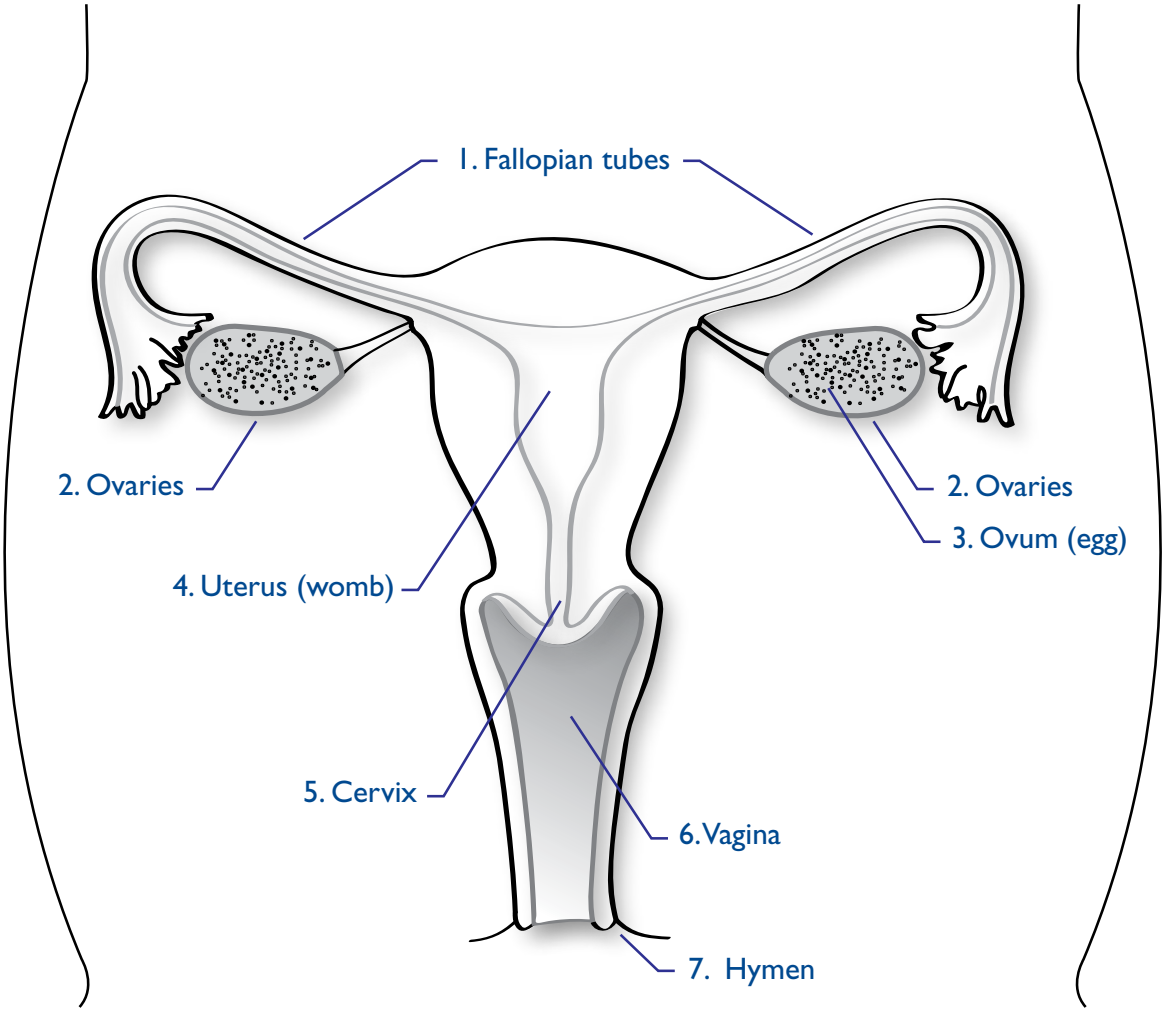
DON'T give up your positive cultural or spiritual values.

Some other tips

Get organized, plan ahead, break up your work into manageable tasks, seek assistance from others, and accept that a certain amount of stress is normal!

HANDOUT 8:

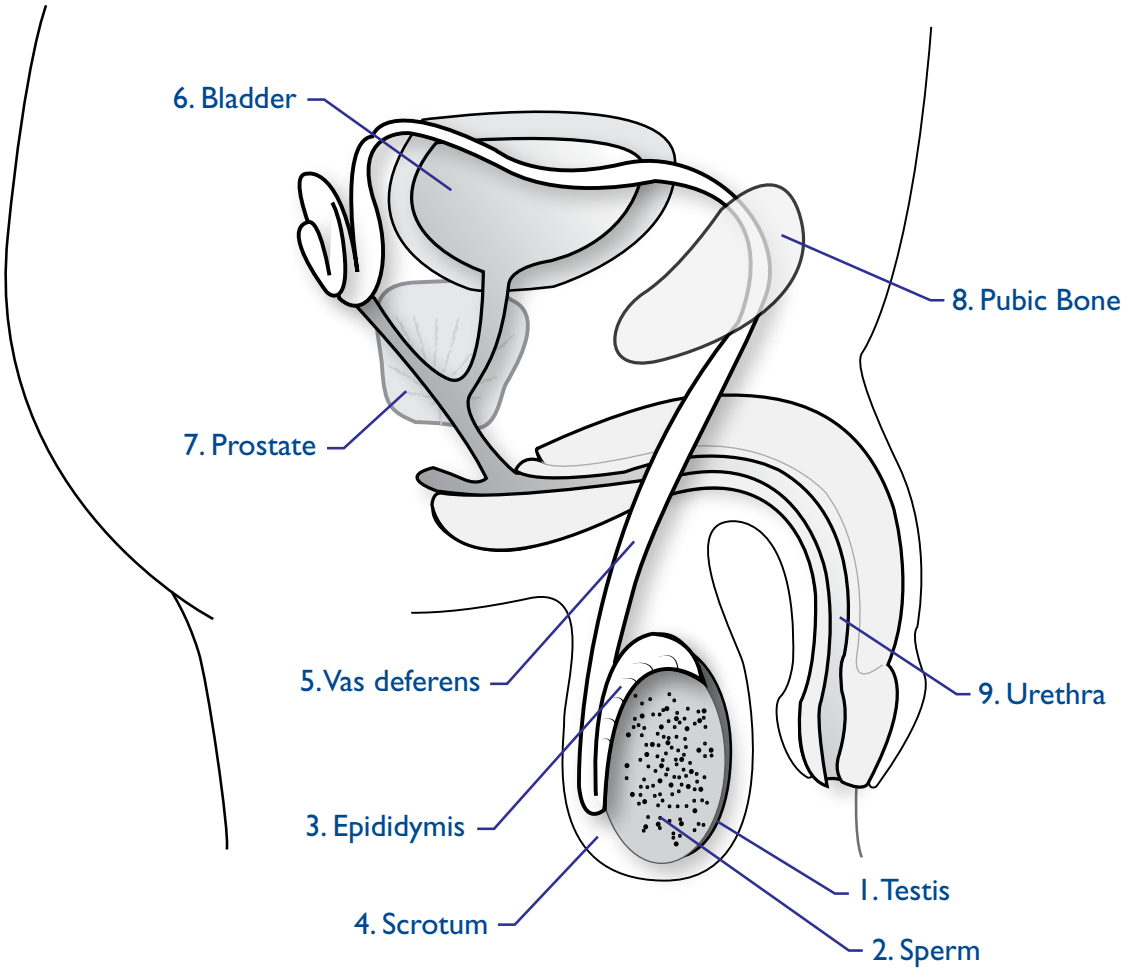
FEMALE INTERNAL REPRODUCTIVE ANATOMY



1. **Fallopian tubes:** A pair of ducts connecting the ovaries to the uterus
2. **Ovaries:** A pair of glands that produces ova (eggs)
3. **Ovum (egg):** The female reproductive cell
4. **Uterus (womb):** A hollow muscular organ that supports the fetus before birth
5. **Cervix:** The lower end of the uterus that opens into the vagina
6. **Vagina:** The passage leading from the uterus to the outside of the body
7. **Hymen:** A thin membrane covering the vaginal opening

HANDOUT 9:

MALE INTERNAL REPRODUCTIVE ANATOMY

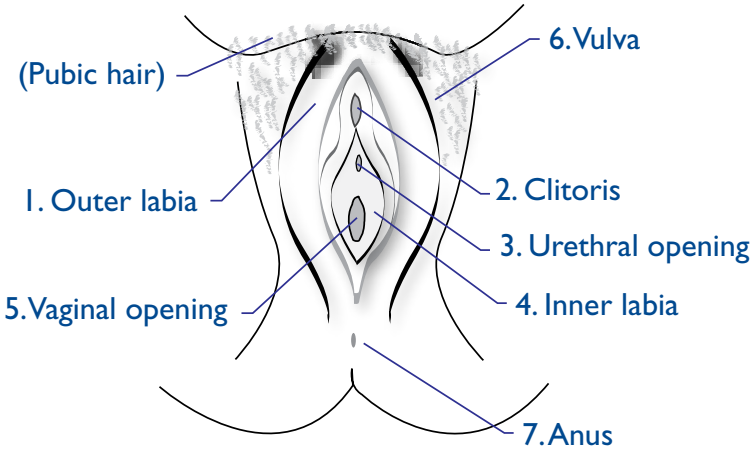


1. **Testis *(testes, plural)*:** One of two glands that produce sperm
2. **Sperm:** The male reproductive cell
3. **Epididymis:** Transfers sperm from the testis to the vas deferens
4. **Scrotum:** External skin sac surrounding the testes
5. **Vas deferens:** Conduit for sperm from the epididymis to the penis
6. **Bladder:** Sac that holds urine
7. **Prostate:** Gland surrounding the bladder and urethra
8. **Pubic Bone:** Bone in the lower part of the abdomen
9. **Urethra:** Tube that transfers urine from the bladder to the penis

HANDOUT 10:

EXTERNAL REPRODUCTIVE ANATOMY

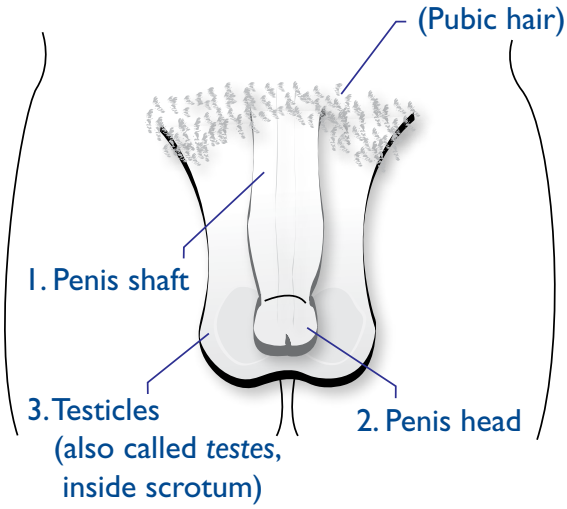
FEMALE



1. **Outer labia:** Two rounded folds of tissue surrounding the vaginal opening
2. **Clitoris:** Small organ responsible for female sexual pleasure
3. **Urethral opening:** Opening through which urine leaves the body
4. **Inner labia:** Narrow folds of tissue inside the outer labia
5. **Vaginal opening:** Opening leading to the vagina
6. **Vulva:** External female genitalia including the labia, clitoris, and vaginal opening
7. **Anus:** Opening through which fecal matter leaves the body

MALE

1. **Penis shaft**
2. **Penis head**
3. **Testicles (inside scrotum)**



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HANDOUT 11:

CARING FOR YOURSELF DURING MENSTRUATION

1. Change menstrual pads or tampons regularly. If you use reusable cloth pads, be sure to clean them thoroughly with soap to prevent bacteria from growing.
2. Bathe daily and keep the vaginal area clean to prevent infections.
3. Take a walk or participate in another form of exercise to reduce cramps.
4. Get adequate rest.
5. Eat healthful foods, including fruits, vegetables, and foods rich in iron such as leafy greens, liver, sardines, and beans and lentils.
6. If you experience headaches or cramps, try one of the following: massaging the lower abdomen or back, taking a warm bath, drinking a hot beverage, or taking a pain-relief medication such as aspirin. (Be sure to consult an adult before taking medication.)

Remember: Just because you have your period doesn't mean you have to change your daily activities. Girls who are menstruating can still play sports and attend school.

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HANDOUT 12:

PREGNANCY PREVENTION TRUE OR FALSE

STATEMENT	ANSWER
You can't get pregnant the first time you have sex.	**False:** A girl or woman may become pregnant the first time she has sex. A boy or man may get a girl or woman pregnant the first time he has sexual intercourse.
A girl cannot get pregnant if she has not started menstruating.	**False:** A girl's or woman's body releases an egg before menstruation occurs. A girl who has not yet had her first period can also get pregnant.
If you clean your vagina immediately after having sex, you won't become pregnant.	**False:** Cleaning your vagina with water, soap, or other chemicals will not prevent a pregnancy after intercourse. Once sperm have been ejaculated, they cannot be washed out of the vagina.
A girl or woman cannot get pregnant if she does not have sexual intercourse.	**True:** A girl or woman cannot become pregnant if she does not have sexual intercourse.
If you love the person with whom you have sex, you will not become pregnant.	**False:** Love does not influence or determine whether a person will become pregnant.
If you have sex standing up, you can get pregnant.	**True:** No matter what position you are in, sexual intercourse can lead to pregnancy.
If a man pulls his penis out of the woman's vagina before ejaculation, she will not become pregnant.	**False:** Even before a man ejaculates, a small amount of semen and sperm are released and can cause a pregnancy.
You will not become pregnant if you have sex with a man who is much older than you.	**False:** The boy's or man's age is irrelevant. You may become pregnant no matter how young or old your partner is.
If you are menstruating (bleeding) and you have sexual intercourse, you may become pregnant.	**True:** Even during menstruation, a girl or woman can become pregnant.
You cannot get pregnant if you urinate immediately after having sexual intercourse.	**False:** Urine does not pass through the reproductive system and cannot "clean out" sperm.
A reliable method of birth control, such as a condom or the birth control pill, can prevent pregnancy.	**True:** When used correctly, modern forms of birth control are highly effective in preventing pregnancy.

Adapted with permission from Choose a Future! Issues and Options for Adolescent Girls, *The Centre for Development and Population Activities (CEDPA), 1996, www.cedpa.org.*

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HANDOUT 13:

FACTS ABOUT COMMON CONTRACEPTIVES

Remember: Some methods of contraception are better suited for some people than others. Before choosing a method of contraception, be sure to consult with a health care professional!

	HOW DOES IT WORK?	HOW EFFECTIVE IS IT?	BENEFITS	DISADVANTAGES
Male Condom	The condom fits over a man's penis. It prevents pregnancy by preventing sperm from entering the woman's vagina, uterus and Fallopian tubes. It also prevents fluids from being shared, thus preventing STIs including HIV. A male condom should not be used at the same time as a female condom. The male condom is made out of a material called latex. Many condoms are lubricated. However, some people like to add lubrication. Only water-based lubricants (not oil-based ones such as Vaseline) should be used with a condom.	If used correctly and consistently, condoms are **nearly 100 percent** effective in preventing pregnancy and HIV transmission.	• Inexpensive (and sometimes free) • Available in many locations, such as shops, health clinics, VCT centers, or schools • Easy to use • The most effective method (besides abstinence) of preventing transmission of HIV/AIDS and other STIs	• Must be used correctly to ensure effectiveness • Must be put on directly before sexual intercourse, when the man's penis is erect • Use of this contraceptive is dependent on the male partner
Pill	The pill (also called an oral contraceptive) is made of artificial hormones that prevent a woman's body from ovulating (producing an egg) each month. As a result, the woman cannot become pregnant. A health professional must prescribe the pill.	If taken regularly, the pill is **99 percent** effective in preventing pregnancy.	• Easy to use • Does not interfere with sexual intercourse • Woman controls use • Often decreases the amount of bleeding and cramps during the menstrual period • In some women, reduces the likelihood of pelvic inflammatory disease, and ovarian and endometrial cancer • Use is not dependent on the male partner	• Must be taken every day • Some women who take the pill experience weight changes, spotting (infrequent bleeding), or vaginal infections • Does not protect against STIs including HIV/AIDS

	HOW DOES IT WORK?	HOW EFFECTIVE IS IT?	BENEFITS	DISADVANTAGES
Depo-Provera	Depo-Provera is a hormone injected into a woman's body once every three months. The hormone prevents ovulation, prevents sperm from reaching the egg, and prevents a fertilized egg from implanting itself into the uterus. Depo-Provera must be prescribed and injected by a health professional.	Depo-Provera is more than **99 percent** effective.	• Lasts for three months • Does not interfere with sexual intercourse • Can be used while breastfeeding • Woman can control use	• May cause irregular bleeding, weight gain, or headaches • Some women may experience a delay in becoming pregnant after discontinuing use • Does not protect against STIs including HIV/AIDS
Female Condom (Femidom)	The female condom is similar in shape to the male condom. It is made out of a strong material called polyurethane (a type of plastic). The female condom can be is inserted into the vagina several hours before sexual intercourse. The female condom prevents exchange of fluids, including semen, thus preventing pregnancy and HIV transmission. The female condom is pre-packaged with a water-based lubricatant. The female condom should not be used at the same time as the male condom.	If used correctly, the female condom is **95 percent** effective in preventing pregnancy.	• Easy to use • Can be inserted prior to sexual intercourse • Some users report that the female condom is more pleasurable to use than the male condom • Protects against STIs, including HIV (also covers more of the external genitalia than male condom)	• Not widely available • More expensive than the male condom
IUD (Intra-Uterine Device)	The IUD is a small device inserted into a woman's uterus. The IUD disrupts normal ovulation, impedes the sperm's ability to reach the egg, and prevents a fertilized egg (if fertilization does occur) from implantation in a woman's uterus. An IUD must be inserted by a health care professional.	More than **99 percent** effective.	• Always in place • Can remain in place for 1–10 years, depending on type • Woman controls use	• May cause cramps, bleeding, infertility • In rare cases, could puncture the uterus • Does not protect against STIs including HIV/AIDS

	HOW DOES IT WORK?	HOW EFFECTIVE IS IT?	BENEFITS	DISADVANTAGES
Sterilization	A surgical procedure that makes a man or a woman unable to produce a baby. In men, a doctor seals, cuts or ties the vas deferens, which prevents sperm from traveling from the testicles and into the penis. In a woman, a doctor blocks or ties the woman's Fallopian tubes to prevent ovulation (monthly release of egg into uterus).	More than **99 percent** effective.	• Eliminates the need for further use of contraception (except to prevent STIs/HIV) • Does not affect sexual desire or intercourse	• Requires a surgical procedure • Expensive compared to other forms of contraception • May cause side effects including pain, ectopic pregnancy (in women), bleeding, or infection • Permanent • Does not protect against STIs including HIV/AIDS
Traditional Methods	1. **Lactational amenorrhea (Breastfeeding):** After childbirth and during breastfeeding, a woman may not ovulate, thus preventing pregnancy. 2. **Rhythm method:** A woman determines when she can and cannot get pregnant (by monitoring vaginal mucus, body temperature, and menstrual bleeding). She abstains from sex or uses contraception during fertile periods. 3. **Withdrawal** (coitus interruptus): A man takes his penis out of the woman's vagina immediately before ejaculation.	1. **Breastfeeding** is 98 percent effective only during the first six months after childbirth and only if a mother breastfeeds regularly and does not have a menstrual cycle. Effectiveness is not consistent among all women. 2. Among most users, the **rhythm method** is only 75–80 percent effective in preventing a pregnancy, although it can be more than 90 percent effective if used consistently and correctly. 3. The **withdrawal method** is 81 percent effective for most users, although it may be up to 94 percent effective if practiced regularly and correctly.	• Low cost • Does not require a prescription	• Least effective of all other contraceptive methods • For many women, fertile times are difficult to determine and track • May be difficult for a woman to refuse sex during fertile periods • Not recommended for adolescents • Cannot be used if a woman experiences irregular menstrual cycles • Do not protect against STIs including HIV/AIDS

Other less common birth control methods include: the diaphragm, sponge, spermicides and the cervical cap. To find out more about them, consult a health care professional your area. Norplant, a contraceptive composed of six hormone "rods" inserted underneath the skin of a woman's arm, was discontinued in 2002.

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HANDOUT 14:

CONTRACEPTIVE MYTHS AND FACTS

Sometimes a man cannot use a condom because his penis is too large.	**MYTH.** Explanation: A condom is made out of a material that can expand to several times its size. To emphasize the point, blow up the condom like a balloon or put it on your arm to see how much it can expand!
If a woman takes birth-control pills for several years, she may not be able to get pregnant later.	**MYTH.** Explanation: Although a woman who has taken birth-control pills for several years may experience a delay in becoming pregnant, using birth-control pills will not affect a woman's ability to become pregnant later.
The "withdrawal" method is not a very effective method of pregnancy prevention. (Be sure to explain that "withdrawal" is when a man removes his penis from a woman's vagina before ejaculation.)	**FACT.** Explanation: The withdrawal method is only about 80 percent effective in preventing pregnancy. Moreover, it does not provide any protection against the spread of STIs including HIV.
Women who use contraception tend to have a lot of sex.	**MYTH.** Explanation: A woman who uses contraception is not any more likely than a woman who does not use contraception to engage in sexual activity.
Certain family planning methods cause infertility.	**MYTH.** Explanation: If used correctly, no contraceptives cause infertility.
If a male condom is in good condition, it may be used a second time.	**MYTH.** Explanation: A male condom should never be used more than once. After a condom is used, it should be disposed of immediately.
Condoms are a good method of preventing the spread of STIs including HIV/AIDS.	**FACT.** Explanation: If used correctly, condoms are very effective at preventing STIs including HIV/AIDS.
Buying contraception makes a person have sex with a lot of people.	**MYTH.** Explanation: Buying contraception does not make a person have sex with lots of people; he/she may simply wish to postpone or space out pregnancies for health or financial reasons.

If a girl carries a condom with her, she should be willing to have sex with her partner.	**MYTH.** Explanation: Just because a girl or woman carries a condom does not mean her partner should expect her to have sex.
Birth-control pills prevent the spread of STIs.	**MYTH.** Explanation: Birth-control pills only prevent pregnancy. They do not prevent against STIs including HIV/AIDS.
Condoms decrease sexual pleasure.	**MYTH.** Explanation: When used correctly, condoms do not decrease sexual pleasure.
Abstinence is the only form of birth control that is 100 percent effective.	**FACT.** Explanation: Only sexual abstinence is 100 percent effective in preventing pregnancy and the transmission of STIs.

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HANDOUT 15:

HIV/AIDS MYTHS AND FACTS

(Note to facilitator: Write down the statements below onto separate pieces of paper, or make a photocopy of the handout and cut the statements in the left column into separate pieces of paper. Do not distribute the answers in the right column to students. These are explanations for you to read aloud to them.)

Medicines exist that can treat HIV/AIDS. However, there is no cure for the disease.	**FACT.** Explanation: Several medications can delay the development of HIV into AIDS. Other medicines can treat infections that someone with AIDS may have. These medicines, however, are only treatments for existing symptoms. There is no medicine that will actually cure someone of HIV/AIDS.
The people most at risk of contracting HIV/AIDS are girls and women.	**FACT.** Explanation: Girls and women are more likely than boys and men to be infected by HIV/AIDS for a variety of biological, social, and cultural reasons. Almost 60 percent of those infected with HIV in sub-Saharan Africa are women, and girls are two to six times more likely than boys to become infected.
You will not get HIV or AIDS if you eat out of the same bowl or drink out of the same cup as someone who is infected.	**FACT.** Explanation: Unless an HIV-infected person has an open, bleeding wound in his/her mouth, eating with him or her does not put you at risk of becoming infected.
Sub-Saharan Africa is the region the most affected by HIV/AIDS in the world.	**FACT.** Explanation: Of the 33.2 million people infected with HIV, an estimated 22.5 million live in sub-Saharan Africa.
In NAME OF YOUR COUNTRY, approximately PERCENT of people are living with HIV.	(Cite statistics pertaining to your country from Annex 6 or consult the internet if your country is not in the table in Annex 6.)
Abstinence is the only 100 percent effective method for preventing the sexual transmission of HIV.	**FACT.**
Having unprotected sex with certain people, such as young girls or virgins, will cure someone who has HIV/AIDS.	**MYTH.** Explanation: There is no cure for HIV/AIDS. If someone who has HIV/AIDS has sexual intercourse and does not use a condom, he or she could spread the virus to another person. The age of the person having sex does not affect HIV/AIDS transmission.
HIV/AIDS is a disease that foreigners spread in Africa.	**MYTH.** Explanation: HIV/AIDS affects people from all countries of the world. Its spread within Africa has been due to several factors, including poverty, conflict, and certain cultural practices and beliefs.

Because people with AIDS will eventually die, it is better if they do not know they have the disease.	**MYTH.** Explanation: There are several advantages to knowing your HIV/AIDS status. First, a person who knows he has HIV/AIDS can obtain medicine that will help treat infections and increase the person's quality of life. The person may live longer and be able to take care of his or her family. However, if a person does not know that he is infected with HIV, he or she may spread it to other people. He or she will also develop AIDS sooner.
Some types of mosquitoes transmit AIDS.	**MYTH.** Explanation: No mosquitoes can transport HIV/AIDS. HIV cannot survive in a mosquito's body.
If a pregnant woman is infected with HIV, her baby will become infected as well.	**MYTH.** Explanation: Not all women who are HIV-infected will transmit the virus to their babies. Transmission depends on several factors, such as how much of the virus is in the mother's body during pregnancy. In addition, some modern medicines can prevent HIV transmission from a mother to her unborn child. While these medicines are not 100 percent effective in preventing HIV transmission, it is very important that a pregnant woman with HIV visit a health clinic to learn more about preventing mother-to-child transmission.
Some people have been cured of AIDS.	**MYTH.** Explanation: No one has ever been cured of HIV/AIDS. No traditional or modern medicines cure the disease.
Kissing someone is one of the most common ways to get HIV.	**MYTH.** Explanation: HIV is primarily transmitted through blood, semen, vaginal fluids, and breast milk. You cannot get it from closed-mouth kissing or kissing someone on the cheek. Deep, open-mouth kissing can carry a low risk if open sores or bleeding gums are present.
Only people who have sex with many people are likely to get HIV.	**MYTH.** Explanation: Anyone who has unprotected sex (sex without using a condom) is at risk for getting HIV. People who have sex with only one partner can become infected if the person they have sex with is HIV-positive. For example, a married woman who has sex only with her husband may become infected with HIV if her husband is having sex with other people.

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HANDOUT 16:

SEXUALLY TRANSMITTED INFECTIONS—SIGNS AND SYMPTOMS

SEXUALLY TRANSMITTED INFECTION (STI) NAME	SYMPTOMS	EFFECTS	TREATMENT
GONORRHEA	• Most women who are infected have no symptoms. • For some women, symptoms will include pain during urination, increased vaginal discharge (milky white or yellow/green), or bleeding between periods. • In men, gonorrhea can cause a burning pain during urination, painful or swollen testicles, or a white, yellow, or green discharge.	• Untreated gonorrhea can lead to serious, permanent health problems in both men and women, including sterility or pelvic inflammatory disease (PID) in women. • Gonorrhea can cause abdominal pain, vomiting, and irregular menstrual periods. • Women with gonorrhea can pass it on to newborns, causing blindness, joint infection, or blood infection.	Gonorrhea can be cured with antibiotics.
CHLAMYDIA	• Most women do not have symptoms. • Symptoms for women may include abnormal vaginal discharge. • Men may experience discharge from their penis or a burning pain during urination, as well as itching around the opening of the penis.	• If untreated, chlamydia can spread to the uterus or Fallopian tubes and can cause permanent damage, including chronic pelvic pain, infertility, and miscarriage. • Chlamydia may cause pregnant women to deliver prematurely. Chlamydia also can cause eye and respiratory tract infections in newborns. • If exposed to HIV, women infected with chlamydia are up to five times more likely to contract the virus.	Chlamydia can be cured with antibiotics.
CHANCROID	• Most women do not have symptoms. • Symptoms may appear three to seven days after infection and include small, painful sores on the genitals.	• The presence of sores or ulcers, the common symptom of chancroid, increases a person's likelihood of becoming infected with HIV if exposed.	Chancroid is curable with antibiotics.

SEXUALLY TRANSMITTED INFECTION (STI) NAME	SYMPTOMS	EFFECTS	TREATMENT
HERPES	• Most people are not aware they are infected. • Some people will develop painful blisters on the genitals or mouth. • Other symptoms include headache, fever, muscle aches, and chills.	• Sores may appear repeatedly throughout a person's lifetime. • Herpes can be passed to a newborn and cause blindness, brain damage, and death. • People with herpes sores are more likely to contract HIV if exposed to the virus.	There is no cure for herpes. However, the virus can be treated with antiviral medications.
SYPHILIS	• Many people have no symptoms. • Symptoms during the primary stage include a sore (chancre) on the vagina or penis. • If a person is not treated during the primary stage, secondary stage symptoms include a rash on the palms of hands or soles of feet, fever, headache, hair loss, and sore throat. • Late stages of the disease are marked by difficult muscle coordination, paralysis, numbness, gradual blindness, and dementia.	• If untreated, syphilis can damage the internal organs, including the brain, nerves, eyes, heart, liver, and bones. • Syphilis can lead to blindness, stroke, and death. • Pregnant women can pass syphilis to their unborn child, causing serious deformities and stillbirth. • Babies born with syphilis may not have symptoms but may experience developmental problems or die if not treated. • The presence of a syphilitic sore means a person is at higher risk of contracting HIV, if exposed.	Syphilis is curable with penicillin.
TRICHOMONIASIS	• Trichomoniasis is caused by a parasite most commonly found in the vagina (for women) or urethra (for men). • Symptoms in women may include a yellow-green discharge with a strong odor, pain during urination or intercourse, and itching in the genital area. • Most men do not have symptoms. Some men may experience mild discharge, irritation or a burning pain after urination or ejaculation.	• Genital inflammation can increase a woman's risk of contracting HIV, if exposed. • Pregnant women may give birth to under-weight babies.	Trichomoniasis can be cured with a prescription medication.

SEXUALLY TRANSMITTED INFECTION (STI) NAME	SYMPTOMS	EFFECTS	TREATMENT
HPV (Human Papilloma Virus)	• Most people do not have symptoms. • Some people may develop genital warts, which can appear weeks to months after infection.	• Certain types of HPV can cause cervical cancer in some women.	HPV is treatable with medications and, in some cases, may go away on its own.