BOTSWANA
TEEN CLUB

LESSON PLANS FOR LIFE SKILLS EDUCATION WITH ADOLESCENTS LIVING WITH HIV

BIPAI
Baylor International Pediatric AIDS Initiative

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Preface

The roll-out of anti-retroviral treatment (ART) programs in many sub-Saharan African countries has made it possible for large numbers of perinatally HIV-infected infants to reach adolescence. However, in many of these countries, HIV/AIDS treatment, care and support programs are organized around adult and pediatric care, neglecting the specialized needs of adolescents. Providing proper care for HIV-positive adolescents requires strong social support—by families, peers and adult role models—to encourage medication adherence, disclosure, proper nutrition and other healthy behaviors. Though the challenge of addressing the needs of a rapidly growing HIV-positive adolescent population is daunting, the Baylor College of Medicine International Pediatric AIDS Initiative (BIPAI) has risen to the challenge and has already spearheaded a number of medical and psychosocial interventions for its adolescent patients, including a network of peer support groups called “Teen Club” at its Centres of Excellence (COE) in Botswana, Lesotho, Malawi, Uganda, Swaziland and Tanzania. BIPAI has also been proactive in designing camp interventions, HIV prevention campaigns, life skills curricula, leadership training and transition of care services. With over 3,500 active members in 6 countries, the BIPAI Teen Club program is the world's largest network of support groups for adolescents living with HIV!

The mission of Teen Club is to empower HIV-positive adolescents to build positive relationships, improve their self-esteem and acquire life skills through peer mentorship, adult role-modeling and structured activities, ultimately leading to improved clinical and mental health outcomes as well as a healthy transition into adulthood. Teen Club events usually occur on Saturdays and include large group games, drama/theatre activities, pool parties, safaris, sports and art sessions. Educational components—including topics on HIV education, disclosure, adherence, life skills, college preparation, personal finance management and goal-setting—are also incorporated into the Teen Club events. In support of our mission, we have designed and are constantly updating customized life skills curricula (such as the lessons plans contained in this document) that are used to empower our adolescents to make healthy decisions as they transition into adulthood.

We hope that you find the enclosed lesson plans useful and welcome any feedback you might have. For more information about BIPAI and Teen Club, please visit www.bipai.org.
Acknowledgements

The creation of the following Teen Club lesson plans was a labor of love culminating from the tireless efforts of numerous staff and volunteers at the Botswana-Baylor Children’s Clinical Centre of Excellence (COE). Overall guidance and editing for this curriculum was provided by Edward Pettitt, Senior Project Coordinator at the Baylor College of Medicine International Pediatric AIDS Initiative (BIPAI) at Texas Children’s Hospital. Each of the lesson plans was created in conjunction with and reviewed by elected “Teen Leaders” at the Botswana-Baylor COE. The following COE staff and volunteers (in alphabetical order by last name) also contributed to the creation and revision of the lesson plans:

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A special note of gratitude is also extended to all members and volunteers of Botswana Teen Club, patients and staff of the Botswana-Baylor Children’s Clinical Centre of Excellence and their families.
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ADHERENCE

**General Tips for Facilitating Small Groups**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage the teens in conversations about the theme as they do small group activities.
- Encourage each teen to participate in the activity at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.

**Objectives:**
To understand:
- The effects of ARVs on the body
- Strategies for maintaining adherence
- How adherence to ARVs contributes to maintaining health
- The risk of drug resistance when not adhering to ARVs

I. **Introduction of Activity** 10 minutes
   Introduce the topic of the session, adherence, and provide a brief description of the session’s activities.

II. **Adherence Drama and Discussion** 35 minutes
   Select Teens, with the help of the Facilitator, will perform the following adherence drama:

   **Characters:**
   - HIV-positive teen (Tefo)
   - 1 Friend
   - 2 CD4 Cells (Soldiers/Masole)
   - 2 Viruses (Bad Guy)
   - 2 ARVs
   - 1 Narrator

   **Props:**
   - Signs with names of each character
   - Cell phone and notebook for Tefo
   - Disguise for 1 of the HIV viruses

   **SCENE ONE (15 MINUTES)**
   Narrator: This is Tefo, who is HIV-positive. These are the viruses in her body. These are her Soldiers/Masole, her CD4 immune cells. *Characters wave and show their name signs.*

   Narrator: In all people, your CD4 cells protect you from disease. They are like Soldiers/Masole who protects you. *Immune cells form a wall next to Tefo. The viruses stand on the other side of the wall.*
   Narrator: When you are infected with HIV, the virus weakens and kills your CD4 cells, the virus attacks your body, and you fall sick. *Tefo sits as the viruses push the CD4 cells out of the way and begin poking her. CD4 cells kneel down and look weak.*
Narrator: When we have few Soldiers/Masole, we need ARVs to help our bodies make more Soldiers/Masole and to make the virus sleep. ARVs recognize the virus. Tefo pretends to take her pills. The ARVs appear, recognize the viruses, take the viruses away from Tefo and put them to sleep a few meters away. ARVs stand watch over the viruses. CD4 cells stand up and look strong again. If we take our ARVs correctly, we can protect our bodies and live a long life. As time goes by, ARVs leave the body and we need to retake them.

Narrator: Tefo’s ARVs are called D4T, 3TC, Aluvia. You should know the name of your medications. Be sure to ask the doctor the name of your medications.

DISCUSSION: ASK SOME TEENS TO NAME THEIR MEDICATIONS. ASK THEM TO TALK ABOUT WHAT TIME THEY TAKE THEIR MEDICATIONS.

Narrator: Let’s see what Tefo does. Tefo wakes up, looks at her cell phone, and pretends to take her pills. Then in the evening… Tefo pretends to eat dinner, looks at her cell phone, and pretends to take her pills. Because Tefo takes her ARVs on time every day, the virus stays asleep.

Narrator: Tefo must take her ARVs for the rest of her life. ARVs do not make the virus go away. It just makes them stay asleep. One of the viruses snores. What happens if Tefo forgets to take her pills or gets tired of taking them? The ARVs leave. The virus wakes up and once again starts harming Tefo’s body. Viruses wake up, push past the CD4 cells and start poking Tefo. CD4 cells fall to their knees.

DISCUSSION: ASK THE TEENS TO SUMMARIZE WHAT THEY’VE SEEN IN THEIR OWN WORDS. REVIEW THE FOLLOWING KEY MESSAGES:

- Good Adherence Is Really Difficult, But, It’s A Challenge We Must Face.
- What Are The Names Of Your ARVs?
- You Must Take Your ARVs For Life; They Don’t Make The Virus Go Away, They Just Make It Weak And Sleepy And If You Stop, The Virus Wakes Up.
- ARVs Must Be Taken At The Same Time Every Day, Without Fail.

SCENE TWO (10 MINUTES)

Narrator: Sometimes, life is busy and we do not take our ARVs on time. Tefo begins her morning and takes her first dose of ARVs at 7AM. Tefo pretends to wake up, check her cell phone, and pretends to take her pills. The viruses are fast asleep.

Narrator: That evening however, she is busy with her homework. Tefo pretends to do homework. At 7PM, she forgets to take her ARVs. The ARVs leave Tefo’s body. ARVs leave, and one virus begins to stir and stretch.

DISCUSSION: ASK THE TEENS WHAT IS HAPPENING.

Narrator: At 8:30PM Tefo, remembers her dose. She knows that she has two hours from her scheduled dose to take her ARVs. If she is too late, she must wait until the next morning’s dose. She checks her cell phone. Tefo checks her cell phone. It is only one-and-a-half hours after her scheduled dose, so she takes her ARVs. Tefo takes her pills. The ARVs stand up and point at the waking virus. The virus goes back to sleep. Virus goes back to sleep.
DISCUSSION: ASK THE TEENS TO SUMMARIZE WHAT THEY’VE SEEN IN THEIR OWN WORDS. REVIEW THE FOLLOWING KEY MESSAGES:

- Good Adherence Is Really, Really Difficult, But It’s A Challenge We Must Face
- We Have A Two Hour Window In Which We Can Take Our ARVs- After That We Must Wait For The Next Dose

SCENE THREE (10 MINUTES)
Narrator: Tefo is strong and healthy and doing well in school. She is very busy with school and her new friends. Tefo continues to take her medication most of the time, but misses doses some days. In the morning, she takes it at 7AM. **Tefo wakes up and takes her pills (and continues to act out the narration).** **ARVs look strong.** That evening she is busy with her friends and forgets to take her medications. **ARVS leave.** The next morning, she takes it late. **Viruses stir.** The next morning, Tefo is late for school and forgets to take her medications. **ARVS leave.**

Narrator: What happens? Some of the viruses wake up because Tefo has missed some doses. **The viruses begin to stir.** And this time, one of them is smart and decides to change clothes to disguise himself/herself from the ARVs. **One virus puts on a disguise.**

Narrator: That evening, Tefo takes her ARVs on time. **The ARVs enter her body and look strong.** **Viruses go back and sleep, except for the one with the disguise.** But this time, the ARVs don’t recognize the virus in disguise. They can’t make it go back to sleep, because they don’t recognize it is disguised and they don’t notice it. **Virus pushes CD4 cells out of the way and begins poking Tefo.** This smarter, disguised virus can start damaging Tefo’s immune system and her body.

Narrator: Then, because the ARVs don’t recognize the virus, the virus can make more copies of itself. [Invite the teens to come up and pretend to be replicated viruses].

Narrator: The virus that doesn’t react to your ARVs may be a resistant virus. By missing doses of ARVs it makes it more likely that resistant viruses can develop. The virus woke up and put on a disguise. Now Tefo’s medications are no longer able to protect her completely from the viruses.

DISCUSSION: Ask the teens to summarize what they have seen in their own words. Review the following key messages:

- Missing doses can allow the virus to become resistant- too smart for the medications-and start to make you sick.
- See SUPPLEMENTARY APPENDIX A for more information.

III. Adherence: Helpful Tips to Remember to Take ARVs 10 minutes
Review information presented during the adherence drama and provide teens with some helpful tips for remembering to take ARVs.

IV. Icebreaker (in Small Groups) 5 minutes
V. **Adherence Dramas (in Small Groups) 30 minutes**

The facilitators should read the assigned scenario to members of her/her group and have group members develop a drama based on the assigned scenario.

**Scenario 1**
You have just started Form 1 at boarding school. You share a room in the hostel with six classmates; you all wake up at the same time in the morning and you are supposed to be at class at 7:30am. You normally have your breakfast at 6:30 am, and your supper at 5:00 pm. You go for your evening studies from 7:00 pm to 8:30 pm, and electricity is switched off at 9 pm. Your roommates don’t know that you take ARVs and the reason why you take them. Make a drama on how you will be taking your medicine.

**Scenario 2**
You are going to Maun for a two week holiday where you will stay with your aunt and cousins; no one knows that you are on ARVs. You will be sharing the room with three cousins. You will be taking your supper at 5:30 pm and after that you will be playing with your friends. Make a drama on how you will be taking your medicine.

**Scenario 3**
You are at a Teen Club meeting, and one of your Teen Club friends tells you that his/her adherence has been poor. Make a drama about how you could help your Teen Club friend to improve their adherence.

**Scenario 4**
You have been staying with your aunt at Broadhurst, but now you are moving to the cattle post to stay with your grandmother. Your aunt has been reminding you to take your medicine in the morning and the evening. Make a plan about how you will remember to take your medicine while you are living at the cattle post.

**Scenario 5**
Your mother has gone to her village for a funeral. Normally she is the one who reminds you and your brother to take your ARV medicines every day. Now that she is away, you are supposed to remember your own and your brother’s medicine. Make a drama about how you will remember to take your medicine while your mother is away.

**Scenario 6**
You are going to a football camp in Kasane. There is only one other teen that you know who is also HIV-positive. Make a drama about how you will remember to take your medicine.

VI. **Groups Perform Skits/Dramas 55 minutes**

Performances will go in group number order. Each group has 5-7 minutes to perform their skit, followed by 5 minutes of discussion to be led by the Teen Leaders and the guest speaker.

VII. **Large Group Discussion and Wrap-Up 5 minutes**

Teen Leaders and Facilitator will lead the group in a wrap-up and closing discussion about good adherence.
**Supplementary Appendix A: Adherence**

**Let’s talk about ARVs**

**What is an ARV?**

ARV stands for anti-retroviral. This term is used to describe the type of medication that is used to stop HIV from making copies of itself and then making your immune system very weak. There are a lot of different kinds of ARV medications and your doctor will choose the ones that he/she feels will work best for you. You will usually take between 2 to 3 pills twice daily and your doctor will have you come for appointments every month to examine you and draw your blood to make sure that the virus is responding to the medication.

In addition to your ARV medications, your doctor may also choose to give you a couple of other tablets like Cotrimoxazole and/or a Multivitamin. Cotrimoxazole is given to you for a period of time when the number of CD4 (Soldiers/Masole) cells in the body is low and you are more likely to develop a severe infection. This medicine is an antibiotic and helps to keep your body’s immune system strong. A multivitamin is often given to teenagers to help keep the levels of certain nutrients like Iron, Calcium, and Zinc high in the body’s tissues. These vitamins are especially important for maintaining your body’s overall health and function. Just like your ARVs, it is important to remember to take these medications every single day.

**What side effects can I expect from ARV therapy?**

Sometimes the medications may give you a rash, an upset stomach, diarrhea, or give you strange sensations in your arms and legs. It is important to report these things to your doctor because there may be a different medication that he/she could give you instead of the one causing the problems. It is also important to ask your doctor if your medicines can be taken with food. This will sometimes help make it easier to take the medications by preventing you from getting an upset stomach.

**Is ARV therapy a cure for HIV?**

ARV therapy is not a cure for HIV, it does not kill the virus. It only stops the virus from reproducing in your body. If you take your ARV medications as your doctor tells you, you will start to feel better because the amount of the virus in your body will decrease. However, there will always be some virus in your body.

**What happens when you take your medications at different times from those agreed with your doctor?**

The main reason for taking your ARVs at the same time every day is to make sure that the drug levels in your body remain high enough to suppress the virus all of the time. Then you skip a dose or take your pills outside the set times, the drug levels in your bloodstream become very low and the drug does not work effectively.

**I have been taking ARV therapy for a year and I feel good, why do I have to continue to take it?**

ARV therapy is a commitment for life; it does not get rid of HIV in your body. Even when your immune system is functioning well and your viral load is undetectable in your blood, the virus is still there, and will begin to multiply rapidly if you stop taking your ARVs. Stopping your ARV therapy will lead to your immune system weakening- your health will deteriorate significantly.

**Let’s talk about adherence**
What does the word “adherence” mean?

Adherence means taking your medication as prescribed, every day for the rest of your life. The first step towards adhering to your ARV therapy is understanding why and how you have to take your medications. ARV therapy will only work if you adhere to your treatment all of the time. If not, the virus will no longer be suppressed and may become resistant to the medications, meaning that the medications will no longer work. Remember, you must contact your doctor immediately if you experience any problems with your medications.

What is drug resistance?

If the tablets are not taken every day, you will give the virus a chance to develop something doctors refer to as resistance. Resistance occurs when the HIV inside of your body becomes smart. If it goes many days without seeing the medications in your body, the HIV will start to ignore them once it begins to see the medications again. In no time at all, the HIV will begin multiplying and taking over your body, leaving you very weak and ill. Even if you start taking your medications regularly, they will not work properly and it will be as if you are not taking any tablets at all. Your doctor will be able to tell that you are not taking your medicines when he/she tests your blood and discovers a large amount of HIV in the body and a very low number of “Soldiers/Masole” or CD4 cells. You may also develop fevers, weight loss, poor appetite, a skin rash or a limited number to choose from because HIV is a very difficult virus to fight. If you keep forgetting to take your tablets, or if you simply refuse to take them, you will develop a type of HIV that is resistant to all available types of ARVs, leaving you unable to be treated.

What happens if miss just one day? Does the virus become resistant?

Yes, the virus could become resistant. You must ensure that you do not miss any doses and that you always have one or two scheduled doses with you all of the time.

It is difficult to adhere to ARV therapy for the rest of your life. Are there any other options?

Unfortunately there are no other options, but to adhere to treatment. Although adherence to treatment is difficult, the benefits of adherence - living a long and productive life - far outweigh the burden of taking the medications. Like anything else in life, once you form a habit, it becomes easier.

Here are some ways that teens can remember to take tablets each and every day. Do the one that works best for you!

- **Pill calendar**- Your doctor can give you a pill calendar for every month of the year. There will be two spaces, one to write your morning medicines in and one to write your evening medicines in. You can cross off each day of the month after you have taken the pills until you finish the month and are ready to begin again. You can decorate your pill calendar with colors, stickers, pictures…whatever makes you remember to look at it and take your tablets. At the end of the month, reward yourself with a special treat if you have taken all of your pills!
- **Buddy system**- Is there someone else who takes medications at your home? If so, you should try to remind each other to take the tablets…or better yet, you could do it together! It may help you remember to take them if there is someone else who is doing it along with you as well.
- **Traveling and/or Social Activities**- Just because you take medicines twice-a-day does not mean that you cannot spend time with your friends, travel to visit family members, or take a holiday. You must prepare ahead of time and be sure to carry your tablets with you if you know that you will not be home to take them. Pharmacies in Botswana usually sell pill-boxes that can hold medications for up to 1 week. Sometimes this can be stored in a purse or backpack and is easy to travel with!
- **Alarm Clock**- If you have an alarm clock at home or an alarm that can be set on your wristwatch, set it! Having an alarm go off will remind you to take your medicines even if you are busy and are likely to forget.
- **Personal Responsibility**- A lot of teens will blame their parents, grandparents, aunties, uncles, sisters, brothers, etc. for not being around to give them their tablets. As a teen, you are starting to learn a lot about personal...
responsibility and need to be accountable for yourself. You should know the dosages as well as the name of your medications. DO NOT depend on anyone else to remind you to take your tablets. Your health is your responsibility and it will show others around you that you want to take care of yourself!

One last important thing to remember is to NEVER stop your medications without your doctor’s approval. This is very dangerous because you could develop severe infections and become very sick. If you are having difficulty remembering to take your pills or if you don’t like the way the tablets make you feel, please talk to your doctor before stopping the medication. They will be able to discuss these problems with you and offer you solutions. Remember that they have your best interests in mind!

**CAREER DEVELOPMENT**

**General Tips for Facilitating Small Groups**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage the teens in conversations about the theme as they do small group activities.
- Encourage each teen to participate in the activity at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.

**Objectives:**
Make teens aware of different career opportunities and what is involved in/required of someone in each of these careers

**Materials Needed:**
Materials for each professional’s career activity
Map of place with locations of each career and route for volunteers

I. **Icebreaker and Name Games** 20 minutes

II. **Introduction: Brief Overview of Stations** 10 minutes

Explain that there are ten stations and at each station the professional will explain their career (~5 minutes; emphasize the importance of education in each of these careers) which will be followed by a brief activity/demonstration (~10 minutes). At each station ask the teens to think about the following:
- What aspects of this career are appealing to you?
- What aspects of this career seem challenging?
- What subjects in school are important for this career?
- Which career is most appealing to you and why?

III. **Visiting Career Stations** 135 minutes

Teens are divided into groups depending on how many are present (enough groups so that each station is full at any given time).

IV. **Large Group Session & Wrap-Up** 15 minutes

In the large group (split into three large groups to allow everyone to participate), discuss the questions outlined in part II. Time permitting, go around the circle and ask each member to say something about each of the questions.
COMMUNICATION SKILLS

General Tips for Facilitating Small Groups

- Please explain any difficult concepts in simple terms, using Setswana when possible.
- Try by all means to reinforce concepts presented by the guest speakers.
- Engage the teens in informal conversations about the theme as they do activities in the small group.
- Though there may not be enough time to do all of the games and activities, allow each teen to participate in the activity at least once.
- Feel free to ask any of the Teen Club staff or “rotating” adult leaders for assistance.

I. Introduction 10 minutes

Today we are going to be talking about three communication skills: teamwork, active listening, and body language. The volunteer(s) and the Teen Leaders will discuss the following terms: Communication (Good), Teamwork, Active Listening, and Body Language. Then they will briefly go over the two activities for the afternoon: ‘Rebuilding a Structure’ and ‘Good Communication and Active Listening’.

II. Icebreaker (in Small Groups): Name Game 10 minutes

For example, you can do the “Names and Adjectives” icebreaker: Participants must think of an adjective to describe a personal attribute or how they are feeling. The adjective must start with the first letter of their name, for example, “I’m Tumelo and I’m Tired” or “I’m Wame and I’m Wonderful.” As they say this, they can also mime an action that describes the adjective.

If you would like to do a different icebreaker than the once above, please do so.

III. Communication Skills: Rebuilding a Structure 60 minutes

GOAL: In this activity communication skills are practiced in a very practical context. Participants should learn about the dynamics of how teams work.

INTRODUCTION OF ACTIVITY (15 MINUTES)

Facilitator(s) should prepare for this exercise by laying out assigned cards to form a flat structure or picture on the ground or a table. Make sure that none of your teens sees this structure before you start.

How it Works!

In your group appoint a ‘Looker’, a ‘Runner’, a ‘Supplier’ and an ‘Informant’. The rest of the group will be ‘Observers’. Your “construction group” must build the very same object as the one built by the facilitator(s), in as much detail as possible. However, strict rules apply to the individual jobs:

The Looker sees the original structure built by you and must describe it to the ‘Runner’ in his or her group.

The Runner listens to the ‘Looker’ and then describes the structure to the ‘Builder’. Neither the ‘Runner’ nor the ‘Builder’ may see the original structure.

The Builder (AND ONLY THE BUILDER) must build a structure similar to the original, using materials (cards) which he or she requests from the ‘Supplier’.
The **Supplier** provides whatever is needed to the builder, but is not allowed to see either of the structures.

The **Informant** may see both the original and the version being built by the ‘Builder’. (SHE OR HE IS THE ONLY PERSON IN THE GROUP TO SEE BOTH). The informant is not allowed to speak except to answer “yes” or “no” to the ‘Builder’s’ questions.

The **Observers** are not allowed to say anything to anyone apart from themselves. They are allowed to view both the original structure and the version being built by the ‘Builder’.


**REBUILDING THE STRUCTURE (30 MINTUES)**

Allow your group no more than 30 minutes to rebuild the structure. Be sure that each member is fulfilling his or her roles appropriately. NO CHEATING!

**DISCUSSION SESSION (15 MINUTES)**

A discussion should follow after this exercise. You should ensure that all aspects are covered including:

- Roles and responsibilities: the process of assigning roles, what wasn’t working, what worked best, etc…
- Teamwork: its successes, conflicts, and peace making
- How communication or lack of communication hindered or aided the building process

**IV. Icebreaker (in Small Groups): Acting Out a Lie 10 minutes**

**GOAL:** To have some fun while learning a lesson in body language and communication.

1. Everyone stand in a circle.
2. The facilitator starts by acting out some action, like washing their hair.
3. The person to the right of the facilitator will ask the facilitator “What are you doing?”
4. The facilitator will reply that they are doing something completely different. For example, the facilitator could be pretending to wash their hair and say “I am swimming.”
5. The person to the right of the facilitator will have to act out what the facilitator said (“I am swimming”) while saying they are doing completely different.
6. Continue this pattern around the circle until everyone has had a turn.

**DISCUSSION QUESTIONS:**

- How did it feel to see the person next to you doing one thing and telling you another thing?
- How did it feel to do one thing and tell the person next to you another thing?
V. Good Communication and Active Listening

GOAL: Participants will learn what it means to listen well and to show the speaker that they are interested.

ROUND ONE: Are you listening to me? (20 MINUTES)
- Form groups of three and ask each group to find a different place in the room.
- Within each group, ask them to decide who the ‘speaker’, ‘listener’ and ‘observer’ will be.
- Ask the ‘speakers’ to stand up and give them the following instructions: **Tell the ‘listener’ about an experience at school or at home that has made a big impression on you. Think about this for a minute while I give instructions the ‘listeners’**.
- Brief the ‘listeners’ outside the room so the others cannot hear: **You are going to listen carefully to what the ‘speaker’ says, but you will pretend not to be listening. How can you show that you are not listening and not interested?** (Expected responses: not looking at speaker, bored face, no encouraging smiles.)
- Ask the ‘observers’ to stand up and brief them: **Your job is to carefully observe the other two and keep notes on what happens so that you can describe it later**.
- Shout ‘Play!’ and stop all groups after 2-3 minutes.
- When they have all finished, ask the ‘speakers’ to stand up. Ask:
  - **How was it to tell your story?**
  - **How did you feel?**
- Allow everyone to talk because they will be very frustrated!
  - Ask the ‘speakers’: **Why do you think the listeners were not listening/not interested?**
  - Ask the ‘observers’: **Explain what you saw the listener doing**. [Expected responses: not looking at speaker, bored face, no nodding of the head, no encouraging smiles, no questions asked, etc.]
  - Tell the ‘speakers’ what you told the ‘listeners’. If emotions rise, allow the listeners to prove they did listen and were interested, by repeating the story.
  - **Ask people to summarize what they have learned from this activity. As facilitators, we have to listen carefully and show that we are listening.**
  - **Summarize:** Point out the effects on the speaker, when they feel that they are not given attention. [Feels uncomfortable, thinks that the person is not interested, doesn’t want to finish the story, gets angry, etc.] Explain the importance of showing that we are listening.

ROUND TWO: Rotate roles within each group so that ‘speakers’ become ‘listeners’, ‘listeners’ become ‘observers’, and ‘observers’ become ‘speakers’. (15 MINUTES)
- Ask the new ‘speakers’ to tell a story and ask the new ‘listeners’ to show that they are listening carefully.
- Allow 5 minutes for the groups to finish.
- Ask the speakers to stand up and ask:
  - **How was it to tell your story?**
  - **How did you feel?**
  - **What did the listener do that made you feel good, that made you think that they were interested in the story?**
- Ask the observers to give their comments and discuss. Ask:
  - **How can this exercise help you become better communicators?**
EXAMPLES OF OBSERVATIONS:

<table>
<thead>
<tr>
<th>Round one: No response from the listener</th>
<th>SPEAKER</th>
</tr>
</thead>
<tbody>
<tr>
<td>LISTENER</td>
<td>Pretended not to be listening.</td>
</tr>
<tr>
<td></td>
<td>Avoided eye contact and looked bored.</td>
</tr>
<tr>
<td></td>
<td>Frustrated because speaker upset.</td>
</tr>
<tr>
<td></td>
<td>Difficult not to look at the speaker.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Round two: Full attention from the listener</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>LISTENER</td>
<td>Showed interest and listened carefully.</td>
</tr>
<tr>
<td></td>
<td>Asked questions to find out more.</td>
</tr>
<tr>
<td></td>
<td>Kept nodding my head to encourage.</td>
</tr>
<tr>
<td></td>
<td>Showed concern with my face and Smiled.</td>
</tr>
</tbody>
</table>

SUMMARIZE: (5 MINUTES)

- **Listening is very important for good communication.** Listening makes people feel valued. Most of us are poor listeners. We think we listen, but often we only hear part of what is said, or we shut out things we don’t want to hear, or we become so focused on what we want to say in reply that we don’t hear what is being said. We need to control our love of talking and focus our attention on what the speaker is saying.

- **Our bodies and faces show if we are listening.**

- **Eye contact** is part of listening. When you don't look at people, they think you are not interested in what they are saying. When you look at someone who is talking, they feel encouraged to talk.

- **Asking questions** at the right time is another way of showing that you are listening. It encourages people to explain more and helps you to understand.

VI. Large Group Discussion & Wrap-Up 10 minutes

Volunteer(s) and Teen Leaders will close the session with a discussion of what the teens learned about good communication, active listening, and body language based on the morning activities. Volunteer(s) and the Teen Leaders should be sure to solicit the participation of the teens in this brief discussion session.

**Supplementary Appendix B: Communication Skills**

**Good Communication:**

Good communication, or the passing of information between two or more people, means that the speaker can:

- Talk freely and honestly, especially about problems that are important to them
- Provide as much information as necessary
• Deepen their understanding of the problem as they talk it out
• See the causes of the problems and look for solutions

**Good Active Listening Skills:**

**DO the following:**

• Show interest and be understanding.
• Identify the problem if there is one and listen for causes of the problem.
• Keep silent when silence is needed.
• Use body language to show you are listening.

**DO NOT do the following:**

• Argue. Interrupt. Pass judgment too quickly. Jump to conclusions. Do other things while the speaker is talking (unless they are okay with it).
• Give advice unless it is requested by the other.

**Body Language:**

• We give each other messages through our body language as well as our words. Body language includes our facial expressions, how we are standing or sitting and how we are placed in relation to other people.
• We express our feelings through body language without thinking about it. We read each other’s body language and this affects how we respond to a situation.
• People believe our body language more than our words. If we say one thing but our body language says another, people will not believe us. Think about a person who says they are very angry but smiles while they say it. Would you believe them?
• Good body language while listening to another person includes showing facial expressions that match your emotions (smiling when you feel happy), nodding to show you understand what the speaker is saying, and facing the speaker.

**Communication in a Relationship:**

• If you care about another person, you want to have good communication with them.
• Good communication in a relationship means caring about what the other person talks about (their emotions, problems, needs) and showing that you care, too.
• Practicing good body language and active listening are two ways you can show that you care about the other person.
• Signs of bad communication in a relationship include lots of arguments, misunderstandings when you talk, being afraid to talk to the other person, and feeling like the other person is not listening or paying attention to what you say.
• Establishing good communication in a relationship is a good way to prepare both people to handle conflicts in the future. You know that you can freely tell the other person about your problems and emotions without feeling judged or afraid, and this will make solving problems easier.
General Tips for Facilitating Small Groups:

- Please explain any difficult concepts in simple terms, using Setswana when possible.
- Try by all means to reinforce concepts presented by the guest speakers.
- Engage the teens in informal conversations about the theme as they do activities in the small group.
- Affirm every teen’s personal expression by making them feel that their opinion is appreciated.
- If the group is subdued or slow to start up in discussions, or they seem disinterested in the topic, try and relate it back to them as much as possible to keep them engaged.
- If the teens are remaining at a superficial level in their responses – affirm their comments and then probe a bit more. Be sensitive to their reaction to you.
- Feel free to ask any of the Teen Club staff or “rotating” adult leaders for assistance.

Materials:

- Activity One: an apple, knife and napkin for each facilitator (6 of each)
- World AIDS Day Activity: aluminum cans, glue, tape, construction paper, markers, colored pencils, ribbon (general craft supplies), fertilizer/soil mix (enough for 60 pots), bulbs
- Gardening: enough seedlings or seeds for each bed (depends on chosen vegetables), shovels, water buckets, measuring tape and fertilizer to mix in with soil.

I. Introduction 10 minutes

Overview (See Appendices C)

II. Icebreaker (in Small Groups) 10 minutes

The goal of this icebreaker is for everyone in the group to learn each other’s names. If you know of a quick icebreaker or game to lead, GO FOR IT. Otherwise, you may do the “Body Spelling” icebreaker: Each participant will write their name in the air first with their finger, then with their head, and finally with their butt.

III. Introduction of Activity #1 5 minutes

“In this activity we hope to convey visually the importance of keeping our soil healthy, by demonstrating the scarcity of fertile soil here on earth. It is important to remember that the soil is essentially the basis of all life- it is where our food comes from! Furthermore, the healthier the soil, the healthier the plants that grow from it, and thus the more it supports good nutrition. Good nutrition is especially important for people living with HIV/AIDS because it helps keep the immune system strong, prevents muscle loss, and improves your body’s response to medications.”

IV. Earth as an Apple Demonstration 10 minutes

a. As you go through this brief demonstration, ask the students the questions which are in quotation marks before revealing the answers noted in bold.

b. Show the apple to the group. “For this exercise, this apple represents our planet.”

c. Slice the apple into quarters.
d. Hold out three of the quarters.
   i. “What does this part of the apple represent?” They represent the oceans of the world.
   ii. “What fraction is left?” 1/4

e. Slice this section in half. Hold up one of the pieces.
   i. “This portion represents the areas where people can’t live: the polar areas, deserts, swamps, very high or rocky mountains.”
   ii. Set this piece aside.

f. Hold up the other piece.
   i. “What fraction of the whole apple is this?” 1/8
   ii. “This piece represents the land where people can live, but not all of the soil is good for growing food.”

g. Slice the 1/8 piece into four equal sections. Hold three of the sections in one hand and one section in the other. Hold out the single section.
   i. “What fraction of the apple is this?” 1/32

h. Hold out the three sections in your left hand.
   i. “These 3/32 represent the areas too rocky, too wet, too cold, too steep, or with too poor soil to actually grow food. They also contain the cities, suburbs, highways, shopping centers, schools, parks, factories, parking lots and other places people live, work, or use in other ways, but can no longer grow food.”

i. Carefully peel the 1/32 slice of Earth. Hold this peel out so they can see it.
   i. “This tiny bit of peeling represents the surface, the very thin layer of the Earth’s crust upon which people grow food. It is less than five feet deep. It takes 100 years for one inch of this topsoil to form.”

j. For dramatic effect, you can eat the small piece of apple, saying, “If we don’t take care of this land, it will be gone.”

V. Discussion 15 minutes

a. Start with general reactions people have to the demonstration (are they surprised? concerned?) and then move into these follow up questions for discussion.

b. Why is healthy soil important?
   It is the basis of life! Its health affects the food we grow, the water we drink, the health of the animals we eat...all factors that sustain us!

c. What are current threats to our soil?
   Pollution, litter, deforestation, and from farming: pesticides, over-farming (not rotating crops), over-grazing, etc...just a quick brainstorm.

d. What are some ways we could keep our soil healthy?
   General environment: Keep pollution down- keep garbage in garbage bins and off the ground. Discuss why people litter to begin with; are more public trash bins needed? When litter is already on the ground does it make other people more likely to litter? How can this cycle be stopped? Does the amount of litter around Gaborone bother you? How has garbage or litter affected your health? (Sharp objects, vermin...) How can you change this?

   i. Specifically in regards to preserving farmland: Sustainable farming methods discussed in the morning introduction like organic and conservation techniques... (see how many they can remember from the morning presentation, but after a brief recap of the benefits of these methods, expand into a discussion about how much they previously knew about these farming techniques; if they have practiced them whether in a backyard garden or a school
garden etc. and more generally discuss what experience they have growing vegetables, what methods they have used and how those methods affect the health of the soil, for better or for worse).

Quick overview of benefits/advantages of these methods: (see handouts in appendices as needed for more detailed information)
- Organic farming: uses no chemical pesticides or other products made of chemicals
- When used, traces of these chemicals remain on the foods we eat, can get into our drinking water, and can have health effects such as weakened immune system, different types of cancers, miscarriages, child development disorders and an assortment of other health issues. These chemicals have a harmful effect on our own health as well as the health of our environment.
- Instead, uses natural fertilizers like compost (made from old food scraps) which replenishes the soil by adding nutrients from previously alive plants as they decompose.
- Conservation agriculture techniques:
  - Crop rotations: important because each kind of crop takes certain elements from the soil. If the same crop is grown in the same place for too many years in a row, the soil has no chance to renew itself. Eventually all of that particular element will be gone, and that soil will be unable to grow anything.
  - Minimal disturbance of the soil: Minimizing plowing helps soil keep its structure, prevents the wind or water from washing it away, and helps the soil retain water and therefore be able to grow healthy crops for longer.
  - Soil cover: important to keep soil always covered either with crops, mulch (plastic covering), or crop residue left over from harvesting because it prevents weeds from growing, keeps soil intact by preventing the wind or water from washing it away, and adds nutrients to the soil, keeping it healthy and able to grow plants for longer!

Benefits of these as a whole: Using these techniques helps reduce labor needs, increase the fertility of the soil, and overall improves the livelihoods of farmers.

e. Discuss how healthy soil supports a healthy life. (Leads to healthy plants which support good nutrition, minimized pollution supports healthy surroundings etc.). End by telling them that this afternoon we are going to get to go out to the garden, plant the beds, and get it up and running and if they’d like to learn more about all these practices they can get more involved with Baylor’s garden in the future.

VI. World AIDS Day, Recycled Art Activity Introduction 10 minutes

“In this next activity we are going to give you guys the opportunity to put into action what we’ve just learned about the importance of healthy soil and a healthy environment. We are going to make use of what would otherwise be garbage, and decorate aluminum cans to make potted plants that will turn into beautiful flowers! Supporting and nurturing a healthy environment can be good for personal health too. There is a growing belief that those who can look after their environment can look after themselves, and so we hope that while you water and nurture these plants in your homes you will be reminded of how important dedication to your own health is. Maintaining good adherence to your ARVs, good nutrition, a positive attitude; all of these things affect your wellbeing.
With world AIDS day just around the corner, we want you guys to take this time to decorate the aluminum cans in different ways to commemorate the occasion. After you’re done decorating we will provide you with a mixture of soil and fertilizer and a bulb which you can plant in your can.

After this activity we are going to head out to the garden, so right now, before we do that, I’d like to give you guys a brief overview. Each group will be in charge of planting one garden bed and the first thing that everyone is going to do is mix in fertilizer. Then as far as planting, I have provided each facilitator with information specifically regarding their vegetable; however some important things to remember are to make sure the measurements between the seeds or seedlings and rows is accurate so that each plant has enough space and nutrients to grow! Your facilitators have these measurements, but it is up to you, as a team, to design your garden bed. It is also important to remember to water immediately after planting to help the plants adjust to their new environment. With that said, let’s move outside to begin the recycled art activity!”

VII. Recycled Art Activity

*This activity will be conducted outside.

Steps:
- Pick a theme to have the teens decorate their cans, and base the decorating materials you provide off of this theme. We provided construction paper, newspaper, scissors, tape, glue, markers, colored pencils, ribbon etc. Animal themes have also been done, and for this cardboard should be provided to make attached ears or trunks etc. out of.
- Hand out one can to every student, and have the decorating materials described above laid out at different stations.
- Have the teens cut construction paper or newspaper to cover the outside of their can, and either glue it or tape it together at the back to attach it securely.
- Next, to celebrate World AIDS Day, show the teens some examples of designs, and different ideas of how to incorporate the classic red ribbon creatively into their work. This could involve gluing on an actual red ribbon, drawing one on, decorating the inside of the ribbon with other designs, writing out slogans like ‘keep the promise’ or ‘World AIDS Day, December 1st’, or anything else they see fit.
- When the teens are finished decorating send them to one of 2 facilitators which should be stationed at 2 different areas, each in possession of a mixture of fertilizer and soil, a bucket of water and the bulbs.
- The facilitator should then fill each teen’s can about ¾ of the way with the soil mixture, and hand out one bulb to each teen, which they should then place about 4cm beneath the surface. Once planted, the teens should put half a cup of water into their can.

VIII. Garden Planting!

Now, in our groups we’re each going to plant a garden bed...

Steps:
- Dump ¼ of a bag of fertilizer on top of the bed and with shovels, loosen the soil and mix it in.
- With the diagram provided, mark where you will plant the seeds/seedlings (either with your finger or a stick etc.), making sure the dimensions between rows and between plants is accurate.
- Create holes in which to place the plants/seeds on these marks at the appropriate depth (again, depends on each plant and will be given to facilitators).
• Plant the plants/seeds and replace the soil so that the soil around the plants or over the seeds is firm but not too compact.
• Water thoroughly.

Facilitators: Please refer to the diagram handed out to you earlier. It contains the specific measurement requirements for your vegetable.

IX. Large Group Session & Wrap-Up 10 minutes
Ask the teens to share with the group things they’ve learned from today’s activity, and facilitators could do a brief review of some of the main concepts.

SUPPLEMENTARY APPENDIX C: CONSERVATION

What is conservation agriculture and why is it useful?
Conservation agriculture is a way to maintain a sustainable and profitable farm. Under its 3 guiding principles farmers find that it reduces labor needs, increases the fertility of the soil, and overall improves their livelihoods.

The 3 main conservation practices:

1. Soil cover: Keeping soil always covered either with crop residue, mulch, or nitrogen-fixing cover crops prevent weed growth, soil erosion and keeps soils healthy and fertile.

The benefits: your soil can grow healthy crops for longer, less fertilizer is needed, as well as less labor to weed.

2. Minimal disturbance of soil: Avoiding heavy plowing and disruption of the soil improves soil structure and helps soil retain water.

The benefits: healthier soil grows healthier crops!

3. Crop rotations: Every plant requires a different amount of nutrients from the soil to grow. The level of absorption of these nutrients is split into 3 categories: heavy feeders, heavy givers, light feeders.

• Heavy feeders require a lot of nutrients from the soil and can rapidly deplete the soil of its nutritional benefits.
  o Tomatoes, lettuce, corn, squash…

• Light feeders require only a small amount of nutrients
  o All root vegetables: carrots, potatoes, beets…

• Heavy givers put back many of the nutrients that other plants absorb
  o Legumes such as peas and beans

Every time you plant a new bed it is important to take into account what was grown there before. The ideal rotation of one vegetable bed to keep its soil the healthiest is heavy feeders to heavy givers to light feeders.

The benefits: increases soil fertility, and is a natural pest prevention technique.

Conservation agriculture is especially relevant to communities strongly affected by HIV/AIDS:

• Reduces labor needed for land preparation and maintenance of crops because eliminates plowing and controls weeds naturally.
• Supports a nutritional, varied diet, particularly important for keeping up the immune system!

**What is ‘Organic’ and how is it beneficial?**

Organic farming or gardening is the process of growing food naturally without the use of artificial pesticides or other products made of chemicals. Its aim is to minimize its impact on the environment, produce safe, healthy foods, and promote biodiversity and health of the soil by growing a variety of produce simultaneously. Organic farming has become more and more popular around the world as people have become increasingly aware of the harmful effect that toxins have on their own health as well as the health of the environment.

Eating locally and organically is better for you, your environment, and your community.

**Nutritious**

• No pesticides means no pollution to your body or your environment.
  
  o When we eat foods grown with chemicals, some of those chemicals get into our bodies which can later on result in different types of sicknesses.
  
  o It has been shown that certain nutrients, especially vitamin C among other naturally occurring antioxidants (that help immune system!) are found in higher concentrations in organically grown crops.
    
    ▪ Reasoning: when plants aren’t treated with pesticides, and must fend off insects on their own, their levels of antioxidants increase to protect themselves and limit damage.
  
  o Food grown locally is allowed to fully ripen, which increases its nutritional value. Imported foods are often harvested weeks before they’re ripe so often the nutrients, taste, texture and color are not fully developed.
  
  o Many foods can lose up to 50% of their nutritional value in a matter to days (from 24 to 48 hrs. after harvest, 50-89% of vitamin C is lost from leafy vegetables) so nutritional benefits are higher when you can harvest from your backyard and cook right away.

**Environmentally Sound**

• No pesticides mean healthier, fertile soil, and uncontaminated water!

• Less contribution to greenhouse gas emissions and climate change from not purchasing food shipped from all over the world.

• Encourages local farmers to diversify their crops which makes for healthier soil and produce.

• Purchasing locally puts money right back into your local economy!

**ENVIRONMENTAL AWARENESS – RECYCLING**

**General Tips for Facilitating Small Groups**

• Explain difficult concepts in simple terms, using Setswana when possible.

• Reinforce concepts presented by the speakers.

• Engage the teens in conversations about the theme as they do small group activities.

• Encourage each teen to participate in the activity at least once.

• Ask Teen Club staff or “rotating” adult leaders for assistance.
Objectives:
- Teens should learn
  1) What is environmental awareness?
  2) Why is environmental awareness important?
  3) What can you yourself do to help the environment?
- Reduce, reuse, and recycle!
- Use the posters and pamphlets today as resources – share and discuss with your teens!

I. Icebreakers 15 minutes

II. What is Environmental Awareness? Discussion 30 minutes
Teen Club Staff (or another speaker) will introduce what environmental awareness is and why it is important. See Appendix A for more information and refer to this for discussion with the teens throughout the day.

Split teens into ~10 groups such that the younger teens (ages 13-15) are together and older teens (ages 16-19) are together.

III. Apple as the Earth 30 minutes
Ask teens the questions in quotation marks before revealing the answers noted in bold.
Show the apple to the group. “For this exercise, this apple represents our planet.”
Slice the apple into quarters.
Hold out three of the quarters.
“What does this part of the apple represent?” They represent the oceans of the world.
“What fraction is left?” 1/4
Slice this section in half. Hold up one of the pieces.
“This portion represents the areas where people can’t live: the polar areas, deserts, swamps, very high or rocky mountains.”
Set this piece aside.
Hold up the other piece.
“What fraction of the whole apple is this?” 1/8
“This piece represents the land where people can live, but not all of the soil is good for growing food.”
Slice the 1/8 piece into four equal sections. Hold three of the sections in one hand and one section in the other. Hold out the single section.
“What fraction of the apple is this?” 1/32
Hold out the three sections in your left hand.
“These 3/32 represent the areas too rocky, too wet, too cold, too steep, or with too poor soil to actually grow food. They also contain the cities, suburbs, highways, shopping centers, schools, parks, factories, parking lots and other places people live, work, or use in other ways, but can no longer grow food.”
Carefully peel the 1/32 slice of Earth. Hold this peel out so they can see it.
“This tiny bit of peeling represents the surface, the very thin layer of the Earth’s crust upon which people grow food. It is less than five feet deep. It takes 100 years for one inch of this topsoil to form.”
For dramatic effect, you can eat the small piece of apple, saying, “If we don’t take care of this land, it will be gone.”

IV. Debate 30 minutes
Younger teens and older teens will debate separately.
In their respective groups, teens will debate environmental issues parliamentary style. One Teen Leader will act as the National Speaker. A panel of 10 teens will be Parliament. The rest of the teens will be the House. Facilitators can help with information from Appendix A and environmental posters posted in the clinic.

Questions to be debated / discussed

How should waste be managed:
- Should we recycle in Botswana?
  - If so, who should be responsible for recycling? The government? The manufacturer? The distributor? The consumer?
- Should trash be burned?

Environmental awareness and responsibility:
- What role should teenagers play in environmental awareness?
- What should the government of Botswana do to improve environmental awareness?
- Some people are concerned that it is too late to save the environment – what do you think?

V. How you yourself can be part of environment awareness? 30 minutes

Discuss what teens themselves can do – reduce, reuse, and recycle!
- Reduce – Reduce means to limit the items you use. How can you yourself reduce waste in your life? How can Teen Club reduce waste?
- Reuse – Reuse items as much as possible before replaced. How can items be reused? How could you reuse a can? Or paper?
- Recycle – What can be recycled? Distribute “How YOU can Recycle in Gaborone” Cheat Sheet
- Leadership and Volunteering – Somarelang Tikolong (located in South Ring) has opportunities to volunteer at their eco park both in the community garden and monitoring recycling deposits.

VI. Presentation by Recycling Company 30 minutes

**Supplementary Appendix D: Waste and Recycling**

Waste Production in Botswana

- Low estimates are that 325,000 tonnes of waste are produced a year in Botswana.
- This amounts to about 0.67 kg per person per day.
- However, only 38% of household waste is delivered to landfills. The rest just “disappears” into the environment.

Length of Time Until Decomposition of Common Items in a Landfill

<table>
<thead>
<tr>
<th>ITEM</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Banana Peel</td>
<td>2-5 weeks</td>
</tr>
<tr>
<td>Paper Bag</td>
<td>1 month</td>
</tr>
<tr>
<td>Newspaper</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Item</td>
<td>Decomposition Period</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td>Apple core</td>
<td>2 months</td>
</tr>
<tr>
<td>Cardboard</td>
<td>2 months</td>
</tr>
<tr>
<td>Waxed milk cartoon</td>
<td>3 months – 5 years</td>
</tr>
<tr>
<td>Cigarette butt</td>
<td>2-5 years</td>
</tr>
<tr>
<td>Rubber sole of leather shoe</td>
<td>50-80 years</td>
</tr>
<tr>
<td>Tin Can</td>
<td>80-100 years</td>
</tr>
<tr>
<td>Aluminium Can</td>
<td>200-500 years</td>
</tr>
<tr>
<td>Disposable Diapers</td>
<td>500-600 years</td>
</tr>
<tr>
<td>Plastic Bag</td>
<td>20-1000 years</td>
</tr>
<tr>
<td>Plastic Water Bottle</td>
<td>1 million years</td>
</tr>
<tr>
<td>Glass</td>
<td>1-2 million years</td>
</tr>
<tr>
<td>Styrofoam</td>
<td>Never</td>
</tr>
</tbody>
</table>

**Global Warming**

- Carbon dioxide traps heat from the sun in the Earth’s atmosphere. Too much carbon dioxide means that the Earth overheats. When the Earth overheats, ice melts and water levels increase such that some cities will be flooded. Moreover, diseases such as malaria will spread. Weather conditions will become more violent and unpredictable.
- An increase of the amount of carbon dioxide in the atmosphere (and resulting global warming) is caused by human activity – including coal-burning power stations, motor cars, and deforestation.
- Your personal carbon footprint is determined by how much energy you use – how much you travel, how much electricity you use, etc.

**Consequences of Burning Trash**

- The chemicals created and released by trash burning have been scientifically shown to increase your risk of many health problems, like heart disease, asthma, emphysema, headaches and even cancer.
- Dioxin and other chemicals are totally invisible, and their health effects are not immediate, but the consequences are severe.
# Recycling in Gaborone

## How You Can Recycle in Gaborone!

<table>
<thead>
<tr>
<th>Organization</th>
<th>Material</th>
<th>Where to Bring Material</th>
<th>Reimbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collect-a-Can Tel: 392-2717</td>
<td>Cans</td>
<td><strong>Office:</strong> Plot 14398 New Lobatse Road (next to Tile Africa) OR <strong>Will Pick-Up</strong></td>
<td>• 35 thebe/kg food cans (30 thebe if pick-up)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• 90 thebe/kg soft drink cans (50 thebe if pick-up)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• P4.50/kg aluminum</td>
</tr>
<tr>
<td>Recycle It Tel: 391-0185</td>
<td>Cans, Glass, Clear Plastics, Boxes, &amp; Paper</td>
<td><strong>Office:</strong> Plot 10239 Legolo Road (Broadhurst next to Part Sales) OR <strong>Cages Around Gaborone</strong></td>
<td>• 25 thebe/kg paper</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• 25 thebe/kg boxes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• 35 thebe/kg clear plastics</td>
</tr>
<tr>
<td>Somarelang Tikolong Tel: 391-3709</td>
<td>Glass &amp; Cans</td>
<td><strong>Eco Park:</strong> Plot 3491 Extension 4 (South Ring)</td>
<td>None</td>
</tr>
<tr>
<td>Dumatau Trading T/A Waste Paper Recovery Tel: 395-6769</td>
<td>Paper &amp; Boxes</td>
<td><strong>Office:</strong> Plot 14455 Kgale View</td>
<td>• 30 thebe/kg colored paper</td>
</tr>
<tr>
<td></td>
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## Feelings and Emotions

**General Tips for Facilitating Small Groups:**
Within the confines of Teen Club, we cannot always resolve the feelings our teens are having – this is a time for expression.

Affirm every teen’s personal expression of feelings by making them feel that their experience was justified.

If the group is subdued or slow to start up, you can do one of two things – 1. Ask (non-judgmentally) what it is that makes it hard to start talking about feelings; 2. If one person does share, paraphrase whatever you hear him/her say to ensure affirmation of that experience. Ask the teen who volunteered if you have heard right and this should encourage them to speak more.

If the teens are remaining at a superficial level in their responses – affirm their comments and then probe a bit more. Be sensitive to their reaction to you.

I. **Overview of Activity**

“Many of us find it easy to chat to friends about the latest football scores or the movies we want to see, but it is sometimes tough to talk about how we really feel. Sometimes it’s even tough to know how we feel, let alone talk about it. We know that as you guys are growing up, you are experiencing new emotions and feelings. This is an opportunity to learn, in a safe environment how to express these feelings and hopefully have a good experience while doing so. And some of you may also be starting to have new thoughts and feelings about your HIV status that you are trying to understand. We hope that today helps you. If you would like to speak to a counselor at any time today, please tell your group leader. Counselors will be available the entire day, even during lunch.”

II. **Icebreaker / Name Game**

The goal is for everyone in the group to learn each other’s names. For example, you can do the “Names and Adjectives” icebreaker: Participants must think of an adjective to describe a personal attribute or how they are feeling. The adjective must start with the first letter of their name, for example, “I’m Tumelo and I’m Tired” or “I’m Wame and I’m Wonderful.” As they say this, they can also mime an action that describes the adjective.

If you would like to do a different icebreaker than the once above, please do so.

III. **Feelings and Emotions Activity**

**Step One:** Give each teen a piece of paper and crayons. Show them how to divide the paper into 6 squares. Ask teens to complete the task.

**Step Two:** Write the feeling, “happy (o itumetse)” in the first square (very small). Ask teens to complete the same task.

**Step Three:** Ask for a teen volunteer to act out “happy.” Ask them to show the group what one might look like when he/she is “happy.” Ask them to show the group what behaviors a person might demonstrate when he/she is “happy.” (Purpose of this step is to make sure all teens in your group understand the meaning of the feeling.)

**Step Four:** Ask each teen to draw a depiction of the feeling “happy” in the square.

**REPEAT steps 2 – 4 with the following feelings (Setswana translation in parentheses):**

1. Happy/Jooyful: O itumetse
2. Sad: O utlwile bothoko
3. Peaceful: O nna le kagiso
4. Afraid/Scared: O a boifa
5. Powerful: O nna le nonofo
6. Angry: O tenegile

IV. **General Discussion on Feelings**
**Step One:** Explain to the teens that they will use this time to talk about times when they have actually experienced some of these feelings. Everyone will have the opportunity to share. When it is your turn, you will roll the dice. Whichever feeling the dice lands on, you will share with the group a time that you experienced that feeling.

**Step Two:** Model this activity. Roll the dice. “A time when I felt __________ was when I ____________”

**Step Three:** Give dice to person sitting to your right. Continue until every person has had a turn. Use any remaining time to continue on a volunteer basis. (“Does anybody want to go again?”)

V. **Discussion on HIV Status** 20 minutes

Explain to the group that the next part of this activity is going to be very personal. Make sure they understand that what is said in this group, stays in this group. This is also a good time to remind teens that counselors will be available if they need more time to process, etc.

**Step One:** Ask all teens to close their eyes. Ask them to think about the time that they first learned about their HIV Status. How did they feel? (Give them a few minutes to sit in silence to just think).

**Step Two:** Ask for any volunteers who feel comfortable sharing.

VI. **Large Group Session & Wrap-Up** 30 minutes

Please sit with your group in the classroom. Counselors will lead a discussion on coping strategies.
**Supplementary Appendix E: Feelings Cube**

Feelings Cube

- **Powerful**
  - O Nna Le Nonofo

- **Happy/Joyful**
  - O Itumetse

- **Sad**
  - O Utlwile Botlhoko

- **Scared/Afraid**
  - O A Boifa

- **Angry**
  - O Tenegile

- **Peaceful**
  - O Nna Le Kagiso
FINANCIAL LITERACY

General Tips for Facilitating Small Groups:
- Most of the teens will have very limited financial literacy knowledge. Please explain any difficult concepts in simple terms, using Setswana when possible.
- Try by all means to reinforce concepts presented by the guest speakers, especially budgeting and proper money management.
- Engage the teens in informal conversations about the theme as they do activities in the small group.
- Feel free to ask any of the Teen Club staff or “rotating” adult leaders for assistance.

I. Introduction of Activity 30 Minutes

Guest speakers (e.g., Barclays staff members) will do a presentation about the following topics:
- Budgeting
- Saving

In addition they will discuss the concept of money diaries (blank notebooks for keeping track of income and expenses) and hand out money diaries to each Teen Club participant.

II. Icebreaker (in Small Groups) 5 Minutes

The goal of this icebreaker is for everyone in the group to learn each other’s names. If you know of a quick icebreaker or game to lead, GO FOR IT. Otherwise, you may do the “Body Spelling” icebreaker: Each participant will write their name in the air first with their finger, then with their head, and finally with their butt.

III. Activity: Planning a Talent Show 45 Minutes

Your class has been engaged in various fund-raising projects during the past several years, and you now have a total of P29,635 to spend on a big bash - your school talent show. You may not spend more than this amount on the talent show, but you do not have to spend all of it on the talent show. Any money "left over" can be used for a class project, designed to help your school or community.

You have decided that there are three categories of expenditures for the talent show: 1) Hiring a DJ 2) renting a place to hold the talent show, and 3) providing refreshments and decorations.

A committee has provided the following information:

<table>
<thead>
<tr>
<th>DJs Available</th>
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<tbody>
<tr>
<td>Cost</td>
</tr>
<tr>
<td>P2,000</td>
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<tr>
<td>P3,500</td>
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<td>P5,000</td>
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<tr>
<td>P7,500</td>
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<tr>
<td>P10,000</td>
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</table>

<table>
<thead>
<tr>
<th>Venues Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost</td>
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</tbody>
</table>

Your task now is to decide, with the other members of your class, which DJ to hire, where to hold the talent show, and what type of refreshments and decorations to provide. Your class must select one item from each expenditure category.

### DISCUSSION QUESTION: How can you relate this activity to budgeting your own finances?

#### IV. Talent Show Production Presentations 45 Minutes

Each group will be given 5 minutes to present their plans for the production of a talent show, including what they decide to do with any funds “left over.” Allow time for a short discussion after each presentation.

#### V. Large Group Discussion and Wrap-Up 15 Minutes

Guest speakers (e.g., Barclays staff) will wrap up the discussion highlighting key points and lessons learned during the activity.

### SUPPLEMENTARY APPENDIX F: FINANCIAL LITERACY

A budget is generally a plan for saving and spending. A budget lies at the foundation of every financial plan. Budgeting is not all about restricting what you spend money on and cutting out all the fun in your life. It is really about understanding how much money you have, where it goes and then planning how to best allocate those funds. Here is what you need to help you create and maintain a budget.

1. Avoid overspending - it breaks your budget: when you begin to stray away from your budget it’s usually because of spending too much money somewhere. But if you have a budget that tells you exactly how much you’re supposed to spend, why is it so easy to overspend? So when you understand what causes overspending, you can help put a stop to it and keep your budget on track.

2. Try using cash to keep spending under control. Swiping using credit cards has become incredibly easy but unfortunately, this convenience comes at a cost. You are likely to begin to lose track of how money’s actually being spent. Using cash might not be as fast, but it helps you visualize just how much money you’re actually spending.
FRIENDSHIP AND PEER PRESSURE

General Tips for Facilitating Small Groups:
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the theme, as they do small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask Teen Club staff or "rotating" adult leaders for assistance.

I. Icebreaker / Name Game 10 minutes
The goal is for everyone in the group to learn each other’s names. For example, you can do the “Names and Adjectives” icebreaker: Participants must think of an adjective to describe a personal attribute or how they are feeling. The adjective must start with the first letter of their name, for example, “I’m Tumelo and I’m Tired” or “I’m Wame and I’m Wonderful.” As they say this, they can also mime an action that describes the adjective.

If you would like to do a different icebreaker than the once above, please do so.

II. Friendship Activity 20 minutes

STEP ONE- Ask the teens to think of a person whom they consider a good friend or even a best friend. Ask each teen to answer the following question aloud, trying not to repeat the same quality twice:
“_____ (Name)_____ is my good friend because he/she is _____ (Quality) ______”

Write all the qualities mentioned on a piece of flipchart paper.

STEP TWO- Give the teens the following task:
- Work together to list (and agree on) 5 qualities wanted in a close friend.
- Rank the qualities from “1” for the most important to “5” for the least important.

STEP THREE- Hold a discussion using the following guidelines:
- Was it easy or difficult to decide on which 5 qualities were most important? Why?
- How did your group decide which quality was most important? Was there much disagreement? What were some of the other choices in your group?
- Which qualities are especially difficult to find in a friend?
- What desirable qualities do you bring to a friendship?
- What qualities would you like to develop in the future?

III. Peer Pressure Role Plays 80 minutes

STEP ONE – Facilitator reads scenario to group:

Group 1: A boyfriend and his girlfriend are together. The girl is HIV-positive and has disclosed her status to her HIV-negative boyfriend. The boy is afraid that if he and his girlfriend don’t have a child
together they will never be seen as adults and pressures his girlfriend to have unprotected sex with him. The girl has decided for herself that she doesn’t want to risk exposing her partner or potential child to HIV. Perform a role play showing this situation and how the girlfriend can respond to the pressure from her boyfriend.

**Group 2:** A group of secondary school students are at a club. They are dancing and having a really good time together. One of the students takes out some alcohol from under his or her jacket. He or she starts drinking and tries to get others to drink too. He or she says that there is more to drink outside and tries to pressure others to join him or her in drinking. Some of the students agree. Show how the other(s) could handle this situation.

**Group 3:** Some friends are chatting outside. One of their friends comes up to them and joins them. After a few minutes, this person takes out some motokwane (a.k.a., dagga, marijuana, cannabis, zolo) and lights it up. He or she asks the others to join him or her. They all resist for a while, but then some of the group members also smoke. One person refuses to smoke. Now, the group pressures this person to join them. Show what the person should do to resist this peer pressure.

**Group 4:** A group of friends are hanging out near the shops. They are talking about how bored they are. One of them suggests that they go into one of the shops and steal some sweets. Some of the friends agree and are excited to do something on this boring day! As the group walks to the shop, one of them is really afraid and does not want to participate in stealing from the store. Create a role play showing what this person might do to resist the peer pressure.

**Group 5:** Two friends are living with each other in the same house at SOS Children’s Village and both of them are taking ARVs. One of the friends decides that it is not necessary to take his/her medications since he/she feels healthy and strong. This friend then tries to get the other friend to spit out the pills with him/her when their house mother is not looking. Create a role play showing how the other friend can resist his/her friend’s peer pressure.

**Group 6:** There’s a girl at school who has a sugar daddy and is always boasting about having new clothes and a lot of airtime. One day, the girl with a sugar daddy tries to hook up her best friend with one of her sugar daddy’s guy friends. Even though the best friend wishes she had all the nice clothes and airtime that the girl with a sugar daddy has, she doesn’t think the situation is safe. Create a role play showing how the girl can resist her friend’s peer pressure.

**STEP TWO – Ask for volunteers to act out scenario**

**STEP THREE – Group discussion**

Start by encouraging everyone to participate in the discussion. There might not be time for every member to answer every question but we will do the best we can. Suggested questions for the discussion are listed below. Feel free to add/delete as you feel necessary!

- Was the way in which the other(s) resisted peer pressure realistic?
- Would the resistance demonstrated actually work in the situation?
- Is this a common situation in our communities and among our peers?
- Are there other ways that the situation could be resolved?
IV. Large Group Session & Wrap-Up  

Please sit with your group in the classroom. Groups can volunteer to either read their list of friendship qualities or perform their skit, though every group may not have a chance to perform. Allow a couple minutes for discussion after each presentation/skit.

GRIEF AND BEREAVEMENT

Note: Portions of the following Facilitator Guidelines have been adapted from *Building Resilience in Children Affected by HIV/AIDS*, by Sr. Silke-Andrea Mallmann.

General Tips for Facilitating Small Groups:

- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the theme as they do small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.
- The focus is expression of feelings, not the resolution of feelings within this setting.
- Affirm every teen’s personal expression of feelings.
- If responses are superficial—affirm the comments made and probe a bit more. Be sensitive to reactions to probing further.
- When discussing facts and emotions surrounding grief and bereavement, ask what they need to cope better. Don’t impose what you think they need.
- Acknowledge teens face difficult situations - offer guidance but let the teens do the problem solving and decision making.

Objective:
- To encourage expression of emotions and feeling to include those related to grief and bereavement.

Materials Needed:
- Notes on Grief and Bereavement (see ATTACHMENT F)
- Paper divided into (9) sections and colored pens for participants.

I. Overview of Activity  

Give a brief overview of the sessions and reinforce the following summary:

“The topic of today’s Teen Club is grief and bereavement. Grieving is the word used to describe the thoughts and feelings that we have we have experienced an upsetting event or loss. Mourning involves accepting the upsetting event or loss, making the upsetting event or loss a part of our memories and moving on with life. Everyone grieves or mourns at some point in their lives. Sometimes we grieve during a difficult or traumatic event such as a loved one’s illness, or when we are diagnosed with a disease, like HIV. Sometimes it’s difficult to talk about how we really feel when we experience such events. Today is an opportunity to learn, in a safe environment, how to express these feelings and hopefully have a good experience doing so. We hope that today helps you to express your feelings related to grief.

II. Icebreaker: Body Spelling  

20 minutes
The goal is for everyone in the group to learn each other’s names. If you know of a quick icebreaker or game to lead, GO FOR IT. Otherwise, you may do the “Body Spelling” icebreaker: Each participant will write their name in the air with their finger. Then, with their head; and finally, with their butt.

III. Icebreaker: Face and Hands

10 minutes

The goal of this game is to get to know one’s own feelings and to be able to express them. You will be given names of feelings on each card. As time permits, let each teen choose a card and read the feeling silently to himself or herself. Each teen must demonstrate the feeling to the group only using facial expression or body language. The other teens in the group must then guess what the feeling is.

IV. The Picture Story Exercise

10 minutes

This exercise is meant to assist teens to process their grief and bereavement surrounding an upsetting event or loss. Pay attention to time during this activity as there is a lot to be done.

1. Hand each teen a sheet that has been divided into 9 blocks and colored pens. Ask them to draw a picture story or a comic about a traumatizing event or loss. It can be a loss of a person, a thing, or a home.

   a. **BLOCK 1**: Ask the teens to remember the last time they felt happy and safe before the upsetting event took place. What were they doing then? When they can remember it clearly, ask the teens to draw a picture of that moment in block one.

   b. Now jump to **BLOCK 9**. Ask the teens to draw the first good moment they remember after the upsetting event was over.

   c. Point to **BLOCK 5**. Ask the teens to draw the worst part of their story (for example, the death of a loved one). NOTE: This is a very important moment because the teens will be confronted with painful memories. The picture should be as accurate as possible. Stay by the teens as they draw. If they talk, be sure to listen closely to what they say.

   d. Ask the teens to draw pictures in **BLOCKS 2, 3, and 4** to show what happened before the worst part (for example, when the loved one fell sick and had to go to the hospital).

   e. Ask the teens to draw pictures in **BLOCKS 6, 7, and 8** to show what the people in the drawings were doing after the worst part was over.

2. IF TIME PERMITS, ask volunteer(s) to tell the story of the people in their drawings. Have the volunteer(s) move from picture to picture so that the parts of the story are told in order. In addition, as the volunteer(s) to talk about how the people in the picture felt, especially themselves.

V. Letters/Poems/Drawings [OPTIONAL: MEMORIAL SERVICE]

30 minutes

At this time, each teen will be given the opportunity to write poems, letters, and drawings to the deceased in order to honor his/her memory.
Notes on Grief and Bereavement for Adolescents

The developmental task of an adolescent is to establish a concept of self. They have to work out who they are, what their purpose in life is and where they belong.

Developing an identity involves developing a body image, a gender role and a distinct personality. Adolescents are insecure about themselves. They are preoccupied with changes in their body and afraid that their bodies may be harmed. Disease and death are very threatening to them. They are preparing themselves to get involved in life and the idea of their lives being limited or ended by disease is threatening to their partly-developed concept of self and of life.

The Adolescent’s Understanding of Death

When a loved one passes away, it is natural for an adolescent to experience feelings of bereavement like sadness, depression, or anger.

“Grieving” is the word used to describe the thoughts and feelings that we have when someone has died.

“Mourning” involves accepting the death, making the death part of our memories and moving on to a new life.

Adolescents recognize death as final and irreversible. They are fully aware of the consequences of death. Adolescents tend to be very egocentric (focused on themselves and their own problems) and they may pity themselves when a loved one passes away. In the case of a parent or caregiver, they may apply the consequences of the parent or caregiver’s death to their own lives, and think, “I have to leave school” or “I have to be responsible for my siblings”- this may be threatening to them.

The Transition from Childhood to Adulthood

An adolescent’s struggle from childhood to adulthood can be seen in his/her reaction to death. Their cognitive (intellectual) understanding of death is that of an adult. But, while some adolescents cope on the emotional level by expressing appropriate emotions, talking about death and loss and actively mourning, others may appear undisturbed, extremely angry or totally withdrawn. It is common for teenagers to react with denial, delayed reactions, and the suppression of feelings.

How You Can Help Adolescents Deal with Loss and Grief

Pay attention to the questions, comments, and behavior of adolescents, and respond by offering emotional understanding and support. At the same time, adolescents need to be told clearly what the acceptable limits of behavior are. They also need to understand what is expected from them in terms of responsibilities.

**HEALTHY DISCLOSURE**

**General Tips for Facilitating Small Groups:**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the topic as they do small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.

**Objective:**
- To learn how about the dangers of MCP, Transactional and Intergenerational Sex
- To learn about alternatives to MCP, Transactional and Intergenerational Sex

I. **Introduction of Activity**

   - **10 minutes**
   - Introduce the day’s activity and the panel guest speakers.

II. **Healthy Disclosure Panel and Q&A Session**

   - **40 minutes**
   - The panel discussion will begin with each guest speaker stating their name and where they are from. The Teen Leaders will then choose questions from the list, in no particular order, to ask the panelists.
   - Please note that there will not be time for each guest speaker to answer every question. Teen Leaders select no more than 2 speakers to answer each question, and to be conscious of time.
   - Each guest speaker’s response should be 2-3 minutes in length.

   Teen Leaders should leave 15 minutes at the end for questions from the audience.

**Questions:**
1. How and when did you first find out your HIV-status? What was your initial reaction? How did you feel?
2. When was the first time you met other HIV-positive individuals? Where was it?
3. Were there people who supported your decision to disclose your HIV-status? If so, who were they?
4. To whom did you first disclose your status? Were they supportive and confidential?
5. Why and how did you publicly disclose your status?
6. When did you first publicly disclose to your community, at school, at the workplace, etc…?
7. Did you receive negative reactions when you first disclosed your status? Were you rejected in any way?
8. How did your family react when you decided to go public with your HIV status?
9. What has been your experience around disclosure and dating, and/or disclosing to a romantic/sexual partner?
10. What are some of the challenges of public disclosure and being publicly disclosed?
11. What are some of the benefits of being publicly disclosed?
12. Can you please give some tips on publicly disclosing one’s status? For example when is the appropriate time, to whom, etc…?

III. **Icebreaker (in Small Groups)**

   - **10 minutes**
   - The goal of this icebreaker is for everyone in the group to learn each other’s names. If you know of a quick icebreaker or game to lead, GO FOR IT. Otherwise, you may do the “Body Spelling” icebreaker: Each participant will write their name in the air first with their finger, then with their head, and finally with their butt.

IV. **Healthy Disclosure Skits/Dramas (in Small Groups)**

   - **20 minutes**
The facilitators should read the assigned scenario to members of his/her group and have group members develop a skit/drama based on the assigned scenario.

**Group 1: Disclosing to significant other**
A girlfriend and boyfriend are together. The boy is HIV-positive and has not yet disclosed his status to his HIV-negative girlfriend. At school, the friends of the couple have been pressuring them to have sex so the couple decides that they want to take their relationship to the next level. The boy is now faced with a dilemma and feels that he must disclose his status to his girlfriend. Perform a drama showing this situation and how the boyfriend can disclose his status to his girlfriend.

**Group 2: Disclosing to boarding master/matron at hostel**
A secondary school student wakes up late for morning lessons. The student rushes to the bathroom and gets dressed quickly but does not have time to take his/her medicines before the boarding master rushes everyone to class. While in class the student tries to take his/her medicines. The head master sees what the student is trying to do and calls him/her to his office. The boarding master asks the student to show him what the student was putting in his/her mouth. The boarding master sees the medication and realizes they are ARVs. Perform a drama showing this situation and how the secondary student can disclose his/her status to the head master.

**Group 3: Disclosing to best friend**
Two friends have been good friends for a very long time. One friend is HIV-positive and feels that it is the right time to tell their HIV-negative friend about his/her status. However, he/she is unsure of how to do this because he/she does not want the friend to reject him/her. Perform a drama showing how the friend can disclose his/her status to the good friend.

**Group 4: Disclosing to someone who accidently finds meds in gym bag**
Two friends walk back to the locker room after an exhausting workout at the gym. The friends begin to pack up their bags when the medication of one friend falls out of his/her bag. The other friend picks up the medication and realizes that they are ARVs. Perform a drama showing this situation and how the secondary student can disclose his/her status to the gym-buddy.

**Group 5: Disclosing to cousin**
A secondary school student, who is HIV-positive, is very good friends with his/her cousin. They grew up together and would always play with one another when they were younger. The teen’s cousin does not know his/her HIV-status. The teen feels that it is time to tell his/her cousin. Perform a drama showing this situation and how the secondary student can disclose his/her status to the cousin.

**Group 6: Meeting a schoolmate at a Teen Club meeting**
A teen wakes up on a beautiful Teen Club Saturday morning, takes a shower, and walks over to Teen Club. The teen makes sure to arrive 10 minutes earlier in order to hang with some friends and play a few games. Towards the beginning of the icebreakers, the teen sees one of his/her schoolmates. The teen has never seen this schoolmate at Teen Club before. The teen knows why he/she is at Teen Club, and asks him/her-self if the schoolmate is there for the same reason. Perform a drama showing this situation.

V. **Groups Perform Skits/Dramas (in Classroom) 55 minutes**

39
Performances will go in group number order. Each group has 5 minutes to perform their skit, followed by 5 minutes of discussion to be led by the Teen Leaders and guest speakers.

VI. **Large Group Discussion and Wrap-Up**

Teen Leaders and guest speakers will lead the group in a wrap-up and closing discussion around the matter of healthy disclosure.

**HUMAN RIGHTS**

**Note:** Portions of the following Facilitator Guidelines have been adapted from “It’s Only Right: A Practical Guide to Learning about the Convention on the Rights of the Child” by Susan Fountain.

**General Tips for Facilitating Small Groups**
- Most teens will have limited knowledge of human rights issues. Explain difficult concepts in simple terms, using Setswana, when possible.
- Reinforce concepts presented by speakers, especially the difference between wants and needs and the Convention of the Rights of the Child.
- Engage teens in conversations about the theme as they do in small group activities.
- Encourage each teen to participate in the activity at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.

**Objectives:**
- Increase understanding of human rights especially as it related to all children (18 and under), youth and those living with HIV.

**Materials Needed:**
- “Wants and Needs” Cards
- Scissors

I. **Introduction: Presentation and Guest Speaker**

Give an introductory presentation on human rights and their relationship with HIV. The presentation should cover basic concepts regarding human rights; what they are, why they are important, and, their relationship to people living with HIV, particularly youth. The facilitator should explain to the group that:
- All children (18 and under) have the same rights. These rights are listed in the UN Convention of the Rights of the Child (See SUPPLEMENTARY APPENDIX G). Almost every country has agreed to these rights, including Botswana. All these rights are connected to each other and all are equally important (i.e. the right to food, water, and shelter, etc.).

II. **Icebreaker (in small groups)**

The goal of this icebreaker is for everyone in the group to learn each other’s names. If you know of a quick icebreaker or game to lead, GO FOR IT. Otherwise, you may do the “Body Spelling” icebreaker: Each participant will write their name in the air first with their finger, then with their head, and finally with their butt.

III. **Activity: Wants and Needs**

40
Step 1: In your small group, distribute a set of 24 wants and needs cards. At this point each group is to imagine that a new government is being set up in their village, town or city. The government wants to provide all young people with the basic things that they want and/or need. The cards include the wants and needs that the government is willing to provide. The teens must then as a group come up with 4 additional rights that are specific to being HIV-positive, whether it be freedom from discrimination, right to privacy etc. Volunteers may want to assist the teens in filling out these cards (See SUPPLEMENTARY APPENDIX H).

Step 2: Once all groups are done, the facilitator should announce to the group that the new government can no longer afford to provide all 24 things on the list and they must as a group cut 8 of the items from the list. These 8 items are then put into a pile labeled ‘wants’.

Step 3: After the groups have cut their 8 items, have the facilitator announce that the government is now asking them to cut 6 more items to add to the wants list. In the end, each group should have 10 items remaining for the ‘needs’.

Step 4: Choose one or two members from your group who will present on 2 or 3 of your remaining needs cards and provide justifications for each.

IV. Group Presentations/Discussion 30 minutes

Each group will present on 2 or 3 of their remaining needs cards and they will explain why they chose them. After each group has presented the facilitator should ask the following discussion questions:

- Which items were most commonly eliminated in the first round? Why?
- Was the second round of cuts more difficult than the first? Why?
- Did your group have any disagreements over which items to cut? Which ones and why?
- What rights are especially important for People Living with HIV/AIDS?
- What is the difference between wants and needs?
- Which items on the list were wants and which ones were needs?

SUPPLEMENTARY APPENDIX H: HUMAN RIGHTS: UN CONVENTION ON THE RIGHTS OF THE CHILD

<table>
<thead>
<tr>
<th>Child-Friendly Version of the UN Convention on the Rights of the Child</th>
<th>Article 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>All of the rights in this document are for all children, no matter who they are. Here are all of these rights</td>
<td>You have the right to get information and say what you think.</td>
</tr>
<tr>
<td>Article 1</td>
<td>Article 14</td>
</tr>
<tr>
<td>All children under the age of 18 are entitled to all of these rights</td>
<td>You have the right to believe what you want, and you can follow any religion that you wish.</td>
</tr>
<tr>
<td>Article 2</td>
<td>Article 15</td>
</tr>
<tr>
<td></td>
<td>You have the right to meet up with other people and be able to set up youth clubs.</td>
</tr>
</tbody>
</table>
You have the right not to be discriminated against in any way.

**Article 3**
You have the right to have good decisions to be made for you.

**Article 4**
You have the right to have your rights respected and made real by the government.

**Article 5**
You have the right to be looked after by your parents if you have them.

**Article 6**
You have the right to a life.

**Article 7**
You have the right to be given a name and a nationality.

**Article 8**
You have the right to be an individual.

**Article 9**
You have the right to live with your parents, unless this would not be appropriate.

**Article 10**
You have the right to live with your

**Article 11**
You have the right not to be kidnapped or moved to another country.

**Article 12**
You have the right to say what you think and you must be listened to.

**Article 16**
You have the right to have a private life.

**Article 17**
You have the right to have information from TV, radio, books, etc.

**Article 18**
You have the right to live with your parents if this is possible.

**Article 19**
You have the right to be protected from being hurt, abuse and neglect.

**Article 20**
You have the right to have protection and care if it is not possible for you to live with your parents.

**Article 21**
You have the right to have a good adopted home if you don't live with your parents.

**Article 22**
You have the right to have protection and help if you are a refugee.

**Article 23**
If you have a disability, you have the right to have special care and education.

**Article 24**
You have the right to good health care.

**Article 25**
You have the right to have your placement checked regularly if you don't live at home.

**Article 26**
You have the right to help from the government if you are poor or need help in some way.

**Article 27**
You have the right to have a good place to grow up in.

**Article 28**
You have the right to have a good education.
Supplementary Appendix I: Human Rights

List of Some Human Rights Specific to People Living with HIV/AIDS

1) Freedom from stigma
2) Right to marry and have/adopt children
3) Right to be treated like everyone else regardless of HIV status
4) Right to access health services
5) Right to be educated on HIV/AIDS issues.
6) Right to HIV testing and support services
7) Right to confidentiality
8) Right to decide when and whom to disclose one’s status
9) Right to privacy
10) Right to ARV treatment and treatment literacy
11) Rights for youth to be heard and listened to
12) Right to gender equity
13) Right to equal opportunity employment
14) Right to access financial services
15) Right to access public facilities

LEADERSHIP

General Tips for Facilitating Small Groups:
- Explain any difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the guest speakers.
- Engage teens in conversations about the theme during small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask any of the Teen Club staff or “rotating” adult leaders for assistance.

Objectives:
Upon completion of this unit, participants will be able to:
- Identify different leadership styles and when each may be most effective.
- Given situations requiring leadership, identify the most appropriate style for the situation.

Materials Needed:
- Flipchart paper and markers

I. Introduction...................................................... 10 minutes

Teens will be given an opportunity to learn and discuss the characteristics they expect from a good leader. Divide teens into small groups.

II. Icebreaker (in Small Groups)................................. 10 minutes

The goal of an icebreaker is to learn each other’s names and help the teens get comfortable with each other. Be creative! Feel free to invent your own!

III. Activity: What type of Leader are YOU?.................. 15 minutes

Ask the teens to volunteer examples of times when they’ve done any of the following:
1. Got others to go along with an idea
2. Directed others (such as a brother or sister) to perform a specific task
3. Got others to help do something (such as solve a problem, complete a task, etc.)
4. Encouraged or convinced another that he/she could achieve a goal (such as win a game, raise money, or pass a class)

Discussion (5 min):

Ask the teens whether they’ve ever considered these activities as leadership.

(They are!)
• Discuss other examples of good leadership.
• Discuss how leadership is about applying the right skills at the right time for the right purpose.

In the next activity you will discuss 3 different leadership styles and times when each is good and bad.

IV. Activity: Leadership Styles 30 minutes

There are many leadership styles but there is no one “right” style. Instead, a leadership style can be considered GOOD or BAD depending on the situation.

The 3 most common leadership styles are Autocratic, Democratic, and Laissez-Faire.

**Autocratic:** Leader decides alone and announces it. Sometimes this leader tries to sell this idea to others.

*Good:* In an emergency or when the group has little experience in the area being worked on and there isn’t enough time to explain. For example, you need to conduct a fund-raising activity, the leader has experience, but the committee members do not.

*Bad:* A team has to solve a problem that needs everyone’s cooperation.

**Democratic:** Leader presents a decision or suggestion which is open to be changed after discussion. This type of leader is more cooperative and might also join the group in identifying the problem, diagnosing causes and considering alternatives.

*Good:* Group has some experience in area being worked on, but may need some guidance. This style is also good when there is no clear-cut answer but the leader has valuable knowledge to contribute.

*Bad:* Group is very experienced in area being worked on. Rather than participate, the leader should facilitate group to reaching decision.

**Laissez-Faire:** Leader presents the problem and leads the decision making process without participating in it. This type of leader is more like a facilitator.

*Good:* The team has experience in the area but little experience working together as a team. They need someone who is impartial to guide them through the process. For example, in a group of business execs who refuse to compromise because each thinks they know-it-all, a good leader encourages team building rather than join the argument.

*Bad:* Group does not have knowledge required to solve the problem. In an emergency where there isn’t enough time for discussion.

DISCUSSION:

• Discuss situations in which each of the 3 leadership styles can be good and bad.
• Ask the teens how they can use these leadership styles in Teen Club.
• Re-emphasize that there is no “right” or “wrong” style of leadership. It’s situational.
• Most good leaders use a combination of these approaches and vary them to meet the situation.
• The key is to know when to use each method for the best results.
• **Example:** Groups involved in school and community service work best under a leader that involves them in the process and is group-centered—this is a combination of Democratic and Laissez-Faire.
V. Activity: Acting Out Leadership Styles  
60 minutes

Make sure to allow plenty of time for this last activity. The teens will now be given an opportunity to act out what they’ve learned about leadership.

Divide the group into two. Assign each group one of the following situations to act out:

1. Teen Leaders want to improve Teen Club members’ adherence.
2. Teen Leaders want to convince adult staff to allow a famous hip-hop artist to perform at the next monthly meeting.
3. Teen Leaders want to ensure that as many Teen Club members attend the next monthly meeting.
4. Teen Leaders involved in a major fundraising project need to ensure that each team member will carry through with his or her part of the project.

Give the two groups 20 minutes to develop a 3 minute skit that demonstrates each of the 3 leadership styles (1 minute per style). Remind them that this activity is also an exercise in good leadership. Encourage them to select a leader among the group.

Reconvene the small groups once time is up and have each group present their skit. While each group performs, it is up to the rest of the group to guess which leadership style is being demonstrated. Follow up each performance with the following questions:

- Which leadership styles did you observe?
- Which leadership style worked best for each situation? Why?
- What was it like working together in your group to create the skit?
- In what other areas can you be a leader during Teen Club?
- Overall, what leadership style(s) work best for a Teen Leader?

VI. Concluding Discussion  
15 minutes

If time allows, reconvene the large group and ask one a group to perform their skit. Again, give the audience an opportunity to guess the leadership style being demonstrated.

Make the following points:

- There are many different styles of leadership.
- No style of leadership is “right” or “wrong.” Effectiveness depends on the situation.
- Leaders should adapt their style to the situation and group.

If applicable, have a Teen Club staff member announce that Teen Leader nominations will take place at the next Teen Club. He/she should advise the group to choose wisely based on what the group has learned about leadership today. The Teen Club staff member should also list the specific requirements for a Teen Leader (See SUPPLEMENTARY APPENDIX I)

Ask if there are any questions about the Teen Leader election process before dismissing for transport money and lunch.
SUPPLEMENTARY APPENDIX J: LEADERSHIP

BOTSWANA TEEN CLUB

THE ROLE OF TEEN LEADERS

LEADERSHIP QUALITIES FOR TEEN LEADERS

- Good listener
- Active and involved
- Confident with humility
- Self-Esteem
- Motivated
- Leads by example
- Punctual
- Positive Attitude
- Empowers others
- Creative
- Respectful
- Zero-transmission lifestyle
- 100% (or nearly so) Adherence Levels
  *95% adherence is needed for Teen Leaders to set a good example.

BENEFITS FOR TEAM LEADERS

1. Gain leadership training and experience.
2. Contribute to the well-being of Teen Club members and your community
3. Add valuable experiences for your Curriculum Vitae and your future.

RESPONSIBILITIES OF TEEN LEADERS

1. To work with adult health workers and volunteers to ensure successful planning and implementation of Teen Club Activities.
2. To mobilize adolescents in his/her geographic area to attend meetings.
3. To attend meetings prior to each Teen Club event to review the prior event and plan for upcoming activities.
4. To follow all ground rules established for Teen Club meetings.
5. To be a role model for adherence to ARV medications and a zero-transmission lifestyle.
6. To lead by example and make all members feel welcome.
7. To visit and support satellite Teen Clubs.

ROLE EXPECTATIONS OF TEEN LEADERS

1. Call guest speakers
2. Write thank-you letters
3. Serve as MCs
4. Help with registration
5. Help with set-up, meals and clean-up.
7. Translate for non-Setswana speakers.
8. Lead small group discussions.
9. Bring concerns to adult volunteers (serve as liaison between teens and adults).
10. Help resolve conflicts among members.
11. Represent Teen Club at workshops and conferences.
12. Speak to donors, as requested.
13. Review ground rules with members at the beginning of each event.
14. Contribute to the development of disciplinary procedures and probation guidelines.
15. Design T-shirts and logos.
16. Review activities and lessons learned at the end of each event.

**Questions for Election Speech:**

1. Why do you want to be a Teen Leader?
2. What qualities to you have to be a good Teen Leader?
3. How has Teen Club helped you to overcome challenges?
4. What is your vision for the future of Teen Club?

**LOVE, SEX, AND DATING (16-19)**

**Note:** Portions of the following Facilitator Guidelines have been adapted from “Chapter E: Personal and Sexual Relationships” of *Standing Up & Speaking Out: A Manual of Participatory Learning Activities on Life Skills and Gender Equity for Young People*, published by Women Against Rape (Botswana).

**General Tips for Facilitating Small Groups:**

- Please explain any difficult concepts in simple terms, using Setswana when possible.
- Try by all means to reinforce concepts presented by the guest speakers.
- Engage the teens in informal conversations about the theme as they do activities in the small group.
- Though there may not be enough time to do all of the games and activities, allow each teen to participate in the activity at least once.
- Feel free to ask any of the Teen Club staff or “rotating” adult leaders for assistance.

**I. Icebreaker / Name Game**

The goal is for everyone in the group to learn each other’s names. For example, you can do the “Names and Adjectives” icebreaker: Participants must think of an adjective to describe a personal attribute or how they are feeling. The adjective must start with the first letter of their name, for example, “I’m Tumelo and I’m Tired” or “I’m Wame and I’m Wonderful.” As they say this, they can also mime an action that describes the adjective.

If you would like to do a different icebreaker than the once above, please do so.

**II. Mapping Where Girls and Boys Meet**

**MAPPING:** Using a piece of flipchart paper and markers, ask the teens to make a map of their community, or one of their communities (e.g. Gaborone), and mark on it the places where boys and girls of their age meet together.
DISCUSSION:

1. What activities do boys and girls do together at these places?
2. What are the good and bad aspects* of these activities?
3. How can boys and girls spend time together without the bad aspects?

*If the teens do not mention pregnancy, alcohol/drug abuse or HIV/STD transmission as bad aspects, discuss these points.

III. Defining the Ideal Partner 30 minutes

STEP ONE: Divide into same-sex groups and give each group a flipchart paper and marker.

Girls’ Group Task: Make a list of qualities they want in a: a) boyfriend; b) husband.
Boys’ Group Task: Make a list of qualities they want in a: a) girlfriend; b) wife.

Encourage your group to not just focus on physical characteristics. Give concrete examples of qualities if they get off track.

Ask your group to underline the three most important qualities.

Examples that group might come up with:

<table>
<thead>
<tr>
<th>Qualities they might want in a boyfriend/girlfriend</th>
<th>Qualities they might want in a husband/wife</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td></td>
</tr>
<tr>
<td><strong>Boyfriend:</strong> Muscular, strong, lots of money</td>
<td><strong>Husband:</strong> Loving, cares for family,</td>
</tr>
<tr>
<td>(will buy them airtime)</td>
<td>faithful, honest, willing to spend time</td>
</tr>
<tr>
<td></td>
<td>with them, good father</td>
</tr>
<tr>
<td>Boys</td>
<td></td>
</tr>
<tr>
<td><strong>Girlfriend:</strong> Beautiful, sexy, fun to be with</td>
<td><strong>Wife:</strong> Good cook &amp; homemaker, faithful,</td>
</tr>
<tr>
<td></td>
<td>good mother, obedient</td>
</tr>
</tbody>
</table>

STEP TWO: Both groups should present their lists. Then discuss: (IF TIME PERMITS)

1. What are the differences between the lists? What are the similarities?
2. Do you think men and women want the same things in relationships?
3. Do you think men and women should have different roles in their relationships (esp. marriage)? In what ways? Why?
4. Do you want to get married? Why? Why not?

IV. Romantic Relationships 30 minutes

PREP: Put up 2 signs – AGREE and DISAGREE

STEP ONE: Explain that this session is about romantic relationships. Everyone has his or her own opinions about romance and love – everyone has a right to his or her own opinion.

STEP TWO: Read aloud each of the statements (below), one at a time, and ask the teens to stand near the sign that most represents their opinion. Ask one or two volunteers at each sign to explain why they feel that way. Repeat this process with each statement.
Statements:

1. A boy should usually pay on dates.
2. The best romantic partner is one who is also a good friend.
3. It is too difficult for youth to abstain from sex.
4. A boy can have many girlfriends at the same time.
5. A girl can have many boyfriends at the same time.
6. A person should always tell their boyfriend or girlfriend their HIV status.
7. A girl can prove she is in love with her boyfriend by having sex with him.
8. If a boy finds out that his girlfriend is cheating on him, it is okay for him to beat her.
9. Boys and girls nowadays should follow traditional marriage practices (i.e., lobola).
10. If two married HIV-positive adults want to have a child, it is okay for them to have unprotected sex.

STEP THREE: At the end discuss: (IF TIME PERMITS)

1. What are the most difficult issues that couples face in relationships?
2. What challenges do boys face when dating or being in romantic relationships?
3. What challenges do girls face when dating or being in romantic relationships?
4. What challenges do HIV-positive youth face when dating or being in romantic relationships?

STEP FOUR: Summarize: Romantic relationships can be a difficult issue to discuss. People have their own ideas about what they want from a romantic relationship. It is important that people are clear about what is acceptable and what is not acceptable to them. This will help individuals as they search for relationships that will make them happy.

V. Large Group Session & Wrap-Up 30 minutes

Please sit with your group in the classroom. Groups can volunteer to either read their lists or summarize their discussion points, though every group may not have a chance to share. Allow a couple minutes for discussion after each presentation.

Supplementary Appendix K: Love, Sex, and Dating (16-19)

Friendships between Boys and Girls:

- Boys and girls can be just good friends without having sex.
- Friendships between boys and girls are good, they help boys and girls to understand each other better and get new ideas from each other.
- Boys and girls who are friends can help to change the bad ideas that people have about their friendship.
- If a boy and a girl are sexually attracted to each other, spending a lot of time alone may lead to a sexual friendship.
- If boys and girls spend time together as friends, it is best to be clear that they just want to be friends and to spend time with other friends also. It may be best to refuse gifts in case this leads to pressure to have sex.
- Traditionally boys and girls were not allowed to spend time together before marriage because people thought that they would have sex. It is best to be together but in the presence of other friends.

What is love?

- Love is a special feeling that fills your heart.
- Love is putting yourself in someone else’s shoes and caring about their lives and how they feel.
- Love is accepting and loving people just as they are and caring about them enough to help them to do better.
• When you are in love you help others to feel important and happy. They become gentler and kinder. Love is catching – it keeps spreading.
• Sharing is a way to show love. Share your belongings, time, feelings and ideas.
• You can be loving to people you don’t know, by caring about what happens to them and sending loving thoughts.
• You show love in a smile, a pleasant way of speaking, a thoughtful act or a hug.
• Love is treating people just as you would like them to treat you – with care and respect.
• Love is treating people with special care and kindness because they mean so much to you.
• Love is being trustworthy and loyal.
• Love is sharing the good times and the bad times.

MULTIPLE CONCURRENT PARTNERSHIPS (13-15)

General Tips for Facilitating Small Groups:
• Explain difficult concepts in simple terms, using Setswana when possible.
• Reinforce concepts presented by the speakers.
• Engage teens in conversations about the theme during small group activities.
• Encourage teens in conversation about the theme during small group activities.
• Encourage each teen to participate in the activity, at least once.
• Ask Teen club staff or “rotating” adult leaders for assistance.

Objectives:
• To learn why Multiple Concurrent Partnerships (MCP), transactional and intergenerational sex are dangerous
• To discuss safe and healthy alternatives to MCP, transactional and intergenerational sex

Materials:
• SUPPLEMENTARY APPENDIX K
• Discussion questions about MCP, transactional and intergenerational sex
• Candy for participation
• 5 whistles

I. Icebreaker and Adherence Talk 30 minutes
Provide a brief lecture on the importance of adherence during the completion of the registration process. Following the lecture, the younger and older teens will split into two groups.

II. MCP Movie (Alternative: Guest Speaker) 20 minutes
• Set up younger teens in the classroom
• Play movie on MCP, transactional and intergenerational sex

III. Discussion about Movie 40 minutes
• Use SUPPLEMENTARY APPENDIX K to lead an interactive discussion about MCP, transactional and intergenerational sex
• For each volunteered answer, throw the answering teen a candy

IV. Go outside to hear marketing presentations of older teens 30 minutes
• Younger teens will gather outside to hear and then vote on older teen’s lemonade marketing strategies
• Volunteers will then pour half cups of lemonade so everyone can have a glass!
Supplementary Appendix L: Multiple Concurrent Partnerships (13-15)

- Emphasis on how important it is to utilize simple terms with clear definitions.
  - MCP simplified: Multiple means “many” and concurrent means “at the same time”. Therefore, MCP is having more than one sexual partner in the same timeframe.
  - Transactional simplified: A bank deposit or sale is a transaction. Therefore, transactional sex is buying, selling, trading, or renting body for economic gain.
- Intergenerational simplified: Across age groups. Teen leaders felt that ten year difference would qualify as intergenerational.

Discussion about the movie (provocative questions for younger teens)

- Character analysis
  - Ask the teens to select a particular character in the movie to tell what sort of activity they were engaging in. Examples:
    - the schoolgirl engaging in intergenerational and transactional sex
    - the pregnant wife engaging in MCP
  - Then ask the teens to discuss:
    - Who else was affected by that character’s choices?
    - Describe ways each character could have made a better life choice.
- What are some of the causes of MCP?
  - Boredom, peer pressure, not getting attention, poverty, lack of guidance, not being taught better
- What are ways to avoid/stop the behavior?
  - Pick a partner well (someone who you could have a meaningful commitment with so that you are less tempted to look elsewhere)
  - Make use of legal system/laws and legal ramifications (esp. for intergenerational exploitation of young people by older people)
  - Parents taking better control of their children
  - Wise selection of friends
  - Positive peer pressure to make good choices
- Reminder that it’s not just external forces, but we are also responsible for ourselves… so, emphasis placed back on individuals making wise choices (not just external laws or social consequences)

- What are the benefits of monogamy?

- Come up with various theoretical scenarios for the teens to reply to:
  - Your friend has been struggling in school and it’s very hard for her family to provide school fees year after year if she keeps failing. One day, her 45 year old school teacher tells your friend she will get an A on the final exam if she will provide sexual favors. How would you advise your friend?
  - Your friend Neo has a girlfriend, but his girlfriend is away in her village for a month over the Christmas holidays. One day when you and Neo are hanging out, you run into another girl from your class and talk to her for a few minutes. Later that night, Neo tells you he is going to try to be with this girl while his girlfriend is away. How would you respond to Neo?
  - Ma 14 and her “ministers” – what do you think of this? How would you advise a friend who had many “ministers”?

- Make sure that an announcement is made that teen leaders and Baylor social work or other Baylor adults would be readily available to talk privately to anyone who is maybe struggling with any of these issues in their own life. These issues can be brought up in clinic with the provider or with the social worker or with a trusted individual.
MULTIPLE CONCURRENT PARTNERSHIPS (16-19)

General Tips for Facilitating Small Groups:
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the theme during small group activities.
- Encourage teens in conversation about the theme during small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask Teen club staff or “rotating” adult leaders for assistance.

Objectives:
- To learn why Multiple Concurrent Partnerships, transactional and intergenerational sex are dangerous
- To discuss safe and healthy alternatives to MCP, transactional and intergenerational sex

Materials:
- 35 large lemons
- 2.5kg sugar
- Water
- 7 2-liter bottles
- Boiling urn from cafeteria
- Big pots/bowls to stir large quantities of liquid
- 5 whistles
- 2 tables (to be set up by the concrete tables out back)

I. Icebreaker and Adherence Talk 30 minutes

Provide a brief lecture on the importance of adherence during the completion of the registration process. Following the lecture, the younger and older teens will split into two groups.

- Remind teen club members about the suggestion box on the front desk at the clinic

II. Talk about MCP/T&I Sex 30 minutes

During presentation, volunteers will set up 7 lemonade stations (set up tables, get urn from cafeteria)

III. Activity: Volunteer from Stepping Stones 30 minutes

- Joanna will show the older teens how to make lemonade
- Teens will then go to the stations and make the lemonade
- After lemonade is made, each team comes up with a marketing strategy including:
  - Mandatory marketing strategies:
    - Name of lemonade/lemonade stand – their stall
    - Slogan
    - Pricing (figure out how much you need to charge and how many cups you need to sell to make a profit; do you give a deal for large purchases? Etc.)
    - Placement: where will you open your stall?
    - Who are your primary target customers?
    - Where and will you advertise?
    - Create advertisements (see ideas to choose from):
      - Make a jingle
      - Make a play
      - Make an advertisement/poster for their stall
* When the older teens are almost done, one of the volunteers has to go up to the younger teens in the classroom and tell them to come down in a minute to hear the lemonade marketing presentations

IV. **Presentation of Marketing Skills to Each other and Younger Teens**

Each group will have a few minutes to present their strategy and product.
- All teens will vote by show of hands
- Volunteers will then give a “prize” to the best group: we’ll buy their lemonade for some amount, so each team member will get P X

**Multiple Concurrent Partnerships Sports Day**

**General Tips for Facilitating Sessions:**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the theme in as they do small group activities.
- Encourage each teen to participate in the activity at least once.
- Ask any of the Teen Club staff or “rotating” adult leaders for assistance.

**Objective:**
- Increase understanding of how multiple concurrent partnerships increase the risk of HIV transmission.

**Materials Needed:**
- Footballs
- One ball painted/colored red beforehand
- Soccer balls
- Pylons (to make goal posts if there are none)
- Whistles

I. **Welcome and Introduction**

Welcome teens and tell them they will be playing football, as well as learning about multiple concurrent partnerships, or MCP. Explain that understanding MCP is important because it affects rates of HIV infection and re-infection.

II. **Passing Game**

**First**, ask the teens for 10 volunteers (if the group is small, you can use as few as four volunteers). Group the volunteers into 5 pairs of two and give each pair a football (a clean one). Tell them to pass the football back-and-forth between each other, without touching anyone else’s ball. Ask the teens to imagine that the pairs of football players are sexual partners and the people who they share the ball with are in their sexual network. Explain that currently, each set of partners is practicing monogamy, and so they each only share a sexual network with one other person.

**Second**, replace the football in one of the pairs with the red soccer ball. Explain to the teens that the red coloring on the football represents a virus. Ask the pairs to continue passing with their partners. Explain that the partners with the red ball are passing the virus back and forth as they continue to pass the ball. Ask the teens how many people were infected with the virus. Ask the teens to explain why the other players were not infected with the virus.

**Third**, ask for 10 new volunteers. This time, tell the volunteers to get into a big circle and pass one ball
around to everyone in the circle. Explain that each player someone passes the ball to represents a sexual partner, and because everyone in this circle is passing the ball around to multiple people, they all have multiple sexual partners. Explain that this is called Multiple Concurrent Partnerships or MCP, and, as a result, each player’s sexual network consists of 9 other people. Explain the following points about sexual networks:

- When men and women have more than one partner at the same time, people become linked together in sexual networks.
- Your sexual network links you to the people you are having sex with, the other people they are having sex with, those people’s other partners, and so on.
- The more people that have more than one partner, the bigger and denser the network becomes.

**Fourth**, replace the existing soccer ball with the red one. Explain to the teens that the red paint represents a virus. Ask the volunteers to continue passing the ball around. Show that now, since the network has more people in it, more players are exposed to the virus. Ask the teens how many people now have the virus. Ask why? Ask them to explain the difference was between the players practicing monogamy and the players practicing MCP. Explain that in real life, this is how sexual networks work to spread infection. Explain that for this reason, it is safer and smarter to practice monogamous relationships.

### III. Soccer Games 60 minutes

Count off all of the teens with numbers 1 to 5 (or 1 to 7 if there are a lot of teens). Ideally, groups should have about 10-12 members. Tell everyone to get into their groups. Give each group 5 minutes to make up a team cheer. Next, explain that there are four soccer teams. Team 1 will play Team 2 on one pitch and Team 3 will play Team 4 on the other. Explain that everyone with the number 5 is not actually on one team, but they will be rotating teams every time the whistle is blown. Divide group 5 equally into the other 4 teams for their starting teams. Instruct group 5 that every time the whistle blows, they must switch teams in the order of 1-2-3-4-5-1-2 etc.

Start the soccer games. Have at least one adult volunteer refereeing each game. Allow everyone on each team to play at all times, but only allow for one goalie. At least once every 5 minutes blow the whistle for those in group 5 to switch teams. After 45 minutes end the games and give the final scores. Ask each of the teams to redo their cheers.

### III. Reflection: 30 minutes

Sit everyone down together and ask them how they enjoyed the soccer games. Ask volunteers from Teams 1, 2, 3, 4 if they enjoyed playing with one team. Ask volunteers from group 5 if they enjoyed switching teams. Ask them to reflect on the pros and cons of belonging to one team versus switching teams all of the time. Explain that the reasons for wanting to belong to one team at a time are similar to the reasons you would only want to have one sexual partner at a time:

- Loyalty
- Cohesion
- Stability
- Rewarding
- Fulfilling
- Fun
- Teamwork

Explain how staying on one team represents mutual monogamy and how switching teams represents MCP. Explain that switching teams, like switching partners is disloyal, less satisfying, and prevents you from giving it your all.
NORMALIZING YOUR LIFE

General Tips for Facilitating Small Groups
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage the teens in conversations about the theme as they do small group activities.
- Encourage each teen to participate in the activity at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.

Information about the day for facilitators
- The day is split into 3 themes.
  - Finding ways to do activities that make you happy.
  - Staying safe while having fun.
  - Setting goals
- Although there is a lot of discussion for staying safe, please have the emphasis of the day be on what makes you happy and setting goals.

Materials
Flip chart / Large Paper / Regular Paper / Markers / Pens

I. Icebreaker / Name Game 30 minutes
If you know another ice breaker that you would like to do, go for it! Otherwise, do the action name game where each individual says their name in conjunction with an action. The entire group repeats the name and the action after each introduction.

II. Introduction 10 minutes
Teen Leaders will introduce the theme “Normalizing Your Life” by addressing the following:
  - Defining “Normalizing Your Life”
    - You do not have to completely change your life because you are HIV positive
      - Find a routine for your daily life that makes you feel comfortable.
      - Do activities that make you happy and help you develop as a person
      - Have fun will staying safe
      - Set goals for yourself for the future

III. What makes you happy? 40 minutes
Break into smaller groups of 10-15 teens per group. Try to have groups that are younger teens (13-15 years old) and groups that are older teens (16-19 years old).

STEP ONE – What makes you happy? Given each teen a slip of paper. Have them write down what they are passionate about / what they like to do in their free time / what makes them happy. Go around in a circle and have teens read aloud what they wrote. The facilitator should write all of the responses on the large piece of paper. Teens can see on the paper all the different interests they have.

STEP TWO – Discuss. Discuss with teens if they are able to spend time doing what they enjoy. Is there anything that limits / stops them from pursuing their interests?
STEP THREE – Brainstorm and Summarize. Ask teens how they can make sure to make ways to do the things that make them happy. Have teens share ways that they have been able to find to do what they enjoy. Brainstorm together other alternatives. Explain the importance of doing the things you enjoy to help de-stress and pursuing goals that help you grow.

IV. Having fun while being safe 40 minutes
Continue with the same groups of 10-15 teens per group (should have younger teens with other younger teens and older teens with other older teens).

SAFE OR NOT?

STEP ONE: Have kids stand in a line. Designate one direction as SAFE and the other direction as NOT SAFE (remind teens that this is like the game AGREE / DISAGREE). Explain that this session is about finding a way to have fun while staying safe. Explain you have to be thoughtful and alert to recognize which scenarios are safe and which are not.

STEP TWO: Read aloud each of the scenarios (below), one at a time, and ask the teens to step in the direction of SAFE or NOT SAFE to indicate their opinion of whether the situation is safe or not. If teens are uncertain, they can also remain where they are. Ask one or two of the teens at SAFE and UNSAFE to explain why they feel that way. Repeat this process with each statement.

Scenarios:
- **Scene 1: Street Crime.** You are meeting friends in town to play football. You have been waiting at the combi stop for more than 30 minutes and decide to hitchhike. An older man stops to pick you up but you realize shortly after entering the vehicle that the driver is drunk and begins asking you inappropriate questions such as… Do you want some of his beer? Do you want to go clubbing with him? Would you mind coming with him to his cousin’s house to pick up something…it’s on the way?

- **Scene 2: Alcohol and drugs.** You’ve just written your final exam and your friend invites you to ‘celebrate.’ She knows some older guy who is throwing a party. When you arrive at the party you are surprised to see some of the most popular kids from school. They are all drinking and having a great time. One of your friends from school approaches you and asks you why you aren’t drinking. Your friend gives you one of his/her extra beers. You walk into the next room and notice that people are smoking marijuana. Someone offers you a joint/dagga/motokwane.

- **Scene 3: Sex.** You are at home with your boyfriend (or girlfriend) listening to music from your new favourite artist. Your mom leaves to visit a neighbour. You are now home alone with your boyfriend. Your boyfriend starts kissing you. You notice he is being too aggressive and wants to have sex. You haven’t disclosed your status to him yet.

- **Scene 4: Physical activity.** You love riding your biking for fun. Even though it is already dark, you and a couple friends decide to try out some new stunts on your bikes at Main Mall. None of you wear a helmet.
STEP THREE: Discuss (~5-10 min discussion for each / as time permits). Have a scribe in the group take note of the points made.

Scene 1: Issues for Discussion
Street safety:
- What are other types of crime that occur in the streets?
- Can you give examples of some situations that seem safe, but could actually be dangerous?
- How can you avoid these situations?
Traveling Safety:
- What are some benefits of hitch hiking? What are some challenges of hitch hiking?
- What precautions should you take if you decide to hitchhike?
- What are some safe options for traveling?

See Appendix A for Useful Information Regarding Street Crime

Scene 2: Issues for Discussion
Peer Pressure:
- What are reasons to stay at the party? What are reasons to leave the party?
- What are some of the reasons to drink the beer / smoke marijuana?
- What are some of the reasons to not drink the beer / smoke marijuana?
- If you think drinking / smoking marijuana is wrong, is it okay to stay at the party?
- Would you be worried that you are participating in an illegal activity?
- If you don’t want to drink / smoke marijuana, and you decide to stay at the party, are you condoning your peers’ behavior?
Drug and Alcohol Abuse:
- Is marijuana an illegal drug?
- What are the consequences of being caught underage drinking and/or using an illegal drug?
- What are the effects (positive and negative) to alcohol? Marijuana?
- Why do teens drink and use drugs?
- Does being HIV+ make you more at-risk when drinking? Using drugs? Why or why not?

See Appendix A for Useful Information Regarding Alcohol and Drugs

Scene 3: Issues for discussion
Safe sex:
- What is safe sex? When are you ready to have sex? Should you be disclosed to your partner? Is consent important?
- When is using a condom important?
Rape:
- Is this situation an example of rape? Why or why not?
- What is the definition of rape?
- Can the victim press charges? What are the consequences?
- If the victim was under the influence of alcohol, can he/she still press charges? Why or why not?

See Appendix A for Useful Information Safe Sex and Rape
Scene 4: Issues for discussion

Street safety (similar to Scene 1):
- What are the dangers of being out at night?

Physical safety
- What are the risks of trying out stunts?
- How can these risks be reduced?

STEP FOUR: Summarize
When finding ways to have fun – playing football, hanging out with friends, or listening to music – it is important to stay safe. **Avoid situations in which you are not control of the situation**, like being outside at night, taking a ride from a stranger, going to a party where you do not know many people and have no safe way home, or being in a relationship with a person who you do not feel comfortable telling that you do not want to kiss, or have sex, etc.

V. Setting goals for yourself for the future

Continue with the same groups of 10-15 teens per group

**STEP ONE:** Discuss what it means to set goals. Describe the difference between short-term and long-term goals.

**STEP TWO:** Have teens write down goals of their own on slips of paper. Collect these goals. The facilitator should write all of the responses on the large piece of paper. Discuss whether these are short-term goals or long-term goals. Explain the importance of choosing goals that are SMART: Specific, Measurable, Attainable, Realistic, and Time-oriented.

See Appendix B for a description of SMART

**STEP THREE:** As a group, pick one goal. Together, come up with a list of 10 steps (one for each person in the group) needed to accomplish the goal. Write these steps on another large piece of paper. Assign each person a step. If there are not enough steps, two teens can share one step.

**STEP FOUR:** All groups come together in the parking lot. Each group is now a relay team achieving their goal. The order of the relay race is the order of the steps needed to reach the goal. Have half the group on one side of the parking lot and half the group on the other side of the parking lot. “Race” to see which team can achieve their goal first. Remember, the next runner cannot start running until he/she has been tagged by the previous step (or previous runner).

When everyone is done, explain that the relay shows how you need each person (or step) to reach a goal. Also explain that different goals take a different amount of time to finish, just as in the relay race. Your goals should be tailored to fit your own personality and learning style.

VI. Large Group Session and Wrap Up

Please gather either in the classroom or outside by the tables. Groups should volunteer to share their list of passions / how to have fun but stay safe / or future goals. Allow for discussion after each group to explain how this is part of “normalizing your life.”
**SUPPLEMENTARY APPENDIX M: “SAFE OR NOT?”**

(Taken from ‘My Future Today…A Guide for Youth’)

**Scene 1: Street Crime**
- Violent crimes such as assault, rape and murder seem to be becoming more common in Botswana. Although you cannot always fully protect you against crime, you can do much to increase your safety.
  1. When you go somewhere, allows inform a responsible adult (your caregiver, another family member, a trusted friend) where you are going, who you will see there, and what time you will be back.
  2. Never put yourself in a dangerous situation, especially, for example, a woman walking alone at night in deserted areas.
  3. If you are being attacked, shout as loudly as possible to attract attention.
  4. If you are being threatened with a weapon, it is better to lose your possessions than your life.
  5. You could also consider taking self-defense classes. Although these will not lessen the chance of you being attacked, it will give you certain skills on how to counteract the attacker.

**Scene 2: Alcohol and Drugs**
- The legal age for drinking is 18, and nobody is allowed to sell alcohol to people under that age. Vendors who sell alcohol to under-age minors are liable to a fine and/or a prison sentence.
- Alcohol consumption can become very habit-forming and lead to a physical addiction (‘alcoholism’). Alcoholics’ bodies become so used to consuming large amounts of alcohol that they cannot function normally when they are not drinking.
- **Alcohol can have a negative effect on people taking antiretroviral medicine: it damages the liver, thus further compromising the person’s weakened immune system.**
- Marijuana makes users feel happy and relaxed, but side-effects include mood swings, loss of memory and anxiety.
- All drugs come with serious dangers and health-risks, including the possibility of addiction.
- There are various penalties for the possession, manufacturing, selling or distributing of non-medicinal drugs, ranging from a fine to imprisonment.

**Scene 3: Safe Sex and Rape**
- **Consistent and correct use of a condom is always important**
- The Penal Code defines rape as unlawful sexual intercourse without the consent of the other person. Persons who are charged with rape are not entitled to bail and, when found guilty, can be sent to prison for between ten years and life. People found guilty of rape must undergo a test for HIV/AIDS, and if the results are positive, the minimum sentence is much harsher; it can also include corporal punishment. The sentence for attempted rape is a prison sentence of at least five years, with or without corporal punishment.
- Many women who have been raped don’t report this, as they fear that they may be victimized, be gossiped about, or that people may say that the woman had led the rapist on. They also fear having to testify in an open court if the rapist is caught. **Rape is a criminal offense and should be reported.** When a woman does not report a rape, it sends out a message to the rapist that he can do it without fear of being arrested, and may go on to rape again.
- If you have been raped or defiled: do not throw away your clothes or take a bath as this will wash away all traces of semen that may help in convicting the rapist. Report the matter to the nearest police station and make a full statement. If you want to, ask that a female police officer take down the statement. Take all evidence with you, such as towels or sheets that may contain traces of semen or other body fluids.
SUPPLEMENTARY APPENDIX N: HOW TO SET SMART GOALS

(Taken from Teen Talk: A Guide for Positive Living)

**Specific**: Make sure that goals are simple and focus on what you would like to happen in your life. An example might be that you would like to have a family by the time you are 30 years old.

**Measurable**: If you have an idea as to when you might be able to achieve your goals, it will allow you to figure out what steps you will need to take to accomplish them.

**Attainable**: Make sure that your goals are realistic. Do not set yourself up for disappointment by making your goals impractical.

**Realistic**: Make a plan as to how you are going to achieve your goals that is easy for you to follow. This will make it much more enjoyable for you to reach them.

**Time-oriented**: Set a target date/time for your goals to be completed so that you remember what you are working toward.

PERSONAL SAFETY

**General Tips for Facilitating Small Groups:**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage the teens in conversations about the theme as they do small group activities.
- Encourage each teen to participate in the activity at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.

**Objectives:**
- Increase understanding of personal safety and high risk situations
- Discuss strategies and resources needed to decrease personal risk

I. **Icebreaker / Name Game** 10 minutes

   The goal is for everyone in the group to learn each other’s names. For example, you can do the “Names and Adjectives” icebreaker: Participants must think of an adjective to describe a personal attribute or how they are feeling. The adjective must start with the first letter of their name, for example, “I’m Tumelo and I’m Tired” or “I’m Wame and I’m Wonderful.” As they say this, they can also mime an action that describes the adjective.

   If you would like to do a different icebreaker than the one above, please do so.

II. **Personal Safety and Crime Prevention Role Plays** 95 minutes

   Divide into small groups and assign a scenario to each group.

   **STEP ONE – Facilitator reads scenario to group:**
Group 1: Your friend meets you at the Game City Mall after school one day. You see her get out of a white Corolla and say goodbye to a man who you do not recognize. After asking her about the man she tells you that it is her boyfriend. When you say you thought she has a different boyfriend, she explains that she does but this guy provides her transport while the other guy buys her airtime for her cell phone. You also know she has another partner who gives her pocket change but she’s thinking about leaving him because he doesn’t want to use a condom during sex. She doesn’t want to disclose her status.

Group 2: Your mom has asked you to head over to Gaborone to pick up some fabric for some dresses she is making to sell in your village. You have been waiting at the bus stop for more than 30 minutes and decide to hitch hike. An older man stops to pick you up but you realize shortly after entering the vehicle that the driver is drunk and begins asking you inappropriate questions such as… Do you want some of his beer? Do you want to go clubbing with him? Would you mind coming with him to his cousin’s house to pick up something…it’s on the way?

Group 3: On your way to the restroom, you realize that you left your cell phone on your desk in math class. Immediately you return to the classroom and find that your cell phone is not on your desk. Class is not over for 15 more minutes.

Group 4: You’ve just written your final exam and your friend invites you to ‘celebrate.’ She knows some older guy who is throwing a party. When you arrive at the party you are surprised to see some of the most popular kids from school. They are all drinking and having a great time. One of your friends from school approaches you and asks you why you aren’t drinking. Your friend gives you one of his/her extra beers. You walk into the next room and notice that people are smoking marijuana. Someone offers you a joint/dagga/motokwane.

Group 5: Your boyfriend asks you to go to a house party with him and you agree. Once at the house, everything seems quiet. The guy having the party tells you that everyone else won’t arrive for another hour or two. You decide to enter. The host guy says that you and your boyfriend can hang out while he runs out to get some more beer. You and your boyfriend have already been drinking. As soon as the guy leaves your boyfriend starts kissing you. You notice he is being too aggressive and wants to have sex. You haven’t disclosed your status to him yet. You tell him his friend should be home soon, so you shouldn’t do this now. He proceeds anyway. He’s too strong for you to push him off. You ask him to stop. He doesn’t and forces himself on you and has sex with you.

Group 6: Your teacher has paired up students for a science project. You’ve never really had a conversation with this classmate. After school your assigned partner and his friend approach you. Your partner wants your cell phone number so he can SMS you about the science project. You give him your number. When you are home that evening, you receive an SMS message. You think it is your classmate because it says, “Let’s work on project this weekend.” Where do you live?” You reply. As the evening continues, you receive about 10 SMS messages, all from numbers you do not recognize. The next morning, as you walk to school, you notice someone is following you.

STEP TWO – Ask for volunteers to act out scenario

STEP THREE – Group discussion

Start by encouraging everyone to participate in the discussion. Suggested questions for the discussion are listed below:
What would you do in this situation?
What strategies will be used?
What resources are needed?
What additional questions would you ask?
What information do you need?

Group 1: Issues for Discussion

**Prostitution:**
- Is this scenario an example of ‘exchange sex’? Why or why not?
- Is ‘exchange sex’ a form of prostitution? Why or why not?
- If someone has self-respect, would they involve themselves in exchange sex? Why or why not?

**Multiple Partners:**
- Are having multiple partners okay? Why or why not?
- What are the implications for having multiple partners when you are HIV+?

**Disclosure:**
- At what point should you disclose your status to your partner?
- Why can it be difficult to disclose your status to your partner? What are some possible outcomes?
- If you are ready to disclose your status but fear how your partner might react, where can you get support?

Useful Information (taken from ‘My Future Today…A Guide for Youth’)
- Prostitution itself is not against the law in Botswana, but living off the proceeds of prostitution, or seeking money for providing for sex for money (‘soliciting’) is illegal; anyone found guilty of either of these can be sentenced to jail after a second conviction, and may also be sentenced to corporal punishment.
- Some people, especially young and unemployed girls and women, practice a form of prostitution in the sense that they receive gifts, such as cell phones or clothing, in exchange for sex, often with men much older than themselves. Many people are driven to such behavior by poverty, or by their desire to own status symbols. Because they are in no position to negotiate safe sexual behavior with their ‘friends’ they are at risk of contracting or transmitting HIV/AIDS or having an unwanted pregnancy.

Group 2: Issues for Discussion

**Street safety:**
- What are other types of crime that occur in the streets?
- Can you give examples of some situations that seem safe, but could actually be dangerous?
- How can you avoid these situations?

**Hitch hiking:**
- What are some benefits of hitch hiking?
- What are some challenges of hitch hiking?
- What precautions should you take if you decide to hitch hike?

**Traveling Safely:**
- What are some safe options for traveling?
Useful Information (taken from ‘My Future Today…A Guide for Youth’)

- Violent crimes such as assault, rape and murder seem to be becoming more common in Botswana. Although you cannot always fully protect you against crime, you can do much to increase your safety.
  6. Never put yourself in a dangerous situation, especially, for example, a woman walking alone at night in deserted areas.
  7. If you are being attacked, shout as loudly as possible to attract attention
  8. If you are being threatened with a weapon, it is better to lose your possessions than your life.
  9. You could also consider taking self-defense classes. Although these will not lessen the chance of you being attacked, it will give you certain skills on how to counteract the attacker.

Group 3: Issues for Discussion

Theft:

- Why do people steal?
- What are common things that people steal?
- Are these things people need to have or want to have? What is the difference?
- Why are material possessions important to us?
- How do you feel when something is stolen from you?
- What should you do if/when something of yours has been stolen?
- What are some measures you can take that would prevent you from being a victim of theft?

Group 4: Issues for Discussion

Peer Pressure:

- What are reasons to stay at the party?
- What are reasons to leave the party?
- What are some of the reasons to drink the beer / smoke marijuana?
- What are some of the reasons to not drink the beer / smoke marijuana?
- If you think drinking / smoking marijuana is wrong, is it okay to stay at the party?
- Would you be worried that you are participating in an illegal activity?
- If you don’t want to drink / smoke marijuana, and you decide to stay at the party, are you condoning your peers’ behavior?

Drug and Alcohol Abuse:

- Is marijuana an illegal drug?
- What are the consequences of being caught underage drinking and/or using an illegal drug?
- What are the effects (positive and negative) to alcohol? Marijuana?
- Why do teens drink and use drugs?
- Does being HIV+ make you more at-risk when drinking? Using drugs? Why or why not?

Useful Information (taken from ‘My Future Today…A Guide for Youth’)

- The legal age for drinking is 18, and nobody is allowed to sell alcohol to people under that age. Vendors who sell alcohol to under-age minors are liable to a fine and/or a prison sentence.
• Alcohol consumption can become very habit-forming and lead to a physical addiction (‘alcoholism’). Alcoholics’ bodies become so used to consuming large amounts of alcohol that they cannot function normally when they are not drinking.
• **Alcohol can have a negative effect on people taking antiretroviral medicine: it damages the liver, thus further compromising the person’s weakened immune system.**
• Marijuana makes users feel happy and relaxed, but side-effects include mood swings, loss of memory and anxiety.
• All drugs come with serious dangers and health-risks, including the possibility of a physical addiction to the drug.
• There are various penalties for the possession, manufacturing, selling or distributing of non-medicinal drugs, ranging from a fine to imprisonment.

**Group 5: Issues for discussion**

*Rape:*

• Is this situation an example of rape? Why or why not?
• What is the definition of rape?
• Can the victim press charges? What are the consequences?
• If the victim was under the influence of alcohol, can he/she still press charges? Why or why not?

*Disclosure:*

• If you press charges, are you obligated to disclose your status?
• Do you think you should disclose your status? Why or why not?
• If you find out that this person is having sex with other people, are you obligated to disclose your status? Why or why not?

**Useful Information (taken from ‘My Future Today…A Guide for Youth’)**

• The Penal Code defines rape as unlawful sexual intercourse without the consent of the other person. Persons who are charged with rape are not entitled to bail and, when found guilty, can be sent to prison for between ten years and life. People found guilty of rape must undergo a test for HIV/AIDS, and if the results are positive, the minimum sentence is much harsher; it can also include corporal punishment. The sentence for attempted rape is a prison sentence of at least five years, with or without corporal punishment.
• Many women who have been raped don’t report this, as they fear that they may be victimized, be gossiped about, or that people may say that the woman had led the rapist on. They also fear having to testify in an open court if the rapist is caught. Rape is a criminal offense and should be reported. When a woman does not report a rape, it sends out a message to the rapist that he can do it without fear of being arrested, and may go on to rape again.
• If you have been raped or defiled: do not throw away your clothes or take a bath as this will wash away all traces of semen that may help in convicting the rapist. Report the matter to the nearest police station and make a full statement. If you want to, ask that a female police officer take down the statement. Take all evidence with you, such as towels or sheets that may contain traces of semen or other body fluids.

**Group 6: Issues for discussion**

*Cell Phone / Internet predators:*

• How can you protect yourself?
• What information is appropriate to give out over the phone internet?
What can you do to prevent this type of situation?

III. **Large Group Session & Wrap-Up** 45 minutes
A representative from each small group should be asked to volunteer to explain the nature of their skit and discuss their responses.

**PHYSICAL FITNESS**

**General Tips for Facilitating Small Groups**
- Be aware of safety as all activities are high energy
- Debrief with teens the objectives following each station

**Objectives**
- Regular **physical fitness** for healthy living – physically and emotionally
- **Sportsmanship, communication, and teamwork**

**Materials**
- Basketball / Volleyball / Netball / Frisbee / Soccer ball / Cones

I. **Icebreakers** 15 minutes

II. **Introduction** 15 minutes
A Teen Leader will introduce the objectives of the day: Importance of physical fitness, sportsmanship, communication, and teamwork

Have teens line up from oldest to youngest. Count off the teens from 1 to 6. All the 1s will form a group, all the 2s will form a group, and so forth. There should be 6 groups total.

III. **Stations** 140 minutes
Teams will rotate through the following stations:

Station 1: Netball
Station 2: Basketball
Station 3: Volleyball
Station 4: Football
Station 5: Ultimate Frisbee
Station 6: Yoga

IV. **Free Play** 30 minutes
Teens may return to their favorite station for 30 minutes

V. **Debrief** 15 minutes
Have all teens come together and discuss the lessons they have learned in terms of physical fitness, sportsmanship, communication, and teamwork. Ask teens to consider how they have apply these lessons to their everyday lives.
GENERAL TIPS FOR FACILITATING SMALL GROUPS:
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the theme as they do small group activities.
- Encourage each teen to participate in the activity at least once.
- Ask the Teen Club staff or “rotating” adult leaders for assistance.

OBJECTIVES:
- To increase understanding of the various types of relationships that exist
- To discuss the characteristics of a healthy versus an unhealthy, or abusive relationship
- To discuss how friendships and romantic relationships may differ

MATERIALS NEEDED:
- One sheet of paper per teen, cut into a triangle; and one rectangular sheet to write their Valentine on
- Crayons/markers/other decorating materials
- Extra pairs of scissors
- 3 pieces of string, each 2.5 meters long
- 1 safety pin per teen

I. LOVE AND RELATIONSHIPS/ORIGAMI HEARTS 70 MINUTES

DISCUSSION: Love and Relationships

Teens will break into small groups depending on volunteers available to facilitate and discuss the questions listed below. Volunteers will facilitate the discussion by presenting each of the questions, keeping the conversation on topic and flowing and assuring all the teens are participating in the discussion (15 – 20 Minutes). Following the small groups discussion, all Teens will return from the small groups to discuss the topic with the entire Club (Provide sweets for those who participate).

QUESTIONS:
1. What is a relationship?
2. What kinds of relationships exist (encourage them to think beyond just romantic relationships)?
3. Can a boy be JUST friends with a girl and vice versa? Are such friendships good? Why or why not?
4. What is the difference between a positive and abusive relationship? What are the differences between loving someone & liking someone? Lusting after or having a crush on someone & being in love?
5. In what ways do we show people we care about them (once again, encourage beyond just romantic relationships)?
6. What makes a good Boyfriend/Girlfriend, Child (to their parent), Parent (to their child), and Husband/Wife?

ACTIVITY: Making an Origami Heart-Shaped Valentine

Origami is the Japanese art of paper folding. Today the teens will learn how to fold a heart-shaped valentine. Demonstrate while explaining by using a larger piece of paper than the one you will hand out to
the teens. You should also have a ready-made example on hand. Hand out triangle shaped pieces of paper to each teen. These slips of paper should have been cut beforehand.

After making the hearts, give the teens an opportunity to write something nice for a friend, family member, or loved-one either directly on the heart or on another slip of paper that they may tuck inside it (see diagram). Make sure to go through each step slowly. Repeat the fold if necessary and have volunteers circle around the group to make sure that everyone has finished that step before you move on.

Ask the teens if any of them would like to share what they wrote. Otherwise, give everyone a minute to stand up and stretch before moving on to the next activity.

II. **ACTIVITY: Friendship/Friendship Bracelets** 60 minutes

**DISCUSSION: Friendship**

Friendship was mentioned as one type of relationship. Now talk in detail about what friendship means. Remain in small groups, and discuss in the same manner that love/relationships was discussed. (Provide sweets for those who participate).

**Questions:**

- What is friendship?
- What does it mean to be a good friend?
- Can friendships also be abusive?
- What do you do when you lose a friend?

**ACTIVITY: Making a Chinese Staircase Friendship Bracelet (See SUPPLEMENTARY APPENDIX L)**

The teens should be given 2-3 few pieces of pre-cut yarn or embroidery thread in a color of their choice.

Instruct them to fold this in half. This will create a loop through which they will attach a safety pin. This safety pin can then be attached to the lap of a dress, skirt, or jeans.

Again, have an example ready. We recommend demonstrating each step to the teens by using yarn or a large ribbon.

**Instructions in brief** (For detailed instructions please refer to SUPPLEMENTARY APPENDIX L): Start with one color. Loop the thread around your thumb and cross it over the remaining strings so that it makes a “4”. Wrap that same string under and through the loop that forms the “4”. Emphasize that the resulting knot should be pulled tightly. Repeat this procedure for as long as you want to use that color making sure that each knot is pulled tightly and is aligned with the one that precedes it. To change the color pattern, simply select another color string and repeat the same procedure. Once again, stop and repeat if any one has any questions. Make yourself available to help those who need it.

**SUPPLEMENTARY APPENDIX O: RELATIONSHIPS (13-15)**

**PART 1—RELATIONSHIPS**

1. What is a relationship?
• The connection that exists between two people.

2. What types of relationships can you have with another person?
   • Romantic, Parent/Child, Casual Acquaintances, Homosexual, Business Associates, Person/Pet, Friends, Boyfriend/Girlfriend, Husband/Wife, Grandparent/Child, Siblings, Cousins, etc.)

3. Can a boy be JUST friends with a girl and vice versa? Are such friendships good? Why?
   • Boys and girls can be just good friends without having sex.
   • Friendships between boys and girls are good, they help boys and girls to understand each other better and get new ideas from each other.
   • If boys and girls spend time together as friends, it is best to be clear that they just want to be friends and to spend time with other friends also. It may be best to refuse gifts in case this leads to pressure to have sex.

4. What is the difference between a positive relationship and an abusive relationship? What are the differences between loving someone & liking someone? Lusting after or having a crush on someone & being in love?
   • Positive Relationships—Symbiotic, both partners are equal, there is a give-and-take, each person has own independence and identity
   • Positive Indications—Both partners feel happy, they trust each other
   • Abusive Relationships—One partner is mentally, emotionally and/or physically dominant, partners are codependent to an extreme
   • Abusive Indications—Low self-esteem, physical and/or verbal abuse, lack of independent identity, money or gifts in exchange for sexual acts

How to recognize an abusive relationship:
   • The person is jealous and possessive
   • The person tries to keep you away from your other friends or family
   • The person tries to control you
   • The person uses alcohol or other drugs
   • The person gets angry often
   • The person gets into physical fights frequently

What is liking someone?
Liking someone is having a fondness for them, enjoying their company, having common interests and mutual friends; it can be long-lasting but occasionally is only temporary. A person you like may be a friend, work associate or casual acquaintance.

What is loving someone?
Loving someone is always putting them before you, accepting them for whom and what they are, and treating them with loyalty and fairness. Love is unconditional and undying. People you love may be your family, close friends, boyfriend/girlfriend or husband/wife.

What is lusting after someone?
Lusting after someone or having a crush on them is usually an intense feeling of desire for that person. All your thoughts are focused on that one person and you cannot concentrate on anything else. It is superficial and conditional and lasts only a limited time. It may be because of weak and fleeting reasons. While it is not unhealthy to have these feelings, it is unhealthy to commit to them. You may lust after or have a crush on an attractive stranger, a friend, a boyfriend/girlfriend, a famous person.

**What is being in love?**

Being in love is a feeling of love and a deeper connection between two people that stands the test of time. Each person is comfortable with who they are as an individual and as a couple. They always remain faithful to each other. They respect each other and share every success AND failure. They appreciate every strength and flaw of their partner. It is genuine, permanent and consistent. It is not usually overpowering, but a calm feeling of content and satisfaction. One may be in love with their husband/wife, fiancé and, after time, a boyfriend/girlfriend.

5. **In what ways do we show people that we love or care about them?**
   - Hugs, Kisses, Sexual Acts, Offering Help, Phone Calls, Letters, “Friending” on Facebook, Gifts on Special Occasions, Compliments, etc.

6. **What makes a good Boyfriend/Girlfriend, Child (to their parent), Parent (to their child), and Husband/Wife?**
   - Loving
   - Caring
   - Respectful
   - Loyal
   - Trustworthy
   - Helpful
   - Faithful…etc.

**PART TWO—FRIENDSHIP**

1. **What is friendship?**
   - Friendship is having a special connection with someone, but not on a romantic level.
   - You can have friendships with people of your own gender, or people of other genders. You can have a lot of not-so-good friends, or a few good friends. It depends on personal choice.
   - There are different levels of friendship—you can have acquaintances (friends you see in certain settings ex. school work, but don’t really socialize with outside of those settings), good friends, and best friends.
   - There are many kinds of friends. You can have friends you have fun with, friends you confide in, or friends who you hang out with for mutual benefit.

2. **What does it mean to be a good friend (along the same lines as the question in the earlier section)?**
   - Loving
   - Caring
   - Respectful
   - Loyal
   - Trustworthy
   - Helpful
   - Faithful… etc.
3. Can friendships also be abusive?
   - Friends may not always have your best interests at heart. Like romantic partners, they can become jealous or dominant. They may also use you for your money or your popularity. In these cases, just like romantic relationships it is best to just cut off communications with that person and find someone who cares about you.

4. What do you do when you lose a friend?
   - It is natural for friends to get into disagreements sometimes. If friends are fighting, they should make the best effort to talk about the problems in a respectful manner and not be too hurtful. However sometimes, friends get in fights to the point where the friendship cannot be repaired. This can happen if one friend has done something inexcusable, or even if friends just don’t have anything in common anymore. When you lose a friend:
     o You must come to terms with the fact that the friendship didn’t work and learn why it did not work so that your next friendships will be better.
     o It is ok to feel sad or lonely but do not feel sorry for you. Realize that you’re are a good person and deserve to be happy.
     o Begin a new hobby or do something new to help you stop thinking about the break-up (see suggestions above).
     o Talk to people that you trust about what you’re feeling but try to respect the other person’s privacy when discussing details
     o Respect the other person and do not spread untrue rumors or lies about them.
Origami Heart

An origami heart is fun to make - and it has many uses! Perfect for Valentine's Day, you can make one or more to decorate the front of a card - or tuck a little message inside and it becomes a card itself (see photo overleaf).

Some of the final folds on this model are made through a number of thicknesses of paper, which can make them a little tricky for the youngest kids. Scissors are required.

1. Start by folding your square in half diagonally, and creasing carefully. Unfold, and cut along the line.

2. You should have two triangles like this, which you can use to make two hearts.

3. Place the triangle in front of you with the long side along the bottom, and fold one corner across to the other, as shown, to crease.

4. Open the triangle up again.

5. Now fold the top point down about 2/3, as shown.
6. Take one of the bottom corners and fold it up, making sure that you line up the edge with the middle crease you have already made.

7. Do the same with the other corner. Crease well.

8. Flip over. Fold the top flaps down along the dotted lines shown above.

9. This is what it looks like. You are forming your heart shape.

10. Here is the basic heart shape, completed.

11. Round off the edges of your heart by making tiny folds at the top and outside corners, as shown.

12. You can see that the top four corners have been rounded off here.

Turn your finished heart over. Why not slip a little message into the heart before you deliver it?
Chinese Staircase Friendship Bracelet

This is a simple bracelet to make for people of all ages. Give it to a friend to wear alone or make a collection and wear them all at once! Let your creativity take wing! Everyone will love the fun design and beautiful colors.

**Step 1:** Begin with 2-3 strings approximately 14 in (35cm) in length. Make sure it is knotted at the top. You may then elect to tape the knot to a flat surface as shown above or you may instead loop it around a safety pin and attach to an item of clothing.

**Step 2:** Choose the string color you would like to begin your pattern with and loop it across the other strings to make the “4” shape shown above.

**Step 3:** Place the tail end of your chosen string under the two other strings and draw it through the large loop you’ve made.
Example of finished friendship bracelet:

**Step 4:** Make sure the knot is tight. You may continue the same procedure as many times as you would like to use that color. Once you’re ready to use a new color, simply take up that string and loop it over the other to create the “4” shape. Repeat until you have a bracelet that is long enough to tie around your wrist!


**RELATIONSHIPS (16-19)**

**General Tips for Facilitating Sessions:**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the lead speakers.
- Engage teens in conversations about the theme as they do small group activities.
- Encourage each teen to participate in the activity at least once.
- Ask any Teen Club staff or “rotating” adult leaders for assistance.

**Objectives:**
- To increase understanding of the various types of relationships that exist
- To discuss the characteristics of a healthy versus an unhealthy, or abusive relationship
- To discuss how friendships and romantic relationships may differ

**Materials Needed:**
- Film about Relationships
- Equipment to view film

**I. Introductory Discussion: Relationships**  
*45 minutes*

Teens will break into small groups (depending on volunteers available to facilitate) and discuss the questions listed below. Volunteers will facilitate the discussion by presenting each of the questions, keeping the conversation on topic and flowing and assuring all the teens are participating in the discussion (15 – 20 Minutes). Following the small groups discussion, all Teens will return from the small groups to discuss the topic with the entire Club (Provide sweets for those who participate).
What is a relationship?
What kinds of relationships exist?
Can a boy be JUST friends with a girl and vice versa? Are such friendships good? Why?
What are the differences between a positive and abusive relationship; what are the indications for each?
What are the differences between loving someone versus liking someone? Lusting after or having a crush on someone versus being in love?
In what ways do we show people we care about them?
What makes a good Friend, Boyfriend/Girlfriend, Child (to their parent), Parent (to their child), and Husband/Wife?

II. Movie: (Relationships Theme) 75 minutes

III. Closing Discussion 30 minutes

Following the movie, time permitting; the large group we will hold an open discussion (see SUPPLEMENTARY APPENDIX N) over the following questions:

b. What kinds of relationships were shown in the movie?
c. What was your favorite relationship in the movie? Why?
d. Were your favorite relationships in the movie healthy ones?
e. What scenes portrayed a healthy relationship?
f. How can we make sure we are in healthy relationships?

SUPPLEMENTARY APPENDIX P: RELATIONSHIPS (16-19)

What is a relationship?
- The connection that exists between two people

What kinds of relationships exist?
- Romantic (Boyfriend/Girlfriend (Hetero & Homosexual), Husband/Wife), Caregiver or Parent/Child, Casual Acquaintances, Business Associates, Person/Pet, Friends, Grandparent/Child, Siblings, Cousins, etc.

Can a boy be JUST friends with a girl and vice versa? Are such friendships good? Why?
- Friendships between boys and girls are good, they help boys and girls to understand each other better and get new ideas from each other.
- Boys and girls who are friends can help to change the bad ideas that people have about their friendship.

What is the difference between a positive and abusive relationship; what are the indications for each?
- Positive Relationship: symbiotic, both partners are equal, there is a give-and-take, each person has own independence and identity.
  - Positive Indications: Both partners feel happy, they trust each other.
- Abusive Relationship: one partner is mentally, emotionally and/or physically dominant, partners are codependent to an extreme
  - Abusive Indications: Jealousy, low self-esteem, physical and/or verbal abuse, lack of independent identity, money or gifts in exchange for sexual acts

What are the differences between loving someone versus liking someone? Lusting after or having a crush on someone versus being in love?
• Liking someone is having a fondness for them, enjoying their company, having common interests and mutual friends; it can be long-lasting but occasionally is only temporary. A person you like may be a friend, work associate or casual acquaintance.

• Loving someone is always putting them before you, accepting them for whom and what they are, and treating them with loyalty and fairness. Love is unconditional and undying. People you love may be your family, close friends, boyfriend/girlfriend or husband/wife.

• Lusting after someone or having a crush on them is usually an intense feeling of desire for that person. All your thoughts are focused on that one person and you cannot concentrate on anything else. It is superficial and conditional and lasts only a limited time. It may be because of weak and fleeting reasons.

• While it is not unhealthy to have these feelings, it is unhealthy to commit to them. You may lust after or have a crush on an attractive stranger, a friend, a boyfriend/girlfriend, a famous person.

• Being in love is a feeling of love and a deeper connection between two people that stands the test of time. Each person is comfortable with who they are as an individual and as a couple. They always remain faithful to each other. They respect each other and share every success AND failure. They appreciate every strength and flaw of their partner. It is genuine, permanent and consistent. It is not usually overpowering, but a calm feeling of content and satisfaction. One may be in love with their husband/wife, fiancé and, after time, a boyfriend/girlfriend.

In what ways do we show people we care about them?
• Hugs, Kisses, Sexual Acts, Offering Help, Phone Calls, Letters, “Friending” on Facebook, Gifts on Special Occasions, Compliments, etc.)

What makes a good Friend, Boyfriend/Girlfriend, Child (to their parent), Parent (to their child), and Husband/Wife?
• To each his own, but looking for something along the lines of loving, caring, respectful, loyal, trustworthy, helpful, faithful, etc.

SPORTSMANSHIP

General Tips for Facilitating Small Groups:
• Explain difficult concepts in simple terms, using Setswana when possible.
• Reinforce concepts presented by the speakers.
• Engage teens in conversations about the theme during small group activities.
• Encourage teens in conversation about the theme during small group activities.
• Encourage each teen to participate in the activity, at least once.
• Ask Teen club staff or “rotating” adult leaders for assistance.

Objectives:
• To introduce good sportsmanship and taking responsibility for one’s own actions
• To introduce the idea that with hard work and practice any individual can become an athlete, even professionally
• To introduce Ultimate Frisbee, a disc game played throughout the world

Materials:
• SUPPLEMENTARY APPENDIX N: Ultimate Rules, example videos
I. Icebreaker and Adherence Talk

- Provide a brief lecture on the importance of adherence during the completion of the registration process.

II. Introduction to and Playing of Ultimate

- All teens come together in clinic lobby to be introduced to the rules of Ultimate and view videos on the rules and how to play (as well as amazingly awesome catches) (SUPPLEMENTARY APPENDIX N). (Approximately 15 min)
- Teens are then taken to an open field at UB. (Approximately 30 min)
- Teens practice throwing the discs and playing Ultimate. Other sport equipment may be available as well. (Approximately 45 min)
- At 11:00, bring all teens back to clinic for money and lunch.

SUPPLEMENTARY APPENDIX Q: SPORTSMANSHIP

RULES FOR ULTIMATE FRISBEE

1. The Field: A rectangular shape with end zones at each end. A regulation field is 70 yards by 40 yards, with end zones 25 yards deep.
2. Initiate Play: Each point begins with both teams lining up on the front of their respective end zone line. The defense throws ("pulls") the disc to the offense. A regulation game has seven players per team.
3. Scoring: Each time the offense completes a pass in the defense's end zone, the offense scores a point. Play is initiated after each score.
4. Movement of the Disc: The disc may be advanced in any direction by completing a pass to a teammate. Players may not run with the disc. The person with the disc ("thrower") has ten seconds to throw the disc. The defender guarding the thrower ("marker") counts out the stall count.
5. Change of Possession: When a pass is not completed (e.g. out of bounds, drop, block, interception), the defense immediately takes possession of the disc and becomes the offense.
6. Substitutions: Players not in the game may replace players in the game after a score and during an injury timeout.
7. Non-contact: No physical contact is allowed between players. Picks and screens are also prohibited. A foul occurs when contact is made.
8. Fouls: When a player initiates contact on another player a foul occurs. When a foul disrupts possession, the play resumes as if the possession was retained. If the player committing the foul disagrees with the foul call, the play is redone.
9. Self-Officiating: Players are responsible for their own foul and line calls. Players resolve their own disputes.
10. Spirit of the Game: Ultimate stresses sportsmanship and fair play. Competitive play is encouraged, but never at the expense of respect between players, adherence to the rules, and the basic joy of play.

STIGMA (13-15)

General Tips for Facilitating Small Groups:
- Explain any difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the guest speakers.
- Engage teens in conversations about the theme during small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask any of the Teen Club staff or “rotating” adult leaders for assistance.

Objectives:
Upon completion of this unit, participants will be able to:
**Materials Needed:**
- Paper and Pens
- Flip chart paper with Teen Outline
- Instances of Stigma- Examples (SUPPLEMENTARY APPENDIX O)
- Sticky notes

I. **Adherence Lecture/Icebreaker** 30 minutes
   After an Icebreaker activity, present a brief talk on the importance of adherence. Following the talk, the younger and older teens will split into two groups.

II. **Thinking about Stigma** 20 minutes
   Peer Educator will lead a “hand-raising response session” where she will ask questions about how the teens feel about coming to the clinic, taking medicine, etc.

III. **Stigma: From Outside and Within** 40 minutes
    Younger Teens will break into groups depending on the number of teens and volunteers. A volunteer will take each group to their assigned area and ask one of the teens to read the attached instructions (SUPPLEMENTARY APPENDIX O). After the instructions are read, the volunteer will give a demonstration using the body outline and the two “Instances of Stigma- Examples” (SUPPLEMENTARY APPENDIX O), one for an externally created stigma and one for an internally created stigma. They will then discuss with their group each instance of stigma and whether they stem from outside or within, posting the stigma where it belongs on the drawing (inside or outside of the body outline). Groups will then return to the larger group with their posted stigma examples to discuss their work with the larger group and the CEYOHO representatives or other guest speakers, if available.

IV. **Defeating Stigma** 60 minutes
    Teens will reunite and exhibit their outlines. Guest speaker from CEYOHO or an adult volunteer will review the listed instances of stigma and lead a discussion on which are within and which are beyond our control. Discussion will continue related to overcoming stigma experiences, no matter what the sources.

V. **Above Stigma: Letters to HIV & Stigma** 30 minutes
   Teens will find a quiet spot to reflect about what the group had discussed and take time to write a letter to HIV and why they do not have to fear the stigma it creates.

**SUPPLEMENTARY APPENDIX R: STIGMA (13-15)**

**Stigma: From Outside and Within - Directions**
For 15-20 minutes, work together in groups to identify and write down the different sources of stigmas you know, have heard about, or, imagine exists. After you have identified all the examples of stigma you can, take each stigma example and discuss whether it comes from within ourselves or from an outside source (such as within the
family, community, school, etc.). When identified, post it on the body outline drawing either inside the body for a stigma you feel about yourself or outside the body if it comes from a source outside yourself.

**Instances of Stigma - Examples**

Facilitators- Write the examples of stigma on sticky notes and ask the teens to say whether they think it is an instance of stigma that comes from within them or from an outside source (example-happens at school). Then post the notes in the appropriate place on the drawing.

**Examples:**

1. When classmates find out you are HIV-positive and stop inviting you to eat with them at school. (External Stigma – placed on the edge of the paper)
2. When you want to tell your cousin why you are going to Teen Club but you are afraid he/she might treat you differently (Stigma from within – placed within the outline of the person)

**NOTE TO FACILITATORS**: If teens are not coming up with ideas, suggest that they begin thinking about what happens at school, how they feel coming to the clinic, taking their medicine when others are around, hearing people talk about HIV in public, HIV in the media or on posters, etc.

**STIGMA (16-19)**

**Note**: (Pictorial Images from: “We are all in the same boat!” produced by UNESCO; pages: 61, 62, 64, 67, and 71)

**General Tips for Facilitating Small Groups:**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the theme during small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.

**Objectives:**
Upon completion of this unit, participants will be able to:
- Understand different forms and sources of stigma
- Understand that stigma affects different people in different ways

**Materials Needed:**
- Paper and Pens for 5 teams
- SUPPLEMENTARY APPENDIX P-Pictorial Examples for Skits

I. **Icebreaker and Adherence Talk** 45 minutes

Following the chosen Icebreaker, provide a brief lecture on the importance of ARV adherence. Following the lecture, the younger and older teens will split into two groups.

II. **CEYOHO / Miss Stigma Free or other Guest Speaker** 45 minutes
Presenter will speak about HIV and Stigma coming from the perspective of someone living disclosed with HIV and examples of how they have coped with internal and external stigma experiences. Teens will be encouraged to make comments, ask questions and participate in the discussion.

III. **Dramatic Productions Introduction** 15 minutes

Teens will be divided into groups. Each group will be given one picture (See **SUPPLEMENTARY APPENDIX P**) for pictorial examples for skits depicting forms of stigma). Each group has to organize and produce a 5 minute skit based on the image given to them.

Additional guidelines:
- The picture can represent the beginning, middle or skit of the skit.
- The groups can include more characters in the skit than depicted on the picture.
- Each group should assign a director (or directing team of 2 people) and actors (who are to be given parts in the skit). The director’s role is to manage the actors and make sure that actors are doing what the group has decided. The group should decide on the dialogue for the skit together.
- Each skit should not be longer than 5 minutes.
- Each skit should incorporate a scene representing stigma based on the picture they are assigned.

**Note:** Remind teens to remain positive and respectful to all participants when getting input and designing their skits.

**QUESTIONS AND ANSWERS**

IV. **Dramatic Productions** 45 minutes

Teens will go into their groups and design their skit. Groups will then create and rehearse their productions. The skits should not be longer than 5 minutes, but can be shorter if the situation can be shown in less time.

V. **Presentation of Group Skits** 30 minutes

Each group will present their skit to the full group of teens. Everyone should be encouraged to applaud at the end of each production to show appreciation.
TALENT SHOW

Tips for Facilitators
- Encourage all teens to be a part of group’s skit / dance / song / talent in some capacity, whether it is behind the scenes (coming up with the ideas or how to use the props) or as one of the main presenters (singer, actor, etc.)

Objectives:
- Have FUN!

Materials Needed:
- Props / costumes / materials for Talent Show
- Stage
- Sound system

I. Icebreakers 15 minutes
The goal of this icebreaker is for everyone in the group to learn each other’s names. If you know of a quick icebreaker or game to lead, GO FOR IT. Otherwise, you may do the “Body Spelling” icebreaker: Each participant will write their name in the air first with their finger, then with their head, and finally with their butt.

II. Talent Show Preparation 75 minutes
Split teens into 10 groups (or approximately the number of Teen Leaders present)

Each group should prepare a 5 to 10 minute act for the “My Baylor Dream” Talent Show. Examples of possible acts include but are not limited to:
- Dance – performance of a self-choreographed dance
- Song – performance of a song by teens
- Skit / Drama – can be about any topic (humor is encouraged but not necessary)
- Any other talents (hula-hooping / soccer juggling / etc)

The sky is the limit! Encourage creativity. And remember that the Teen Leaders are here to help. Planning sessions are limited to 1 hour.

III. “My Baylor Dream” Talent Show 120 minutes
Each group will present their act as part of “My Baylor Dream.”

TEAMWORK IN ADHERENCE

General Tips for Facilitating Small Groups
- Engage teens in conversations about the theme as they do small group activities.
- Be aware of teens’ safety – particularly in the obstacle course and tug of war!
- It is important that you debrief with the teens following each competition, so that teens can process the lessons in teamwork and adherence.

Objectives
• **Working as a team**
  o Leadership – Delegation of responsibilities to peers and encouragement of team members
  o Communication – Working together towards a specific task

• **Adherence**
  o Barriers to adherence and steps to overcome barriers

**Materials**
- Rope (Tug-of-war); Water balloons (Adherence); Hula Hoops (Adherence); Umbrellas (Adherence); Cones (Obstacle course); Blindfolds (Obstacle course); Two buckets (Minute challenge)

I. **Icebreakers**

II. **Introduction to Team Adherence Competition**

**The scenario:** Kabo has not been taking his ARV medication as often as he should. At his last visit to Baylor, the doctors and nurses explained to him that he needed to improve his adherence otherwise he will become sick. Each team must compete at each station to help Kabo improve his adherence.

**Teams:** Have all teens line up from oldest to youngest. Count off the teens from 1 to 10. All the 1s will form a group, all the 2s will form a group, and so forth. There should be **10 groups total**. Each team should come up with a **team name and cheer**. At each station the group must designate two / three new leaders. This should rotate each station so that every teen (regardless of age!) leads at least once.

III. **Team Adherence Competition Stations! Helping Kabo**

Teams will rotate through the following stations. See Appendix A for schedule.

**Station 1: Water Balloon ARVs – Understanding Why Adherence Matters**
One team represents the HIV virus by forming smaller groups that fit inside the three hula hoops. The other team has the ARVs (which are water balloons). The HIV virus must line up on one side of the grass and make it to the other side. The ARVs are lined up along the side. The HIV virus must try to make it to the other side without getting hit by the ARVs. This continues until all of the virus has been hit by an ARV. The teams then switch roles. However, now the each HIV virus cell has an umbrella they may use as defense. The umbrella represents resistance.

**Debrief:** What “kills” the HIV virus? ARVs. But if ARVs are not taken, the virus can become resistant. Was it more difficult to kill the HIV virus when the virus had resistance (umbrellas?). Explain that if medication is not taken at the same time every day, a virus may become resistant to the ARVs. Explain to teens that it is important that they understand why good adherence is important and emphasize the importance of staying informed and educated through credible sources (such as providers here at Baylor rather than the internet or peers).

**Station 2: Human Knot – Detangling Your Life**

**Competition:** Each team should stand close together and randomly stick their hands in the middle. Each teen should then randomly find a hand of someone who is not directly next to them. Everyone must be holding hands. The teens must then untangle themselves without letting go. The first team to completely untangle themselves wins.

**Debrief:** Explain that the initial knot represented an unorganized schedule. Ask what skills it took to untangle the knot (i.e. communication, effort). Ask the teens if they think an organized schedule (i.e. balancing
priorities, routine) is important in maintaining adherence. Explain that the same skills in untangling the knot can be helpful in “detangling” their own lives so that they can more easily adhere to their meds.

**Station 3: Tug of War – Who is Your Support?**

*Competition:* Teams should line up on opposite ends of a rope. Each member of the team should be holding onto the rope. There is a line drawn perpendicular to the rope. The goal is for one team to pull the rope across the line.

**Debrief:** Ask teens if they think they could pull the other team across the line by themselves. What else did they need? Their teammates! Their teammates are their support. Similarly, they must have support in life to help them achieve their goals – whether it is pulling the rope or taking their medication. These teammates can be their family but it can also be their friends.

**Station 4: Obstacle Course – Communication!**

*Competition:* The two teams must race through the obstacle course. Each member of the team is blindfolded except for two. Of the two remaining teens, one is able to see the obstacle course but cannot speak – he/she may only give instructions through hand signals. The other teen cannot see the obstacle course but can give instructions based on the hand signals from their teammate. The first team to have everyone complete the obstacle course wins.

**Debrief:** What was most important factor in making it through the obstacle course? Communication! Discuss how communication is similarly important in adherence.

**Station 5: Lift the Pail – The Minute Challenge**

*Competition:* Everyone must remove their shoes and socks and sits on the ground in a circle around a bucket of water (one circle per team). Each team must try to balance the bucket using only their feet. Their hands must be on the ground at all times. The team must balance the bucket for *exactly one minute* – no less and no more. The first team to achieve this wins. Note that the teams are responsible for timing the minute themselves (an important part of the challenge).

**Debrief:** Did teens remember to time the minute? Was it challenging to think about both balancing the bucket and the time? Have teens describe the strategy they used. Discuss whether it can be challenging to remember the exact time for taking their medication. Discuss whether similar time management strategies can be used in both situations.

**IV. Debrief**

15 minutes
SUPPLEMENTARY APPENDIX T: SAMPLE Rotation SCHEDULE

Rotation 1: 09:30-09:50
- Station 1: Group 1 and 10
- Station 2: Group 2 and 9
- Station 3: Group 3 and 8
- Station 4: Group 4 and 7
- Station 5: Group 5 and 6

Rotation 2: 10:00-10:20
- Station 1: Group 5 and 9
- Station 2: Group 1 and 8
- Station 3: Group 2 and 7
- Station 4: Group 3 and 6
- Station 5: Group 4 and 10

Rotation 3: 10:30-10:50
- Station 1: Group 4 and 8
- Station 2: Group 5 and 7
- Station 3: Group 1 and 6
- Station 4: Group 2 and 10
- Station 5: Group 3 and 9

Rotation 4: 11:00-11:20
- Station 1: Group 3 and 7
- Station 2: Group 4 and 6
- Station 3: Group 5 and 10
- Station 4: Group 1 and 9
- Station 5: Group 2 and 8

Rotation 5: 11:30-11:50
- Station 1: Group 2 and 6
- Station 2: Group 3 and 10
- Station 3: Group 4 and 9
- Station 4: Group 5 and 8
- Station 5: Group 1 and 7
TEAMWORK AND LEADERSHIP (13-15)

**General Tips for Facilitating Small Groups:**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the theme during small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.

**Objectives:**
Upon completion of this unit, participants will be able to:
- Delegate responsibilities to peers and team members.
- Accept assignments and work as members of a team on a specific task towards a goal.

**Materials Needed:**
- Scavenger Hunt Directions
- Papers and Pens

I. **Icebreaker and Adherence Talk** 30 minutes

Provide a brief lecture on the importance of adherence during the completion of the registration process. Following the lecture, the younger and older teens will split into two groups.

II. **Nominations for Teen Leaders (if applicable)** 15 minutes

Teen Leader nominations can be self-done or nominated by others. Candidates will be reminded that they are required to make a speech at the next Teen Club, when voting will take place.

III. **Introduction Scavenger Hunt** 15 minutes

Teens will be divided into groups according to the amount of volunteers available

- Each team will vote for a leader who will delegate the following responsibilities:
  - Recorder- Writes the teams answers for grading
  - Reader- Reads and interprets the clues
  - Drawer– Draws the items required
  - Time Keeper – Makes sure the tasks are completed fast enough to return within the allotted time
- Each team will be given a list of things to find and questions to answer about the surrounding area.
- Q&A

IV. **Activity: Scavenger Hunt** 75 minutes

90
Teens will go out in teams to find locations on the list and answer corresponding questions as well as drawing the items requested. Teams have 1 hour 15 minutes to return with as much on the list completed as possible.

Judges will mark the responses and check the items collected. Penalties for returning late will be issued.

The winning team will receive prizes.

Note: SUPPLEMENTARY APPENDIX Q from Gaborone Teen Club has been attached to provide ideas for Scavenger Hunt guidelines.

V. Debrief 45 minutes

While the judges tally the scores, the teens will discuss the best methods used for each position held. Leaders will unite in the front and discuss how it was to be a leader of a small group. Each team will say something they thought their leader did exceptionally well.

When the judges have completed the scoring, they will announce the winners and award the prizes.

SUPPLEMENTARY APPENDIX U: SCAVENGER HUNT

SAMPLE RULES & HINTS:

- TEAMS MUST STAY WITHIN THE STATED LOCATIONS
- Teams may NOT go inside ANY building or they will lose automatically
- Every member should participate as much as possible
- Any member found without his or her group, that group will be deducted 8 points
- Leaders should make sure everyone’s voice is heard
- Manage time intelligently (those later than the time allowed will be penalized)
- No running or yelling
- Be very, VERY careful in areas that may have traffic. VERY CAREFUL!
- Skip questions if they are taking too much time and then come back to them
- Read all the questions for each area as you begin that area
- Read each question all the way through as there are sometimes clues
- Work together as a team, but delegate roles & assign specific questions to groups
- Keep your answers hidden from other teams
- Play fair, Stay safe and HAVE FUN!!!!

SAMPLE SCAVENGER HUNT

I. PAEDIATRIC WARD PLAYGROUND

1. What did PG Industries donate?
2. “Love” is in front of which colored bench?
3. Who sponsored the structures in the paediatric garden?
4. What color bench is without a seat?
5. Who provided the red bench?
6. Fill in the blanks from the playground: A ___ Z

II. DENTAL CLINIC & PARKING LOT

1. Translate “kitsiso” into English.
2. On the green roofed building, there is a sign. Draw the symbol for ACHAP.
3. What does IDCC stand for?
4. What kind of sport courts are beyond the Dental Clinic parking lot? (name both)
5. What number is in brackets ( ) in the TEAM phone number?
6. If, by definition, you needed to go to a narrowly localized place having a precisely indicated position to expel air from your lungs suddenly with an explosive noise, what would be the color of the structure you are in?
7. Gaborone Dental Clinic is Headquarters for what Division of the Ministry of Health?

III. HOSPITAL WAY (Between Baylor and Churchill/Notwane Rd)

1. What are the working hours of the Psychiatric Clinic?
2. According to the white sign on the tree, who works directly behind the Emergency Assembly Point?
3. How many sides are on a Botswana STOP sign?
4. What is the MASCOM “More Bonus For You” Girl eating?
5. What is the plot number of Baylor’s Proposed Adolescent Centre?
6. Who is the Architect for the Proposed Adolescent Centre?
7. What NGO is next to the Adolescent Centre?
8. Draw the symbol of the NGO from question #4.

IV. PRINCESS MARINA HOSPITAL ADMINISTRATION / FRONT ENTRANCE

1. What TEL number would you call if you wanted to contact CI Parkhomes?
2. What colour is the door to Occupational Therapy?
3. Who has the slogan “We ‘educate,’ supply & service fire equipment”? Clue: Dry Riser
4. By the ambulance emergency entrance, all of the following are on the same sign post; which is red?
   A) MAIN ENTRANCE
   B) ACCIDENTS
   C) WAY OUT
   D) CAR PARK
5. By the ambulance emergency entrance, in what year was the B-Cast sponsored Neo Matome decoration made?
6. On the sign listing the colours of all the departments, starting from “X-ray Dept.” square, move in this order:
   2 squares right, 3 squares up, 1 square right, 2 squares down, 3 squares left, 2 squares down, 1 square right, 4 squares up, 2 squares left, 2 squares down, 1 square right.
   What COLOUR is the box you end at?
7. The parking spot for the Head of what department is located between the spots for the Head of Ophthalmology and Head of Pharmacy.
8. Including the ground floor, how many floors does the building marked “Administration” have?
9. As accurately as possible, complete the drawing as it appears on the Botswana Harvard AIDS institute sign. (NOT WORDS)

V. BAYLOR COMPOUND & PARKING LOT

1. How many lights are attached around the outside of the Clinic building walls?
2. There is a door near the Baylor parking lot labeled with the 13th letter in the alphabet and the solution to this math problem: \((200 \times 4 + 8) / 2\) – 297. According to the label, what is in behind that door?
3. There are three benches in the Baylor courtyard with thin gum poles above them. What is the mean (average) of the number of THIN gum poles?
   4. There is a “pious” four-legged creature in the Baylor courtyard. What’s it made of?

SUPPLEMENTARY APPENDIX V: TEAMWORK AND LEADERSHIP (13-15)

Leadership and Team Functions

Each member of a team has the responsibility to help the team be effective. There are certain functions that keep a team working smoothly. While these functions apply to everyone, it’s the responsibility of the team leader to coordinate the activities of the team and ensure the functions take place. There are two types of functions in a team: goal-oriented and relationship-oriented.

Goal-oriented behavior is activity directly related to accomplishing the task of the group or problem-solving:

Goal-oriented behaviors include:
- Initiating or defining a problem or task.
- Seeking information or opinions.
- Giving information or opinions.
- Clarifying or elaborating.
- Summarizing.
- Testing agreement.

For example, in a band, a goal-oriented behavior is picking the music to play.

Relationship-oriented behavior is activity that maintains personal relationships among the members to keep the team together and help make it positive.

Relationship behaviors include:
- Encouraging—being responsive to and accepting others, listening and trying to understand.
- Expressing group feelings
• Harmonizing.
• Compromising.
• Ensuring everyone can be heard.
• Setting standards for group conduct (i.e., ground rules).

TEAMWORK AND LEADERSHIP (16-19)

General Tips for Facilitating Small Groups:
• Explain difficult concepts in simple terms, using Setswana when possible.
• Reinforce concepts presented by the speakers.
• Engage teens in conversations about the theme during small group activities.
• Encourage each teen to participate in the activity, at least once.
• Ask Teen Club staff or “rotating” adult leaders for assistance.

Objectives:
Upon completion of this unit, participants will be able to:
• Accept assignments and work as members of a team on a specific task towards a goal
• Practice skills of communication, critical thinking, analysis, negotiation and conflict resolution

Materials Needed:
• SADC Country Information Sheets

I. Icebreaker and Adherence Talk 30 minutes

Provide a brief lecture on the importance of adherence during the completion of the registration process. Following the lecture, the younger and older teens will split into two groups.

II. Nominations for Teen Leaders 10 minutes

Teen Leaders will be chosen at the next meeting. Nominations can be self-done or nominated by another member. Candidates will be required to make a speech at the next Teen Club, when voting will take place.

II. Introduction-Model Southern Africa Development Community (SADC) 15 minutes

• Teens dived into groups of 2-3 review 1 of 15 country profiles
• Each “country group” must decide on a Policy Statement as a reaction to the proposed discussion topic
• Re-group and each country group presents findings
• Deliberate amongst each other to create a consensus on the topic

Note: See SUPPLEMENTARY APPENDIX S for additional information
III. **Background of the Topic** 35 minutes

- Older teens will break into two groups; and then again into groups of 2-3.
- One volunteer/Teen Leader will be assigned to several of the smaller independent study groups that represent 1 of 15 SADC countries. With an understanding of the issues respective of their country (see Country Information Sheets provided-SUPPLEMENTARY APPENDIX S), teens will come up with a Policy Statement to share with the other countries as per the question prompts, having examined what would be best for their country.

V. **Your Country's Positions** 45 minutes

All 15 countries will regroup to discuss their separate decisions. Each country has 3 minutes to present their Policy Statements to the other countries, while giving a brief description of the issues involving their countries.

I. **Possible Solution** 55 minutes

Each of the 15 representatives creates unanimous solution within negotiations.

II. **Debrief** 20 minutes

**DISCUSSION QUESTIONS:**

- How did you balance the needs of the country within the analysis of the problem? (Critical Thinking)
- Discuss how working in a setting where negotiation is important differs from a setting where only one or two perspectives are offered. (Leadership within a Group)
- What should leaders do when their favoured solution is not the dominant opinion? (Conflict Resolution: accommodation, avoidance, collaboration, compromise, competition are some examples of conflict management solutions)

**SUPPLEMENTARY APPENDIX W: TEAMWORK AND LEADERSHIP (16-19)**

**Southern African Development Community (SADC)**

Comprised of Angola, Botswana, Democratic Republic of Congo, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, United Republic of Tanzania, Zambia, and Zimbabwe

Aims to promote sustainable and equitable economic well-being, improvement of the standards of living and the quality of life, freedom and social justice and peace and security with civil society participation for the people of Southern Africa.
Anchored on the common values and principles and the historical and cultural affinities that exist between the people of Southern Africa.

To promote the region as a competitive and effective player in international relations and the world economy.

**Model SADC Security Council on the 2011 Zimbabwean Elections**

**Primary Question:**
To avoid crisis as in North Africa, should SADC intervene in internal affairs in relation to Mugabe’s regime in Zimbabwe?

**Sub Questions:**
What course of action should the council take if Mugabe refuses? / What course of action to secure life should the council take if they are not to intervene?

Should all SADC countries agree on a universal limit to the length and number of terms a head of office/elected official can serve?

If intervention in Zimbabwe leads to military conflict, where will the resources (health care, education, infrastructure, etc.) for SADC countries come?

Should SADC adopt an open door policy for nationals from other SADC countries like Zimbabwe, who seek political asylum or economic betterment?
**TEEN PREGNANCY (MALES)**

**Note:** Portions of the following Facilitator Guidelines have been adapted from “Choose a Future: Issues and Options for Adolescent Boys.” *The Centre for Development and Population Activities.*

**General Tips for Facilitating Small Groups:**
- Please encourage all group members to speak up about their opinions.
- Encourage the teens to ask questions.
- Be sure to engage the teens in discussion of responsibilities of BOTH sexes.
- Feel free to ask any of the Teen Club staff or “rotating” adult leaders for assistance.

**I. Introduction: How A Baby is Created**

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<th>30 minutes</th>
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The objective of this session is describe how women’s and men’s reproductive systems function.

*Ask the teens what they have been told or heard about how pregnancy occurs, or how babies are made.*

*Tell the teens that it is important to know and understand how women and men’s reproductive and sexual organs work.*

Presentation: Female Reproductive Organs, Male Reproductive Organs, How Pregnancy Happens

*If time permits, ask the teens, “What do you know now that you didn’t know when you came here today?”*

**II. She Can’t Get Pregnant If…**

<table>
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<th>20 minutes</th>
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Explain to the boys that we learn a lot about sexuality and reproduction from our friends, older brothers and sisters, or other relatives. Some of what we learn is true, and some not. It is important to be able to tell the difference.

*Tell the group that you have a game about avoiding pregnancy. Place an “AGREE” and “DISAGREE” sign at opposite ends of the room and read the TRUE/FALSE statements below. Tell the teens that if they agree with the statement they should move to the “AGREE” sign, and if they disagree with the statement they should move to the “DISAGREE” side.*

*Before revealing the answer to each statement, choose one member from each side to explain why he agrees or disagrees with the statement.*

**TRUE/FALSE PREGNANCY GAME**

She can’t get pregnant if…

1. You have intercourse standing up.
   **FALSE. She can get pregnant in any position.**
2. She urinates right after sexual intercourse.
   **FALSE. Urine passes through the urethra, so it does not remove any sperm in the vagina.**
3. You pull your penis out of the vagina before ejaculating.
   **FALSE. Some sperm can be released even prior to ejaculation.**
4. You are having sexual intercourse for the first time.
FALSE. Any time you have intercourse, she can become pregnant.

5. You should use a medically prescribed/recommended contraceptive method to regulate fertility.

TRUE. In most cases, if a medically prescribed/recommended contraceptive method is used PROPERLY, it prevents pregnancy.

III. Having a Baby Before Age 20 ———— 60 minutes

The objective of this session is to identify the risks and consequences of having a baby as a teenager.

MATERIALS:
- Flip chart paper, markers
- Pens/Pencils

ICEBREAKER: The goal of the icebreaker is for everyone in the group to learn each other’s names. If you know of a quick icebreaker or game to lead, go for it. Otherwise, have each group member introduce themselves and tell the group their favorite singer (or movie or animal). (5 MINUTES)

1. Ask the boys to think about the age that they would like to have their first child. Have several boys answer and explain why.
2. If there are boys who are already fathers, ask them if they are willing to share their experiences and perceptions. After they have shared ask:
   a. Who does pregnancy impact on most? They boy or girl?
   b. Is it important for us to be aware of the impact on girls? Why or why not?

DISCUSSION SESSION:
1. Ask the boys what they think of the two letters. (15 MINUTES)
   a. Encourage discussion with the following questions
      i. What problems did Keneilwe and Masedi face?
      ii. How is Keneilwe’s life different from Masedi’s?
      iii. What other problems may a young girl face if she had a baby at an early age?
      iv. Whose situation is more common in your community?
      v. Why do girls in your community have babies at a young age?
      vi. What impact does it have on the boys who are the fathers?
      vii. What impact should it have?

2. Divide the boys into five groups. Give each group a piece of flip chart paper, a maker, and a copy of worksheet #1 (See SUPPLEMENTARY APPENDIX T). Give each group one of the following topics, and ask them to make a list of how the topic is impacted by teen pregnancy- both females and males. The group should record these lists on their flip chart paper. (25 MINUTES)
   a. EDUCATION
   b. CAREER/EMPLOYMENT
   c. SOCIAL LIFE/FREE TIME
   d. FAMILY
   e. MONEY

3. Ask each group to report back and discuss the answer given. Remind the teens that they should take notes on worksheet #1 (See SUPPLEMENTARY APPENDIX T). The following questions should be discussed (25 MINUTES)
a. From the discussion so far how much does your life change when you become a parent?
b. Do you think most teenagers realize how pregnancy and parenthood changes their lives?
c. Are you willing to risk these changes to your life? Why or why not?
d. How have your ideas about when to have children been affected by this discussion?
e. What can young men do to reduce the number of unplanned pregnancies among teenagers?

IV. **Having Children By Choice- Not by Chance: BOFWA** 30 minutes

The objective of this session is to identify the advantages of planning when to have children and to become familiar with modern contraceptive methods. (10 MINUTES)

(Think about having a condom demonstration…) (10 MINUTES)

Discussion Questions (10 MINUTES)
- What are the advantages of using effective family planning methods when engaging in sexual intercourse? Write responses on a flip chart.
  - They include
- Which one is 100% effective? (The answers is abstinence)
- When can this be ineffective? (The answer is note that even abstinence can be ineffective if ejaculation takes places near the vagina and semen enters the vagina.)
- Which partner is responsible for using most of these contraceptives?
- Which ones can boys/men be responsible for using?

V. **Closing Remarks** 15 minutes

Ask volunteers from the group to recall what they have learned in today’s session.

Review these points if they are not mentioned: (Need to add to this as well. Consequences of teen pregnancy…)
- Boys and girls can be friends without engaging in sexual activity,
- Sexual intercourse can result in pregnancy unless abstinence is practiced or modern family planning methods are used.

**SUPPLEMENTARY APPENDIX X: TEEN PREGNANCY WORKSHEET**

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<th>EDUCATION</th>
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<tbody>
<tr>
<td>Effects on Male</td>
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| CAREER / EMPLOYMENT |
**TEEN PREGNANCY (FEMALES)**

**Note:** Portions of the following Facilitator Guidelines have been adapted from “Choose a Future: Issues and Options for Adolescent Girls.” *The Centre for Development and Population Activities.*

**General Tips for Facilitating Small Groups**
- Please encourage all group members to speak up about their opinions.
- Encourage the teens to ask questions.
- Be sure to engage the teens in discussion of responsibilities of BOTH sexes.
- Feel free to ask any of the Teen Club staff or “rotating” adult leaders for assistance.

I. **Introduction: How A Baby is Created**

The objective of this session is describe how women’s and men’s reproductive systems function.

*Ask the teens what they have been told or heard about how pregnancy occurs, or how babies are made.*
Tell the teens that it is important to know and understand how women and men’s reproductive and sexual organs work.

PowerPoint Presentation (BOFWA): Female Reproductive Organs, Male Reproductive Organs, How Pregnancy Happens (See SUPPLEMENTARY APPENDIX T).

If time permits, ask the teens, “What do you know now that you didn’t know when you came here today?”

II. You Can’t Get Pregnant If… 30 minutes

The objective of this session is to examine common myths teens believe about preventing pregnancy.

ICEBREAKER: The goal of the icebreaker is for everyone in the group to learn each other’s names. If you know of a quick icebreaker or game to lead, go for it. Otherwise, have each group member introduce themselves and tell the group their favorite singer (or movie or animal).

Ask the girls to remember the previous session about how babies are created. Have them share what they remember about how a girl or woman becomes pregnant.

Add these points if the girls do not mention them:
- In a woman’s body, an egg goes from her ovary to her uterus at a certain time of the month.
- A man’s penis becomes erect when he is ready for sexual intercourse.
- In sexual intercourse, a man puts his penis into the woman’s vagina and ejaculates his sperm.
- If one of these meets an egg, the woman becomes pregnant.

Explain to the girls that we learn a lot about sexuality and reproduction from our friends, older brothers and sisters, or other relatives. Some of what we learn is true, and some not. It is important to be able to tell the difference.

Tell the group that you have a game about avoiding pregnancy. Place a “TRUE” and “FALSE” sign at opposite ends of the room and read the TRUE/FALSE statements below. Tell the teens that if they think the statement is false they should move towards the “TRUE” sign, and if they think statement is “FALSE” they should move towards the “FALSE” sign.

Before revealing the answer to each statement, choose one member from each side to explain why she agrees or disagrees with the statement.

TRUE/FALSE PREGNANCY GAME

You cannot get pregnant if…

1. You have not begun menstruating*
   FALSE. Eggs may be released into the uterus before menstruation starts.

   2. You are having menstrual bleeding.

* You have not begun menstruating but you are in the age range for when puberty typically begins (8-16 years).
FALSE. When girls start menstruating, their cycles are irregular, and eggs can be released into the uterus at different times.
   3. You have intercourse standing up.
FALSE. You can get pregnant in any position.
   4. You urinate right after sexual intercourse.
FALSE. Urine passes through the urethra, so it does not remove any sperm in the vagina.
   5. You cleanse your vagina after sexual intercourse.
FALSE. Sperm reaches the uterus very quickly and will not be removed by vaginal cleansing.
   6. You are under 12 years old and too young to get pregnant.
FALSE. Eggs can be released as early as 9 years old.
   7. A male pulls his penis out of the vagina before ejaculating.
FALSE. Some sperm can be released even prior to ejaculation.
   8. You are having sexual intercourse for the first time.
FALSE. Any time you have intercourse, you can become pregnant.
   9. You have sexual intercourse with a man who assures you that you will not get pregnant.
FALSE. If a man releases sperm into your vagina, he cannot control whether it will cause you to become pregnant or not.
   10. You should use a medically prescribed/recommended contraceptive method to regulate your fertility.
TRUE. In most cases, if a medically prescribed/recommended contraceptive method is used properly, it prevents pregnancy.

Point out that ALL the statements about avoiding pregnancy were false, except the last statement.

Check if there are questions about the statements or about becoming pregnant. Emphasize that it is natural to have sexual or romantic feeling. However, when deciding to have intercourse one must be aware of the risk of pregnancy. This decision is very serious.

III. Teen Pregnancy Panel and Q&A Session 45 minutes

The objective of this session is to identify risks and consequences of becoming a teen mother.

The panel discussion will begin with each guest speaker stating their name and where they are from. The panelist should then give a five-minute testimony about their experience and perceptions as a teen mother.

Suggestion of Questions to be answered in Testimony:

1. What is your name? Where are you from?
2. How old were you when you got pregnant?
3. How did your family react when they found out you were pregnant? Were they supportive?
4. How did the father of your child react when you told him you were pregnant? Has he been supportive?
5. How did becoming pregnant change your life?

The facilitator can choose questions from below to ask the panelists (questions do not have to be asked in any particular order). Leave 15 minutes at the end for questions from the group.

Facilitation Questions:

1. Who was the first person you told that you were pregnant?
2. How did the father of your child react when you told him you were pregnant? Has he been supportive?
3. What have been some of the challenges of being a teen mother? How did you cope with being a teen mother?
4. How has being a teen mother impacted you achieving your goals?
5. How has your life changed since having your baby?
6. How might your life have been different if you had waited to have children?

Group Discussion Questions (time permitting):
1. What can girls do to delay having children until they are ready?
2. What are some of the advantages of waiting to have children?

IV. **Having Children By Choice- Not by Chance: BOFWA**

The objective of this session is to identify the advantages of planning when to have children and to become familiar with modern contraceptive methods.

Brief Overview of BOFWA (Botswana Family Welfare Association) Family Planning Services (5 MINUTES)

Contraceptive Talk (10 MINUTES)

Condom Demonstration (15 MINUTES)

Discussion Questions (10 MINUTES)
- What are the advantages of using effective family planning methods when engaging in sexual intercourse? Write responses on a flip chart. (They include: preventing against HIV infection, re-infection, and other STIs, preventing early unwanted pregnancy, showing respect and concern for your partners wishes and health, having a more relaxed sexual relationship with much less worry of pregnancy or disease.)
- Which one is 100% effective? (The answers is abstinence)
- When can this be ineffective? (The answer is: Note that even abstinence can be ineffective if ejaculation takes places near the vagina and semen enters the vagina.)
- Which partner is responsible for using most of these contraceptives?
- Which ones can boys/men be responsible for using?

V. **Closing Remarks**

Ask volunteers from the group to recall what they have learned in today’s session.

Review these points if they are not mentioned:
- Boys and girls can be friends without engaging in sexual activity,
- Sexual intercourse can result in pregnancy unless abstinence is practiced or modern family planning methods are used.

**SUPPLEMENTARY APPENDIX Y: TEEN PREGNANCY WORKSHEET**

**EDUCATION**
### Effects on Male Effects on Females

#### CAREER / EMPLOYMENT

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#### SOCIAL LIFE / FREE TIME

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#### FAMILY

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#### MONEY

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**Transition of Care**

**General Tips for Facilitating Small Groups:**
- Explain difficult concepts in simple terms, using Setswana when possible.
- Reinforce concepts presented by the speakers.
- Engage teens in conversations about the theme, as they do small group activities.
- Encourage each teen to participate in the activity, at least once.
- Ask Teen Club staff or “rotating” adult leaders for assistance.
III. Overview of Transition: Guest Speaker ____________________________ 30 minutes

Guest speaker should be a clinician from the COE who can describe the process of transition and why it is important (preferably, in Setswana). Among other things, the speaker should address the following points (from the Teen Talk guide):

**What does transition of care entail?**

Transition of care is the active process of preparing for and making the move from paediatric, or child-based, care to adult-based care. In some settings this will require changing health providers and health facilities, in other settings you will remain with the same provider in the same facility. Regardless of the setting, successful transition of care requires that your various needs are met appropriately, be they medical (health-related), academic (school-related), or vocational (job-related). A smooth health care transition can also make other transitions to adulthood, such as those related to work, school, and family, easier to handle. Though not all young people will have access to specialized paediatric or adolescent care, many of the principles in this section will still help you make the transition towards self-management of your HIV, and allow you to go from taking anti-retroviral therapy as a child to taking it as an adult.

**Why do I need to transition to adult-based care?**

As a child, your medical needs are usually best met by a paediatrician (children’s doctor) or a paediatric clinic where the providers are used to being very responsible for the care of their patients. As you get older, however, your medical needs change and usually require attention by an internist or other adult-care doctor, who will expect you to be more responsible for your own care. This means that you will need to be able to independently ask questions about your health and advocate for your needs, while following the advice of your doctor or other health care provider. Many people eventually leave their paediatrician or paediatric clinic to find an adult doctor. When this happens, the patient has been “transferred” (switched from one doctor to another) and transition has occurred.

IV. Transition Role Plays (Alternate Group: Tour) ____________________________ 45 minutes

**STEP ONE – Facilitator reads scenario to group:**

**Group 1:** Ntobeledzi gets his HIV treatment at Nyangabgwe Referral Hospital and attends Francistown Teen Club is going to graduate from secondary school in 6 months. He hopes to attend the University of Botswana next year, but is nervous about leaving Francistown and his healthcare providers at Nyangabgwe. Perform a role play showing this situation and how Ntobeledzi can transition successfully to adult care and life in general in Gaborone.

**Group 2:** Thabo, an 18 year old living with HIV since birth wants to disclose his HIV positive status to his girlfriend of 2 months. They have discussed becoming more intimate and he feels it is important for her to know his status. Thato feels he can trust his girlfriend; however he is uncertain about how she will react. Perform a role play showing how Thabo can handle this situation.

**Group 3:** Kago has been living with HIV since birth and, since childhood, has always wanted to work in an office. Kago has never been hospitalized and has remained very healthy and active his
whole life. He is now 18 years old and is worried that his HIV status might prevent him getting a
due to discrimination. Perform a role play showing how Kago can handle this situation.

**Group 4:** Sethunya is 17 years old and has just learned she is 2 months pregnant. She does not
always adhere to her medication and openly admits to skipping doses every week. She wants to
prevent passing HIV to her unborn child. Also she has not disclosed her HIV status to the father of
the child and is concerned with his health and how and when to tell him. Perform a role play
showing how Sethunya can handle this situation.

**Group 5:** Kagiso lives at SOS Children’s Village and is taking ARVs. In a couple years, Kagiso
will be too old to stay at SOS Children’s Village and he wants to move back to his home village of
Mochudi. Currently, he is getting his HIV treatment at the Botswana-Baylor COE, but he would
like to attend the adult clinic at Deborah Retief Memorial Hospital when he moves to Mochudi.
Perform a role play showing how Kagiso can prepare himself for leaving SOS Children’s Village
and the Botswana-Baylor COE.

**Group 6:** Naledi is 19 years old and is becoming more involved with HIV/AIDS advocacy and
education. Naledi wants to be open about living with HIV however her family is upset with the
idea of her being publically open about her status. Her father’s main concern is regarding Naledi’s
younger siblings who are also HIV positive and wants to protect the family from discrimination
and stigma. At the same time, her father is proud of Naledi for speaking about HIV and recognizes
how important it is for people living with HIV to tell their stories. Perform a role play showing
how Naledi can handle this situation.

**Group 7:** Mpho recently transitioned from the Botswana-Baylor COE to an adult HIV clinic
nearby. He returned to the COE to say hello and share updates about his life with clinic staff. He
expresses he is not happy at the adult clinic and misses his doctors and nurses at the COE. He asks
if he can return to the COE even though he is over the age limit. Perform a role play showing how
Mpho and his healthcare providers can handle this situation.

**Group 8:** Pule is a Form 3 student who wants to attend university one day. Earlier this year, he
missed a lot of school due to poor health and he has fallen behind in his schoolwork. Pule is
worried that his bad grades might prevent him from going to university and he wants to find a way
to improve his performance. Perform a role play showing how Pule can handle this situation.

**STEP TWO – Ask for volunteers to act out scenario**

**STEP THREE – Group discussion**

Start by encouraging everyone to participate in the discussion. There might not be time for every
member to answer every question but we will do the best we can. Suggested questions for the
discussion are listed below. Feel free to add/delete as you feel necessary!

- Would the way the situation was handled actually work in real life? Why or why not?
- What are the negative consequences of not addressing the issues in this role play?
- What other kinds of guidance and support would you provide the characters in the role
  play?
- Do you know of any existing tools or resources that would be helpful in this situation?

**V. Princess Marina Hospital Tour (Alternate Group: Role Plays) 45 minutes**

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ns will be lead on a tour of Princess Marina Hospital and will be provided with an overview of the adult care services offered and how they are similar to or different from the care provided at the COE. If there are any young adults who have already transitioned to PMH or other adult facility, they can describe their experience for the group.

VI. Large Group Session & Wrap-Up 30 minutes

Please sit with your group in the classroom. Groups/individuals can volunteer to perform their skit on transition of care, though every group may not have a chance to perform. Allow a couple minutes for discussion after each presentation/skit. Teen can also volunteer to give their impressions on the tour of PMH.

SUPPLEMENTARY APPENDIX Z: TRANSITION OF CARE

Additional Talking Points (from Teen Talk guide):

Definitions: Transition has been defined as “the purposeful, planned movement of adolescents and young adults with chronic physical and medical conditions from child-centered care to and adult-oriented care system” (Blum R. W., 1993) as well as “a multifaceted, active process that attends to the medical, psychological, and educational or vocational needs of adolescents as they move from the child focused to the adult focused health care” (Reiss & Gibson, 2002). Basically, transition is broader than just moving from a pediatric to an adult provider – it encompasses all the changes that one experiences as they move into adulthood.

At what age will I need to transition to an adult doctor?

Most people, including adolescents living with HIV, will leave their paediatrician or paediatric clinic somewhere between their teens to mid-twenties. The exact age at which someone transfers from paediatric to adult-based care depends on a number of factors, including their readiness (how ready they are to make the move, medically or emotionally), their level of maturity, their medical needs (those with special or complicated medical needs may need to transfer later), their life situation (whether they are in the process of moving from home for school or work), their insurance situation (some private or public insurance plans have age cut-offs for paediatric care, etc.), and other reasons. Over time, you will need to learn to take the lead in meeting your various needs, medical and otherwise. As an adult patient, you will be expected to take responsibility and ownership for your health and wellbeing.

What knowledge or skills will I need in order to have a successful transition?

There are many things you can learn and skills you can develop to prepare yourself for transition. You should first meet with your doctor to discuss the skills you will need and make a plan for how and when you will develop them. This list of knowledge and skills “milestones” and the timeline for when you will accomplish them will become your personalized transition plan. You should start working on this plan as soon as possible, beginning as young as age 10, when you can start planning future goals with your doctor, or at least 3 years before your transition is planned. But starting your plan late is better than nothing! Below are some general knowledge and skills questions that you should address in your plan:

- Do you understand your HIV/AIDS diagnosis?
- Do you understand other health conditions that you have?
- Do you know what to do to keep healthy?
- Do you know what to do to keep safe (i.e., avoid unsafe behaviours, activities and situations)?
- Do you know how to communicate well with your doctor and other health care providers?
- Are you comfortable asking your doctor and other health care providers questions about your health?
- Do you know how to use community services?
- Do you practice responsible sexual behaviour (i.e., prevent the spread of HIV and keep yourself safe from getting other diseases or strains of HIV)?
- Do you seek information and counselling when needed?
- Do you keep track of your health records?
- Do you understand your health insurance status and related issues?
- Do you remember to take your medications on your own?
- Do you make and attend health appointments on your own?
- Do you know how to arrange your own transportation and use it safely?

**How can I be a better advocate for my own health needs?**

The first thing you can do to better advocate for your own health needs is to learn about your HIV/AIDS diagnosis and other health conditions. You should understand any changes or symptoms caused by your medical condition(s) and any side effects caused by your ARVs or other medications. As you get older, you should take more and more responsibility for taking your own meds without having to be reminded by someone else when and how to take them. You should also understand any tests you need to take (blood, x-ray, etc.) and what the results mean – your doctor can help you to learn more about your tests. Being your own health care advocate also means knowing the warning signs for when you need emergency help and who to call in case of an emergency. You should carry your emergency contact info with you, along with your insurance card (if you have one) and any other important health care information. You should learn how to make your own doctors’ appointments and write down any questions you have for the doctor prior to your visit. During your doctor’s visit, you should speak up and ask any questions that you might have. If you don’t understand the answer, you should ask again. You should also talk to your doctor and other health care providers about difficult or sensitive topics like relationships, drugs, and family planning. Be sure to ask for copies of medical tests and reports and ask for clarification if you don’t understand something.

**How can I take charge of my health care information?**

To take charge of your health care information, you should first understand the medications you are taking, including their names and when you need to take them, as well as any medications you used to take and why your doctor changed them (e.g., side effects, resistance, etc.). You should also know how to call your pharmacy and how to refill your meds. If you have health insurance, you should understand how it works and which expenses you are responsible for (and have a plan for paying any of these expenses). Be sure to keep a list of addresses and contact information for all of your health care providers as well as other community resources. You should also keep a notebook or journal of your medications, medical history, and medical test results. You can also ask your doctor or other health care provider to give you a short written summary of your health condition – sometimes this is called a “portable medical summary” because you can carry it with you, especially if you need to switch doctors. You should also be able to give a brief history of your condition verbally – you can practice doing this in front of a mirror!