DREAM 2 BE

MANUAL FOR
peer-educators

GRADE 9
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DEAR PEER-EDUCATOR

This is the place to be! Whether you are a newcomer or playing the game for the second year, welcome to the Life Choices family!

Over the next year, we will work together towards our vision of ‘starting a movement of young people who foolishly pursue their purpose and are surrounded by supportive environments’.

We are happy to introduce you to the Western Cape Peer-Education programme and the Dream2Be game.

Life Choices is certain that YOU can make a positive difference in your life, your school and society. Believing that you have unlimited potential, working hard and leading others will bring you close to achieve your dreams and to realize your full potential.

So welcome to Grade 9, the second year of the Western Cape Peer-Education programme, a programme with a difference.

This is your peer-education tool kit. In this kit you will find necessary things to keep playing the game. Stick to these guidelines to ensure your success.

THERE ARE A FEW RULES TO PLAY THE DREAM2BE GAME:

JOB 1:
Make the activities fun for members and the Peer-Education experience fun for yourself.

SAY AUNTE:
Know when to ask for help. It is a sign of strength and wisdom to admit that you need assistance. Do not hesitate to say to people, “I don’t know the answer but I will find out and get back to you”.

10 AND 90:
Effective performance is 10% talent and 90% preparation. Remember the importance of good preparation.

BE REAL:
Honest and concrete feedback improves everyone’s performance.

DREAM BIG:
We believe in your unlimited potential. You can do anything you put your mind to. Remember you are your own limitation, so go for it and set your potential free.

SHHHH:
As a peer-educator you will be exposed to private and sensitive matters. KEEP THEM SAFE. If you want to talk about the issue with someone with more experience avoid using the names of the people involved in order to keep it confidential.

PROVE IT:
Every task that you perform as a peer-educator needs to be recorded in order for you to score points. So get to know the tools, use them and score high.

FREE PLAY:
Remember you play the game as you please. You decide which activities you want to play and get points for. IT’S FREE WHEEL!!!

WHAT EXACTLY IS DREAM2BE?

DREAM2BE IS MORE THAN JUST A GAME, IT IS HARD WORK!

Through the year many of you may feel excited and others overwhelmed by the amount of work involved in the Peer-Education Programme. This is a new year and that means new responsibilities and tasks, the game now picks up pace!

So yes, you will still have fun, get to meet new people, and make your dreams come true... and yes it is hard work if you want to achieve something at the end of the day!

Dream2Be is a game that will challenge you to be the best you can be.. There will be tasks to fulfill that will take you out of your comfort zones... You may have to talk to large groups, sing and dance, play games, go on outings and be a listening ear for those in need.

Yet, throughout all of this there is growth and we hope that at the end of the game you come out a better, stronger and wiser person.

INTRODUCTION
Life Choices believes in this philosophy too. We believe that in order to make a change we have to live that change. For example, if we want to live in an honest world we need first to be honest. If we want to live in a world where people respect each other then we need to start by respecting others. The list goes on and on. As a peer-educator we expect you to have the attitude that “IT STARTS WITH ME FIRST”.

Through the year you will be assigned tasks that will help you influence and assist those around you. As a peer-educator, you are the most important element in the programme. You have been carefully recruited and trained. Through your hard work you will be able to fulfill the four roles of a peer-educator:

**THE BEST**

Be the Best that You Can Be!

As a peer-educator you will be working closely with peers who may look up to you, for this reason it is important to be a positive role model. Try to ABIDE by the rules set out by the school and the Dream2Be game as much as possible. We know that this is a process so we expect that it may take you some time, but we ask that you embrace this role as much as possible.

**A FREAK**

Freak Peers Out!

Many of our activities involve peer-educators having fun with peers while at the same time UNSETTING them. You do this by asking good questions and getting peers to question their own perceptions and their own way of thinking. This can be achieved through activities like: Talk!, Heart2Heart and more! In this way, peer-educators are able to share information and educate peers in a structured way.

**A LOOKER**

Eyes Open & Mouth Closed!

RECOGNISE peers in need and refer them for help. This involves getting to know the learners that you work with and recognising when they need someone to talk to, or when they need to be referred for help. But remember to always keep the matter confidential!!

**Implementation**: This is when peer-educators play the different activities. These activities should not feel like school to peers. They should be more fun, more interactive, and perhaps more noisy! Peer-educators need to have high-energy levels and make the activities extremely interactive for peers. Peer-educators should always remember to ask themselves this question: “Who should be the ones feeling clever at the end of the discussion?”

**Preparation**: Do you remember 10 and 90 from the beginning of this kit? Well, good performance is 10% talent and 90% preparation. It is very important for peer-educators to plan, prepare and rehearse their plays well. This will ensure the successful implementation of the activities.

**Documentation**: Every task that you perform as a peer-educator needs to be recorded properly in order for you to score points. So get to know the tools, use them properly and score high.
TIME TO PLAY

If peer-educators want to continue in the game they must perform the following three activities – Talk5, Heart2Heart & Find my Friend! In each activity, peer-educators are requested to play it well and do their best.

Beware if you miss out on an activity you will be jeopardizing your spot in the game as you will be losing points!

In this kit, you will find the 5 lessons to play Talk5, Heart2Heart, Google It! and the explanation to ‘Find My Friend’ activity. These activities are designed for implementation by you, the peer-educator as part of a comprehensive HIV prevention and risk reduction education intervention.

Glossary:

What are trigger questions?

Trigger questions are questions that you can ask while debriefing an activity to help you make the group or an individual think about questioning their social norms. It is not your job to tell them what the right thing is but to question them so that as a group they themselves can come to the right conclusions. You can find some examples of trigger questions in your sessions.

enjoy!

READY, SET, GO!

Ready, Set, Go! meetings happen after school on days when the Life Choices facilitator is at your school. Each meeting takes around one hour.

These meetings are aimed at helping peer-educators prepare to play...

During these meetings peer-educators will practice activities, plan as a team and support each other.

So, make sure you know the dates and the times of these meetings!!!

Fun Gatherings will be the most fun you can possibly have while learning. They are designed to equip you with all the skills necessary to perform Dream2Be tasks.

Fun Gatherings happen once a year for two consecutive days. On Gatherings you will get the chance to meet peer-educators from other schools and play fun and interactive games. Who knows you might make friends for life.

DATES FOR YOUR GATHERINGS:

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<th>1st Day</th>
<th>2nd Day</th>
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Sign the Attendance Register and show up on time in order to score all the points!
WHAT IS THE PEER-EDUCATORS ROLE IN A TALK5?

The peer-educators’ role is to:
• Research the topic
• Plan and prepare the contents of the Talk5
• Negotiate with Educators
• Implement the Talk5
• Review the Talk5
• Collect and complete all Talk5 tools
• Build a trusting relationship with your peers.

IMPORTANT:
While it may be difficult to run sessions with your own class, relax! Remember you are just a peer bringing useful information to the class, and the Educator plus your Facilitator will be present to support you.

Peer-educators should always remember this question: “Who do we want to feel clever?” At the end of the day, we want our peers, and the group as a whole, to feel clever. For that to happen, peer-educators must continually and consistently refer questions back to the group, and only in the end should peer-educators summarize or conclude what has been discussed in the session for the group.

SO, WHO SHOULD TALK THE MOST?

The peers or learners because peer-educators are organizing this activity for them! However, peer-educators should not allow peers to leave the room believing something that is not true or unhealthy, whether it was said as a fact or simply as someone’s opinion. It is up to YOU as peer-educators to make sure members leave your Talk5 with the correct information and are empowered to adopt healthy attitudes and behaviours.

HOW TO SET UP A TALK5?

Peers and peer-educators should sit in a circle facing each other if they can. It is best if there are no tables or desks, but the critical thing is that you are all on the same level and accessible to one another. This will facilitate a productive Talk5.

We understand that in a classroom setting this can be difficult, particularly in light of time constraints but if you can quickly change the desk arrangement into a workation layout, it would be ideal. A Talk5 should NOT feel like school to peers. Though there will be times when peer-educators need to establish order or keep some members from being naughty or distracted, a Talk5 should be fun and interactive so that peers want to be there.

HOW TO MANAGE A TALK5?

As a peer-educators you may not have the authority of an Educator, but you often have your peers’ trust, and this gives you the advantage in maintaining order. Don’t forget that often peers who misbehave have a need for attention, but for the benefit of the group, these peers must be gently controlled.

BEHAVIOUR MANAGEMENT STRATEGIES INCLUDE:

• Have one of your fellow peer-educators (probably the “Eyes & Ears” peer-educator) sit near the member who is misbehaving.
• Never pay too much attention to the disruptive member as this often encourages further misbehaviour. Ignore the member as much as you can.
• Use humor to manage the immediate situation. Then, after the Talk5, have the peer-educator who the member is most likely to respect spend some time forming an alliance with the member to prevent future incidents.
• Discuss in the group how this member’s behaviour is keeping the group from its business and its fun.
• Take the member out of the room, ask him/her if there is something wrong, and if he/she does not provide a reason for his/her behaviour, invite him/her to come back into the group if he/she can behave appropriately. If he/she can not commit to behaving appropriately during the Talk5 ask him/her to not rejoin the group until he/she is ready to behave.

• “Say Auntie”, ask your Facilitator for help.

PLANNING A TALK5

When planning a Talk5 it is important to plan how you intend to impact your group based on the nature of the class you will be working with. After all, each class is different and you need to make sure that you plan the session in such a way that impacts your class the best... here is some steps and guidelines to help you with this process.

The nature of each Talk5 is structured around discussions and debates, this can be a very difficult process to run, but it gets better with practice. To get you started here is some guidelines on running discussions and conversations with groups.

BEFORE THE SESSION:

1. KNOW WHERE YOU WANT TO GO WITH THE DISCUSSION, but be flexible. Before you start the Talk5, ask yourself the following questions:

• What is the point of this discussion?
• What do I want my class to get out of it?
• When will I know to end the discussion?

As you lead the discussion, pay attention to whether the discussion is allowing you to address the topic that you wanted to address. If not, ask a new question to bring the group back on track. Sometimes the discussion will address the topic, but the group’s answers might be different from what you were expecting. Again, try to ask a question to help the group get back on track. If that fails, the discussion and move to the next step in the session plan.

2. START FROM WHERE PEOPLE ARE. When you are planning the Talk5, take some time to think about what the class might already believe or know about the topic:

• What attitudes do they have?
• Do people’s age usually have accurate facts about this topic?
• What have they seen older people do, or heard them say about it?
• What questions might class members have about this topic?
4. **ASK OPEN-ENDED QUESTIONS**: Open-ended questions are given to all the participants. These questions cannot be answered with a yes or no. Instead, they require participants to explain how they feel about a particular topic. Here are some examples showing closed-ended and open-ended questions:

   - **Close-ended**: Was Thandi right to be angry?
   - **Open-ended**: What do you think of Thandi’s reaction?

5. **CREATE A PARKING LOT FOR ISSUES**: This tool is completed by the peer-educator who was chosen to be the “Eyes & Ears” (the observer) while your facilitator reviews and completes the rest of the peer-educators’ review form.

6. **STAY NEUTRAL**: Do not take sides during discussions, even if you have a strong opinion on the topic. The class members have to feel comfortable sharing what they think, without fear of being judged or criticized.

7. **BE GENEROUS WITH THANKS AND PRAISE**: Some class members will speak more clearly and more convincingly than others. Always praise people for participating regardless of what their comment was. And never make fun of what anybody adds to the discussion—remember, the group is supposed to be a safe space where participants receive support and respect from each other and from the peer-educators.

8. **KEEP TRACK OF IMPORTANT POINTS**: Take notes, either for yourself or for the whole group on a flipchart. Use these notes to summarize key points at the end, so that everyone has a clear idea of what to take away from the discussion.

9. **PREREAD THE STORIES**: Before discussing the “Talk”, read it. This helps you to understand what the stories are about and how they relate to the discussion.

**HOW DO PEER-EDUCATORS RECORD WHAT HAS BEEN ACHIEVED?**

Each “Talk” has its own documents and tools that need to be completed whenever you conduct a “Talk”. Some tools need to be filled in before your “Talk” and others after the event. All of them are important and must be completed and handed to your facilitator so that they have proof that your “Talk” took place and you can score points.

**HOW DO PEER-EDUCATORS RECORD?**

The Log Sheet is a summary of the “Talk”. It proves that you conducted the “Talk”. An Attendance Register needs to be attached to the “Talk” Log Sheet. It is a list of all the people who attended your “Talk”. Without these two forms, the activity will not be counted and you will not receive your points.

**THE PLAN AND REVIEW SHEET**

This tool helps you to plan your “Talk” in detail. It prompts you to think about and decide on things such as: the topic of your “Talk”, what material/resources you will need to make your “Talk” a success, the different tasks for which each peer-educator will be responsible, and more. After conducting the “Talk”, there is space on this tool to review how the activity took place, what went well and what can be improved upon. This form helps you to assess yourself and shows you where and how to improve.

**“EYES & EARS” TOOL**

This tool is completed by the peer-educator who was chosen to be the “Eyes & Ears” (the observer) while your group is running the “Talk” session. After the “Talk” has been run, take a few minutes to sit together and debrief about how the “Talk” went. The “Eyes & Ears” peer-educator leads the debriefing session. He/she will start by asking the remaining peer-educators to complete the “Talk” review form. After everyone has finished, the “Eyes & Ears” peer-educator starts the discussion by asking the following questions:

   - How do you feel about the activity you just ran? What went well and what could be improved upon for next time?
School: _____________________________ Facilitators: _____________________________
Date: _____________________________

Names of peer-educators who delivered the Talk5 session:

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact details</th>
<th>Excellence bonus*</th>
<th>Time of Arrival</th>
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<tr>
<td>1</td>
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*Average - 0 points; Good - 1 point; Excellent - 2 points

Number of learners that attended the Talk5 session: ________________
Topic of session: ______________________________________________
No. of Class: ________________
Facilitators’ signature: _________________________________________
Educator’s signature: ___________________________________________
Contact no.: _____________________________

Overall comments from the Educator:

Please attach attendance register to this form.

FOR OFFICE USE ONLY:
M&E: _____________________________ Name: _____________________________
Sign: _____________________________ Date: _____________________________

Quality control information
Supervisor: _____________________________ Name: _____________________________
Sign: _____________________________ Date: _____________________________
“TALK 5” SESSION PLAN:

This part is completed BEFORE a Talk5 session is delivered. Complete with the group of peer-educators who will be delivering the session.

Topic: ____________________________

Date session is to be delivered: ____________________________

How long will the Talk5 last? ____________________________

Where will the Talk5 be delivered? ____________________________

Names of peer-educators who will deliver the Talk5: ____________________________

Equipment or resources that will be needed: ____________________________

How will the Talk5 session be introduced and who will do it: ____________________________

What will the main content of the session be and who will facilitate it? ____________________________

How will the Talk5 session be summarised and concluded and who will do it? ____________________________

“TALK 5” SESSION REVIEW:

Form to be completed AFTER a Talk5 session is delivered. Complete with the group of peer-educators who delivered the session.

How long did the Talk5 session last? ____________________________

What are your overall impressions of how the session went? ____________________________

How did you work as a team? ____________________________

How did the learners respond to the session? ____________________________

What would you do differently next time you deliver a Talk5 session? ____________________________

No. of learners attended: ____________________________

“EYES & EARS” TOOL:

From your observation, describe briefly what worked well in this Talk5 session: ____________________________

Did you feel the team had enough support from your facilitators to effectively deliver the Talk5? Briefly explain your answer. If NO, please make recommendations as to how you could be better supported: ____________________________

From your observation, describe briefly what did not work as well as it should have: ____________________________

What are the lessons learnt with this Talk5 that the team should have in consideration for the next time they plan & organize a Talk5 session? ____________________________

Do you think the team worked well together? Please explain: ____________________________

What was the most meaningful or useful thing you learnt as a member of this team? ____________________________

Peer-educators signature: ____________________________

Date: ____________________________
PURPOSE:

Young people are an enormous resource to their peers. Their peers know what youth are thinking and doing before adults do. It is critical that they recognise and accept the role they can play in helping each other to keep safe and healthy.

OUTCOMES:

By the end of the session, learners in your class should be able to:
- Know who their peer-educators are.
- Feel at ease with peer-educators.
- Know the difference between protection and interference.
- Illustrate the ways in which people protect one another, how we feel about being protected and how we feel about protecting others.
- Know that protecting your friend is good if they are about to get into trouble.

MATERIAL NEEDED:

- Cards with the Protection or Interference scenarios and questions.
- Flipchart, kokis and pens.
- Attendence register and all the other tools.

SESSION:

INTRODUCTION

(10 minutes)

Introduce yourselves as the Life Choices peer-educators for this class. Explain to the class that you will be conducting 5 to 6 lessons for the year and today is the first one of the set. During the lessons you will be discussing issues that affect young people’s lives and you will be making a follow-up about the 5 lessons they received last year.

Explain that today we are starting the lesson with an ice-breaker (peer-educators choose an ice-breaker they feel their class will enjoy and practice this ice-breaker with Life Choices Facilitator before Talk).

After the ice-breaker, thank the class and tell them that it is great to be running this session with them today.

Another peer-educator can do this activity. Start by asking the class to please sign the Attendance Register that is going to start to go around the classroom (explain the different parts of the attendance register before passing off the register).

Before we start with the topic of today, we would like to suggest 3 rules for the 5 sessions we will spend with you (show flipchart):
- Respect
- Maximum Participation
- One Person at a Time

Peer-educator explains each rule and makes the sign that goes with it.

- Respect (peace sign)
  As a group we will find value in each member. If any of us feels that somebody is not being respectful we will make the peace sign.

- Maximum Participation (fist)
  We would like to encourage everyone to participate because each opinion is a valuable opinion. If we feel that only a few people are participating, we will show the fist sign.

- One person at a time (shhhhh sign – one finger in front of the mouth (no noise)).
  This goes hand and hand with respect. Every time a person wants to talk he/she must raise his/her hand and when given the opportunity, the rest of the group listens. If we feel that many people are talking at the same time we will show the Shhhhh sign.

Ask the class if we can all agree on these rules? Allow for 2 or 3 answers or for a big YES.

Put the flipchart on the class in a safe space. You can refer to these rules throughout the 5 sessions that you will be running. If someone breaks one of these rules you can remind them with the signs and that you have all agreed on them together.

JUST ENOUGH TO HELP

(5 minutes)

In this activity you will need the ‘Protection or Interference’ scenario cards.

Scenario 1

Lerato, Shembule’s girlfriend tells him that she is concerned that he is not attending to his schoolwork and will not pass his Matric unless he starts getting serious.

Scenario 2

Karen, Mark’s sister tells him that she is worried about his drinking.

Scenario 3

Scott suggests to Phillip that he talks to a counselor because he is been getting into a lot of fights and it seems something is bothering him (though Scott doesn’t know what it is).

Scenario 4

Sandra warns Rosina to be careful where she goes and what she does with Neville.

Scenario 5

When Thabo, sick and acting crazy from drugs, refuses to go to the hospital, Lukas calls an ambulance.

STEP ONE: INTRODUCING THE ACTIVITY

Peer-educator explains to the class that we are now going to do some group work. I am going to divide the class in small groups and each group will discuss a scenario where they will decide if the scenario is a protective or an interference action. Each group will be reporting back to the class in the end of the discussion.

STEP TWO: WORKING IN GROUPS

- Divide the class into groups and make sure that each group has 5 or 6 learners so that the group is small enough to have everyone involved in the discussion and activity. There are 5 ‘Protection or Interference’ cards but you can repeat the cards in case your class has too many learners.
- Give one of the ‘Protection or Interference’ card to each group.
- Give each group 30 seconds to read their own card silently. Ask each group to choose a representative that will summarise their discussion to the class in the end of the activity.
- Read the first question out loud to the class: “In which situations would this be considered protection?” (give 3 minutes to discuss the question within the group)
- Then read: “In which situations would it be considered interference?” (give 3 minutes to discuss the question within the group)
- Read: “Do the ages and relationship between the two people involved matter? In which manner” (give 3 minutes to discuss the question within the group)
- Then read: “Is the protector likely to be thanked for helping? Is she/he being thanked?” (give 3 minutes to discuss the question within the group)
- Read: “Is there any way to help someone who has not asked for help and does not want it?” (give 3 minutes to discuss the question within the group)

STEP THREE: CLASS DISCUSSION

Ask one person from each group to stand and read out their card. Give each group 2 minutes to report-back to the larger group a summary of their discussion (in case there is more than one group with the same card, ask one group to present and the other to add anything that was discussed differently in their group).

After each presentation ask the class as a whole some of the following questions:
- So, what does the rest of the class thinks? Is this card interference or giving help?
Is that what everyone thinks? Let’s hear your ideas.

After class discussion, affirm and acknowledge group presentation with a special clap before proceeding to the following group.

CONCLUSION OF THE SESSION
(10 minutes)

To conclude this activity, ask learners if anyone would like to describe an experience where they were glad someone protected them? (allow 2-3 learners to share). Ask the class if they think it is OK for someone that CARES to talk to them about things he/she is concern about in their life?

Is a real friend or someone that loves you, a person that always agree with your actions? Or are they people that have honest conversations with you even when they know that those conversations might not be easy and they might even up-set you.

There is a song called ‘Honesty’ and the words of the song go like this … “Honesty is such a lonely word, everyone is so untrue. Honesty is hardly ever heard. But it is mostly what I need from you.”

Honesty is the best policy. Honesty makes you feel good about yourself and creates trust in others. If you really CARE you will be honest with people around you.

There is always a reward for doing the right thing and believe it or not, just doing the right thing is a prize on its own.

Explain to the class that you have come to the end of the session. Thank them for the session and ask to two or three people “what do you take with you from this session?”

Once again thank them and explain that you will be back with another session soon. Also mention that they are more than welcome to talk to any of you about the programme or any other thing at any time.

Honesty is the best policy. Honesty makes you feel good about yourself and creates trust in others. If you really CARE you will be honest with people around you.

TOLL FREE NUMBERS

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<tr>
<th>SUBSTANCE ABUSE</th>
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<tbody>
<tr>
<td>National Drug Line:</td>
<td>0800 601 031</td>
</tr>
<tr>
<td>Cape Town Alcohol &amp; Drug Hotline:</td>
<td>0800 435 748</td>
</tr>
<tr>
<td>National Substance Abuse:</td>
<td>0800 121 314</td>
</tr>
<tr>
<td>Nor Anon: (support groups for the families of drug addicts)</td>
<td>0881 296 791</td>
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<tr>
<td>Substance Abuse Helpline:</td>
<td>0800 121 314</td>
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<td>Toughlove:</td>
<td>0861 868 445</td>
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<td>0800 055 555</td>
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<td>Safeline: (counseling and support)</td>
<td>0800 3553</td>
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<td>0800 587 587</td>
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<td>Bipolar Helpline:</td>
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<td>0800 123 32</td>
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<td>HIV 911: (referrals to local resources)</td>
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<td>Gay and lesbian network:</td>
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<tr>
<td>Triangle Project:</td>
<td>021 712 6699 (not free)</td>
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<td>Human Trafficking (soldpersons)</td>
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<td>Department of Education Helpline:</td>
<td>0800 202 933</td>
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TALK5 LESSON 2: SUBSTANCE ABUSE

PURPOSE:

Young people are on a stage of their life where they like to try new things. Surveys have shown that 49% of youth will experiment with illegal substances during their teenage years. This session aims at exploring what substance abuse is, its effects and its dangers.

OUTCOMES:

By the end of the session, learners in your class should be able to:

• Understand the difference between substance use and abuse
• Understand the disadvantages of taking substances that makes us feel sexy and as if we haven’t any responsibilities
• Look at situations where we are in danger of misusing substances and having sex

MATERIAL NEEDED:

• Attendance Register
• Flipchart
• Markers
• Four Debate Cards

SESSION:

INTRODUCTION
(5 minutes)

Greet the class, and ask them how they are doing (start passing the attendance register around and remind the class to sign). Note: make sure when the attendance register is passing around someone is keeping an eye on it.

Ask the group if they remembered what we spoke about last session? (Allow for 2 or 3 answers). Acknowledge their answers and say that last session we talk about protection versus interference. Well done!

Say to the class that today our session is about substance abuse. Ask the class:

• What it means to you when you hear the phrase ‘substance abuse’? (allow for 2 or 3 answers)
• Which substances do you think are commonly abused? (allow for 3 or 4 answers)

Affirm their answers and explain that people uses substances such as alcohol, tobacco, dagga, over the counter medicines and recreational drugs such as cocaine and ‘tik’ to feel good or forget their problems for a while. Explain that today we are going to talk about substance use in a form of debate.

ACTIVITY 1: GROUP DISCUSSION
(55 minutes)

You have 10 minutes per group debate:

1. Divide the class into four groups and give each group a debate card. (To argue in favour of using alcohol / To argue against using alcohol / To argue in favour of using marijuana and other types of drugs / To argue against using marijuana and other types of drugs)
2. Ask the groups debating on alcohol to sit in the middle or in front opposite each other and to make their opening arguments, each trying to persuade the other to agree with them.

3. When the groups have run out of arguments invite the audience to add any opinions and discuss them.

4. Ask each side to sum up their arguments.

5. Ask the audience to vote on the motion by the show of hands for each of the groups. Clap for the winning team.

6. Close this debate by adding any correct factual information that might have been missed. And conclude by saying alcohol is the most abused substance among young people. There are young people who are already addicted to alcohol in high school and who find it difficult to function in school and home without a drink.

7. Repeat the process with the groups arguing about marijuana and other drugs (repeat point 2, 3, 4, 5).

8. Close this debate by adding any correct factual information that might have been missed. And conclude by saying people often like the feeling drugs give them when they first start using them, their feelings can range from happy, confident, lively, relaxed to excited. After a while they feel sad as the drug wears off making them to use again. Drugs don’t make problems to go away they often make problems worse.

**ACTIVITY 2: SUBSTANCE USE & SEX** (10 minutes)

- Ask seven people to volunteer to the next activity.
- Give a special clap for their courage and invite them to come to the front of the class. Ask them to form a line.
- Open a flipchart that has the heading ‘Places where people use alcohol or other drugs’.
- Explain to the volunteers that you would like each of them to write down a place where they think or have heard or seen young people using alcohol or dagga or any other drug.
- Give a marker to the first participant and let him/her to write down. When she or he is done he/she can give the marker to the next volunteer and sit down. Encourage them to write different places.
- When everyone is done. Read the places loud and clear to all the class.
- Ask the class the following questions (allow for 2 or 3 answers in each of them):
  - Which of these places are young people likely to have sex after getting high or drunk? (You could ask place by place and allow class to answer yes or no)
  - What are the dangers of having sex when you are high or drunk?
  - What can people do to avoid these dangers?

**CONCLUDE BY SAYING ...**

When most people talk about substance abuse, they are referring to the use of illegal drugs. Most professionals argue that any use of illegal drugs is by definition abuse. Those drugs got to be illegal in the first place because they are potentially addictive or can cause severe negative health effects; therefore, any use of illegal substances is dangerous and abusive.

Illegal drugs are not the only substances that can be abused. Alcohol, prescription and over-the-counter medications, inhalants and solvents like glue and nail polish, and even coffee and cigarettes, can all be used to harmful excess. Theoretically, almost any substance can be abused. When people use a substance they normally become addicted to it and are unable to function normally without taking it.

I would like all of you to picture a drug user or an alcoholic. Can be somebody you know or you have seen in your community or on TV. Think about how they look, how they spend their time, think about their families. Have we all pictured someone?

**My question for each of you and I don’t need you to answer ...**

- Would you like to be like them?
- Would you like to waste your life, your potential on that manner?

Taking substances can be dangerous not only because of the physical impact they can have on your body, but they can also limit your ability to set limits and function. Be aware of your environment, and realize when you are in danger.

It is easy to say no to substance use altogether than is to give them up when we have grown to like and need them.

So let us all say NO to drugs, avoid having friends that use substances and stop hanging out in places where temptation is high!!!

**LESSON AID:**

Substance abuse can simply be defined as a pattern of harmful use of any substance for mood-altering purposes. But the broad range of substance abuse in today’s society is not that simple. These substances are harmful to the body. Drugs can cause organ failure, brain damage, wrinkles, ageing, mood alteration (depression, aggression, paranoia, etc) and other complications.

- Drug dependency is when a person’s mind and/or body develops an obsessive need for it.
- It is easy to say no to substance use altogether than to give them up when we have grown to like and need them.

**MYTHS AND FACTS**

This section is an additional resource and can be used to explore how much you really know about substance abuse.

**Alcohol is addictive, but is not a drug.**

**Myth:** Alcohol is a drug because it is a substance that affects your mind and body and can also be addictive.

**More young people use alcohol than dagga.**

**Fact:** Alcohol is the most abused substance among young people because it is accessible in most communities. According to the 2002 Youth Risk Behaviour Survey, 49% of young people that were surveyed reported to be current users of alcohol compared to only 13% who were currently smoking dagga.

**Driving after using dagga is much safer than driving after drinking.**

**Myth:** Like alcohol, dagga affects motor coordination, slows reflexes and affects the way we see things around us. Any of these changes increases the likelihood of an accident while driving.
Coffee, tea and many fizzy drinks contain drugs.

**Fact:** Coffee, tea and many fizzy drinks contain caffeine, which is a stimulant. Caffeine is addictive and headaches are a common sign of withdrawal.

A young person can never be an alcoholic.

**Myth:** There are many young people who are already addicted to alcohol in high school. These are young people who find it difficult to function in school without taking alcohol on a daily or weekly basis.

Cigarette smoking can be addictive.

**Fact:** Cigarettes are highly addictive because they contain nicotine. It is very difficult to stop smoking once you have started. People who smoke get yellow staining of teeth and bad breath which is also not very pleasant.

Many people addicted to drugs reported that dagga was the first step to their addiction.

**Fact:** Dagga is viewed as a 'gateway drug', it opens the way to use other drugs.

Alcoholism is a disease.

**Fact:** Alcoholism is a disease and once a person becomes an alcoholic, they need to undergo treatment. They can't just stop on their own without being in a treatment programme because withdrawal symptoms can be dangerous to their health. Alcoholism is also related to the genes, so if a person has alcoholism in his/her family this person is at high risk of also becoming an alcoholic if they drink.

Drugs help people handle their problems.

**Myth:** Drugs help people to forget about their problems or reduce pain caused by problems, but the problems don't go away, they often get worse.

Inhalants are basically harmless even though people make a big deal about them.

**Myth:** Using Inhalants such as glue, cleaning fluids (thinners) or nail polish remover can be extremely dangerous. Unlike most drugs, inhalants can cause permanent damage to organs like the liver and the brain.

A cup of coffee and a cold shower will sober someone who is drunk.

**Myth:** Many people believe that it is not addictive; however, research has shown that it is addictive as people feel 'high' and they get addicted to the temporary feeling of 'high'.

**Purpose:**
The purpose of this session is to learn to make effective decisions and to equip learners with the necessary skills to make good decisions in difficult situations. It's also about knowing that making decisions is based on a process, to know the process and to apply it into their lives.

**Outcomes:**
By the end of the session, learners in your class should be able to:
- Understand the three Cs of decision making.
- Know the reasons for making the choices that they make.
- Understand that all their decisions have consequences.

**Material Needed:**
- Attendance Register.
- Blank cards for participants to use.
- Prepare the decision-making flipchart prior to the lesson.
- Prepare the decision-making flipchart prior to the lesson.
- Kokis and prestick.

**Session:**
**Introduction (5 minutes)**
Greet the class, and ask them how they are doing (start passing the attendance register around and remind the class to sign). Note: make sure when the attendance register is passing around someone is keeping an eye on it.

Ask the group if they remembered what we spoke about last session? (Allow for 2 or 3 answers).

Acknowledge their answers and say that last session we talk about substance use. Well done!

Peer-Educator explains to the class that it is not easy to make decisions because some of the decisions we make have negative consequences. However, some decisions are not very serious, but today we are just going to focus on the decisions that have serious consequences because they require a lot more thought. Today we are going to look at the process that one has to go through in order to make a difficult decision.

**Activity 1: Decisions Reflection Exercise (5 minutes)**
1. Distribute the cards to everyone in the class.
2. Ask them to write down on the card a serious decision that they or their friends are facing currently. Ask them to choose one decision where the consequences matter...like deciding whether or not to smoke because your friends are smoking and you feel left out or whether they feel that they are being picked on by a teacher and whether to confront the teacher (show these examples on a flip chart). Please, write down the decision on the cards and do not write your name. Collect all the cards into a hat or a bucket. One Peer-Educator chooses five or six cards from the hat depending on the number of groups you would like to have in the class. Make sure the statement is different. At the same time another Peer-Educator divides the class in small groups.
ACTIVITY 2: DECISION MAKING GROUP WORK
(20 minutes)

1. Give each group a decision card and a handout page.

2. Ask the participants to discuss the decision in their groups using the steps of decision-making process in their handout. Read the handout loud so that everyone understands. Ask if anyone has any question. Explain that the group needs to come to an agreement on the decision. After the discussion each group will present to the class their process of thinking using the three C’s methodology (Give groups 5 to 10 minutes to discuss). Note: Peer-Educators should move around the small groups to make sure that everyone is working on the exercise. One Peer-Educator should stick up the decision making flip-chart in the wall so that can be seeing by everyone.

3. When all groups are done, ask each group to present. Make sure presentations are not longer than 2 minutes. Each group should start by reading the Challenge - decision making card (make sure all class heard the decision). After they should explain their three Choices and the positive/negative consequences of each. In the end they should explain which choice they opted for and why. Peer-Educator thanks each group with a special clap and asks the class if they would like to add anything to this scenario. Note: In case the Peer-Educator feels that the decision was not the best, Peer-Educator should challenge the group. Remember you know the difference between a positive and a negative choice and how to weight your choices. A choice is only positive if it is moral and shows concern for yourself and other people.

ACTIVITY 3: CLASS DEBRIEFING
(30 minutes)

Conclude the session by asking the following questions to the class:

1. Are we able to guess negative consequences before making the decision so that we might choose something else? Ask for examples.

2. If we agree that we have those capabilities, why do you think we still make unhealthy choices? (Possible answers: peer-pressure, lack of self believe, don’t care attitude, feeling like a hero (it will not happen to me), etc).

CONCLUDE THE SESSION BY SAYING:

In life we are going to be faced with decisions every single day. Some of those decisions will be light or easy and others will be so serious that they could affect the rest of our lives. When facing a serious decision is important to think twice and weigh all consequences. STOP and think if the choice you want to go for is moral and shows concern for yourself and other people.

If you find yourself with doubts talk to someone you trust or do some research about the matter before making the choice.

Remember we all have the power within us to choose the right things. There is no excuse!

That’s the end of today’s session. Ask if there is anything of the session they will be able to use in their lives. Ask 2 or 3 people to share. Thank the learners.

THREE C’S TO GOOD DECISION-MAKING

Use the following STEPS to make your decision.

1. Challenge (or decision) you are facing

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2. Choices you have:

   Choice 1:

   Choice 2:

   Choice 3:

3. Consequences for each choice:

4. What is your decision?

   You’ll need to do some thinking about which choice is the best for you to make right now. Remember your choice should be moral and show concern for yourself and other people.

5. What are your reasons?

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PURPOSE:
The purpose of this session is to examine gender stereotypes and cultural practices which increase vulnerability to HIV transmission. The objective is for members of the group to arrive at a new understanding of sexual health based on gender respect.

OUTCOMES:
By the end of the session, learners in your class should be able to:
1. Distinguish between gender and biological sex.
2. Determine what part gender plays in sexual stereotyping.
3. Identify and evaluate gender stereotypes which feed into inequalities between women and men, which also increase the risk of STI and HIV transmission and abuse.

MATERIAL NEEDED:
- Attendance Register.
- Flipchart paper.
- Poster/chart written prior to the lesson.
- Kokis and prestick.

SESSION:
INTRODUCTION (5 minutes)
Greet the class, and ask them how they are doing (start passing the attendance register around and remind the class to sign). Note: make sure when the attendance register is passing around someone is keeping an eye on it. Ask the group if they remembered what we spoke about last session? (Allow for 2 or 3 answers). Acknowledge their answers and say that last session we talk about decision making. Well done!

Today session is on gender and we will be talking about what makes us think men and women should act in a specific way and how that affects us in relation to HIV.

ACTIVITY 1: GENDER STEREOTYPES
(30 minutes)
1. Ask all the participants to sit in same sex groups and to list 7 things, on a flipchart ‘how men are expected to act and behave in society.’ Than ask them to do the same, on another flipchart for women (give 5 minutes for the activity).

2. Once participants have had sufficient time to get a few thoughts down ask people to go back to their seats and ask each group to present. Ask each group to stick their first flipchart – ‘how men are expected to act and behave. Let both groups present. After ask for the second flipchart – ‘how women are expected to act and behave’ – to be stuck on the wall and also both groups to present. Thank each of the groups with a special clap.

3. In the bigger group explain to the participants that together we are going to write in front of each statement a B for biological make up (e.g. breast-feeding, being pregnant, etc) and a S for what society tell us (show the meaning of B and S in a flipchart).

Read the first statement and ask the class B or S. Write it in front of the statement. You might find out that some people are confused with some statements. Ask participants to explain their different answers. Note: If you get also confused ask for support from your Facilitator. In both flipcharts you might have similar statements; there is no need to go through all statement in the second flipchart. Work only with new statements.

4. Ask the class the following questions:
   a. How do these expectations/beliefs come about in society?
   b. Do you remember the first time you realised that boys and girls were different? Would someone like to share that experience (how old were you, who told you, what was said?)
   c. Are society’s expectations of each gender correct and acceptable? Why
   d. Can gender expectations make people vulnerable to HIV, STI’s and abuse? Please give some examples.

5. Peer Educator asks the bigger group to help circle in RED any statement on the flipcharts that can put women or men at risk. Note: Browse through each of them by asking the class how? If the class misses any risk statement challenge them. Thank the class with a special clap.

ACTIVITY 2: CONCLUSION
(5 minutes)
Peer Educator asks the class how can gender stereotypes be challenged or changed?

Conclude by saying:
It is important that we appreciate the positives of being a woman and a man but at the same time it is important that we are bold enough to identify what needs to be changed.

The fact that girls and boys are raised very differently affects what we perceive our roles in society to be and in the long run affects our own behaviour. This can limit ourselves and at the same time be used by many people to justify bad/unhealthy behaviors. We should not allow society to determine who we are, how we should behave and to increase risk in our lives. We all have unlimited potential to become whatever we want to be and we all have the capacity to distinguish what works for me and what I should just let go and change.

That’s the end of today’s session. Ask if there is anything of the session they will be able to use in their lives. Ask 2 or 3 people to share. Thank the learners.

LESSON AID
SEX
Sex the biological differences between the male and the female body parts and reproductive roles (e.g. women are able to give birth to babies while men cannot). We are born with it.

GENDER
Gender is a set of socially constructed ideas of what being a man and what being a woman is. This includes the characteristics and roles that society and culture impose and which determines the way in which men and women interact with each other and what men and women can and cannot do. Those defenitions change over time and from society to society. For example, a Muslim wife may have a vastly different role from a Christian wife. We are taught our gender, we are not born with it.

Let’s clarify: One example of a sex difference between the male and female is that we have the capacity to breastfeed their babies while men cannot. An example of a gender difference is the belief that women can cry but men shouldn’t cry. There is nothing that biologically prevents men from crying, but it is viewed by society as ‘unnatural’ for a man to cry.

From an early age children are taught different things:
1. Children are taught that boys and girls have different responsibilities. For example the kind of household chores that girls are expected to do, compared to boys – girls work inside the house and boys outside or, girls should serve boys.

2. Girls and boys are taught to behave differently. For example girls are not encouraged to play games like football, which involves vigorous physical activity and physical contact with each other and boys are often not allowed to play with dolls.

3. Girls and boys are expected to think differently. For example girls are expected not to talk back or express their opinion but boys are encouraged to speak up and often.

Ethnic group, class and other differences affect what girls and boys are taught about gender too. The fact that girls and boys are raised very differently affects what we perceive our roles in society to be and in the
long run affects our own behaviour. This can limit ourselves and at the same time be used by many people to justify bad/unhealthy behaviors.

**SOME DANGEROUS GENDER-BIASED & CULTURAL BELIEVES:**

- Disobedient women should be beaten or disciplined by men.
- There is no such thing as rape in marriage; once a woman is married to a man she has “access” to her regardless of how she feels about sexual intercourse or acts at that time.
- Men are more valuable than women. Women should feel blessed if a man wants them.
- The best thing can happen to a woman is to get married. Women cannot survive on their own.
- Payment of lobola – men feel like they own their wives and so will treat them as possessions and not as equal human beings.
- Men are sexual beings with a higher sexual drive that they cannot control.
- Wife inheritance. This is the belief that when a man dies any of his brothers or father may “inherit” the surviving spouse in order to carry on the family name.
- Early marriage – this puts the younger girl at greater risk of STI and HIV infection not only because they are expected to perform ‘womanly duties’ but also because their genitalia may be under developed.
- Dry sex (using herbs to dry vaginal fluids during sex), where men want vaginal tightness for sexual pleasure. However dry sex is uncomfortable and often painful for both parties. The increased friction causes abrasions on the vaginal wall thereby increasing the chances of contracting HIV and other STIs.

It is important that we appreciate the positives of being a woman and a man but at the same time it is also important that we are bold enough to identify what needs to be changed.

**PURPOSE:**

The purpose of this lesson is to dispel embarrassment and encourage openness to talk about sex in relationships. To look at the advantages and disadvantages of having sex.

**OUTCOMES:**

By the end of the session, learners in your class should be able to:

- Be confident to talk about sex.
- Be able to make informed decisions about whether or not to have sex.
- Understand the risks associated with having sex.

**MATERIAL NEEDED:**

- Attendance Register

**SESSION:**

**INTRODUCTION**

(5 minutes)

Greet the class, and ask them how they are doing (start passing the attendance register around and remind the class to sign). Note: make sure when the attendance register is passing around someone is keeping an eye on it.

Ask the group if they remembered what we spoke about last session? (Allow for 2 or 3 answers). Acknowledge their answers and say that last session we talk about Boys, Girls & Gender. Well done!

**ACTIVITY 1: TALKING ABOUT SEX**

(30 minutes)

1. Ask for two people to play the role of a boy and a girl who are thinking about whether to have sex or not. Note: Peer-educators know their own class they could have identify two people before the class and ask them (make sure they are not shy) to volunteer for the activity and explain the activity beforehand.

2. Invite the pair in front and ask the class to give different names to the personages they are going to play. Choose a name for the girl and a name for the boy. Explain that they have the same age that everyone around. Ask them to leave the class and get into their roles. They should agree on their past, how long they have known each other, how and where they got together and how they feel about each other.

3. Ask the rest of the class to sit in pairs and discuss what questions would you need to answer to make good decision about whether to have sex or not (give 5 minutes for the discussion). Tell them to remember their questions so that they can ask the boy and girl who are making the decision.

4. Invite the couple to join the group and to sit in the ‘hot-seat’ (two chairs in front of the class, where people can see them). Explain that the class is going to help them to make a decision of whether to have sex or not by asking them some questions.

5. Ask the group to make sure they ask questions to both the boy and girl, because they should make the decision together.

6. Also ask the group to ask open questions and do not tell the couple the answers that they want to hear. Tell them not to ask moral questions, for example, “Don’t you think that is wrong to have sex before marriage?”
instead ask: “What do you think about having sex before marriage?”. Ask the class to try and ask questions who follow the question the person before them asked. For example: “Do you want to have a child with this person?” If the answer is NO, ask: “What are you going to do to prevent pregnancy if you have sex?”

7. Introduce the couple with their new names and ask them to stay in their role.

8. Open for questions from the class. Ask people to raise their hand and you will decide who should go first.

9. When people have asked all the questions that they can think of, ask any of the following questions that they have left out if needed:
   - Why are you thinking in having sex with this person?
   - If you do have sex, what will be your reasons for doing it?
   - Where would you have sex?
   - Would you still have sex if you were high from drinking alcohol or using drugs? Why or why not?
   - Do you want to have a child with this person? Does he or she want to have a child with you?
   - If you don’t want a child, what will you do to avoid pregnancy?
   - Methods of avoiding pregnancy can fail. If this happens, what will you do?
   - How would your life change if you have to bring up a child at this time?
   - Will you share the responsibility? How do you know he is saying the truth?
   - Could either of you have HIV or another STI?
   - How many sexual partners did you have before?
   - Do you know your HIV status?
   - What would you do to protect yourself from HIV?
   - How would your life change if you got infected with HIV?
   - Why or why not is trust worthy before having sex? Why or why not?
   - Who would support you?

10. When they have answered all the questions, ask the couple to go away for five minutes to decide as a couple if they would like to have sex or not.

11. When the couple is out, ask the class to decide whether they think they should have sex or not based on the couple’s response. Ask each member of the class to weigh the good points about having sex against the bad points, and see which one ‘weights more’ (give the class one minute to think in silence).

12. Ask the class to vote and count the votes – couple should have sex, couple should not have sex, I don’t know because I still don’t have enough knowledge.

13. Invite the couple back to give their decision and the reason for it. Tell them how the group voted. Deroll the couple and welcome the real people back and give them a special clap.

**ACTIVITY 2: CONCLUSION**

Peer-Educator asks the class:

- How easy or difficult was it for you to think about and talk about issues related to sex and sexual risk? Why
- Do you think it is important to have honest conversations about this topic between couples? Why
- Do you think people should get advice for someone trust worthy before having sex? Why or why not is important

**CONCLUDE BY SAYING:**

You are the only one who has the power over what happens to you because only you have control over your body. Definitly there are many things to be considered before having sex. Before even thinking on sex there is no doubt each of us should get more information about reproduction, contraceptives, HIV, condoms and even the psychological consequences of sex at our age.

In the end is you choice, so make sure you choose wisely. That’s the end of today’s session. Ask if there is anything of the session they will be able to use in their lives. Ask 2 or 3 people to share. Thank the learners.

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**LESSON AID:**

**ABOUR YOUR BODY**

**GET TO KNOW THE FACTS!**

Every girl and boy experiences a time in which their body changes from a child’s body to an adults’ body. If this has not happened to you yet, it will at some point. This period of physical (and emotional) change is called puberty. This process is natural and is nature way of ensuring that you will be able to have children, if you want.

Even though our bodies may become ready for children, that does not mean that we are ready emotionally or financially to have them. So its important to start to understand your body, and the changes you are going through, so that you can be better prepared to make the right choices...

**BOYS**

**WHAT ARE THE CHANGES THAT WILL START TO HAPPEN TO MY BODY?**

- You will start to get taller and your muscles will start to bulk and develop
- Your shoulders will broaden
- Your nipples will get hard, and sometimes hurt for prolonged periods of time, and can even discharge a clear liquid.
- Hair will grow around your penis, testicles, under your arm pits, and on your face, legs, arms and chest.
- Your testicles and penis will get bigger
- Your voice will deepen. You may feel that your voice is uncontrollable but the changes in pitch is just a sign that you are heading into puberty
- Your skin will become rougher, and may develop pimples and blackheads which will appear on your face, neck, back, buttocks and maybe even your arms.
- Your penis will now be able to ejaculate a white creamy substance when aroused (semen).

**WHAT DO THESE CHANGES MEAN?**

When your body starts to go through all of those changes it means that you are now ready to produce children.

**GIRLS**

**WHAT ARE THE CHANGES THAT WILL START TO HAPPEN TO MY BODY?**

- Hair will start growing under your arms and in your private parts.
- You will start menstruating (having periods)
- Your body shape gradually changes from a girl to a woman- hips will broaden, your thighs and buttocks fatten, and you get taller- this is all to get your body ready for having a baby.

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**What CAN I DO TO BE RESPONSIBLE AND TAKE CARE OF MY BODY?**

Make the decision to wait for sex until you are ready- you can try things like masturbation to satisfy any urges, this is a safe way of pleasuring oneself.

Be sure to practice safer sex if choosing to have sex. This is done by using condoms all the time and sticking to one partner.

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**When DO THESE CHANGES HAPPEN?**

Your body will start to go through changes between the ages of 12 and 14, and sometimes even as early as 10 years old. It doesn’t matter when you start to experience these changes. They are perfectly natural. Whether you start to develop early or late your body will mature at some point. In many boys their body doesn’t fully mature till they reach age 20+.

**Semens (cum, ejaculate) is the milky liquid that is released when you ejaculate (cum or have an orgasm). In this semen there is sperm. Sperm is what is needed to fertilize an egg and, in doing so, create new life. This process of sperm joining an egg is called conception. When you ejaculate, you will shoot out about a tablespoon of semen. This tiny amount contains up to 500 million sperm cells. A drop of semen, the size of a ballpoint pen head contains 1500 sperm. It takes only one sperm to fertilize an ovum (egg) in a girl or women and make them pregnant.**

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**Care of my Body**

A girl or women experiences a time in which her body changes from a child’s body to an adults’ body. If this has not happened to you yet, it will at some point. This period of physical (and emotional) change is called puberty. This process is natural and is nature way of ensuring that you will be able to have children, if you want.

Even though our bodies may become ready for children, that does not mean that we are ready emotionally or financially to have them. So its important to start to understand your body, and the changes you are going through, so that you can be better prepared to make the right choices...
WHAT DOES IT MEAN WHEN I START MENSTRUATE?
You begin to have periods or menstruate when your body starts to produce eggs, and every month if they are not fertilized—your body will release these eggs with blood through your vagina.

Ovulation is when an egg gets released. It happens about 14 days before a period is due. At this time your body also produces mucus to help sperm live as long as possible inside of you after sex. If the egg is not fertilized, you menstruate. The lining of the womb collapses and is released together with the unfertilized egg.

A menstrual cycle is the time measured from the first day of a period until the last day before a new period starts. The length of the menstrual cycle varies; it can be as short as 21 days or as long as 40 days. It is on average 28 days. When you start first getting your periods the time in between menstrual cycles may vary, so it can be difficult to know when you will have your next period.

Once you start having your period this means that your body is now physically able to have a baby.

WHEN DO ALL THESE CHANGES HAPPEN?
This can start at about age 10. Every girl will develop at a different age and at a different speed. Some girls only start to develop much later, at the age of 16 or 17. All of this is normal.

The first thing you will notice as you start going through puberty is hair growing under your arms and in your pubic area. Your pubic area is located between your thighs, your pubert is hair growing under your arms and in your pubic area. Your pubic area is located between your thighs, and it is your pubic area.

WHAT CAN I DO TO BE RESPONSIBLE AND TAKE CARE OF MY BODY?

Make the decision to wait for sex until you are ready— you can try things like masturbation to satisfy any urges, this is a safe way of pleasuring oneself. Be sure to practice safer sex if choosing to have sex. This is done by using condoms all the time and sticking to one partner.

Speak to a nurse at your local clinic about family planning before you decide to have sex.

HIV / AIDS

Knowing about HIV and its risks will help you protect yourself from getting the virus, or spreading it to others. So let us start...

WHAT DOES HIV STAND FOR?

H Human

I Immuno-deficiency

V Virus

WHAT DOES AIDS STAND FOR?

A Acquired

I Immuno

D Deficiency

S Syndrome

WHAT IS THE LINK BETWEEN HIV AND AIDS?

In order to develop AIDS a person needs first to have been infected with HIV. AIDS is the last stage of HIV infection. A person infected with HIV can over many years develop AIDS as their immune system weakens and opportunistic infections enter into the body.

THE BAD NEWS - HIV DOES NOT HAVE A CURE

However, people that live with HIV can take care of themselves in order to strengthen their Immune System (fence) and live healthy lives for many years. This is called ‘Positive Living’ and it is a way of managing the disease.

There is also hope for people that reach the AIDS stage. The clinics will give treatment (ARVs) for life in order to help rebuild people’s defenses and stop HIV from multiplying and getting stronger.

Remember, HIV testing is the first step in planning your future — whether you have the virus or not.

So now that we know the difference between HIV and AIDS, let us talk about: How can a person get HIV?

HIV CAN BE TRANSMITTED IN THREE DIFFERENT WAYS:

SEX

Any kind of sex: vaginal, anal, oral and mutual masturbation (sex using your hands). In any activity where you come into contact with someone else’s sexual fluids, THERE IS A RISK.

BLOOD-TO-BLOOD

Any time a person is exposed to blood from another person and there is an opening (normally in your skin) where infected blood can enter into an uninfected person (e.g. sharing needles, fights, stabbing, accidents, etc).

MOTHER-TO-CHILD

HIV can be passed from an infected mother to her baby through pregnancy, birth and breast-feeding.

REASONS WHY HIV IS STILL SPREADING:

ALCOHOL & DRUG USE

Being drunk or using drugs makes it easier for you to put yourself at risk because when you are drunk/high it might increase your risky sexual behaviour or you might get into fights easily. Reduce your alcohol intake and your drug use.

EXCHANGING SEX FOR THINGS

Wanting to be loved or wanting nice things is part of life. But when people feel that they need to have the latest designer clothes or expensive things to feel special or loved, this is a problem. This puts people who cannot afford these things at risk, especially when they are willing to have sex so that they can get gifts, money or acceptance from others. Get your facts straight. Your life is more valuable than anything else. You need to LOVE yourself first before you can love others.

MANY SEXUAL PARTNERS

When you have more than one sexual partner at a time or your partner has more than one sexual partner, you become part of what is called a sexual network. If just one person in this sexual network is infected, HIV is easily passed on to everyone else in the network. Remain faithful to one sexual partner, know his/her HIV status, and use condoms at all times.

NOT KNOWING YOUR PARTNER’S HIV STATUS

South Africa has almost 6 million people who are living with HIV and most of these people do not yet know they are infected with HIV. Before starting a sexual relationship, go for a Couples HIV Counseling & Testing session. Both
of you will be tested and counseled together and you will be able to plan your future properly.

NOT BELIEVING YOU HAVE CONTROL

Many people feel as if they are not able to control their future, or have no hope that the future will be good. Because of this, they grow up on living healthy lives. You should understand that you are special and you were born for a purpose. Do not throw your life away.

WHEN MEN & WOMEN ARE NOT SEEN AS EQUAL

Some people in society believe that men cannot control their sexual urges, and this is why their wives or partners often forgive them when they cheat. This is not true: Men are not animals – they choose how they behave. Some women also feel that they cannot challenge and question these kinds of men because the men might become angry, violent or leave them with nothing. Women should get to know their rights and demand that people respect them. Real men PROTECT women.

SEXUALLY TRANSMITTED INFECTIONS (STIS)

Many people in this country have untreated STIs. It makes it easier to get HIV if you have a STI or you are having sex with someone with a STI (read next section to know why). If you have one STI symptom you need to go to the nearest clinic for help, fast.

The good news is that HIV can easily be prevented. Get to know your facts and start living your life based on the knowledge you have.

STI’S

Sexually transmitted infections are transmitted by having contact with the genitals (penis and vagina) of an infected person. This includes: vaginal, oral anal sex and mutual masturbation. Anyone who has sex can get an STI.

SYMPTOMS:

- Unusual discharge
- Unusual smell
- Ongoing burning and/or pain from your vagina, penis or anus.

If you have any of the following symptoms it is important to go to the clinic. Most STIs are treatable in an early stage.

HOW CAN I REDUCE THE RISK OR PREVENT AN STI?

- 100% STI prevention - Abstinence from sex
- Reduce the risk of getting an STI by:
  - Using condoms every time you have sex. This does not prevent Herpes and HPV.
  - Reduce the number of sexual partners

There are different kinds of STIs (e.g. syphilis, gonorrhea, herpes, chlamydia, HIV and many more). Each of them are caused by a different germ.

The good news is that most STIs (other than HIV) can be cured. The earlier you go to the clinic and get treated, the easier it is to cure the infection.

The bad news is that untreated STIs can cause infertility, increase the risk of getting HIV and can cause life-threatening complications.

You can reduce the risk of STIs if you use a condom every time you have sex. But be aware that not all STIs can be prevented with condoms (e.g. Herpes and HPV). If you combine both the use of condoms and reduce the number of sexual partners you have, it will help to minimize your chances of getting STIs even more.

In the early stages most STIs are invisible. You can have a small amount of abnormal discharge and not be aware of it. But even if you cannot see anything, STIs can very easily be passed on to others.

HIV

HIV is also an STI (even though it can also be transmitted through blood and breast milk). HIV is a virus that damages the immune system. HIV cannot be cured. HIV is treatable if you take care of yourself you can live with it for many years.

HOW TO PREVENT A HIV INFECTION?

- Know if you are at risk
- Get yourself tested for HIV
- Know your partners HIV status
- Talk to your partner about past and present sexual history
- Seek treatment if you think you have been exposed to other STIs
- Do not abuse alcohol or drugs
- Male circumcision can reduce the risk of infection by 60%

STIS & HIV

HIV is also an STI (even though it can also be transmitted through blood and breast milk).

If you have any other STI, it makes it easier to get HIV or to give HIV to someone else. This is how:

9. When you have sex with someone who has HIV and who also has an STI, his/her sexual fluids can easily infect you with HIV. This happens because the abnormal discharge from his/her STI contains a lot of HIV.
10. If you have a STI it can make small sores, cuts or breaks in the skin. This is like an open door to your body. Now, HIV can easily enter your bloodstream through these small cuts and breaks.

Get treated for STIs fast! Clinics will give you treatment. If you stop taking the treatment before it is finished, the infection may come back again.

The same applies if you get treated but your sexual partner doesn’t, you might re-infect yourself again and again.

PREGNANCY: HOW CAN I PREVENT IT?

1. Don’t give in to peer pressure

Do stand your ground and wait with sex till you know you are ready. Everyone develops according to their own pace, both psychically and mentally. Do not push your peers in to something they are not ready for!

Learn to say NO

This includes saying no to everything you feel uncomfortable with. Whether it is refusing to have physical contact, have sex or have sex without protection, there is nothing wrong with standing up for yourself. The only way to avoid pregnancy completely is to abstain or to combine a condom with birth control.

2. Use protection

Remember any type of sexual intercourse can cause pregnancy. The best thing to do would be talk about contraception choices with your partner before having sex.

Birth control: The pill or injection: is only 99% effective when used properly. If it is ever missed or taken at the wrong time it may not be as effective. The pill or injections are available for free at the clinic. Birth control does not protect against HIV and other STIs.

Condoms: minimize the chances of getting pregnant. However a condom can break if there is too much friction; if it is used past its expiry date and is brittle; if it is used incorrectly; or if it is not taken off immediately after intercourse and semen spills. Condoms are given away for free at places such as the health clinic.

Emergency contraceptive pills or morning after pill can prevent you from becoming pregnant, after having unprotected sex. The pill works up to 72 hours (three days) after sex. The emergency contraceptive pill works best if taken within 12 hours of having unprotected sex. The morning after pill is free and available at the clinics.

If you are not sure about your best options, visit your doctor or nearest health clinic. They are not allowed to tell anyone about what you spoke about, and will give you advice.

SEXUAL ABUSE

What can you do to prevent sexual abuse?

- Go to a public place when meeting someone for the first time and let someone know where you are going.
- When you go out to travel or walk somewhere, do so with people that you trust and will look out for your safety.
If you go out for drinks, watch your drink. Don’t accept drinks from strangers or leave your drink unattended.
• Avoid travelling home alone especially at night. It may not be safe to be intimate with someone if you or they have been drinking or using other substances.
• Call out for help if you suspect you are in danger, don’t be afraid to make a lot of noise or to make a scene.
• If you feel that someone you know makes you feel uncomfortable talk to an adult about it.

WHERE TO GET HELP?

HEALTH CLINICS:

At the health clinics you can get more information about pregnancy, STIs and family planning. They are youth friendly and offer also free pregnancy tests and morning after pills.

TOLL FREE NUMBERS:

Teen Pregnancy helpline
Emergency contraceptive helpline:
National drug line
Cape Town Alcohol and drugs helpline
AIDS Helpline
HIV 911
(or dial *120*448# from your cell phone).

PURPOSE:

The purpose of this lesson is to discuss relationships and teen-pregnancy.

OUTCOMES:

By the end of the session, learners in your class should be able to:
• To challenge learners about the seriousness of teen-pregnancy
• Illustrate the factors that make a relationship work and what is acceptable and unacceptable behaviour in a relationship.
• Discuss coping strategies for not being in a relationship and for developing friendships.
• Begin to change the social norms so that young people put effort into respecting each other in relationships.

MATERIAL NEEDED:

• Attendance Register
• Poster

SESSION:

Introduction (5 minutes)

Greet the class, and ask them how they are doing (start passing the attendance register around and remind the class to sign). Note: make sure when the attendance register is passing around someone is keeping an eye on it. Ask the group if they remembered what we spoke about last session? (Allow for 2 or 3 answers). Acknowledge their answers and say that last session we talk about ‘Talking about Sex’. Well done!

Activity 1: Teen-Pregnancy

(20 minutes)

1. Divide the class in two groups boys in one side of the classroom and girls in the other side.

2. Two Peer-Educators show the poster – “I’ve had my fun with you, I’m done” - in the two sides of the room. Show to the girls and to the boys. Read the say in the poster out loud.

3. Peer-Educator ask the group to talk about what they think or feel about the statement. Ask participants to put their hand up before starting to talk. Preferable you should allow people from each of the sides to have turns.

4. Some trigger questions that you can use in case the group does not discuss enough:
• It’s really only her baby. Why?
• Who has the main role to care for a child the mother or father and why?
• What is the role of a father in the upbringing of a child?
• How does he know is really his baby?
• What if the girl brings the baby to him and says “I’ve had my fun with you, I’m done… It’s your baby now!”
• What if the girl brings the baby to her mom or granny and say “I’ve had my fun with you, I’m done… It’s your baby now!”
• Who is really the victim in this situation? (unborn child)

5. Thank the class for their participation in the discussion and conclude.
It takes two people to make a baby! Even when a couple is not married the father still has legal responsibilities towards his child. Legally he will need to pay maintenance until the child, as an adult, can provide for him/herself. But the role of a father is far bigger than just providing financial support.

To have a child is a huge responsibility and it should be thought and planned very carefully. In an ideal society children should be born in loving and caring environments where both parents share responsibilities in raising the child.

Families are the most important element in the development of a healthy child. They need to provide physical supervision and protection, socialization, finances, love and emotional support, and culture.

Many problems of society today are because families are dysfunctional. Many times children are raised by children or single guardians, they don’t even know who is their father and overall families don’t take care of children as they should.

My question to the group and you don’t need to answer is - how many of us live in this situation? Or how many people we know live in this situation?

Because we are the next generation of parents is our responsibility to STOP this now. We can not do to our children what was done to us.

**ACTIVITY 2: CONCLUSION**

Peer-Educator asks the class to go back to their seats and talks them through the following questions:

- Do you think the couple knew when they fell in love that this is how they will end up? Why?
- What do you think this couple lack? (possible answers: respect, responsibility, honesty, proper planning, information, proper communication among others)
- In a romantic relationship what are the differences between the falling in love stage and breaking up stage?
- What are the things that would lead people to break-up?

**CONCLUDE BY SAYING:**

People fall in and out of love everyday and there is nothing wrong with feelings changing after some time. The aim of being in relationships is to be happy and if a person feel that it is not working any longer they should move on. The only certainty of when we start a relationship is that we never know how it is going to end up.

However we must commit to do everything under our power to find relationships were we are loved, respected and protected. We must also commit to only have children when we are grown up and can properly care for them. The decision of having a child must be planned and taken by both parents when they are mature enough and ready.

Think about this - we (ourselves and our future children) all deserve it.

**ACTIVITY 3: REFLECTION ON THE TALK**

Peer-Educator informs the class that this was the last Talk for the year. We have been with you six times this year.

Before we finish I would like us to reflect in each of the sessions:

1st Session was about Protection – Be Safe
Who can tell me something they remember about this session?

2nd Session was about Substance Use
Who can tell me something they remember about this session?

3rd Session was Making Good Decisions
Who can tell me something they remember about this session?

4th Session was about Boys, Girls & Gender
Who can tell me something they remember about this session?

5th Session was about Talking About Sex
Who can tell me something they remember about this session?

6th Session was today and was about Relationships & Teenage Pregnancy
Who would like to tell me something they think they will be able to apply in their lives about this session.

On behalf of my group of Peer-Educators and Life Choices it has been a pleasure to work with all of you.

Thank you.

**RECOGNIZING DISTRESS**

Remember that some learners could be dealing with emotional situations at home or in school. Their feelings will be stimulated by the discussions in the classroom. In addition to situations and emotions related to HIV/AIDS, they may be dealing with fear, loneliness, family problems, abuse, and the whole range of more common but still painful adolescent issues. Some learners (and for that matter, some peer-educators) might become upset; they may be able to name exactly what they are feeling and where the feeling comes from.

But other learners either will not know, or will not feel free to say, what is troubling them. They will show in their behaviour the distress they cannot put into words. This may take different forms:

- **Being unusually quiet and withdrawn during group activities.**
- **Being unusually engaged and active in group activities.**
- **Being restless or sleepy, unable to focus, needing to move about instead of sitting still.**
- **Being unusually quiet and withdrawn during group activities.**
- **Being unusually engaged and active in group activities.**

These signals must be recognized as requests for help. They are as far as these peers can go to say, “I am having a hard time and need to talk about it.” When a peer-educator sees these signs, he/she needs to follow up after the class with a simple, brief, private and concrete offer for assistance. The best way is to say something like, “It seemed to me that you were (name the behaviour you saw) today and I know from my experience with other peers that sometimes it’s because you may be upset about something.” Would you like to talk about it?”

The peer may accept or reject the offer at that moment, but will know that he/she can count on you if needed. And if the peer is in fact not upset at all about anything, he/she will say so, he/she will not be insulted or offended by the offer of help.

**HOW CAN A PEER-EDUCATOR ASSIST A PEER?**

What can a peer-educator do about the situation a peer faces? During the Talk, the answer is: Get more information and encourage the peer to get help. Outside the Talk, peer-educator may be able to assist improve some situations, but will usually need to bring the member to a Facilitator/Educator who can find the appropriate services.

What can a peer-educator do about their emotions their class members are feeling? Both during and after sessions, the answer is: A lot. You can listen, support, and make the member feel there is nothing at all wrong with having feelings. The peer-educator can also help peers see when they are hurting themselves or taking risks because of these feelings. A peer-educator can assist peers to see that feeling bad does not have to cause, and does not excuse, doing things that are unhealthy.

What can a peer-educator do about the interpretations peers have of their situations? Here is where a peer-educator can have his/her greatest impact on what young people feel or do. People of all ages do not see the Situation. They see their version of the situation, interpreted according to their limited information, the comments of others, their beliefs, their feelings about themselves, etc. Their interpretation and their
understanding of what they should or can do, is often not accurate and does not feel good.

Some people become resilient – they come out of difficult situations with lasting strengths. Others do badly in the same situations. The difference is usually not in the situations they face, but in whether or not they receive assistance in understanding the situation accurately and feel good about themselves in spite of it.

A peer-educator can assist by getting peers to see beyond their own interpretations and emotions and by referring them to professional help if they need it. Important things for a peer-educator to remember about the meaning of ‘assistance’ include:

1. SEEING PAIN IS NOT THE SAME AS CAUSING PAIN
   Peers are already feeling pain. You are just helping them express it, bringing it into the light of day, and therefore allowing them to accept and cope with it. Talking about issues and cry are often the first steps towards improvement.

2. HELP IS OFTEN INVISIBLE TO ALL
   Peers may become angry, or withdraw, or deny that the feelings or situation exist, or simply ignore your offer of assistance. You may feel you said the wrong thing, or even made the situation worse. But help is a gradual process and the person receiving the help often does not know until much later that he/she used the help. The helper often never finds out at all. Help is very much like planting a seed.

3. WHAT YOU SAY IS ONLY PART OF WHAT YOU COMMUNICATE
   More important that your words is the concern you show and your message: “Whatever is upsetting you, it’s better to talk about it, and I am ready to listen and will try to assist.”

4. RECOGNISE THE LIMITS OF WHAT YOU CAN DO
   You may not be able to change the situation. You may not be able to help the peer to feel better, or change the beliefs and attitudes that confuse his/her interpretation of the situation. You can only try to assist and support.

5. HELP IS OFTEN NOT JUST A CONVERSATION
   By listen to a peer and showing that you care is probably one of the most important steps to recovery. However assistance goes beyond talking and peers should always be referred to a facilitator, a specialised services or to a toll free number.

A Heart2Heart is exactly that - from one heart to another. It is a confidential and nurturing conversation between a peer-educator and his or her peer.

Sometimes life can get hard and all we need is someone to listen to us and understand or simply provide us with more information about how and where we can get help. These conversations are different from ordinary chats in the following ways:

- The peer-educator starts a conversation with his/her peer in order to share some of the knowledge and expertise that the peer-educator has gained in Dream2Be
- A peer-educator starts a conversation because he/she notices that one of his/her peers is upset
- Someone comes to the peer-educator because he/she knows that peer-educators are equipped with the right information on certain topics such as relationships, drugs and more

Be aware:
Peer-educators are not professionals (counsellors, doctors, social workers, caregivers, etc.). Your job as a peer-educator is to create awareness amongst your peers around different topics of interest to them and about services available in their communities. Peer-educators should identify peers in need of support and refer them immediately to specialized services where they can be helped. If as a peer-educator you do not know where to refer a peer, don’t worry, “Say Auntie”! Talk to your Life Choices Facilitator or to Life Choices Social Worker to get the necessary support.

A Heart2Heart is its own special tool. This tool is unique because a Heart2Heart is confidential, you cannot record the person’s name.

HOW DOES A PEER-EDUCATOR RECORD WHAT HAS BEEN ACHIEVED?
Heart2Heart has its own special tool. This tool is unique because a Heart2Heart is confidential, you cannot record the person’s name.

HOW DOES A PEER-EDUCATOR FILL IN THE HEART2HEART RECORD SHEET?
Start by filling in the name of your school. Each time you conduct a Heart2Heart fill in one row with the relevant information.

WHAT IS THE ROLE OF A PEER-EDUCATOR IN A HEART2HEART?
- Give information about where the person can get help
- Show respect by keeping what he or she was told confidential – Shhhh!!!

Be aware:
Some issues (depression, suicide and abuse among others) will need IMMEDIATE referral. Discuss the matter with your facilitator or a professional ASAP.

Listen with understanding and no judgment
- Give correct information about the topic or “Say Auntie”
**COMPLETE ALL THE COLUMNS:**

**Column 1:**
The date that the Heart2Heart took place.

**Column 2:**
The sex (male or female) of the person to whom the peer-educator talked.

**Column 3:**
The date of birth of the person to whom the peer-educator spoke.

**Column 4:**
If the person is in or out of school.

**Column 5:**
The topic about which the peer-educator and person chatted. At the bottom of the page is a list of topics and their codes. For example if the Heart2Heart was about HIV/AIDS you would enter the number 1 in this column.

**Column 6:**
Did you refer the person? Yes or no?

**Column 7:**
Where did you refer them to? E.g. Clinic, Life Choices Social Worker, etc.

**Column 8:**
Explain the Heart2Heart in a few words. E.g. “A girl in my school confided in me the problems she is facing with her boyfriend. Her boyfriend is cheating on her with another girl. I listened to her problem and I tried to help her understand that she deserves a boyfriend who respects her. I referred her to a Life Choices Social Worker”.

**IMPORTANT:**
When you have 10 Heart2Hearts in the form you must close the form to give it to your facilitator.

Fill in the boxes at the bottom TOTAL NUMBER of Heart2Heart and TOTAL NUMBER of referrals.

Write your name, the date and sign the form to declare that everything in the form is the truth.

Each term, each peer-educator can complete about 30 Heart2Hearts. For every completed form you hand in (that’s 10 Heart2Hearts) you will receive 2 points. If you do more than 30 Heart2Heart per term, you will compete for the “Reaching for the Stars” bonus.

**Points will only be given once your facilitator has received all of necessary proof that a Heart2Heart has occurred.**

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**HEART2HEART FORM:**

<table>
<thead>
<tr>
<th>School name:</th>
<th>Details of peer:</th>
<th>Topic or code:</th>
<th>Did you refer?</th>
<th>Where did you refer?</th>
<th>Explain Heart2Heart in few words:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td>M/F:</td>
<td>Date of birth:</td>
<td>In/out of school:</td>
<td>Yes or No?</td>
<td>Explain Heart2Heart in few words:</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1  - HIV/AIDS
2  - VCT
3  - STIs
4  - Rape
5  - Relationship Problems
6  - Depression
7  - Suicide
8  - Family Problems
9  - Pregnancy
10 - Drug/ Alcohol
11 - Gangsterism
12 - Abuse
13 - Grief
14 - Other

I declare that everything that I have written in this form is the truth.

Name of peer-educator: ______________________
Date of birth: ______________________
M/F: ______________________
Signature: ______________________
Google has changed the world. The more you Google, the more you know. Dream2Be has its very own Google search engine: YOU!

Once a term, as peer-educators you go out to different community resources and organizations in your area and find out all you can about the services they offer.

**WHAT IS THE PURPOSE OF GOOGLE IT?**

As a group of peer-educators you need to be aware of all resources available to you and to your peers. When peers are in need it is your job as a peer-educator to refer them to the appropriate service.

**THE KINDS OF THINGS THAT YOU WILL BE LOOKING AT ARE:**

- The overall feel of the organization/service
- The staff and their attitudes towards young people
- The services offered to teens
- The times at which these services are available to teens

**HOW DOES A PEER-EDUCATOR RECORD WHAT HAS BEEN ACHIEVED?**

Each Google event has its own tools, which need to be filled in each time you go out and Google it.

### GOOGLE IT LOG SHEET:

As a group of peer-educators you need to ensure that a Google it Log Sheet is completed for each visit. Once completed, the Log Sheet needs to be signed AND stamped (if possible) by a person in the organization that was visited. This needs to be handed in to your facilitator as proof that a Google it happened and you can be awarded points for it.

**Google it**

### GOOGLE IT INFORMATION PAGE:

Each peer-educator attending a Google it activity should fill out an information page in his/her manual.

- This information is kept by each peer-educator in their "Dream2Be" manual as a reference site if a peer needs the service.
- Google it activities are open to all peer-educators and you will get 5 points for every Google it you attend.

**Points will only be given once the Google it Log Sheet has been received by your facilitator. You can also get points for being on time for the activity.**

<table>
<thead>
<tr>
<th>Name of Community resource:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact details of resource:</td>
</tr>
<tr>
<td>Date of visit:</td>
</tr>
<tr>
<td>School name:</td>
</tr>
<tr>
<td>Name of peer-educator:</td>
</tr>
</tbody>
</table>

**Organization details:**

<table>
<thead>
<tr>
<th>Does your organization offer any services for teens?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes [ ] No [ ]</td>
</tr>
</tbody>
</table>

Please describe these services in detail:

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<table>
<thead>
<tr>
<th>Are your services free of charge?</th>
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<td>Yes [ ] No [ ]</td>
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If services are not free, what are the charges?

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<th>And if teens use your services, what method of payment do you accept?</th>
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<td>Yes [ ] No [ ]</td>
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Would your organization like youth to volunteer?

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<th>Please list the tasks that youth could do if they were to volunteer in your organization?</th>
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Any other question or comments?

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<th>Any other question or comments?</th>
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Organization details:

Does your organization offer any services for teens?
Yes ☐ No ☐

Please describe these services in detail?

Do teens need to be referred in order to use your services or can they come on their own?
Yes ☐ No ☐

What time and days are your services available to teens?

Are your services free of charge?
Yes ☐ No ☐

If services are not free, what are the charges?

And if teens use your services, what method of payment do you accept?

Would your organization like youth to volunteer?
Yes ☐ No ☐

Please list the tasks that youth could do if they were to volunteer in your organization?

What time and days are your services available to teens?

Any other question or comments?


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Any other question or comments?
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**Does your organization offer any services for teens?**

- Yes [ ]
- No [ ]

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- Yes [ ]
- No [ ]

**What time and days are your services available to teens?**


**Are your services free of charge?**

- Yes [ ]
- No [ ]

**If services are not free, what are the charges?**


**And if teens use your services, what method of payment do you accept?**


**Would your organization like youth to volunteer?**

- Yes [ ]
- No [ ]

**Please list the tasks that youth could do if they were to volunteer in your organization?**


**Any other question or comments?**


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**Name of organisation visited:**

**Telephone no:**

**Fax no:**

**Address:**

---

**Brief description of the organization and the visit:**

---

**Name of contact person:**

**Date:**

---

**Signature of contact person:**
NAME AND SIGNATURE OF PEER-EDUCATORS WHO PARTICIPATED IN THE VISIT:

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of birth</th>
<th>M/F</th>
<th>Class</th>
<th>Time of arrival</th>
<th>Signature</th>
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FOR OFFICE USE ONLY:

M&E: Name: ____________  Sign: ____________  Date: ____________

Supervisor: Name: ____________  Sign: ____________  Date: ____________

In this activity each peer-educator will be responsible for a certain number of peers in their class.

The job of the peer-educator is to keep an eye on their “friends” and make sure that they attend school and classes. This does not mean that peer-educators run after their peers.

All it means is that as a peer-educator, you keep an eye on your peers and you monitor their attendance to school. Each week you report to your Life Choices Facilitator any peer you are concerned about because he/she misses too many days or bunks classes.

When you are concerned with a peer, the first step is, talk to her/him and find out what is going on. After if there is a problem that they need help with refer them to the relevant services.

This task helps peer-educators to fulfill their role as a ‘Looker’. In this way you will be identifying and helping your peers who may have difficulties.

If done diligently this activity could earn you 20 points per year (2 points per month)!
Please make sure each day you tick off the names of your friends to mark if they are in class or absent or bunking.

Month: Checked by: Date:

Key: b - bunking, a - absent, s - sick

Notes:
Please make sure each day you tick off the names of your friends to mark if they are in class, absent, or bunking.

| Name: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|-------|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|

**Key:** 
- b = bunking
- a = absent
- s = sick

**Notes:**

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**Month:** Checked by: Date:

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**Month:** Checked by: Date:
Please make sure each day you tick off the names of your friends to mark if they are in class or absent or bunking.

| Name: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
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| Name: | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|-------|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|

**Key:** b = bunking, a = absent, s = sick.

**Notes:**
| Name | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|------|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|

Please make sure each day you log all the names of your friends to mark if they are in class or absent or bunking.

Key:
- b = bunking
- a = absent
- s = sick

Name:
Date:
Checked by: