

# NETBALL



**Drills to educate young people about  
Sexual Reproductive Health and HIV/AIDS**





# Table of Contents

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1. Introduction	4
2. Definition of terms	6
3. Life Skills	9
4. Shooting	21
5. Catching the Ball	27
6. Screening	31
7. Screening 2	37
8. Deffending	42
9. Passing	46
10. Dodging	51
11. Additional Information	56
12. References	59
13. List of People who participated in the Review of the Manual	60

# Foreword

**Y**OUNG people in Zimbabwe face unprecedented challenges related to their sexual and reproductive health.

These challenges include a severe HIV epidemic exposing young women to extraordinarily high rates of new infections, high levels of early and unintended pregnancies and limited access to sexual and reproductive health rights. Of particular concern is the increased vulnerability of young women to maternal mortality, due to gender inequality, low access to education, adolescent pregnancy and low access to sexual and reproductive health.

This Adolescent Sexual Reproductive Health (ASRH) Soccer manual was developed as a tool to complement and reinforce the Government of Zimbabwe's efforts through the Ministry of Health and Child Care, the Ministry of Primary and Secondary and the Ministry of Education, Sport, Arts and Culture in the delivery of Adolescent Sexual Reproductive Health services to youth in and out of schools. The manual has also been created to engage and educate young people about Sexual Reproductive Health (ASRH) and HIV/AIDS through imparting life skills and values that will develop their resilience. This manual was developed through a multisectoral and consultative process that relied heavily on the then Ministry of Education, Sport, Arts and Culture Curriculum Development Unit and the National ASRH Coordination Forum.

The development and content of the manual relies heavily on the existing MoESAC Life Skills, Sexuality, HIV and AIDS Education Strategic Plan: 2012 – 2015, The National ASRH Strategy: 2010 - 2015 and the National

Standard Adolescent Sexual and Reproductive Health (ASRH) Training Manual for Service Providers. The manual also seeks to apply a life skills and human rights approach in translating ASRH messages through sports. Sports represent a non-threatening environment whose principles the youth will readily understand, hence the manual takes these sporting principles and translates them to ordinary life and then into lessons on aspects of sexual and reproductive health.

This ASRH Sports manual will contribute to coming up with a generation of young people who know and have skills on how to safeguard their sexual reproductive health, make informed and responsible choices as well as practical steps to protect their SRH rights, including building and maintaining positive and safe relationships.

The ministries of Health, Education and that of Sport therefore partner with other stakeholders in endorsing this manual to be used as a complement of the existing education curriculum to teach and educate the youth in and out of schools on Adolescent Sexual Reproductive Health.



Ministry of Primary and  
Secondary Education

**Permanent Secretary**



Ministry of Sports, Arts and  
Culture

**Dr. T. Chitepo**

**Permanent Secretary**

# Introduction

**T**HIS manual was designed to complement efforts by the Ministry of Health and Child Care, the Ministry of Primary and Secondary Education and the Ministry of Sport Arts and Culture in empowering young people on sexual reproductive health (SRH) issues. This manual can only be used by a coach who has undergone relevant training.

The Coach and his or her assistant are the key drivers of this manual. Their role is to guide and encourage the participants to share ideas, information and experiences. It is the facilitator's role to bring the discussions to a conclusion by highlighting 2 or 3 life skills as take home messages at the end of each drill.

The coach must be well prepared, as well as aware of the barriers to communication which can affect young people from effectively participating in discussions about SRH. During the training of the coaches, effective communication with the young people is emphasized. The coach must pay attention to the following:

**Knowledge** – You need to be knowledgeable if you are speaking on a topic you do not know a lot about. If you do not know something, it is okay to tell the youth that you do not know at present, but that you can find out for them. Also, you can refer youths for more in-depth discussion with the relevant service providers such as clinics, churches etc.

**Attitude** – Negative attitudes can affect the impact of the message. Good communication must be non-judgmental. You must be aware of your attitudes and biases and keep them out of your communication. Never impose your opinions on controversial topics. Be a good listener.

**Age** – Some youth do not feel comfortable with people either younger or older than themselves. You therefore need to show proper respect. Explain that when there are serious health consequences, there is need to discuss issues that are sometimes personal. It is important for you as a coach to de-role during discussions.

**Religion and Culture** – Sometimes youth may feel uncomfortable sharing their thoughts and feelings with a person from another culture or religion. It helps for you to have background information of the religious and cultural beliefs of the youth. Try to identify times when religious and cultural values might interfere with communication, and work with them (do not ignore them). Respect people's values, even when you do not agree with them.

**Sex** – Some prefer to communicate with people of the same sex (especially about personal subjects). Again, acknowledge that the discussion might be sensitive but explain that it is necessary to discuss personal topics for health reasons. Acknowledging embarrassment usually helps youth to overcome it.

**Language** – Technical words can be too difficult to understand. It is important to speak in terms that young people understand and to use acceptable names for things. You therefore need to keep the language simple. Confirm whether terms are familiar and understood by youth. If not, explain the terms or use more familiar words.

**Economic status** – Youth might find it hard to relate to a person who appears to be of another economic status. You need to show respect no matter how poor the adolescent might appear. Avoid fancy

dress. Sit among group members, instead of standing over them or sitting apart from them. Again, remember to de-role.

**Time** – When possible, let the youth choose the time for discussion. Remember, good communication can occur even when little time is available. Choose an appropriate time to come in and manage or end the discussion.

**Venue** – Noise, excessive temperatures and poor seating facilities can interfere with good communication. Make sure the venue is conducive and in a location that

# Definition of Terms

For the purposes of this manual, the following terms shall be used and understood as defined:

## **Who is a young person?**

Young person (adolescent) refers to anyone between 10 – 24 years (United Nations). Adolescence begins at puberty. It is a period in which an individual undergoes major physical, psychological and emotional changes. It is a period characterized by exceptionally rapid growth and development. During this stage, the body develops in size, strength and reproductive capabilities, and the mind becomes capable of more abstract thinking. It is a phase in an individual's life, rather than a fixed age band, and is perceived differently in different societies.

Therefore, for purposes of this manual, the terms “adolescents,” “young people” and “youth” are used interchangeably to refer to the 10 – 24 year target age group for sexual reproductive health programming. (Standard National Adolescent Sexual and Reproductive Health (ASRH) Training Manual for Service Providers, Ministry of Health and Child Welfare, Zimbabwe, 2012, p11).

## **What is Sexual and Reproductive Health?**

**Sexual Health:** In broad terms, sexual health is a personal sense of sexual well being as well as the absence of disease, infections or illness associated with sexual behaviour. Sexual health requires a positive and respectful approach to

sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. (Standard National Adolescent Sexual and Reproductive Health (ASRH) Training Manual for Service Providers, Ministry of Health and Child Welfare, Zimbabwe, 2012, p27 - 28).

## **Reproductive Health**

Is the state of complete physical, mental and social well-being of an individual in all matters relating to the reproductive system and its processes and functions but not merely the absence of disease or infirmity. It also includes sexual health and suggests that people with adequate reproductive health have a satisfying and safe sexual life, can have children, and can make a choice as to whether they would like to have children and if so, when and how to have them.

Core SRH activities include providing universal access to voluntary family planning and maternal health services; protection from STIs including HIV, gender violence and harmful traditional practices such as polygamy and child-marriages; and the reduction of gender inequalities.

Young people typically have inadequate information about their own or their partners' bodies. They need information that is essential for making informed decisions about sexual behavior and

health. (Standard National Adolescent Sexual and Reproductive Health (ASRH) Training Manual for Service Providers, Ministry of Health and Child Welfare, Zimbabwe, 2012, p27 - 28).

### **Gender Based Violence (GBV)**

Is a violation of human rights and a form of discrimination. It is defined as violence

that is directed against a person on the basis of their gender that results in, or is likely to result in physical, sexual or mental harm or suffering to the individual, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

# HORMONES

Are substances produced by a gland that is carried in the blood and acts as a chemical messenger to another body structure. Hormones regulate body growth and development, control sexual drive and maintain the body's chemical balance.

## Female hormones and their effects

The principal female hormones are oestrogen, secreted by ovaries (female sex glands), which causes the body to develop secondary sexual characteristic such as breasts, pubic hair and progesterone, which helps maintain pregnancy by keeping the uterus a suitable environment for the embryo to grow.

## Male hormones and their effects

The male hormone testosterone, produced by the testes, controls the growth of the male reproductive system and stimulates development of secondary sexual characteristics.

Changes in boys	Changes in girls
Production of sperms	Growth in body height
Ejaculation	Development of pubic hair
Growth in body height	Body shape beginning to look adult
Development of pubic hair and beard	Voice changes
Body shape beginning to look adult	Skin problems (acne for some)
Voice changes	Sensitivity about personal appearance
Skin problems (acne for some)	Preoccupation with opposite sex
Sensitivity about personal appearance	Sensitivity to what others think and say about them
Preoccupation with opposite sex	Ovulation (the release of a ripened ovum or egg from the ovary)
Sensitivity to what others think about their wet dreams	Menarche (beginning of menstruation)
Growth in penis length and thickness	Menstruation (the periodic discharge of blood and tissue from the womb)
Growth of testes	Development of secondary sexual characteristics such as, breast enlargement, growth of pubic hair, enlargement of labia and clitoris
Gain in muscular strength	

*Adapted from the Standard National Adolescent Sexual and Reproductive Health (ASRH) Training Manual for Service Providers, Ministry of Health and Child Welfare, Zimbabwe, 2012, p11*

# LIFE SKILLS

Having good SRH means having the knowledge, skills, services and ability to make positive, informed, safe and responsible decisions about sex and sexuality. For young people to protect themselves and their partners from unintended pregnancies, HIV other STIs and from unhealthy or harmful relationships, they need a set of life skills which include being well informed about the risks and consequences of sex; having the confidence to stand up for their rights and beliefs; believing in themselves and their ability to say no to anything they do not feel comfortable with or that they know is unsafe.

One outcome will be a generation of youth who know the practical steps to protect themselves and others from STIs including HIV and AIDS. A second outcome will be a generation that will know and desire to take the practical steps if they suspect they are HIV positive so that they can lead a healthy and productive life.

## Values and attitudes

Values: Also the same as moral values are standards (principles) of behavior, which we use to classify behaviour as good or bad (right or wrong)

We learn or acquire many of our values from our family, religion, friends, education, cultural factors and personal experiences. Values are beliefs, principles and standards to which we assign importance. They are things we prize and give a degree of significance to.

Attitude: is a state of mind or a feeling. It is the mental stance we take in relation to the world. Attitudes are largely based on our personal values and perceptions. Attitudes are mental views, opinions, dispositions or postures.

## Sources of Values, Attitudes and Perceptions

Where do we get our values and attitudes?

From parents, society, culture, traditions, religion, peer groups, media (TV, music, videos, magazines, advertisements), school, cinemas, climate, environment, technology, politics, friends, personal needs, economics, family, and personal experiences.

## Key Moral Values

Love –	commitment to treat others well
Honesty –	commitment not to lie, cheat, steal or deceive
Justice –	to be without prejudice, discrimination or dishonesty
Faithfulness –	undeviating allegiance to a person, contact or oath

<b>Dignity –</b>	according appropriate worth to self and to others
<b>Responsibility –</b>	thinking rationally and being accountable for one's behavior
<b>Compassion –</b>	caring for those smaller and weaker than ourselves and not abusing or taking advantage of anyone
<b>Integrity –</b>	consistency in what one says and does and the commitment to be honest and conscientious in what one does or says.

## Negotiation Skills

In SRH discussions, there are other life-skills you need to emphasise as a coach which include teamwork, inter-personal communication and negotiation skills which are best brought out through role playing. Ask participants to do a role play on an adolescent relationship, for example a male youth negotiating for sex with his girlfriend.

Negotiation takes at least two parties with two different views on an issue, in this case sexual behaviour.

## Tips for Negotiation

- Be a good listener. Let your partner know that you hear, understand and care about what she/he is saying and feeling.
- Be “ask-able” – let your partner know that you are open to questions and that you won't jump on him/her or be offended by questions.
- Be patient and remain firm in your decision that talking is important.
- Recognize your limits. You don't have to know all the answers.
- Understand that success in talking does not mean one person getting the other person to do something. It does mean that you have both said what you think and feel respectfully and honestly.
- Avoid making assumptions. Ask open-ended questions to discuss.
- Avoid judging, labeling, blaming, threatening or bribing your partner. Don't let your partner judge, label, threaten or bribe you.
- Be assertive and not aggressive.

*Adapted from the Standard National Adolescent Sexual and Reproductive Health (ASRH) Training Manual for Service Providers, Ministry of Health and Child Welfare, Zimbabwe, 2012. p114.*

## Self Esteem

This is the way ‘we put value on ourselves’. It encompasses the way we perceive, the way we feel, the way we think and act.

“Everybody has self-esteem – it's what you think of yourself, the confidence level you have when dealing with problems and making all kinds of decisions.”

Bragging and pride are not self esteem!!!

### Characteristics of High & Low Self Esteem

HIGH SELF ESTEEM	LOW SELF ESTEEM
Optimism Enthusiasm Ambition Respect of self and others Kindness Volunteerism Commitment High internal drive Sense of humour Cooperation Individuality Accepting responsibility	Pessimism Withdrawal Laziness Rudeness Aggressiveness Volunteering others Lack of commitment Depression Boredom Conformity Anger Irresponsibility Lack of commitment Negative attitude

# WHAT IS STRESS?

- Stress is defined as pressure or worry resulting from mental or physical distress or difficult circumstances.
- An event that may be stressful to one person may not be so to another. People react differently to various situations.

## CAUSES OF STRESS

- Emotional/personal problems
- Traumatic experiences, i.e. violence, organized torture, gang warfare, gang rape, abductions
- Death of a family member or friend
- Economic hardships e.g. lack of money
- New environments or situations, changes in places of work, living situation, family situation
- Unemployment

## SIGNS AND SYMPTOMS OF STRESS

*Stress may manifest itself in either or both physical and emotional signs.*

### Physical: -

- Excessive substance (beer, drugs) abuse
- Fatigue
- Weight loss/gain
- Sleeplessness/insomnia
- Change in appetite (over-eating or loss of appetite)
- Skin problems (rash, pimples, acne)
- Loss of libido
- Impotence

### Emotional: -

- Mood swings
- Isolation or loneliness
- Depression
- Change in normal patterns of behaviour

- Anger or aggressiveness
- Irritability (snapping up at peers or family members unnecessarily)
- Sudden poor school performance for somebody who was performing well

### Ways of Reducing Stress

- Proper rest
- Deep breathing
- Exercises (relaxation, gym etc)
- Being more organized
- Sports (i.e. jogging)
- Hobbies
- Positive socialization (i.e. joining a youth club)
- Change of environment
- Communication (i.e. sharing problems with someone you trust—a guardian, a relative, counsellor or friend)
- Recognizing those things that are really important and those that are not
- Child/parent counselling
- Praying and meditation
- Religious singing
- Positive self-talk
- Accepting reality
- Recognizing what you can control and what is not in your control

### COMMON SEXUALLY TRANSMITTED INFECTIONS

There are many STIs and below are a few which can be easily noticed. The period from the day when a person is infected to the day the signs and symptoms occur differs according to the type of STI. This period is referred to as incubation period.

#### Genital ulcer

- Syphilis
- Chancroid

- Herpes
- Granuloma inguinale
- Lymphogranuloma Venereum

### Discharge

- Bacterial Vaginosis
- Yeast Infection
- Gonorrhoea
- Trichomoniasis

### Others

- Genital Warts

### Signs and Symptoms

*The different STIs present different signs and symptoms. Some of these signs and symptoms are:*

- Urethral Discharge
- Burning when passing urine
- Ulcers on genitals
- Pain in genitals
- Vaginal discharge that might be offensive
- Vaginal or vulva itches
- Lower abdominal pain in women
- Swelling and pain in the inguinal region

## CANCERS OF THE REPRODUCTIVE SYSTEM

### What is cancer?

- Cancer occurs when cells in the body grow out of control.
- Cancers are named for the part of the body where they start.

### What are reproductive cancers?

Reproductive cancers start in the organs related to reproduction (sex). These organs are located in the pelvis. The pelvis is the area in the lower belly between the hip bones.

The most common reproductive cancers in women are:

Cancer	Early symptoms
Uterine – begins in the uterus (womb), the organ where the baby grows when a woman is pregnant.	Uterine-vaginal bleeding or discharge that is not normal, pressure or pain in the pelvic area.
Cervical – begins in the cervix, the lower end of the uterus that attaches to the vagina.	Cervical-vaginal bleeding or discharge that is not normal.
Ovarian – begins in the ovaries, the two organs that make and house a woman's eggs.	Ovarian-vaginal bleeding or discharge that is not normal, pressure or pain in the pelvic area, belly or back, bloating.
Vaginal – begins in the vagina, the hollow channel that leads from the uterus to the outside of the body.	Vaginal-vaginal bleeding or discharge that is not normal.
Vulvar – begins in the vulva, the area around the opening of the vagina	Vulvar-pressure or pain in the pelvic area, itching, burning, rash, or sore around the opening of the vagina.
*Breast cancer is sometimes considered a reproductive cancer too. Breast cancer begins in the tissues that make up the breast.	Breast – a lump in the breast, fluid coming from the nipple, or changes in the skin around the nipple.

Source: <http://www.hhs.gov/opa/reproductive-health/general-reproductive-health/female-reproductive-cancers/index.html>

# WHAT IS HIV?

To understand what HIV is, let us break it down:

**H – Human** – This particular virus can only infect human beings.

**I – Immunodeficiency** – HIV weakens your immune system by destroying important cells that fight disease and infection. A “deficient” immune system can’t protect you.

**V – Virus** – A virus can only reproduce itself by taking over a cell in the body of its host.

**Human Immunodeficiency Virus** is a lot like other viruses, including those that cause the “flu” or the common cold. But there is an important difference – over time, your immune system can clear most viruses out of your body. That isn’t the case with HIV – the human immune system can’t seem to get rid of it.

We know that HIV can hide for long periods of time in the cells of your body and that it attacks a key part of your immune system – your T-cells or CD4 cells. Your body has to have these cells to fight infections and disease, but HIV invades them, uses them to make more copies of itself, and then destroys them.

Over time, HIV can destroy so many of your CD4 cells that your body can’t fight infections and diseases anymore. When that happens, HIV infection can lead to AIDS.

# WHAT IS AIDS?

To understand what AIDS is, let us break it down:

**A – Acquired** – AIDS is not something you inherit from your parents. You acquire AIDS after birth.

**I – Immuno** – Your body’s immune system includes all the organs and cells that work to fight off infection or disease.

**D – Deficiency** – You get AIDS when your immune system is “deficient,” or isn’t working the way it should.

**S – Syndrome** – A syndrome is a collection of symptoms and signs of disease. AIDS is a syndrome, rather than a single disease, because it is a complex illness with a wide range of complications and symptoms.

Acquired Immunodeficiency Syndrome is the final stage of HIV infection. People at this stage of HIV disease have badly damaged immune systems, which put them at risk for Opportunistic infections (OIs).

You will be diagnosed with AIDS if you have one or more specific OIs, certain cancers, or a very low number of CD4 cells. If you have AIDS, you will need medical intervention and treatment to prevent death.

*For more information about HIV and AIDS visit a nearest clinic or health service provider.*

## Is there a link between STIs and HIV?

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Having a sexually transmitted infection (STI) can increase your risk of acquiring and transmitting HIV. This is true whether you have open sores or breaks in the skin (as with syphilis, herpes, and chancroid) or not (as with Chlamydia and gonorrhea). Where there are breaks in the skin, HIV can enter and exit the bloodstream more easily. But even when there are no breaks in the skin, STIs can cause biological changes, such as swelling of tissue, which may make HIV transmission more likely. Studies show that HIV-positive individuals who are infected with another STI are three to five times more likely to contract or transmit the virus through sexual contact.

### **Are some people at greater risk of HIV infection than others?**

HIV does not discriminate. It is not who you are but what you do that determines whether you can become infected with HIV.

### **Are women especially vulnerable to HIV?**

Women are at least twice as likely to contract HIV through vaginal sex with infected males as vice versa. This biological vulnerability is worsened by social and cultural factors that often undermine women's ability to avoid sex with partners who are HIV-infected or to insist on condom use (gender based violence).

## **SEXUAL AND REPRODUCTIVE RIGHTS**

Sexual Rights include the human rights of women and men to have control over and decide freely and responsibly on matters related to their sexuality.

Reproductive Rights are integral parts of human rights. They are the basic rights of women and men to decide freely and responsibly on issues of sexuality and family planning, to have access to information to make these decisions and the means to carry them out. Reproductive rights include the right to attain the highest standard of sexual and reproductive health and the right to decide on issues of reproduction free of discrimination, coercion and violence.

Note: Sexual and Reproductive health rights are human rights. These rights are listed below.

- The right to life
- The right to liberty and security
- The right to equality and to be free from all forms of discrimination
- The right to privacy and confidentiality
- The right to freedom of thought or expression
- The right to information and education
- The right to choose whether or not to marry, and whether or not to found and plan a family
- The right to decide whether or not to have children
- The right to health care and health protection
- The right to the benefit of scientific progress
- The right to freedom of assembly and political participation
- The right to be free from torture and ill treatment
- The right to have a safe and satisfying sexual relationship

*As defined by International Planned Parenthood Federation, 2008. IPPF Sexual Rights: An IPPF Declaration.*

### **Youth Responsibilities vis-à-vis Rights**

- Participation in issues that affect their sexual and reproductive rights
- Advocacy for better services
- Taking responsibility for consequences of one's actions

### **Barriers to Rights**

- Cultural barriers
- Economic barriers
- Social barriers
- Legal barriers: For example, although young people have a right to decide when to have a child, abortion is not an option that they can simply choose except in cases of rape, incest or when the pregnancy threatens the health of the mother or the child.
- Lack of harmonization between some laws and policies.

*Adapted from the Standard National Adolescent Sexual and Reproductive Health (ASRH) Training Manual for Service Providers, Ministry of Health and Child Welfare, Zimbabwe, 2012, p163 – 164)*

# How To Use This Manual

Each section of this book is divided into four major parts. These parts are **Drill, Discussion, Application** and **Fact Sheet**.

The **Drill** section introduces the participants to the concepts or principles found in the lesson objective. The drill is a non-threatening way of bringing up challenging principles. If the drill is done correctly, it should lead naturally to the discussion. Please note that the drill is a part of the coach's training session plan. Therefore all other aspects of good coaching practice must be considered. Warm up, demonstration of techniques and skills for the participants to copy must be done.

**Discussion** -The discussion should be a natural follow up from the drill. The discussion can take place at the beginning of the training session, halftime or at the end of a training session depending on the coach's choice. Participation of students should be encouraged. The discussion hinges heavily on the coach's ability to facilitate discussions. Try by all means to involve all participants. An idea is to give each participant three stones. Each time they contribute they give away one stone.

**Application**—Lesson on sexual reproductive health, including HIV and AIDS. The coach must take care to prepare by understanding the objective of the drill, by studying the SRH and HIV and AIDS fact sheet at the end of each section before they go out to train the players.

# SHOOTING



## AIM

To educate that some positions carry more responsibility and commitment than others.

The success of a team lies in each person doing their job and not passing the responsibility to someone else.

## DRILL 1.

### 1. Skill Activity Preparation

- Netballs and netball court
- Have players go twice around the court to warm up. Jog the length of the court, sprint the far base line, run backwards down the other side of the court, hop along the closest base line.
- With the team starting on the base line, do a range of dynamic stretches up to the first transverse line and back. Change the stretch

each time you hit the base line e.g. Small feet, bounding, side-step, grape vine.

Put players into pairs and do passes between each other approx. 5m apart. 20 x chest passes, 20 x overhead jump passes, 20 x bounce passes, 20 shoulder passes.

## **2. Skill Activity Instructions**

**Skill** - To remind the young people of the main coaching points for shooting 1. Body must be well balanced and square to the goal post.

Feet shoulder width apart.

Ball sits on fingers of one hand with fingers spread wide. (ball should not be resting on palm of hand) Other hand on side of ball as a support only. Eyes focused on the goal.

Shooters arm extended high overhead. Keeping elbows in to avoid chicken wings. (Imagine you are shooting from inside of a tall but thin cardboard box, this will help keep elbows in and facing forwards as well as encourage front to back wrist release)

Drop wrist backwards a few inches towards the back of your head. As you drop the ball back bend your knees.

Straighten body and arm and the ball is released with a flick of the wrist and fingers. (Imparting a slight back spin).

Index and middle fingers should end up facing towards the ground. (Wrist ends up bent at approximately 90 degrees to hand).

Ball should fly in a high arc up and over the front rim and into the centre of the ring.

## **1. Activity – Drive and shoot**

2. Feeder starts with the ball at the top of the circle and the shooter starts

in front of the goal post.

The shooter sprints out to the side of the circle towards the first cone, then back towards the post.

As the shooter is driving back in, the feeder places the ball slightly in front of the shooter for her to jump and catch it in the air, landing on two feet, balancing herself and then shooting.

Shooter follows her shot, jumps for the rebound (if any).

Shooter turns quickly passes the ball back out to the feeder and drives to the next cone, repeating the exercise.

Once the shooter has driven to all 5 cones she swaps roles with the feeder.

## **DISCUSSION**

ASK: What did we learn in today's drill?

(courage, conviction and responsibility are required to make a shot)

ASK: If one is afraid to make a shot, can the team win the game?

Why do you think that?

ASK: Do you know of anyone who was courageous enough to take up a major responsibility? (Jairos Jiri's decision to start a place that could house, educate and help the disabled could be a good example)

We all know that STIs including HIV destroy the body. STIs also affect the lives of sexual partners, unborn children and also puts a cost burden on the nation. What can we do to take up the responsibility of ensuring an STI and AIDS free generation?

## **APPLICATION**

1. Do you know what HIV means?

*Human Immunodeficiency Virus.*

2. If you have this virus does this mean you have AIDS? Why?

Here you want the youth to understand that as long as the HIV is managed the person's life can be long and productive

3. If someone is already infected, what steps do you think are necessary for the management of STIs including HIV?

**Identifying** – this means testing.

**Information** – knowledge that will help you manage the virus.

What responsible thing can you as a future mother do to ensure that your unborn baby does not contract STIs including HIV and AIDS?

4. Would you agree to be tested for STIs including HIV? Why?

Here the objective is to draw the youths out so that they express their fears.

Possible answers:

I don't want to know?

If people find out I have the virus they won't like me any more.

What if I am positive?

Ask: is it not better to know your status so that you can get help?

If you suspect that you are pregnant, what do you do?

What must we do to avoid unplanned pregnancies?

Here we can include all the information about testing, counseling, resource centres and treatment that is available to youths.

## **CONCLUSION**

Today we learnt that we need to be responsible and to play our part if we are going to be winners against unintended pregnancies, STIs, HIV and AIDS.

All STIs are preventable, and it is your duty to protect yourself and the ones you love. Abstain from sexual intercourse. Stick to one uninfected, mutually faithful partner.

Condoms for males or females greatly reduce the risk of getting STIs and unplanned pregnancies if they are used correctly and consistently.

Young people who are sexually active may require contraception to: avoid unintended pregnancies avoid unsafe abortions avoid sexually transmitted infections (STIs) including HIV

## **FACT SHEET # 1**

### **COMMON SEXUALLY TRANSMITTED INFECTIONS**

There are many STIs and below are a few which can be easily noticed. The period from the day when a person is infected to the day the signs and symptoms occur differs according to the type of STI. This period is referred to as incubation period.

- Genital ulcer
- Syphilis
- Chancroid
- Herpes
- Granuloma inguinale
- Lymphogranuloma Venereum
- Discharge
- Bacterial Vaginosis
- Yeast Infection
- Gonorrhoea
- Trichomoniasis

#### **Others**

- Genital Warts

### **Signs and Symptoms**

The different STIs present different signs and symptoms. Some of these signs and symptoms are:

- Urethral Discharge
- Burning when passing urine
- Ulcers on genitals
- Pain in genitals
- Vaginal discharge that might be offensive
- Vaginal or vulva itches
- Lower abdominal pain in women
- Swelling and pain in the inguinal region

## TAKE HOME

- Protect your body by abstaining from sex until you are sure you are in control
- Your health is your life
- All STIs are preventable and it is your duty to protect yourself and the ones you love

# CATCHING THE BALL



## AIM

To educate the youth that influence or control over their feelings or sexual urges is an important asset.

Good catching of the ball is one of the most important skills for a player. A good catch allows the player to do what they want. A bad catch puts the player under pressure as the defender closes in.

## **DRILL 1.**

### **1. Skill Activity Preparation**

- Cones laid 10 meters apart.
- Break players into two groups.
- Each group lines up behind a cone.

### **2. Skill Activity Instructions**

- Players will pass the ball to the opposite team.
- The receiving player will receive the ball safely on their chest.
- The players will increase in the strength and speed of pass thus increasing difficulty for the receiver.

For variation players can attempt to do different passes (shoulder, bounce and over head)

## **DISCUSSION**

ASK: What did you learn from today's drill?

(Catching the ball is important, a bad catch puts you under pressure).

ASK: Have you ever had a bad catch in a game and what were the consequences?

SAY: Catching is like self-control.

ASK: Can you recall some situations that you have been in school or at home that require self-control?

ASK: Is it possible to control sexual urges? Tell me why? Are there boundaries we can set to help us with controlling our sexual urges? (manage what we watch (pornographic material), listen to, who we hang out with etc)

## **APPLICATION**

How would you define rape?

Rape is a criminal offense defined as forcible sexual relations with a person against that persons will.

If a boy fails to control his sexual urges and puts a girl under a lot of

pressure until she says yes, has the girl really agreed or is it force in a different way? Give reasons for your answer?

How would you feel after having sex against your will?

Let the youth respond.

Say: if someone took something away from you without your agreement you would feel robbed.

## **CONCLUSION**

We learnt today that catching the ball requires mastering the right technique. Also doing the right things like monitoring what we watch, listen to, who we play with will help us control our sexual urges.

## **FACT SHEET # 2**

### **How are STIs transmitted?**

Sexually Transmitted Infections are usually spread from an infected person to a partner during sexual intercourse. While some are spread only through sexual intercourse, others can be spread in other ways. These infections may affect the reproductive organs, and with the culture of silence on reproductive matters, STIs can be difficult to talk about.

## **HIV and AIDS**

It can take 3 months or longer for the AIDS virus to be detected in a person. During this period an infected person can infect any sexual partners before realizing that he or she has the HIV. The virus will continue to attack the body's disease-fighting power. It can take 5 to 10 years for a person to develop symptoms of AIDS. During this period, the infected person looks completely healthy but is continuously infectious.

## **Transmission of HIV**

A person who has HIV carries the virus in certain body fluids, including blood, semen, vaginal secretions, and breast milk. HIV is transmitted:

- Unprotected sexual intercourse (either vaginal or anal) with someone who has HIV.

- Sharing needles or syringes with someone who is HIV infected.
- Infection during pregnancy, childbirth or breast-feeding (parent to infant transmission).
- Unprotected oral sex with someone who has HIV.

STIs make people more prone to HIV infection

How is HIV not transmitted? (Myths and misconceptions)

It is not transmitted through food or air (for instance, by coughing or sneezing).

Sweat, tears, vomit, faeces and urine do contain HIV, but have not been reported to transmit the disease.

Mosquitoes, fleas, and other insects do not transmit HIV.

HIV changes the signs of some STIs making it difficult to identify them. Controlling the spread HIV infection is linked to preventing and controlling STIs.

## TAKE HOME

- Manage what we watch (pornographic material), listen to, who we hang out with
- STIs make people more prone to HIV infection

# SCREENING



To show that we must do everything in our power to protect ourselves from unintended pregnancies, STIs including HIV and AIDS. To learn about the various methods of prevention of STIs including HIV and AIDS infection.

- The most precious thing in the game is the ball.
- Do everything you can to protect the ball.

## **DRILL 1.**

### **1. Skill Activity Preparation**

- Netball and netball court
- Have players divide into two equal teams where they can warm up by playing a fun game of netball. The rules being that you can go anywhere on the court, however only two of any one team in the circle at any one time. Anyone can shoot. All other netball rules apply as in stepping, distance, contact etc.
- With the team starting on the base line, do a range of dynamic stretches up to the first transverse line and back. Change the stretch each time you hit the base line e.g. Small feet, bounding, side step, grape vine.

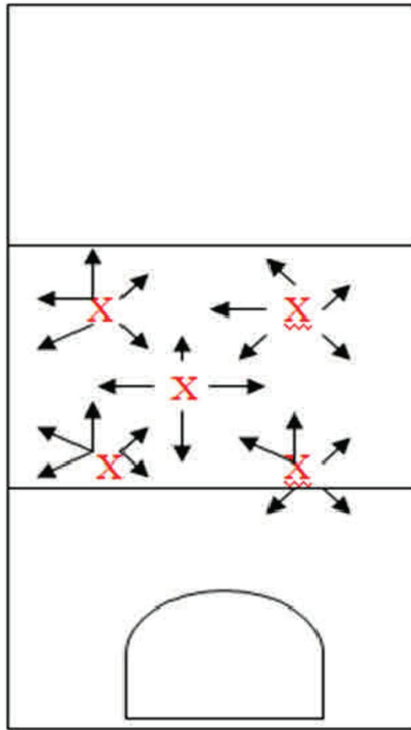
Put players into pairs and do passes between each other approximately 5m apart. 20 x chest passes, 20 x overhead passes, 20 x bounce passes

## 2. Skill Activity Instructions

The alternative to one on one defence is zone defence. Playing a zone means defending an area rather than a particular player. Players in a zone protect their assigned area. They pick up any opposition player that passes through their zone but does not follow her when she leaves. The responsibility passes on to the next team mate to pick up the mobile player. Zones can be an effective change if the opposition is not prepared. If well executed the defence looks outstanding and get a lot of quick turnover balls to pass to shooters and score!

In zone, players remain in a set formation and adjust as a unit with every pass of the ball until the ball is through the zone. The people at the back of the zone become the eyes of the zone and call the play for their team mates. All players must stick to their assigned area or they will leave a gaping hole in the zone which will leave the team exposed. The players must commit to the zone or it will not be effective.

- There are different types of zones but today we will look at centre court block.
- The 5 players that are allowed in the centre third set up as the number 5 on a dice (a rectangle with a player in the middle). See diagram



below. The centre player positions herself in the centre of the rectangle and the GA attack and the WA take up the front two corners.

- The shooter stays as a roving defence ready to pick up any opposition player or ball in the goal third. The WD and GD form the back two corners of defence. These are the eyes of the zone and call for their team mates.
- The object is not to allow your opponent to catch a ball in your area. That may be because you are marking them so tightly that the passer doesn't risk throwing the ball to them, you may get the held ball call, force an error e.g.
- Over a third as the opposition try to get the ball through or you are
- hunter of the ball and go for the intercept.

You must be ready as a unit to shift along depending on where the ball is. The centre is in charge of this move and must be roughly in line with

where the ball currently is. The outside players must move with her.

The goal keeper positions herself well back to act as a safety net. When a pass is received by the opposition in the centre third, the zone is broken and all players need to rush back to their players for one on one defence.

## DISCUSSION

ASK: What have you learnt from this drill?

Say: So the ball is worth protecting.

ASK: Are there things in our life that are worth protecting?

Possible answers: Family, friend, life, health, money etc

Say: You mentioned health as one of the things to protect.

ASK: What can we do to protect ourselves and our health?

Possible answers: eat a good diet, exercise, avoid taking drugs and alcohol, avoid having unprotected sex.

## APPLICATION

### 1. What might happen to someone who has unprotected sex?

Possible answers: They may contract STIs and HIV, drop out of school, face social stigma, have unplanned pregnancies etc.

Results of unprotected sex such as unplanned pregnancies can also cause stress, depression and even suicidal tendencies for both partners.

### 2. What are some STIs you know or have heard about?

Let them answer and then share the list below:

Gonorrhea, Chancroid, Genital Herpes, Syphilis, HIV, Monilia, Trichomoniasis, Pubic Lice, Genital Warts and Chlamydia.

Inform participants that there are some STIs that have no symptoms. Therefore, it is wise to go for regular health checks.

### 3. How might one know that they have one of these illnesses?

Let the youth respond. They will probably come up with most of the common symptoms. Highlight the following list:

**In men:** Discharge or puss from the penis, sores on the penis, lower abdominal pain, pain when passing urine, swollen inguinal glands, frequency in passing urine.

**In women:** Rash or irritation around the vagina, Vaginal discharge which maybe itchy, passing urine frequently, sores on the vulva, pain when having sexual intercourse, pain in passing urine, foul smelling vaginal discharge.

**4. What are some of the ways you know which protect or shield us from contracting STI's?**

Possible answers: correct use of condoms, abstinence and having one faithful sexual partner.

**5. Ask: Are people protected if they use condoms some of the times?**

**6. Ask: What are the chances of contracting STIs and HIV if you abstain from sex and unsterilized needles?**

**7. Apart from condomising, are there any other ways we could protect ourselves from STIs and unplanned pregnancies?**

## **CONCLUSION**

Your health is precious. The condition of your body determines the quality of life you will live. Why not shield and protect your body by abstaining from sex until you are sure you are in control, or by being faithful to your partner or by making sure you use the condom properly and consistently.

Let them reflect and then give them time to talk about how they will protect themselves.

If you have had sex and you are worried visit your nearest health service provider. Do not delay doing this and also do not be afraid or shy. Remember your health is your life.

Dismiss the group.

## FACT SHEET # 3

STIs, HIV and unplanned pregnancies prevention

How can I reduce the risk of becoming infected with HIV through sexual contact?

Practice ABC

- A- Abstinence
  - B- Being faithful to one sexual partner
  - C- Correct and consistence use of condoms
- 
- Do not exchange needles
  - Avoid contact with body fluids (blood, vaginal discharges etc without gloves)
  - Boys opting for Voluntary Medical Male Circumcision (VMMC) that reduces the rate of HIV infection in men by 60%
  - Even after VMMC always wear a condom during sex as circumcision does not give 100% protection

All STIs are preventable, and it is your duty to protect yourself and the ones you love.

- Abstain from sexual intercourse.
- Stick to one uninfected, mutually faithful partner.

Condoms for males or females greatly reduce the risk of getting STIs and unplanned pregnancies if they are used correctly and consistently.

Young people who are sexually active may require contraception to:

- avoid unintended pregnancies
- avoid unsafe abortions
- avoid sexually transmitted infections (STIs) including HIV

## TAKE HOME

- A- Abstinence
- B- Being faithful to one sexual partner
- C- Correct and consistence use of condoms

## SCREENING 2



To educate the youth to protect what is important — **HEALTH**

- The ball is the most important commodity on the field, you cannot win without it.

### **DRILL 1.**

#### **1. Skill Activity Preparation**

Netballs or balls x 8, hoops, 10 – 15 small objects such as tennis ball, bean bags, blocks.

Have players go for a short jog three times around the court to warm up. First time jogging. Second time side stepping, hopping, running backwards, skipping, jumping etc. Coach has whistle and girls change their movement, third time running.

With the team starting on the base line, do a range of dynamic stretches up to the first transverse line and back. Change the stretch each time you hit the base line e.g. Small feet, bounding, side step, grape vine

- Put players into pairs, 20 x chest passes, 20 x lob passes. Then stand players approximately 1m apart. One player is the passer and the other the catcher. The catcher is always on the ball of their feet keeping moving on the spot. The passer does short passes up, down, to each side – within the arm's length of the catcher's outstretched arms.

## **2. Skill Activity Instructions**

Play Rob the nest as a fun game to help with dodging, driving and speed. It helps in listening skills and following rules.

As per diagram. Teams are numbered 1 - 3 and stand behind their nest. Objects are placed in central nest.

Teacher calls a number and all players with this number run to the central nest to take one egg at a time back to their nest.

When all objects in the central nest have gone runners may rob the nest of the other groups.

The first team with a set number of eggs calls stop and wins e.g. 5 eggs (depends on the number of eggs you start with in the central nest)

Changes of number can be called at any time – if a new number is called during the middle of play runners must place the eggs they are holding on the ground and return to their nest so the new player can take over. All eggs are returned to the central nest following a win and the game begins again.

- Team members are not allowed to protect their eggs by hovering over them or hiding them
- This time play the game with netballs in the centre.
- The player whose number is called runs to the central nest and passes the ball back to another player in their team who is standing by their

nest. She continues to do this until there are no balls in the central nest. Another attacking player may watch and try to intercept these passes. She then runs to another team's nest and tries to steal their eggs.

However in this game the teams can have one de- fender who by using their body (as in netball) can defend their nest and try to stop the attacker from getting in and getting an egg. There must be no pushing or contact between players. An attacking player must dodge around the defender to steal an egg.

- The coach can call a change of number at any time an which case the attacker has to return immediately to their nest and tag the next numbered player that was called.

## DISCUSSION

ASK: What did you learn from the drills today?

ASK: What would happen if no one watched and protected the goal?

ASK: What are some areas in our lives at home, school and in community that we need to be watching and protecting?

ASK: What would happen if we did not watch and protect these areas?

How can we watch and protect ourselves from STIs, unintended pregnancies, HIV and AIDS.

## APPLICATION

How many of us here are ready to start a family? Give reasons for your answers.

Possible answers may include – still too young, don't have money for a family, don't want to have children etc.

How can we ensure that we control our decision not to have children yet?

Possible answers: Don't have sex, use condoms, use pills etc.

Share the list of contraceptive options that are available.

Which option protects you from unwanted pregnancies and STIs including HIV and AIDS?

## CONCLUSION

Today we have outlined ways in which we can protect ourselves from unwanted pregnancies, and STIs including HIV and AIDS. Make a commitment today to watch and protect yourself from the effects of unwanted pregnancies and STIs including HIV and AIDS as well as starting a family before you are ready.

## FACT SHEET # 4

Are young people at significant risk of HIV infection? Many young people also use drugs and alcohol, which can increase the likelihood that they will engage in high-risk sexual behavior.

### Peer pressure

Wanting to experiment especially during the adolescent stage (10-18 years). They can be sexually abused!

### *Is there treatment for HIV/AIDS?*

A number of drugs are available to treat opportunistic infections and illnesses (e.g. chest infection, diarrhea, tuberculosis) that affect people with AIDS. When taken as directed, anti-retroviral drugs (ARVs) can reduce the amount of HIV in the bloodstream to very low levels and often enables the body's immune cells to rebound to normal levels.

It is important for one to know their HIV status Get tested at a New Start Centre or local clinic If you test positive, further tests are done e.g. CD4 count or viral load to determine the amount of HIV in the blood.

If eligible, the person is commenced on ART and counseled on positive living.

### Join a support group

Once on ART, adherence to ARVs is critical for improved health Balance diet and Exercises are also important

Prompt treatment of opportunistic infections Keeping doctor's appointments to check on progress is also important Disclosure should

be considered so that one can get the required assistance from the family or friends. Disclosure should be voluntary but has many benefits if done properly.

### **TAKE HOME**

- Using drugs and alcohol can increase the likelihood that you will engage in high-risk sexual behavior
- It is important for you to know your HIV status

# DEFENDING



## AIM

To show that we need to defend our lives with all available resources including other people. To build high self-esteem.

- Defending is a team effort.
- Those who defend well always ask for help

## DRILL

### 1. Skill Activity Preparation

- Netballs and netball court
- Have players stand on base line jog to first transverse line and back to base line, then run to 2nd transverse line, back to base line and

then to end base line and back. Go through twice to warm up.

- With the team starting on the base line, do a range of dynamic stretches up to the first transverse line and back. Change the stretch each time you hit the base line e.g. Small feet, bounding, side step, grape vine. Any netball specific dynamic stretch.
- Put players into pairs and do passes between each other approximately 5m apart. 20 x chest passes, 20 x overhead passes, 20 x bounce passes, 20 x shoulder passes

## **2. Skill Activity Instructions**

In 2's with defender immediately behind attacker holding the ball. As attacker turns, Defender takes up a position at 0.9m and moves arms in such a way that the Attacker has to readjust the ball.

In 3's as above but as A turns with ball, D positions in such a way as to make it more difficult for A to pass to R

Variety – Encourage D's to experiment with two arms over the ball, one arm over and one arm out to deceive the attacker. Jumping is an option depending on the player and her opposition. You need to be able to quickly suss out which is the best defence for your opponent.

Practise in full court situation. Divide the team in half, e.g. 5 v 5. Give one side bibs to wear. Give each girl 5 points to start off with, whilst she correctly pressures her oppositions pass she keeps her points. If she doesn't then take a point off her, the first player to get down to 0 has to do 5 Star jumps (or similar). To take points off the girls instead of giving them points allows for the fact that some players may get 5 opportunities to pressure a pass before a player touches the ball.

## **DISCUSSION**

ASK: What did you learn about defending the goal?

It takes teamwork.

ASK: What would you do if your friend got injured?

ASK: What areas in your life need to be defended? Health

ASK: What are the things that pose a threat to your health? drugs,

diseases, alcohol, unhealthy diet.

ASK: When you feel pressurised about having sex or taking drugs who can you talk to?

## APPLICATION

Have you ever heard of self- esteem? What does it mean? Let the youth respond.

**Define self-esteem:** Self-esteem has to do with the way we value ourselves; whether we see ourselves as valuable and equal to others.

Do you think that you are valuable and equal to others? Why?

Do you think people who pressurize others to have sex believe others are valuable and equal to them? Why?

How does someone prove that they value you and they believe you are equal to them?

Wait for youth to respond. Then say: Someone who values you will respect what you say. They will not disrespect your yes or disrespect your NO.

Knowing that you are valuable, what will you do if the person you love pressurizes you for sex when you have said NO?

- Would you tell someone?
- Who would you ask for help?

How would you assist someone who has an unplanned pregnancy or contracted an STI?

## CONCLUSION

So in today's discussion we have seen that it is important for us to value ourselves. It is also important to value yourself so much that you defend yourself against all kinds of pressure.

We have also learnt that there are people around us who are well placed

to help us in the area of defending our lives. They are there to help us keep the ball in motion and stand by us. Let us make sure we ask them for help. Dismiss the team.

## **FACT SHEET # 5**

An HIV positive person can live a healthy happy life. Positive living will add quality to your life.

Adherence to medication and eating a balanced diet can prolong one's life.

Membership to a support group can help in building self-esteem and reducing stress.

You can have a treatment buddy (friend) who assists you not to forget taking treatment. Taking treatment for a lifetime can be exhausting hence the need of a treatment buddy and to join a support group.

While abstaining from sex until the right time and age is the best way to prevent unplanned pregnancy, STIs and HIV, adolescents who are sexually active may require contraception to:

- avoid unplanned pregnancies
- avoid unsafe abortion
- emergency contraception.

Emergency contraception, which is also called the “morning-after pill,” is a birth control measure that if taken after sexual intercourse, may prevent pregnancy. If a woman has unprotected sexual intercourse or a condom failure, she can take a regimen of pills within 120 hours that will prevent pregnancy. Recommended for adolescents in emergency situations only.

## **TAKE HOME**

- Everybody has self-esteem – its what you think of yourself, the confidence level you have when dealing with problems and making decisions
- Bragging and pride are not self-esteem
- Don't let your partner judge, label, threaten or bribe you.

# PASSING



**AIM:** To show that who we are connected to matters for the decisions and direction we take in life.

- Always look for a team mate.
- Avoid giving away possession.
- The ball is precious, keep possession

## DRILL 1.

### 1. Skill Activity Preparation

- Netballs, cones, hurdles and netball court
- Have players go for a short jog three times around the court to warm up. Coach has whistle. One blow on the whistle means jog, two blows means walk, three blows means sprint
- With the team starting on the base line, do a range of dynamic stretches up to the first transverse line and back. Change the stretch

each time you hit the base line e.g. Small feet, bounding, side step, grape vine

- Put players into pairs, 20 x chest passes, 20 x lob passes. Then stand players approximately 1m apart. One player is the passer and the other the catcher. The catcher is always on the ball of their feet keeping moving on the spot. The passer does short passes up, down, to each side – within the arm's length of the catcher's outstretched arms.

## **2. Skill Activity Instructions**

- Passing is a very important skill to develop as every ball movement down the court requires the ball to be passed. A good player can be defined by how well she handles the ball, from the time she catches it, to its safe arrival into the next player's hands. Ball control is a skill which is often neglected in training as you take it for granted everyone can do it. Passing and catching needs to be practiced at every training session.

There is the Chest pass, Shoulder pass, Bounce pass, Lob pass, Overhead pass, Sling pass and the Fake pass.

A good pass is accurate, strong and well timed. To achieve this, the player with the ball must set themselves into a balanced position whereby they are ready to achieve control on receiving the pass. The faster you can catch the ball, stop, get balanced, and identify the pass the better your individual game and that of the team will become.

## **DRILL FOR INDIVIDUAL PLAYERS**

- Find a solid wall and stand the girls in a row approx. 1.5m back for the wall. The girls have 1 minute to make as many passes and catches against the wall as possible. Aim for 100 passes in 30 seconds. Depending on the level of your players this can be repeated after a 30 second break. The players must try to do as much or better than they did the first time.

## Box drill

- Set out 4 cones in a square approx. 5m x 5m. You need at least 8 players standing in four corners, one player with a ball. Player 1 x passes the ball into the space ahead of player 2 who runs on to receive the ball and passes it into the space ahead of player 3 etc. Players move on to next group after the pass.

Progressions

Change direction

Second ball starts opposite corner to the first

Shrink and stretch the square whilst the play carries on

Add defenders and play within a 3rd of the court. Challenge is to see how many passes you can put together without the defence intercepting. Swap over when intercepted.

Ensure that the receivers time the move to receive

## DISCUSSION

Say: Today we learnt about passing the ball.

ASK: How does passing the ball help the team to keep possession?

ASK: What happens when you lose possession? (the opponent will hurt your team)

ASK: How do we know who to pass the ball to? (Same uniform, same team, scoring the same direction)

Say: In other words, your team mates would not do anything to make you lose possession.

ASK: What are some things we possess in life that are to be shared only with the right people. (direct to our health)

ASK: What should we do to keep possession of our health?

## APPLICATION

How do we tell that someone has a positive influence in our life? Let the youths respond.

Share this list of activities shared between positive peers: Reading, sports,

art and music, prayer, engaging in income-generating projects.

How can we tell that someone is a negative influence? Let the youth respond.

Share this list with them: stealing, lying, cheating on parents/authorities/friends, taking health risks such as smoking, drinking, engaging in sexual intercourse and drug abuse.

## **CONCLUSION**

Today we have seen that our lives are important possessions that cannot be entrusted to the wrong people. When we entrust them to other people we are not in control and can lose the ball! Once you've lost the ball you allow a lot of negative consequences and situations to take control and as such STIs, early and unintended pregnancies, HIV and AIDS enter the ball game.

## **FACT SHEET # 6**

### **Should I get tested?**

If you think you might have been exposed to STIs and HIV, you should get tested as soon as possible. Here is why:

Even in the early stages of infection, you can take concrete steps to protect your long-term health.

- Regular check-ups at a health institution will enable you (and your family members or loved ones) to make the best decisions about whether and when to begin anti-HIV treatment, without waiting until you get sick.
- Taking an active approach to managing HIV may give you many more years of healthy life than you would otherwise have. If you are HIV positive and pregnant, visit a health facility and join the PMTCT programme.

How can I get tested?

Most people are tested at local health centres, New Start Centres or in hospitals.

Counselors can answer questions about high-risk behavior and suggest ways you can protect yourself and others in the future.

They can also help you understand the meaning of the test results and refer you to local support groups.

Advantages of joining a support group are the same as advantages of playing soccer as a team. It's good to laugh with others. It relieves stress.

### STI Signs and Symptoms

Any abnormality in the genital area should be treated. Most signs are easily noticed in men due to the position of their organs, but signs may be absent or difficult to detect in women.

### Treatment Compliance

If those with STIs seek treatment early, most STIs can be treated and cured. Delaying makes the infection more difficult to treat and allows time for infecting partners. Be open with the health care provider, as misinformation can result in your getting the wrong treatment. Finish all the medication even when signs and symptoms disappear. Use condoms with all sexual partners until you are completely cured. Advise all sexual partners to seek treatment. Go for review even if you feel very well.

### TAKE HOME

- Protect your body by abstaining from sex until you are sure you are in control
- Your health is your life
- All STIs are preventable and it is your duty to protect yourself and the ones you love

# DODGING



## AIM

To help young people think through the alternatives when someone is putting them under pressure to have sex.

Dodging is an important skill to have.

Dodging allows a player who is tightly marked or under pressure to create space in order to pass or shoot.

## DRILL 1.

1. **Skill Activity Preparation**  
Netballs  
Cones

Netball court or flat hard surface area

### **Skill Activity Instructions**

Dodging is frequently used in netball as it is an easy way to lose a defender. The dodge begins before the player with the ball is ready to release the ball to allow time for the complete action.

A player dodges or makes a quick change of direction to lose her defender. When the attacker moves from side to side she must shift her weight quickly to her outside foot and then back again as quickly as possible. The idea is to make the defender believe you are about to run in a straight line the way you initially move. You then dodge the other way and drive forward onto the ball.

Set up 6 or 7 cones in a zigzag formation, evenly spaced about 1 to 2m apart. Players practise the necessary transfer of weight from one foot to another whilst running through the cones.

The player starts at one end of the cone and sprints to the first cone, where with bended knee she changes direction by placing all her weight on her outside foot then quickly transferring it back to the other foot, changing direction and driving away... to the next diagonal cone. Go through several times.

Add a passer into the drill – Once the player is confident and can do drill correctly. Add a passer. The passer can stand to either side, at the top and pass the ball to the player as they drive to that side. The passer times the pass for just after the player has made the dodge. This will help them to keep their head up and still watch for the ball.

Add a defender (remove cones for safety reasons) – Using the same approximate space that the cones in the previous drill took up. Players try to dodge free of the defender and receive the ball from the passer.

### **Finish with Fun**

All against one Dodge game. This game will reinforce the need to change

direction quickly, to keep the players heads up watching for the ball and it will make the rest of the team work together to choose the best solution to make the tag.

7-10 players

1 Ball, 1 Bib

One third of the netball court

One player is nominated to be the Dodger. They put on a bib to identify them as the dodger.

All other players work together passing the ball around within the third of the netball court and try to tag the dodger.

All netball rules apply, e.g. no stepping with the ball, 3 seconds to make the pass, etc.

The player making the tag must not throw the ball at the dodger but be in possession of the ball when tagging the player

When the tag is made a new tagger puts on the bib and game starts again until everybody has had a turn as the dodger

## **DISCUSSION**

ASK: What did you learn during the drill today? (you can relieve pressure by turning).

ASK: How does turning help to relieve pressure of a bad situation. (helps you keep control)

ASK: What situations/ people in your own life can put you under negative pressure and what kind of pressure could it be? Say: We learnt that turning relieves pressure or creates space.

ASK: Where or who can we turn to when someone pressures us to have sex?

ASK: Is it ok to pressure a boy or for a boy to pressure you into having sex?

## APPLICATION

What are the undesirable things that youths are faced with?

So what are the effects that these undesirable things have on young people?

How can you come out of these undesirable situations?

Did you get someone to confide in or are there other support systems?

Let the youth share their thoughts

Say instead of feeling the pressure by yourself there are options that are available to youth who think they might be infected with HIV or other STIs such as: -

- Clinic
- New Start Centre
- Local Doctor/Nurse
- Church/peer leader

Community based distributors of contraceptives

They will be there to walk through with you as you make some important decisions.

## CONCLUSION

Today we have learnt that whatever pressures we face in life be it sexual pressure or health pressure, we do not have to face it alone.

## FACT SHEET # 7

How can I help fight HIV/AIDS, STIs and unplanned pregnancies?

Everyone can play a role in confronting the HIV/AIDS epidemic. Here are just a few suggestions for how you can make a difference:

- Volunteer with your local AIDS service organization.
- Talk with the young people you know about HIV/AIDS.
- Speak out against AIDS-related discrimination.
- Value and preserve your body until time is ripe when you

are mature to make informed decisions.

- All relationships including sexual relationships should be based on consent, as without consent, one will be ignoring other people's right to choose and this result in abuse.
  - Delay sex.
  - If already sexually active, use protection during sex.
  - For boys, go for Voluntary Medical Male Circumcision.
- An HIV free generation begins with you!

## TAKE HOME

- Speak out against AIDS-related discrimination
- Value and preserve your body until you are mature to make informed decisions
- All relationships including sexual relationships should be based on consent, as without consent, one will be ignoring other people's right to choose and this result in abuse

## ADDITIONAL INFORMATION

Is there a link between HIV and other sexually transmitted infections? Having a sexually transmitted infection (STI) can increase your risk of acquiring and transmitting HIV. This is true whether you have open sores or breaks in the skin (as with syphilis, herpes, and chancroid) or not (as with Chlamydia and gonorrhea). Where there are breaks in the skin, HIV can enter and exit the bloodstream more easily. But even when there are no breaks in the skin, STIs can cause biological changes, such as swelling of tissue, which may make HIV transmission more likely. Studies show that HIV-positive individuals who are infected with another STI are three to five times more likely to contract or transmit the virus through sexual contact.

Are some people at greater risk of HIV infection than others?

HIV does not discriminate. It is not who you are but what you do that determines whether you can become infected with HIV. Are women especially vulnerable to HIV? Women are at least twice as likely to contract HIV through vaginal sex with infected males as vice versa. This biological vulnerability is worsened by social and cultural factors that often undermine women's ability to avoid sex with partners who are HIV-infected or to insist on condom use (gender based violence).

## OTHER RESOURCES WHERE TO GET HELP?

Youths have a right to receive accurate sexual and reproductive health information and confidential services without discrimination. These services are called Youth Friendly Services (YFS) and are accessible, acceptable and appropriate for young people.

Zimbabwe provides friendly SRH services to young people through health facilities, communities and schools.

Health facility: SRH services are provided to young people as part of the general public but special arrangements are made to make the service more acceptable to them. Every health facility is required to establish and equip some special rooms, which are referred to as “youth friendly corners”

Community: Service is offered via community youth centres including private pharmacies, police victim friendly units, New Start Centres, SRH drop-in or interact centres or clubs and institutions.

Schools: Service is mainly through the provision of life skills education and counseling for young people by both teachers and peer educators in schools (both public and private) and tertiary or vocational institutions. Where to get services and the kind of services offered

<b>Clinics</b>	<ul style="list-style-type: none"> <li>- Education and counseling on HIV and AIDS</li> <li>- Post HIV-test support,</li> <li>- Screening and treatment of STIs,</li> <li>- Provision of contraceptives and other family planning methods</li> <li>-Emergency contraception</li> <li>-Pregnancy testing</li> <li>-Comprehensive post rape care</li> <li>-Youth Friendly Corners</li> </ul>
<b>New Start Centres</b>	<ul style="list-style-type: none"> <li>-HIV testing and counseling</li> <li>-Medical male circumcision</li> <li>-Health information</li> </ul>
<b>Community Based Distributors</b>	<ul style="list-style-type: none"> <li>-Education and counseling on HIV and AIDS</li> <li>-Provision of information and education on SRH</li> <li>-Promotion of family planning services i</li> </ul>

<b>Service provider</b>	<b>Services offered</b>
	including the re-supply of appropriate contraceptives to eligible clients. They also refer and encourage communities to seek treatment early from a rural health centre or clinic.
<b>Churches</b>	Education and counseling -Care and support -Life skill training
<b>Police</b>	-Education and counseling Victim Friendly Unit and support
<b>Schools</b>	Education and counseling -Life skill training

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