



**Practical
Life Skills:**
Workshops
for care leavers
and those
remaining in care
aged 10 to 13 years old

FACILITATOR'S GUIDE



MacArthur
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Changing
THE WAY WE
care™

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The resources consulted include:

- Original iteration: Care Leaver Personal Development, Career Employability, and Learning Skills Manual, Kenya Society of Care Leavers (KESCA) with Sandra Githaiga
- United States Peace Corps. (2001). Life Skills and Leadership Manual. Accessed at: <https://files.peacecorps.gov/library/M0098.pdf>
- Brakarsh, J. (2017). Singing to the Lions: A facilitator's guide to overcoming fear and violence in our lives. Accessed at: <https://www.crs.org/our-work-overseas/research-publications/singing-lions>
- REPSSI. (2017). The Journey of Life Trainer's Manual Global Edition: Facilitator's Guide. Accessed at: https://www.crs.org/sites/default/files/tools-research/jol_global-main_cig_web_0.pdf

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ACRONYMS

CCI	Charitable Children Institutions
CTWWC	Changing the Way We Care
GOK	Government of Kenya
HIV	Human Immunodeficiency Virus
KESCA	Kenya Society of Care Leavers
SBC	Social and Behavior Change

INTRODUCTION

Children and young people who grew up in care¹ face challenges that are often different from the challenges faced by other young people. They often leave care without any definite or tangible support from the government, little to no support from the childcare institution (CCI) they are leaving, and sometimes limited connections to family or community. Additionally, young people who have spent time in institutional care can have social and behavioral challenges.² A 2011 Kenyan study of 122 care leavers found that the majority were “stuck in transition,³” feeling excluded from society and poorly equipped for life outside of care. Many had limited coping strategies and lacked the safety nets or supportive community networks that young people growing up in families have. They described experiencing stigma and discrimination. Global research describes risks to care leavers including early marriage, lower educational attainment levels, unemployment, mental health problems, drug use and abuse, and conflict with the law.⁴

This facilitator’s guidebook was developed by care leavers for care leavers and children remaining in care. It has been developed based on the myriad of challenges shared and experienced by care leavers with the hope that it will support others in and leaving care.

Who are the workshops for?

The activities and materials are designed for young people between the age of 10 to 13 years. These young people are in the process of transitioning out of care or those who have already left care.

The topics and activities are for working with children and young people aged 10 to 13, but using age-appropriate activities, examples, and information.

Who should use the facilitator’s guidebook?

- Caseworkers
- Caregivers
- Facilitators of sessions for children in care and care leavers
- Project staff who work with children in care facilities and care leavers
- To train facilitators

Why run workshops with young people?

The focus of this facilitator guide is to invoke behavioral change. This behavioral change is at the core of these life skills sessions for young people, aiming to help them develop lifelong reasoning, thinking, analyzing, personal care routines, and interpersonal skills. It also includes self-awareness, problem-solving, negotiating skills, decision-making, creative thinking, critical thinking, effective communication, interpersonal relationship skills, conflict resolution, empathy, coping with emotions, stress management, and understanding budgeting and money management. The approach aims to empower and guide care leavers and those remaining in care to be competent and confident. The methodologies are interactive, innovative, and fun. Case studies, stories, group discussions, role-plays, and games are all used and can be adapted depending on each session.

1 The term “care” as used here refers to alternative care of all types as described in the glossary located in Annex 1.
2 Browne, K. (2009). *The risk of harm to young children in institutional care*. London: Save the Children.
3 KESCA, Koinoinia (2011). Kenya Careleavers Conference Report “How I left care”
4 Ibid.

How should the workshops be run?

The facilitator's guidebook is organized into **10 topics (15 sessions)**; each module is estimated to run for 90 minutes. Each module section includes key activities with directions, an explanation of key concepts, suggestions for adaptations, materials needed, and homework assignments for participants. Icons make it easy to find information. **There is also background reading on each of the modules in the appendices, which the facilitator should take time to read through before the module.**

Icon Definitions



Materials needed such as flipchart and pens



Additional notes and references to annexes with further information for the facilitator



Key points for the session.



Activity



Time required



Suggested home practice to be completed by participants before the next session to check understanding and practice new skills



Explanation of key concepts



Where an activity, session or topic differentiates from the Facilitator Guide for working with 10- to 13-year-olds.

OVERVIEW OF THE SESSIONS

SESSIONS	OVERVIEW
1. Welcome, introductions, and beginning the journey	This session introduces the program to participants and encourages them to start thinking about life skills and the transition out of care.
2. Effective communication	This session will create awareness of the importance of effective communication. The session builds skills on conflict resolution, assertion, and teamwork.
3a. Keeping myself safe: how to keep yourself safe and what to do when you feel unsafe	This session looks at violence and abuse—how to recognize, respond to, and report it, as well as proactive steps to support young people to stay safe, including online.
3b. Keeping yourself safe: healthy and unhealthy relationships	This session enables care leavers to build healthy relationships, including during and after reintegration. It aims to equip care leavers with knowledge on the way healthy relationships look and feel.
4a. My health: my body	This session is designed to support participants to start thinking about career choices and the steps they may need to take to achieve their desired career path.
4b. My health: HIV	This session equips young people with knowledge and facts about HIV.
4c. My health: mental health	This session supports care leavers to stay mentally healthy and recognize and respond to mental health issues using positive coping methods.
4d. My health: resilience	This session enables care leavers to build their resilience. It helps them adapt, cope with, and rebound from traumatic, disruptive, and stressful life events. For example, the transition to secondary school, moving CII or leaving a CII, experiencing discrimination, bullying or abuse, or losing a friend or family member.
5. Making safer and healthier choices	This session equips children and young people with skills] to identify risky behaviors and know how to make safer and healthier choices.
6. Gender roles	This session empowers care leavers to recognize and respond to unsafe and unhealthy situations and relationships, including family settings.
7. Starting to think about my career path	This session supports care leavers to think about what they might want to do as a career, how to conduct job searches, and build their resume.
8. Money matters	This session aims to equip care leavers with basic budgeting and saving skills.

SESSIONS	OVERVIEW
9. Citizenship	This session helps equip care leavers with knowledge and skills on the values and behaviors that define them as Kenyans. It also outlines the essential documents that may be needed and how to acquire them. The session lists the various social protection programs that exist and how to enroll in those programs.
10. Managing changes in our lives	This session aims at preparing participants for coping with significant life changes, including life outside of care. The session is intended to help the participants recognize the tools they must manage change, including moving on from a CCI.
11. Graduation	This session enables participants who have attended 80% of the sessions to celebrate the completion of the program alongside their invited guests.

SELECTING AND TRAINING FACILITATORS

A life skills facilitator is a trained individual who helps participants identify and solve problems by structuring the discussion and guiding the activities. They have been trained through the Practical Life Skills Guide and know how to conduct sessions with young people currently in care, those preparing to leave, or young people who recently left care. They promote new knowledge and skills toward developing behavioral changes. A life skills facilitator leads group sessions in the institution, community, schools, or homes.

A Facilitator will...

- Be twenty years or older
- Have experience working with children in care and/or care leavers; or be a care leaver (see below)
- Have a secondary school certification or higher
- Have attended a five-day training on this guide and received a certificate of completion
- Have attended safeguarding/child protection training within the last two years
- Have a criminal records check completed within the last two years, which is signed off by the hiring organization, and additionally list two references
- Have read, understood, and signed the KESCA child protection policy
- Understand the diversity of children and young people in care, including children with disabilities, different genders, and ethnic backgrounds.

It is beneficial if the facilitator knows the participants. If they do not, a trusted adult who knows them well must be present. It is essential to have someone the participants trust to talk to if they become upset, find any of the topics challenging, or need additional support. Ideally, the young people themselves should agree with the additional adult who is present during the sessions.

Supporting care leavers become facilitators

Care leavers can be supported and trained to become fantastic potential facilitators. However, it is recommended that they co-facilitate sessions initially to develop their skills, confidence, and experience. Co-facilitating these trainings can be a great starting point for them. It is important that care leavers do not lead the facilitation or facilitate alone until they have significant experience co-facilitating. Some of the sessions discuss sensitive topics and participants may have experienced trauma. **Only facilitators who are experienced in supporting young people to express and work through trauma and challenging situations should facilitate these sessions.**

CARING FOR THE FACILITATOR

Being a life skills facilitator is hard work. Caring for yourself and receiving supportive supervision is vital to this work. Without support you may experience ‘burn out,’ and your work can begin to interfere with your own wellbeing. As a life skills facilitator, you will be supporting vulnerable young people who may have had upsetting and/or traumatic experiences. This can influence you—you may worry about the wellbeing of the young people, and you may have children in care and/or care leavers disclose past or current abuse to you (if you do, you must follow your organization’s safeguarding policy).

Working with children in care and care leavers is both rewarding and challenging:

Rewarding because:

- You feel you can help
- You often see the lives of children and young people improve
- You feel you are doing something meaningful
- You are developing skills and knowledge around facilitation and working with children in care and care leavers

Challenging because:

- Some young people do not want to change or it is not the right time or setting for them to change
- You worry or are upset about the trauma experienced by some participants
- You may be reminded of your own difficult experiences
- Your workload is too much and you cannot give enough attention to each child or young person
- You do not have enough resources to help and you feel helpless
- You feel you do not have enough knowledge or skills to help
- You do not take time to take care of your own needs

RECOGNIZING AND DEALING WITH STRESS

Some stress is normal with any job, but too much can be harmful and counterproductive. Signs of stress include:

- 1. Burnout:** “All I do is work, I do not have a life.” A feeling of dread, being overwhelmed, a lack of confidence, ineffective time management, no excitement or energy, and a desire to escape
- 2. Vicarious (or Secondary) trauma:** “I feel hurt and afraid too.” As a result of working with people who have been traumatized, you feel similar feelings of anxiety, hopelessness, depression, sleep difficulties, loss of appetite, and/or fear.
- 3. Compassion fatigue:** “I am so tired of caring for everyone else” - Feeling detached from people, especially those with whom you work. Depersonalization—children in care and care leavers are just “cases,” not real people in need. Feeling that no one notices or appreciates how hard you work and how much you go through to help.

Burnout **is real but preventable**. Here are some tips to help you deal with the stress that comes with being a life skills facilitator:

- Care for yourself first before you care for others and make time to do things you enjoy doing
 - Get adequate sleep, nutrition, and exercise
 - Find time for relaxation, hobbies, and recreation
 - Attend to spiritual self-care—meditation, prayer, or attend mosque/church
- Participate in a monthly debrief/supervision session
- Have a one-on-one session with a trained counsel or when issues arise or, as a minimum, quarterly
- Participate in monthly meetings with other service providers such as project staff, commu-

nity health volunteers, and volunteer children officers (where challenges or successes are discussed)

- Talk to a trusted colleague about burnout
- Separate work from your personal life
- Attend workshops and career enhancing opportunities
- If you are concerned about your levels of stress or feel depressed or anxious, seek professional help

A job aid for assessing your level of stress is in annex 4.

SUPPORTIVE SUPERVISION FOR FACILITATORS

Supervisors are those qualified to serve as trainers in the **Practical Life Skills Guide**. Each supervisor is responsible for a group of facilitators and is expected to provide you with mentoring and support, known supportive supervision. It serves the following purposes:

Protective

- Supports facilitators to proactively identify any gaps in their knowledge and/or experience and find solutions to help address those gaps so that sessions empower, rather than inadvertently cause harm to children in care and/or care leavers
- Provides a safe space for facilitators to discuss concerns and things they felt did not go as well as they had hoped

Supportive

- Can assess facilitator's capacity and competence in carrying out their roles
- Help to address facilitator's lack of experience, knowledge, and/or confidence
- Build trust and respect between facilitator and supervisor
- Encourage and support the facilitator

Informational

- Supervisors use their skills, knowledge, and experience to help facilitators grow in confidence and ability
- Monitors program gaps, challenges, and successes experienced by facilitators
- Supervisors give relevant information to facilitators and participants

Ideally, your supervisor sits with you monthly for a debrief session. The debrief session will focus on helping you understand your feelings, thoughts, and behaviors, as well as discuss any work-related challenges you are facing. He or she may review notes from the previous time you met so that questions and actions can be followed up. During supervision, you can discuss:

- What is going well? What do you like about your work?
- What concerns do you have? What challenges do you face?
- Is the workload manageable? Any experiences of stress?
- Do you need any information or skill practice?
- Are there any difficult participant situations you need support with (be sure to maintain confidentiality principles unless you have a child protection concern)?

Supervision works best when you use active listening and open communication to probe for further details when needed. Discussions should be kept in confidence concerning any participant information and your challenges and successes. Supervision should never be used to:

- Gossip about other colleagues
- Be spent as recreational time
- Discuss topics irrelevant to work

Supervision might sometimes be done with a group of facilitators to build solidarity, exchange information, share common experiences and problems/solutions.

Everything discussed in supervision should be kept confidential unless the supervisor or facilitator is concerned that a child or adult is at risk of harm. If so, the organizations' safeguarding protocol outlined in the safeguarding policy should be followed.

PREPARING TO FACILITATE

Once a facilitator has been trained on the Life Skills Guide and has received child protection/safeguarding training, they are ready to share knowledge, skills, and support to children in care and care leavers. The sessions can be run weekly or fortnightly in groups. The sessions should be spaced out just enough to allow participants to practice what they have learned and not long enough to encourage absenteeism or break learning continuity. They should take place in the organization or another public space.


Before you can start, you must determine:

- Who are the participants?
- How often will you meet?
- Where will you meet?

Who should participate?

Any child or young person (10 to 13) who has recently (in the last two years) left care or who is preparing to leave care in the coming 3 to 12 months can participate. You may also decide to have single or mixed-gender groups.

For 18 to 25-year-olds, refer to the Life Skills Guide for 18 to 25-year-olds. For 14 to 17-year-olds refer to the Life Skills Guide for 14-17-year-olds that supports facilitators to select which activities from the two facilitator manuals are most applicable to their group.

 *Note: When planning to facilitate within a care setting like a CCI or a group home, you need to work with the management of the institution to agree with participants on where sessions will be held, how often, and which staff member(s) will attend to support the young people.*

How can I include participants with disabilities?

All activities can be easily adapted to be suitable for participants with disabilities. Some participants may require reasonable adjustments to support their participation, which can be easily done. This may include a larger print copy of the participant handbook and bigger writing on the flipchart. Others may require more planning, such as finding a space to run the sessions that has wheelchair access.

Some disabilities are not visible, so it is worth checking with all participants beforehand to note any disabilities or additional needs they would like the facilitator to know about before the program commences. Some activities may be adapted to include the perspectives of participants with disabilities. The activities may include discussions about the way a disability may impact communication (session 2), mental well-being (session 4), access to services (session 9), and the transition from care (session 10).

Groups or individual sessions?

All sessions will be conducted in a group setting. If a participant misses a session, encourage that person to meet with other participants to review key points. If you need to run an individual catch-up session, there must be another adult present. This additional adult must be someone who the young person knows and trusts. You should not be alone with this young person at any time. This is also useful practice with people who are over 18 years who may be at greater risk of abuse due to their care experiences.

How long should each session be?

Each session is 90 minutes. However, some groups may be larger, be more inclined to engage, or may need more support; plan on allowing an additional 10 to 15 minutes per session if possible. Some groups may have a shorter attention span, so you may choose to shorten the length of each session. It is estimated that approximately 19 hours is needed to cover all of the content.

Each session ends by giving participants homework to empower them to practice new skills. Encourage all participants to do their homework. This should be reviewed before the start of any subsequent session.

Prepare before each session

Before each session, review the lesson content and activities. Prepare any materials that will be needed and make sure you understand how to conduct the activity. Read all instructions and make sure you understand the age group adaptations. Review the previous sessions' homework.

General session flow:

- Opening and review of session objectives
- Review of homework
- Introduction of new content
- Activities
- Re-cap and introduction of new homework

TIPS FOR FACILITATING

- Be respectful to all participants
- Do no harm: do not force participants to tell their story, always ensure confidentiality, follow up with anything that was promised, and do not make promises you cannot keep
- At the end of each session, summarize the key points and check for understanding from participants
- Pay attention to scheduling - take note of important events that may hinder attendance or concentration
- Support participants by reviewing or assisting with homework
- Promote diversity and inclusion (gender and disability)—set a tone of zero tolerance for discrimination or stigma
- Keep participants involved by eliciting answers from them rather than lecturing to the group—keep it fun and be flexible
- Be supportive by being a good listener
- Model agreed-upon ground rules about confidentiality, time keeping, and respect. For example, always arrive on time to greet participants as they arrive
- Practice good listening skills and intervene if necessary—follow up individually as needed
- Encourage participation - support quieter participants through small group work
- Use a variety of facilitation techniques/methods such as brainstorming, games, art, and skits.
- Take the activities outdoors; being outside naturally adds opportunities for movement, various sounds, and more. A change of scenery can also help reluctant participants engage more and participate more freely
- Be sensitive to the reality that participants have different experiences. Each person is on a different journey and will have different views and opinions—communicate this as a strength rather than a weakness.

In supervision, be sure to share other ideas for facilitating and managing groups.

CONFIDENTIALITY

Confidentiality must be honored at all levels through the information-sharing principles listed below. These principles should be upheld the facilitator, but also should be expected of all group participants. Facilitators should make sure they understand their obligations and explain the principles of confidentiality to the group.

- Participants own their information, not the facilitator or any organization. It is the facilitator's

responsibility to protect the participant's privacy regardless of how the information came to their knowledge. It is imperative to seek the client's informed consent before sharing anything **unless you have a safeguarding/child protection concern** (see below)

- The Necessity Principle: Only share as much information as needed. Many cases can be managed without mentioning identifying information.
- Participant information should not be shared in public places, even when meeting with other agencies where children and young people may have established connections.
- Do not talk about participants with friends or family members

CHILD PROTECTION AND SAFEGUARDING

All facilitators must read, understand, and sign a policy about safeguarding and child protection (see annex). The policy includes information about handling safeguarding issues that are identified/disclosed.

Safeguarding is both about how facilitators behave and act towards participants and what you proceed if an issue arises or a problem is disclosed. First and foremost, establish boundaries between you as the facilitator and the participants to avoid instances of sexual advances, gift giving, or social interactions that are outside the life skills sessions. The facilitator is a trusted professional, not a friend. Before starting the facilitation, review the safeguarding policy and the procedures for reporting any past or present situations of abuse or harm, including reviewing the job aid on recognizing post-traumatic stress in the annex. Wherever possible, do not be alone with any participant, even if they are over 18 years.

 **Note:** *Maintain confidentiality except when there are safeguarding/child protection concerns:*

- *A participant is being abused, is at risk of abuse, or any other harm, or*
- *A participant discloses that they have been or are being abused, have or are abusing others, or are at risk of harm*

In these situations, you must follow the reporting protocol outlined in your organization's safeguarding/child protection policy.

What if a participant becomes emotional in the session?

1. Remain calm
2. If a participant cries, give them space; it is part of the process of healing and coming to terms with any fears about leaving care
3. Ensure that the group is a safe place for expressing emotions—promptly deal with others who tease, laugh, or otherwise discourage their peers
4. Respond by sitting next to the upset participant. Do not initiate physical contact but appropriately respond if they do (for example, if they initiate a brief hug). Using suitable methods of touch, like holding his or her hand, is permitted
5. If a care leaver is becoming physically uncontrollable, try to calm them down and refer to the rules that were set by the group during the first session. Remove the participant from the setting or ask others to leave if necessary
6. Ask if they would like to talk after the session
7. Consider involving a supervisor to help outline appropriate steps for moving forward
8. If participants are frequently becoming upset, have your supervisor assist with referral to a counselor/therapist or other professional help

MONITORING THE PROGRESS OF LIFE SKILLS SESSIONS

During the program, an attendance form will track the sessions each participant completes (see annex 3, session attendance form). A survey to monitor participants' well-being and skills developments will occur at the start and end of the program (see annex 5, feel good survey). Participants must attend 80% of the sessions to receive a certificate of completion. After completing the sessions, participants will be encouraged to continue connecting and regularly follow

up with each other through the care leaver groups formed outside of the life skills sessions.

i **Note:** *if a participant misses three sessions consecutively, kindly ask them to hold off attending sessions until they have resolved any issues or commit to attending sessions regularly.*

i **Note:** *The facilitator should introduce the participants to KESCA (or other local care leaver associations and support groups) as a more extensive support system. Explain to the participants that KESCA membership is free and voluntary. Explain the benefits and process of joining the association.*

After each session

The facilitator may choose to encourage participants to volunteer to conduct feedback at the end of each session. The following method can be applied to solicit feedback from care leavers:

1. Collect two flip charts and draw a smiling face or a thumbs up image on one and on the other draw a sad face or a thumbs down icon.
2. Explain to participants that they will have time to provide feedback at the end of each session.
3. Using the flip charts, participants can write down any feedback about the session topics, facilitators, venues, and logistics.
4. Inform participants that the feedback will improve subsequent sessions and any information shared outside of the session will be kept anonymous.
5. Read through the feedback and plan to address relevant and possible changes. The facilitator may choose to discuss some of the concerns or suggested changes with their supervisor.

SESSION FACILITATION GUIDE

TOPIC 1: WELCOME, INTRODUCTIONS AND BEGINNING THE JOURNEY

This session introduces the Life Skills Program to participants and enables them to start thinking about life skills and the transition out of care.



90 minutes



- Flipcharts, pens, sticky notes
- Name tags if participants do not already know each other
- Participant survey ('How I'm Feeling' survey)
- Practical Life Skills Participant Handbooks

Session objectives

- Getting to know each other
- Developing and agreeing on a Code of Conduct for the group
- Developing a shared understanding of how the life skills program can support participants
- Visualizing our current and future life journeys

Session outline

- Welcome
- Code of Conduct
- How I'm feeling survey
- Setting expectations
- Mapping my life journey
- Setting homework
- Summary

Welcome—20 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game; for example, ask participants what they would like to know about their fellow participants. On a flipchart, write things like names, schools that they attend, hobbies, and other information to help people get to know each other.



Life skills are skills that children and young people can learn to support us throughout life. These skills include problem solving, excellent communication, decision making, managing difficult conversations, and coping with emotions. You can liken the journey to a boat at sea—life skills create a sturdier boat that can better cope with storms and enjoy calm waters.



These sessions will help you learn life skills to help you when you are in care and after you leave care.



ACTIVITY 1: Getting to know each other

 TIME: 15 minutes

The facilitator writes down ten topics on a flipchart. They should be topics that participants may find they have in common, for example, favorite foods, school subjects, books, who owns pets, and who has siblings.

- Get into groups of four to five participants.
- In your groups, find two things that all the members in the group have in common, for example, all members have a brother. Next, find one thing that is unique about each person in the group. For example, Peter has been to Mombasa for a holiday. For the one unique thing, you do not have to be the only person in the world who has had that experience, just the only person in the group.
- Ask each group to come back and gather all participants together again.
- Each group may nominate one or two people from their group to share something they learned about their fellow participants during the break-out sessions.
- As one big group, if possible, find something that all participants have in common.



ACTIVITY 2: Developing a code of conduct

 TIME: 10 minutes

Ask the group why we should establish rules

Ask the group to identify how they want to operate as a group. What rules do they want to have? How do they want to be treated by each other? Record the answers on a flip chart and ask everyone to agree. You may need to discuss and resolve any disagreements (display these agreed upon group standards during each session)


You may need to give the group a couple of sample rules to help them start the exercise or suggest topics they may want to consider. Some rules they may want to contemplate could be listening when others speak, quieting mobile phones at the start of the session, and being on time for lessons.

Explain what participants can and should do if they have any questions or concerns.

If you are worried about them or someone else, you may need to act in ways that prioritize their safety and well-being and that of all children.




ACTIVITY 3: How I am feeling survey

 TIME: 15 minutes

Explain that you want to collect information to help assess sessions' effectiveness of the participant's learning and skills development. This will be done by a test given during the first session and the same test will be administered halfway through, at the last session, and hopefully three months after completing the entire training.

- Give each participant a survey and ask them to fill it out as truthfully as possible.
- Collect the papers after allowing 10 minutes for completion.

 This survey is not a school test. There are no right or wrong answers. We want to know how you feel about important topics.



ACTIVITY 4: Setting expectations


 TIME: 10 minutes;  MATERIALS: sticky notes; pens; flipchart paper

On a sticky note, ask each participant to write or draw one thing they want to learn from the workshop. Alternatively, do this activity as a group and record participant's answers on a flipchart

- Go through participants' ideas as a group while you list them on a flipchart
- Outline the aims of the sessions (see Overview of the Sessions, page 2)



ACTIVITY 5: My life journey

 TIME: 15 minutes

Explain to participants that they are now going to think about their futures and life stories

- Facilitators will ask the participants to close their eyes, relax, and imagine their life next year
- Facilitators will ask the following questions: Who will you be living with? Who will your friends be? What will you do in your spare time? Will you be in school? What support might you need on this life journey? Who is your role model? Why are they your role model? What are your talents, hobbies, and sports? What else do you do in your spare time? Is there anything you are worried about?

Next, imagine yourself in five years. Ask the participants some of the same questions as above. Have them consider what their goals or visions is within this time?

- What support might you need on this life journey?
- Ask participants to open their eyes and relax for a few minutes
- Ask them to reflect on what they just envisioned. If they feel comfortable, ask participants to share something they envisioned on their life journey
- Discuss any concerns or fears that participants are comfortable sharing with the group. Remind participants they can share concerns that they do not want to share with the group with a trusted adult after the session.




The activity aims to allow us to reflect on our own individual lives. As you will see from this activity, no two children in care or care leavers are the same. Each of us has our dreams, fears, and aspirations. It is essential to recognize where we are coming from and where we aspire to be in the future. Thinking about the challenges we may face helps us prepare well. The sessions aim to support you in preparing for starting or continuing life outside of an institution.



Look through the participant handbook but do not complete any activities. Before the next session, write your name on the book and come back with one question about life skills.

SESSION SUMMARY

 TIME: 5 minutes

- Any questions?
- Ask participants what they are excited about learning. Remind participants when and where the next session will take place
- Ask participants to choose a name for the group (this can be done as an informal discussion or you can ask participants to get into small groups and come up with ideas)
- Ask participants to write/draw any feedback on the flipchart



Do not forget to bring your handbook to every session.

TOPIC 2: EFFECTIVE COMMUNICATION

This session is designed to create awareness on the importance of effective communication. The session build skills on conflict resolution, assertion, and teamwork.



90 minutes



Flipchart paper, pens, notebook (for a prop), blindfolds, small objects

Session objectives

- Developing effective communication skills
- Learning the difference between aggression, passiveness, and assertiveness
- Understanding the importance of conflict resolution and learn how to practice it effectively
- Developing and practicing teamwork

Session flow

- Welcome and introductions
 - Discussion of homework
 - Effective communication
 - How to be assertive
 - Conflict resolution
 - Teamwork
 - Setting homework
 - Summary
-

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Address any issues from the previous session
- Go through today's session objectives

Discussion of homework—5 minutes


- Following the first session, what are you most excited about regarding the life skills sessions?
- Do you have any questions regarding the life skill sessions or the use of the handbook?



Explain: communication is the act of passing information from one person to another through mutually understood signs and includes a sender, message, and receiver.



ACTIVITY 1: Broken telephone

 TIME: 15 minutes

Ask for three volunteers

- Volunteer 'A' will be a tourist visiting Kenya and looking for directions to the local national park, volunteer 'B' will attempt to give directions, volunteer 'C' will be as noisy as possible
- Inform volunteer 'A' they must only speak in a whisper
- Ask the volunteer participants to role-play

Discussion

- What did you learn from this activity?
- How does this affect communication in real-life settings?

Encourage participants to cover the following:

- A complete and clear message ("I would like to go shopping this afternoon with my friends.")
- **Easy to understand** (speaking with a clear message and looking at the person)
- **Thinking about the other person** ('can they hear me properly? Is it noisy? Am I speaking too quietly? Is there anything stopping them from hearing me well?' (do they have hearing difficulties, for example?))
- **Being polite**
- **Using language the other person will understand** (for example, "if we use computer and gaming language will our parents, caregivers, or grandparents understand us?")
- **Showing we are listening** (nodding, making sounds to show we are listening, focusing on the conversation, repeating what they have said to check we have understood if it is a complicated instruction or message)
- **Responding** (even if it is "okay" or "thank you," it shows the other person they were heard).



Effective communication is when an intended communication is successfully delivered.




Cultural barriers or a different interpretation of some nonverbal cues: For example, in some cultures, eye contact is important, while in others, it is considered rude to maintain eye contact.

Barriers to effective communication (see annex 8.1 page 9 for more information)

Barriers are those things that can stall or distort communication. When communicating, it is imperative to pay attention to barriers to overcome them.

Some barriers include:

- Judging someone else—how they speak, or what they look like, for example
- Using complicated or technical words, this can be isolating
- Things that distract us—such as our thoughts, cellphones, or something we see or hear
-  Listen attentively, keep it short, ask questions, notice body language, repeat back, and summarize.



Inform participants that we will look at different ways to have a conversation (see annex 8, page 9 for more information).

Example: It is lunch time. Carol wants to eat beef and ugali, Cate wants Chinese, and Chep wants a light lunch.

- What would you like to have for lunch?
- Carol: I don't know, what would you like to eat?
- Cate: We must eat Swahili dishes. I love their food. Come on, let's go!
- Chep: I prefer to have a light lunch. Can we find something that works for all of us?

Inform participants that we are now going to look at assertive, passive, and aggressive responses.


 TIME: 15 minutes—see annex 8, page 11 for more information.

Example:

- What would you like to have for lunch?
- Carol: I don't know, what would you like to eat? Carol later regrets that she did not give an opinion on the kind of food she wanted (passive)
- Cate: We must eat at the Chinese restaurant. I love their food. Come on, let's go. Opinionated, bossy, and insensitive to other people's feelings (aggressive)
- Chep: I prefer to have a light meal since I have a lunch hour meeting. What about you? (assertive).



ACTIVITY 2: Communication styles


 TIME: 15 minutes

- What are your thoughts about how Carol, Cate, and Chep communicate?
- Whom would you prefer to talk to and why?

Carol is using **passive** communication: she is not saying what she wants or needs. Cate is using **aggressive** communication: saying what she wants and not thinking about what her friends want. Chep uses assertive communication: being clear about what he wants and considering other people's needs and wants.



ACTIVITY 3: Role play "It's mine!"

 TIME: 15 minutes

Instructions

Get into groups of three per group

Person 1: passive (like Carol)

Person 2: aggressive (like Cate)

Person 3: assertive (like Chep)

You are all deciding what to do during break time at school. Using the different types of communication styles given to you, have a conversation about what to do. Swap characters so each person get a chance to practice the different types of communication styles.

 **Note:** Before beginning the activity, ask all 'Carols' to put up their hand, then all 'Cates' then all 'Cheps' so that everyone is clear on whom they are role-playing before the start of the activity.

If there are some confident participants, you can ask them to demonstrate to everyone first to ensure all participants understand the activity.

Discussion


- What did you learn from the role-play?
- Which character is more likely to lead to better communication? Why?
- How can you be assertive/confident like Chep? (see annex 8.1, page 11 for more information)



Conflict resolution: conflict is a collision or disagreement, clash, contend, or fight. Conflict is a normal part of friendship. The key is not to avoid conflict but to learn how to resolve it healthily. When conflict is mismanaged, it can cause great harm to a relationship, but when handled in a respectful, positive way, conflict provides an opportunity to strengthen the bond between two people. Emotional awareness (why you feel that way about something) allows you to communicate effectively and your ability to handle conflict.



ACTIVITY 4: Communicating during disagreements

 TIME: 10 minutes

Describe a disagreement, argument, or disagreement you have had with someone, or one you have heard about (it could be between your friends for example)


- How did that disagreement end?
- How did/might the problem make you feel from beginning to end?
- How can we manage disagreements better in the future? (see annex 8.1, page 12 for more information)



When we have conflict with someone, each of us is trying to 'push' their message home.



ACTIVITY 5: TEAMWORK

 TIME: 15 minutes

Brainstorm:

- What is teamwork?
- Why is teamwork important?
- Where in your life has teamwork been important? (see annex 8.1, page 12 for more information)



ACTIVITY 6: The mine field game

 TIME: 15 minutes;  MATERIALS: small objects, blindfolds

Find an open space

- Place the objects (cones, balls, bottles, etc.) across the open space
- Have everyone form groups of four and ask one person from each group to put on the blindfold
- The other people must lead their teammate from one side of the open space to the other without stepping on the objects using only verbal instructions. Participants can only walk, no running

The blindfolded person should try not to speak at all, though they are welcome to speak if they have any concerns.

Discuss:

- What was challenging about working as a team?
- What worked well with your team?
- What makes someone a good team player?




Trust, teamwork, communication, and effective listening are great tools for effective teamwork.



You have been asked to identify three people (not anyone from this life skills group) to join you for a fun day out. Whom would you choose and why did you choose them?

SESSION SUMMARY

 TIME: 5 minutes

Good communication can help us be more explicit in what we need, want, and do not want. It can help us have better friendships, be clearer with family, teachers, mentors, community leaders, and set a good example of transparent communication with others. Good communication takes practice.

TOPIC 3: KEEPING MYSELF SAFE

Healthy friendships and relationships (including between caregivers and those in/leaving care, parents/guardians, mentors, teachers, peers, and community members) are critically important in life, including for a healthy transition from care. These sessions look at how we can keep ourselves safe, what to do when we feel unsafe and how we can build and maintain healthy friendships and relationships.

There are two sessions:

- Keeping myself safe and what to do when I feel unsafe
- Healthy and unhealthy relationships.

SESSION 1: KEEPING MYSELF SAFE AND WHAT TO DO WHEN I FEEL UNSAFE



90 min




Notebooks, pens, flip charts, marker pens, blue tack/masking tape, ball

Session objectives

- Recognizing violence and abuse
- Responding to violence and abuse
- Staying safe online

Session flow

- Welcome
- Homework review
- Types of violence and abuse
- Signs of violence and abuse
- Reporting abuse
- Staying safe online
- Responding to online abuse
- Setting homework

 *Note to facilitator: this can be a sensitive and challenging topic for participants. It is particularly vital to remind participants only to share what they feel comfortable with, keeping an eye out if a participant is becoming upset, and outline how participants can receive support after the session.*

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group norms and go over them
- Outline the session's objectives

Discussion of homework—5 minutes

Guiding questions for discussion.

- Why did you choose those people? (you can refer to the qualities of a team player)
- Address any issues



ACTIVITY 1: Understanding violence and abuse

 TIME: 10 minutes

Brainstorm: how can adults and other young people harm young people like us? **(See Annex 8.2, page 14 for more information).**


Talk through:

- Adults and other young people can harm young people like us.
- It can be bullying, shouting at us, saying hurtful things, touching us in inappropriate ways, hitting us and physically hurting us; not giving us enough to eat or drink even though, making us work in unsafe places or doing unsafe jobs; cutting our genitals, or making us get married before we are adults.
- People can also harm us online, including people who pretend to be our friends to get photos and videos of us or meet us in person. Our friends can bully us online, too. Sometimes we can do something we regret, like sending photos or videos of ourselves naked, giving someone confidential, sensitive information about ourselves, or sharing our log-in password.

Highlight that anyone can harm children—including staff, caregivers, family members, men, women, and other children. Sometimes this is called “abuse.”



ACTIVITY 2: identifying types of violence and abuse


 TIME: 15 minutes

Instructions

- Have pictures or photos of roles of people in society: parent/carer, religious leader, chef, doctor, fashion designer, police, teacher, friend, etc.
- Stick those examples on the wall
- Divide your group into groups of 5 participants
- Ask participants to work in their groups to develop ways the individuals could harm a child, e.g., hit us, shout at us, withhold food
- After five minutes, ask the groups to report back

Discussion

- Who can harm children?
- What types of harm can occur?
- If someone harms you, what can you do?
- Where would you report any form of abuse?

 *Note: Any form of abuse, no matter the frequency, hurts young people. Many times, the people who cause abuse are the people closest to the child. Sometimes in care, children may not have access to the internet or a phone, so they may not contact the ChildLine (116). The facilitator should discuss with participants that they can report to an adult they trust within the care environment.*



ACTIVITY 3: Keeping myself and others safe

 TIME: 20 minutes

- Get into groups of between two and four per group
- Brainstorm the top five ways to keep yourselves and others safe from abuse
- Make a poster showing your top five methods
- Get into one big group and show the other groups your poster

Support participants to discuss:


- My right to stay safe and be protected from violence and abuse
- How they can proactively help keep themselves and others safe

- Whom they can speak to if they are concerned about themselves or someone else
- The role of child protection committees

Reporting abuse (refer to Annex 8.2, page 15 for more information)



ACTIVITY 4: Staying safe online

 TIME: 15 minutes

Ask for five volunteers and let them choose randomly any of the strips of paper. The strips of paper have the following statements:


1. Do not share your personal information when chatting online, including your location
2. Do not meet someone you met online in person, even if you think they are a friend
3. Do not believe everything you read on the internet: not everything is truthful or reliable
4. Tell a trusted adult/seek help if something online makes you uncomfortable or if you are being bullied
5. Be kind, respect others, and think before you post anything

- Each volunteer draws what is on their strip of paper on the flipchart (trying not to use any words)
- Everyone else guesses what the online safety tip is

Ask participants if they have any other tips for staying safe online. *Go through the top tips in Annex 8.2, page 16.*

Highlight that excessive use of social media has negative impacts e.g., loss of privacy, peer pressure, anxiety, and social isolation. Explain this can include (see Annex 8.2, page 17 for more information):

- Social isolation
- Being emotionally unwell
- Sleep deprivation
- Obesity
- Psychological and/or behavioural problems
- Privacy violations

 **Proactive steps to stay safe online and use the internet in moderation can help us make the time we spend online fun and useful.**



ACTIVITY 5: Case study

 TIME: 10 minutes


Your friend Jack tells you that he met someone named Betty online. Betty stated that she is the same age as Jack and likes playing the same online games. Betty asked Jack to send her some photos of himself in his room. Jack sent the photos, but then Betty said she is a 50-year-old man. She threatened to share the photos with Jack's friends and family unless Jack agreed to send more photos. Jack is feeling very anxious and depressed and scared that his family will find out. What could/should Jack do next?

If this case study does not reflect how participants use the internet (for example, if they have minimal access to the CCI), the facilitator should adapt the case study to reflect their realities or alter it to read 'Jack tells his friend...'


Brainstorm:


- What can/should Jack do next?
- How can Jack report his concerns?
- What support can Jack access?
- What might Jack do differently in the future?

The facilitator should support participants to discuss:

- Who Jack can talk to and how he can report any concerns
 - Reporting concerns to the Anti Human Trafficking and Child Protection Unit (AHTCPU) (note: the facilitator should inform the participants about the location and contact info for the AHTCPU). If Jack does not have access to the internet or a phone, he can talk to an adult whom he trusts
 - If the adult does not believe him or act, Jack must speak to someone else
 - Local and national support services e.g., counseling
 - Not posting anything sensitive or personal online; avoid befriending strangers online, report concerns as soon as they emerge
-  ■ Three top tips for staying safe online
- Three top tips for staying safe in the 'real world.'

SESSION SUMMARY

 TIME: 5 minutes

 There are steps we can all take to keep ourselves and each other safe, but violence and abuse can still happen. It is never right and should always be reported to a trusted adult or the child protection services if it does occur. Violence and abuse are never acceptable, whoever the perpetrator is (even if it is a family member) and for any reason they provide. You deserve to feel valued, respected, and safe. Speak up and report any form of abuse.

If you are concerned about anything discussed in this session, speak to the facilitator or someone you trust as soon as you feel able to do so.

SESSION 2: HEALTHY AND UNHEALTHY RELATIONSHIPS

This session enables children in care and care leavers to build healthy relationships, including during and after reintegration. It aims to equip children in care and care leavers with the knowledge on the look and feel of healthy relationships.



90 min



Notebooks, pens, flip charts, marker pens, blue tack/masking tape, ball

Session objectives

- Recognize healthy and unhealthy relationships
- Understand how gender can affect peer pressure
- Develop skills to address negative peer pressure

Session flow

- Welcome
- Homework review
- Recognizing healthy and unhealthy relationships
- The impact of gender on peer pressure
- Recognizing and addressing peer pressure
- Summary
- Assigning homework

 *Note to facilitator: this can be a sensitive and challenging topic for participants. It is imperative to remind participants only to share what they feel comfortable with, keep an eye out if they are becoming upset and outline how participants can get support after the session.*

Welcome—10 minutes


- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group norms and go over them
- Outline the session's objectives


Discussion of homework—5 minutes

Guiding questions for discussion.

- Did you face any challenges in completing your homework?
- Review everyone's top tips for staying safe online and offline.

The power of relationships—5 minutes

 **Our relationships with our friends and families are vital because they can affect our physical and mental health, help us to work through problems, feel better about ourselves and our decisions.⁵ However, not all relationships are healthy. Sometimes we spend time with people who may not want what is best for us. We must learn to recognize a healthy relationship from a harmful one.**


 **We all have a responsibility for choosing healthier relationships. We cannot choose some relationships—for example, our family relationships—but we can still make them as healthy as possible. Clear communication about our own needs and wants and what is ok and not ok in our relationships is important.**

⁵ Adapted from: <https://schools.au.reachout.com/articles/relationships>

Healthy Relationships are where both people are listened to, able to be themselves, valued for who they are, and not judged (see Annex 8.3, page 20 for more information)



ACTIVITY 1: Role-play—healthy and unhealthy relationships

 TIME: 15 minutes

1. Get into groups of four. Ask participants to role-play the following (inform participants they will have three minutes per scenario):
 - a. A healthy family relationship (parent(s)/carer(s), sibling(s) and self) where you are all sitting down for a meal
 - b. An unhealthy family relationship where you are all sitting down for a meal
 - c. A healthy friendship (the group of friends) where you are deciding what activity to do together
 - d. An unhealthy friendship (group of friends) where you are deciding what activity to do together
2. Feedback as a whole group:
 - a. What made the relationships healthy?
 - b. What made them unhealthy?
 - c. What might you be able to do if you think a relationship (or aspects of it) are unhealthy?



ACTIVITY 2: CASE STUDY—Mary and Peter

 TIME: 15 minutes

- Read the below case study out loud to the whole group
- Divide participants into groups of three per group
- Discuss the following questions:
 - What bits of Mary's relationships are healthy and unhealthy?
 - What could Mary do next?
 - What could Peter do next?

Mary is 12 years old and has just reunited with her family. She is staying with her mother and grandmother. She is progressing well with her education in her new school but is finding it hard to make friends. After her reintegration back home, Mary met her old friend Peter. Peter is 13 years old; he dropped out of school and now spends time with other friends hanging out on the street. Peter encourages Mary to miss a couple of school lessons and hang out with them; Mary has fun and likes the attention, especially from Peter and another friend of his, Fred. Peter tells her that unlike a lot of girls, Mary is fun and so being educated is not that important.

- Get into one big group. Do all of the groups have the same/similar answers?



Explain: Much of Mary's relationship is unhealthy: missing school, spending time on the street, feeling the need for attention from Peter and Fred. However, having friends she can talk to and hang out with is healthy.

Mary could attend all her school lessons. She could see if a healthy, respectful relationship with Peter and his friends is possible outside of school hours and building new friendships at school. Mary needs to be aware of the risks of hanging out with (a) groups of boys (and girls) unsupervised (b) spending time on the streets (c) missing school (including exclusion from school). Mary could speak to a trusted adult about her friendship with Peter; take up extracurricular activities to help make new friends; speak to a trusted adult about healthier ways to build her confidence and self-esteem; and how to approach Peter on his attitude towards girls.

Peter could speak to a trusted adult about returning to school or apprenticeships to gain work experience. He also needs to be aware of the risks of spending time on the streets. Peter's attitude towards girls is not ideal—he needs to understand that girls and boys have equal rights and deserve to be respectfully treated.

Peer pressure

Peer Pressure is the direct influence on people by peers, or the effect on an individual who gets encouraged to follow their peers, of a similar age, by changing their attitudes to be liked or respected. Often, peers influence the way they act or think because of time spent together. Peer pressure can be a positive or a negative thing. For example, peer pressure for everyone to complete their homework on time can be positive; peer pressure to try smoking a cigarette is negative.⁶




ACTIVITY 3: DO GIRLS FACE MORE PEER PRESSURE THAN BOYS?

 TIME: 10 minutes

Brainstorm:


- Do you think girls face more peer pressure than boys? Why?

 *Alternatively, the brainstorm can be accomplished in two groups: one group of boys and the other girls.*

 Peer relationships play an important role in developing our sense of self and have a substantial impact on how young people view the roles of men and women in our society.



ACTIVITY 4: OUR HEALTHY RELATIONSHIPS TREE

 TIME: 25 minutes

Instructions

Outline a large tree with branches (but no leaves) on a piece of flipchart paper. Give participants green paper and red paper, scissors, and glue.

1. Draw three leaves on your green piece of paper and three leaves on your red piece of paper
2. Write one characteristic of a healthy relationship on each green leaf and one characteristic of an unhealthy relationship on each red leaf. Example: listening to each other (healthy); not respecting each other (unhealthy)
3. Cut out the leaves and stick them on the tree
4. Spend a few minutes looking at what others have written

Discussion

- What are important factors in a healthy relationship? (*think about your relationships with friends, family, caregivers, peers of the opposite sex, teachers, mentors, etc.*)
- What are some of the warning signs that parts of a relationship might be unhealthy?
- What kind of peer pressure issues or statements can you think of that you have come across in your daily life? For example:
 - You are not a man if you do not smoke
 - It is fine, we are only missing school for day
 - Everyone does it
 - No one will ever find out

Encourage participants to discuss:

- Using clear, confident communication, communicating your viewpoint boldly. Say no like you mean it
- Choose friends carefully and pick people with whom you share similar values and with whom you can have each other's back. Do you have a close friend that can hold you accountable? One who shares the same values?
- Avoiding situations, places and people that put negative pressure on you, for example,


⁶ Definition adapted from: <https://www.merriam-webster.com/dictionary/peer%20pressure>

hanging out with people who you know smoke or drink alcohol


- The importance of asking for help: talking to your parents, mentor, or other trusted adults
- Knowing your values/worth and sticking to them


Children and young people living in care may have different experiences to those not living in care, such as exposure to drugs, alcohol, sex, clicks/gangs, stealing, missing school etc. It is important to recognize negative peer pressure and how to deal with those influences.

 *Note: the facilitator should keep the tree for the upcoming Making Safer and Healthier Choices session.*

 **Homework:** From whom would you seek out advice and support? (minimum of three people/roles). Why choose those people?

SESSION SUMMARY

 TIME: 5 minutes

 Do not change to make people like you. Do not do things to please your friends in an attempt to fit in. Do not give in to peer pressure. True friends respect your choices. Get help and support from a trusted adult when you need it.

TOPIC 4: MY HEALTH

This topic highlights the importance of children in care and those leaving care to stay physically and mentally healthy and recognize and respond to any health concerns.

This section consists of four parts:

- Session 1: My body
- Session 2: HIV
- Session 3: Mental health
- Session 4: Resilience

SESSION 1: MY BODY



90 minutes




Notebooks, pens, flip charts, marker pens, blue tack/masking tape, printed strips of paper, a variety of local food

Session objectives

- Understand how our bodies and brains develop during adolescence
- Learn practical skills to recognize and manage our feelings and emotions
- Learn how we can better support ourselves and each other through puberty

Session outline

- Welcome
- Homework review
- How our bodies change
- How we can better support our friends and ourselves through puberty
- Recognizing and managing our feelings and emotions
- Summary
- Setting homework

 *Note to facilitator: this can be an embarrassing and sensitive topic for some participants. It is crucial to remind participants only to share if they feel comfortable. Be aware of a participant struggling with the session. Make it clear to all participants that they can receive additional advice and information after the session.*

Welcome—10 minutes

Greet and welcome the participants warmly

- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Outline the objects of the session

Discussion of homework—5 minutes

Guiding questions for discussion.

- Would you ask for support from others? Who?



ACTIVITY 1: How our bodies change


 TIME: 20 minutes

Split participants into two groups: boys and girls

- Each group receives a large piece of paper
- The group draws an outline of a person on the piece of paper
- Ask each group to put an X on the parts of the body that change during puberty
- Hang both drawings at the front of the room and ask groups for feedback (note that participants may be embarrassed, the facilitator should not push for answers)
- The facilitator explains some of the significant bodily changes that humans go through during puberty (see Annex 8.4, page 24).



ACTIVITY 2: Case studies: Akinyi and George

 TIME: 20 minutes

Divide participants into two groups: girls and boys

- Give each group a case study to discuss

Akinyi is 12 years old. Akinyi's friends have invited her to go swimming. She just started menstruating for the first time ten days ago; the only person she could speak to about it was her grandmother. Akinyi is worried her period might start when she is swimming with her friends. She also has pubic and underarm hair, and her breasts have recently grown, which causes her embarrassment. Akinyi is afraid to go swimming with her friends because there is a possibility they may notice her bodily changes.

George is 12 years old. He is attracted to one of the girls in his group of friends. George's friends invited him to go swimming. He has just had an outbreak of pimples on his face and is embarrassed about the girl he admires seeing it. His voice is also breaking, so he is embarrassed about speaking in front of her, and he is worried that he might get an erection while he is in his swimming trunks.

Discussion


- Get back into one big group and discuss both case studies
- What could Akinyi and George do in these situations?
- Where could they get advice and support about going through puberty?



Explain: Everyone goes through puberty—it is a normal part of life. It occurs earlier for some people and later for others and can happen between 8 and 14 years old. Being understanding and supportive of each other is important. If you or someone else is being bullied or feels unable to participate in things due to puberty, speak to an adult you trust for advice and guidance. Be wary of finding information on the internet and only access information from reliable sources.



ACTIVITY 3: managing my feelings and emotions

 TIME: 30 minutes



Explain: puberty is when hormonal changes in the body bring about physical changes to our bodies. Additionally, teenage brains are changing rapidly. This part of the brain is called the prefrontal cortex, which helps with decision-making and reasoning. During adolescence, you are still using the amygdala (primary role in processing memory, decision-making, and emotional responses) to make many decisions. This development makes dealing with our feelings and emotions challenging.


The facilitator splits participants into two groups: boys and girls

- Each group is given a large piece of paper and asked to draw a sun
- In the middle of the sun, participants write or draw some of their challenging emotions (such as anger, frustration, or in distress)


- On the 'rays' of the sun, participants write or draw something that can help them manage their challenging emotions (one idea per 'ray' of sunshine)
- Each group shows the other their suns.


Discussion:

- What situations might make our feelings feel unmanageable?
- What can help us manage our emotions in these situations?
- What about when we have strong emotions without any apparent reason?
- What can help us manage our emotions in these instances?


 **Sometimes feelings can be strong. Learning to accept our feelings and 'sit with' them until they pass can make them less overwhelming. When we can identify things that prompt strong emotions, we can often manage how we react. Some ideas for managing feelings might include:**

- Writing about your feelings
- Drawing/painting/doodling
- Playing or listening to music
- Physical activity
- Meditation and quiet time
- Getting enough sleep
- Eating healthily
- Crying
- Talking and processing emotions with someone trusted can be helpful for both releasing feelings and gaining perspective
- Recognizing what causes us stress and addressing it
- Sometimes taking the pressure off ourselves and "just being."⁷


 If feelings of being overwhelmed, sad, or worried are continuous and/or affecting your daily life, it is crucial to speak to an adult you trust. Counseling and/or medical support might be helpful to you.

 **Homework:** Your friend of the opposite sex is going through puberty. What advice and support could you give to him or her?

SESSION SUMMARY

 TIME: 5 minutes

 **While our bodies and brains start preparing us for adulthood, physical and emotional changes during puberty can be challenging. Remember, you are not alone:**

- Grow your knowledge about the changes your body and brain are going through
 - Develop positive coping tactics for when your feelings are overwhelming; talk to friends and find adults whom you trust to confide in and who will support you
-  Be aware of the information and 'support' you can access on the internet—it is not always reliable or trustworthy. Avoid 'pro' sites that promote harmful coping mechanisms such as self-harm, anorexia, and bulimia.

⁷ Good Therapy, How to Help Teens Manage their Emotions and Accept their Feelings <https://www.goodtherapy.org/blog/how-to-help-teens-manage-their-emotions-and-accept-their-feelings-0705175>

SESSION 2: HIV

This session equips young people with knowledge and facts about HIV.



90 minutes



- Flip charts, marker pens, blue tack/masking tape, sticky notes
- Practical Life Skills Participant Handbooks

Session objectives

- Develop an understanding of HIV/AIDS
- Support friends and family who are affected by HIV/AIDS
- Learn how to disclose their status and support friends in the disclosure process

Session outline

- Welcome
- Homework review
- Developing an understanding of HIV
- Getting tested for HIV
- Disclosing your HIV status
- Setting homework
- Summary



Note to facilitator: this can be a sensitive and challenging topic for participants. It is imperative to remind participants only to share what they feel comfortable with, keep an eye out if a participant is becoming upset, and outline how participants can get support after the session.

Welcome—10 minutes

Greet and welcome the participants warmly

- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group norms and go over them
- Outline the session's objectives.

Discussion of homework—5 minutes

Guiding questions for discussion.

1. What advice and support could you give to your friend?
2. What advice and support would you like from your friends, family, and community when going through puberty?



ACTIVITY 1: What is HIV and why does it affect me?

 TIME: 20 minutes


Get into groups of five

- Each group is provided the same HIV statements (listed below), which are pre-cut into strips. cut into strips). Kindly ask each group to place the statements they think are true on one left side and the ones they think are false on the right side.
- After the participants have sorted the questions, return together as one big group.
- Ask the participants if any information surprised them.

- Next, ask the participants if they have any questions. Remind participants that there are no silly questions.
- HIV stands for Human Immunodeficiency Virus (**true**)
- HIV stops our bodies from fighting diseases and infections (**true**)
- AIDS is a form of HIV; this is when a body is no longer able to fight diseases and infections (**true**)
- I can get HIV from sitting on the same toilet seat as someone who has HIV (**false**)
- I can get HIV from someone with HIV who sneezes next to me (**false**)
- I can get HIV from someone hugging me who is HIV positive (**false**)
- I can get HIV from having unprotected sex with someone who has HIV (**true**)
- I can get HIV from having a blood transfusion from someone who has HIV (**true**)



ACTIVITY 2: Living with HIV

 TIME: 25 minutes

Read the following story to the group:

Richard is 11 years old. He tested positive for HIV when he was six after receiving a blood transfusion due to a terrible car accident. Richard is on medication, and most days, he feels well and healthy. Last week he decided to confide in his best friend David that he has HIV. David told him he's not safe to be around and told everyone in their class. Now no one will sit next to Richard, and they call him mean names.

Discussion

- Imagine you are in Richard's class. What might you do?
- What could his teachers do?

Next, read the following text to the group:

Martha is also in Richard's class. Her mom has recently been diagnosed with HIV, and Martha is worried that she might also have the virus. She is too scared to talk to anyone about this or what she should do next.


Role play


- Get into pairs. One person will be Martha or Richard; the other is an HIV advisor. Martha or Richard decides to talk to the HIV advisor: role-play the ensuing conversation
- After roleplaying the scene, swap roles and perform once more

Discussion

- How did it feel role playing Martha and Richard?
- What should Martha and Richard do next?

Knowing our HIV status helps us to:


-  Be less worried if we are HIV negative
- Learn how we can reduce the risks of contracting HIV if we are negative
- Have timely access to life-saving treatment and support if we are HIV positive
- Be able to look after our health and get information and counseling about how to live confidently with the virus if we are HIV positive

 **It is important to take an HIV test if you have possibly been at risk of contracting the virus. It is necessary to retake the HIV test three months later as there is a "window period" for HIV transmission before the body develops antibodies. Please note, nobody is required to get tested for HIV.**

- A pregnant woman living with HIV can pass on the virus to her baby during pregnancy, childbirth, and breastfeeding. All pregnant women with HIV are placed on HIV treatment as soon as possible.



ACTIVITY 3: How can I keep myself healthy?

 TIME: 25 minutes

Participants form into groups of three per group

- Ask participants to think about what keeps them physically healthy
- Each group designs an advertising campaign for other children on how to stay physically healthy. This can include a TV advert, a poster/billboard, or a radio advert
- Each group has 15 minutes to create their advertising campaign
- Each group then shows the other participants their campaign


Discussion:

- What are the main things we can do to keep ourselves physically healthy?
- Which of these can prevent HIV transmission?
- Which of these might help me if I have HIV?



Interview three friends about their views on HIV. Think about why they might have those views. What is one thing you could tell them that might increase their knowledge of HIV?

SESSION SUMMARY

 TIME: 5 minutes



Preventing HIV transmission is just as important for people already living with HIV, to protect other people, and to protect themselves. For more advice or support on both preventing and living with HIV, it is crucial to go to someone who can give you accurate information and support.

SESSION 3: MENTAL HEALTH



90 minutes



Notebooks, pens, flip charts, marker pens, blue tack/masking tape

Session objectives

- Understand the importance of mental health
 - Brainstorm the practices that contribute to positive mental health
 - Discuss emotional wellbeing
 - Learn and practice various techniques of stress awareness regulation, stress responses, and methods of stress management
-

Session outline

- Welcome
 - Homework review
 - Managing stress
 - Challenging negative thoughts
 - Setting homework
 - Summary
-



Note to facilitator: this can be a sensitive and challenging topic for participants. It is imperative to remind participants only to share what makes them feel comfortable. Recognize any participant becoming upset and outline how participants can acquire support after the session.

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Outline the objectives of the session

Discussion of homework—5 minutes

Guiding questions for discussion.

- Check if participants know of an area near their district where they can go for HIV testing
- Review the importance of knowing your HIV status



ACTIVITY 1: The Me Shield

 TIME: 15 minutes;  MATERIALS NEEDED: Blank sheet of paper divided into four squares, and colored pencils or markers.

Give each participant a blank piece of paper and ask them to divide it into four squares. Explain that this is their 'shield' to help keep them mentally well

- Write or draw the following in each square of the 'shield' (one topic per square):
- What I am good at doing
- What I like to do
- What makes me happy
- What makes me feel safe
- Give participants ten minutes to complete all four sections
- Gather in one big group and ask participants to share points from their 'shields' (but only what they feel comfortable sharing)

Discussion:

- What did you learn about yourself doing this activity?
- Was there anything that surprised you?



Approximately one person in three has a mental health issue at some point in their lives. There are many mental health issues; the more common ones are depression, anxiety, and trauma. When we feel down or depressed, we may not be able to attend to our own needs and responsibilities. If we break an arm, we get help. It is important to do the same if we feel mentally unwell. While focusing on our strengths and skills does not prevent mental health issues, it can help us find tools that support us in addressing mental health issues and keeping ourselves as mentally healthy as possible.




Ten tips for maintaining positive mental health⁸ (Refer to annex 8.5, page 36)

1. Value yourself
2. Take care of yourself physically and mentally, including eating healthily and getting enough sleep
3. Surround yourself with people who love and support you
4. Help others
5. Develop personal stress coping skills
6. Quiet your mind
7. Set realistic goals
8. Break the boredom
9. Avoid cigarettes, alcohol, and other drugs
10. Get help when you need it



ACTIVITY 2: Case study: Nancy and Peter

 TIME: 15 minutes

Instructions

Identify participants to role-play the following:


Nancy and Peter are best friends. Nancy has just moved to a different school. Before Nancy transferred to her new school, they spent considerable time together in the afternoons. Recently, Peter noted that they no longer spend as much time together as they once did, especially since Nancy has started basketball classes after school twice a week and has more


⁸ Adapted from: <http://www.bhcwausau.com/2017/01/06/focus-mental-wellness-new-year/>


schoolwork than Peter. Peter has started spending more time on his own playing video games every afternoon and evening and says he even tried alcohol to make himself feel better. Peter is behind with his schoolwork, and his grades have dropped. He told Nancy last night that he is feeling depressed.

Discussion questions

- What are the issues troubling Peter?
- What support can Peter access?
- Imagine you are Nancy. How might you support Peter?

 *Participants must be aware of the importance of seeking mental health support from professionals and adults he trusts. While Nancy can be a friend to Peter, she cannot be his only support.*

 **Self-harm includes cutting or burning, substance use to cope with or escape from feelings, and deliberate exposure to unsafe situations. Self-harm can help young people try and maintain some control in a situation that feels chaotic or controlled by others. It may also be a way to manage complicated feelings rather than express them to others, especially if they feel they cannot trust anyone enough to confide in them or believe there will be a misunderstanding. Self-harm (when there are not suicidal intentions) is often a form of 'self-preservation.' It is imperative to have an alternative strategy in place before preventing a young person from self-harming. In some cases, self-harming can continue for years.**

 Anyone worried about their mental health should speak to someone they trust who has mental health experience or expertise. If you or someone else is feeling suicidal, you must seek help as soon as possible. This assistance can be from mental health workers, a doctor, and or a counselor.



ACTIVITY 3: Coping with negative feelings⁹


 TIME: 25 minutes;  MATERIALS NEEDED: Flip chart and markers

Draw a tree on a large piece of flip chart paper and stick it on the wall. Remind participants of the activity on healthy and unhealthy relationships with the tree exercise; explain this is a similar exercise, but we will now be using it to explore our feelings.

- Divide the group into smaller groups of 5-10 participants
- Cut out large pieces of paper in the shape of a leaf
- Explain that the red leaves represent our harmful coping methods in challenging experiences. These feelings compel us to isolate ourselves if we have negative thoughts. The green leaves represent our positive coping mechanisms, such as listening to upbeat music if we have negative thoughts.
- The groups write positive ways of coping on the green leaves and negative ways of coping on the red leaves
- Let the participants hang or stick the leaves on the tree

Discussion:

- Are there more red leaves or green leaves? Why do you think there are more of one color over the other?
- Can we think of more positive ways of coping with challenging experiences and feelings? If new ideas emerge, write them on green leaves and add them to the tree
- How can we help ourselves and our friends to use positive ways of coping?

 **We all have helpful and unhelpful ways of coping, even if we are not aware of them. For example, listening to our favorite music if we are feeling down is a helpful coping mechanism. Unhelpful coping devices can be addictive, both physically and emotionally. It can be challenging to replace these methods with helpful alternatives.**

⁹ Leonora Borg (2014) Nothing about us without us; A toolkit for organizations working or wanting to work with adolescent street-connected girls. CSC

However, with practice, important coping techniques can also be addictive (in a positive way!). Most people use unhelpful coping methods, even if we know they are not beneficial to us. Do not criticize yourself. Instead, use helpful coping methods next time. Remember that hormonal changes can make emotions even harder to manage. Speak to someone if you need any support.



ACTIVITY 4: Releasing stress and worry

TIME: 10 minutes

Provide each participant with a piece of paper and ask them to draw a line down the middle

- On the right-hand side, instruct them to write or draw their current stresses and worries
- On the left-hand side, please direct them to write or draw how they are currently, or might, handle their stresses and worries using positive coping mechanisms
- Instruct everyone to fold their paper into an airplane and write their name on it for an identifying mark
- Direct everyone to stand in a line together and welcome them to throw their airplanes into the air

Discussion:

- How did it feel to 'throw away' your stresses and worries?
- Can we develop our top five ways to positively cope with stresses and worries as a group?



Letting go of stresses and worries can often help us see them as less significant and gain new perspectives. Usually, talking to someone we trust about our worries or writing it down (and keeping it somewhere safe) can be an essential first step (see Annex 8.5, page 36 & 37 for more information.)



Challenging negative thoughts

Sometimes we can get stuck in a negative cycle of thoughts and actions. Addressing them can help us to cope better with the present and look forward to the future.

Complete the table below with three personal negative thoughts.

Negative thought	Where did my thought come from?	How it makes me feel	Alternative positive thought	How much I believe my new thought	How my new thought makes me feel
I am not popular at school	My friend told me	Sad and angry	I have good friends in school and out of school	60%	Hopeful

SESSION SUMMARY

TIME: 5 minutes



Just like keeping physically well, staying as mentally healthy as possible takes effort. Eating healthily, gaining enough sleep, getting regular exercise, taking time to relax and have fun, recognizing and managing our stresses, speaking to friends we trust, and accepting help when we need it are all key actions. However, sometimes we cannot take positive steps to improve our mental well-being. If you feel overwhelmed or unable to cope, you must speak to someone you trust or a mental health professional and get the support you deserve.

SESSION 4: RESILIENCE

This session enables children in care and care leavers to build their resilience. It helps them adapt, cope with, and rebound from traumatic, disruptive, and/or stressful life events. For example, transitioning to secondary school, moving CIs, leaving a CI, experiencing discrimination, bullying, abuse, or losing a friend or family member.



90 min



Notebooks, pens, flip charts, marker pens, blue masking tape, a ball

Session objectives

- Understand what resilience is
- Understand the resilience tools we already have
- Develop skills to build resilience

Session flow

- Welcome
 - Homework review
 - What is resilience
 - Understanding my strengths
 - Using helper words and other tools for developing resilience
 - Summary
 - Setting homework
-

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group norms and go over them
- Outline the session's objectives

Discussion of homework: (time: 5 minutes)

Guiding questions for discussion.

- Did you find the homework difficult? If easy, why?
- What was helpful about identifying and better understanding any negative thoughts you have?



ACTIVITY 1: What is Resilience

TIME: 10 minutes

Brainstorm:What is resilience?

1. Give an example of someone who has been resilient



Resilience is the ability to bounce back from something difficult or challenging in our lives; it is the ability to handle a stressful moment and recover from it. Resiliency does not come without problems. It is learning to deal with those obstacles while keeping a healthy mind. Resilient children and young people keep an open mind and think in ways that make them feel like they are in control even when unfortunate situations in life inevitably occur. Sometimes, a problem can become smaller and more manageable, depending on how we understand it. It depends on our perspective and seeing the problem as something we can or cannot cope with and work through.



ACTIVITY 2: My strengths

TIME: 10 minutes

Participants crouch on the floor in a circle. Each participant says out loud what one of their strengths is (for example, “I am kind”; “I am clever”; “I am good at writing.”). When he or she utters a strength, they stand up a bit taller. Go around the circle four or five times (so that everyone has an opportunity to say four or five of their own strengths). By the end of the activity, all participants should be standing tall.



The facilitator explains to participants that recognizing their strengths is an integral part of creating a toolbox to help them become stronger and more resilient. (Refer to Annex 8.6, page 40, for more information)



ACTIVITY 3: Using ‘helper words’ to become resilient

TIME: 20 minutes; MATERIALS NEEDED: A rubber band, paper, pencils, or markers

Objective: To become aware that positive and motivational thoughts about ourselves impact how we feel, think, and act .

The facilitator explains the following:

- Resilience means we need to be flexible like a rubber band when we face challenges and difficulties in life (**demonstrate flexibility with a rubber band**)
- We talk to ourselves to figure things out. For example, while working through a challenge. We call this ‘self-talk’ or ‘helper words and phrases.’ You can learn positive ways to think and act by learning ‘helper words.’ Helper words remind you of things you can do when you are confused or upset. You can use them to remember that you oversee your feelings and behavior.
- Listen to what you say to yourself when you are going through a challenging situation. Do you cheer yourself on or discourage yourself?
- Read the following **helper phrase**: *I keep my mind open and flexible to help solve problems. I tell myself to slow down and take a breath when things go wrong. I can do this. I’ll keep working and figure it out. I’m working on this. I get help and support when I need it. I can do this.*
- Participants get into groups of three. Ask them to come up with their helper phrase and helper words (you can suggest some, such as ‘calm’ and ‘thoughtful’)
- Get into one big group and share the helper words and phrases.



When dark storms arrive, do not panic. You have handled them before, and this time you are older with more experience. Be proud of yourself when you use your helper words and phrases and remember that most things take practice.



ACTIVITY 4: How do I become more resilient?

 TIME: 30 minutes;  MATERIALS NEEDED: Resilience diagram



Explain to participants that building resilience is a skill that takes time

Show participants the resilience diagram (*the facilitator can draw it or print off copies for participants*)

- Talk participants through each one to make sure they understand
- Ask participants to get into groups of three
- Groups will discuss the following:
 - Do you do any of the resilience-building techniques shown in the pictures?
 - Which methods are harder and which ones are easier?
 - Which one(s) would you like to continue or begin?
- Discuss the following as one big group:
 - How else could you build resilience?
 - Which techniques are you more comfortable with doing now and which ones take time to improve?
- Ask each person to pick the resilience tool they want to continue using or begin to use
- Ask each person to stand and declare that they have a unique resilience tool. For example, if someone is striving to respect themselves deeper, they may say, 'I respect myself!'
- Explain 'positive affirmations' are phrases we repeat to change how we think, act, and exist in the world.


Participants might include the following points in their sharing activity:

- Talking to my friends and an adult whom I trust
- Having fun playing sports, listening to music, and spending some time being quiet
- Achieving small things and praising myself for the achievements
- Not getting upset or angry at myself if I do not achieve something the way I think I should
- Taking action to address problems and difficulties
- Experiencing difficulties often teaches us important things about relationship skills, increased self-esteem, and gratitude for blessings
- Knowing I can problem-solve. I have done it before; I might need some support, guidance, and a bit of time
- Writing or drawing how I am feeling

BUILDING RESILIENCE





Diagram from Stenhouse Primary School: <https://stenhouseps.com/building-resilience/>

 Practice three resilience-building skills you learned in Session 4: Resilience

 *Note: the facilitator may want to review the resilience-building skills*

SESSION SUMMARY

 TIME: 5 minutes

 It is important to practice resilience. It is a skill that we can improve upon with time, practice, and support. Speak to an adult whom you trust if you struggle to cope with challenges in your life.

TOPIC 5: MAKING SAFER AND HEALTHIER CHOICES

This session equips children and young people with skills to identify risky behaviors and know how to make safer and healthier choices.



90 minutes



Notebooks, pens, flip charts, marker pens, blue tack/masking tape

Session objectives

- Understand what we mean by 'safer and healthier choices' and 'risky behaviors'
- Learn more about risky behaviors: smoking, alcohol, drugs, and gambling
- Develop tools for assessing risk and making safer and healthier choices

Session outline

- Welcome
- Homework review
- Main session
- Summary
- Assigning homework



Note to facilitator: this can be a sensitive and challenging topic for participants. It is imperative to remind participants only to share what makes them feel comfortable. Recognize any participant becoming upset and outline how participants can acquire support after the session.

Welcome—5 minutes


- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and go over them
- Outline the session's objectives

Discussion of homework—5 minutes

- Ask participants which resilience skills they chose to practice. What was the most challenging skill to practice? What was the most useful?



ACTIVITY 1: Brainstorm

 TIME: 5 minutes

Discuss:

- What are some of the unsafe or unhealthy choices and activities that some young people make?


Examples of unhealthy choices:

Unsafe and unhealthy choices can put us at risk for poor health, injury, or death.¹⁰

- Children and young people tend to engage in more risky behaviors because the brain's rational part has not fully developed. They may not think of long-term consequences and may believe "it cannot happen to me." Some examples of unsafe and unhealthy choices are:
 - Sharing personal information with someone you do not know in person and online
 - Tobacco, alcohol, drug use, sniffing glue
 - Gambling
 - Being a member of a gang
- While there is the possibility for many safe/unsafe and healthy/unhealthy choices, this session specifically examines smoking, alcohol, drugs, and gambling. Refer to annex 8.7, page 41 for more information



ACTIVITY 2: Addiction

 TIME: 10 minutes

Divide the participants into four groups. On a piece of paper, each group draws something they really like or want to eat (for example, chocolate or ugali)

- Next, ask the participants to write or draw how they feel not having what they want right now
- Inform the participants that they cannot have what they wrote or drew for one month. Ask them to write or draw how they feel now
- Explain that these feelings are like how we feel when we are addicted to something

Discuss:

What else can be addictive but less harmful (unless done excessively)?

Participants might suggest exercise, eating chocolate, drinking caffeine (tea or coffee).



Addiction is defined as a strong inclination to do, use, or indulge in something repeatedly. It's losing the ability to have control over doing, taking, or using something to the point where it could be harmful to you.¹¹



ACTIVITY 3: Betting

 TIME: 10 minutes

Give each participant a stone or a piece of candy


- Tell the participants you bet you can throw a ball into the bin (or some similar task)
- Ask participants if they will bet their rock or candy that your ball will make it into the bin on the first try. The winner(s) will receive five stones or candies as a prize.
- Ask the participants if they would bet:
 - 10 shillings
 - 100 shillings
 - Their watch
 - Their house


¹⁰ <https://www.verywellmind.com/what-is-youth-at-risk-behavior-2610455>

¹¹ NHS <https://www.nhs.uk/live-well/healthy-body/addiction-what-is-it/>

Discuss:

- What helps you make those decisions?
- Why do you think gambling is addictive?

 **Gambling can be perceived as fun, but it can quickly become addictive or escalate to a point where people risk money even if they do not have the capital. The rush of endorphins we feel after a win creates an addiction we crave, which leads to risky decisions. Betting is only legal for 18+, and anyone who allows children to bet is violating the law. Even if it is just for fun, it is financially and mentally healthier to stay away from betting.**

 **Explain to participants that we are now talking about smoking, drinking alcohol, and using illegal drugs.**



ACTIVITY 4: Smoking, alcohol, and drug abuse

 TIME: 20 minutes

Participants move into two large groups. Explain that each group will be discussing questions and then presenting to the other groups for approximately two minutes each.

- Group 1: Alcohol
 - Why do you think alcohol is unhealthy?
 - Why do you think young people drink alcohol?
- Group 2: Smoking
 - Why do you think smoking is unhealthy?
 - Why do you think young people smoke cigarettes?
- Each group presents to the other groups
- Discuss the following as a group:
 - What are the common reasons young people drink alcohol and smoke?
- Next, the participants return to their two groups. Ask each group to make a list of all the non-medical drugs they have heard of on flipchart paper
- Next, ask everyone to sit in a circle and put the two lists in the middle
- Discuss as one big group:
 - Which drugs are most used by young people? What are the effects?



ACTIVITY 5: Mix and match

 TIME: 10 minutes;  MATERIALS NEEDED: information chart in annex 8.5 cut into 21 strips

Participants arrange themselves into four groups. Provide each group with strips of mixed paper (reference annex 8.5, chart cut into strips) and ask them to match the effects to the correct substance

- Go through the correct answers as one big group or check each group's answers to make sure they are correct



ACTIVITY 6: Making safer and healthier choices

 TIME: 20 minutes

Get into three or six groups, depending on the amount of people present. Give each group a topic: smoking, drugs, or alcohol

- Each group creates a short television or radio advert informing people about their selected substance and why it is not healthy


- Perform the adverts to the rest of the participants
- As a whole group, ask what messages were clear. Was there any crucial information omitted?

Discuss:


- How can we support ourselves and each other to make safer and healthier choices?


Support participants to discuss the following:

- How to combat peer pressure
- Staying away from people and places where drugs or alcohol are used
- Staying busy with activities such as running, bike riding, dancing, etc. These physical activities provide us with a natural 'high' from endorphins that make our bodies and brains feel satisfied
- Talking to a mentor/guardian if you are under pressure from friends
- Reaching out for help if we find ourselves in trouble with any substance abuse.; Encouraging our friends to do the same even if it is frightening

-  The chief in your area has invited you to talk to the local under 15 football team for five minutes about the importance of making safer and healthier choices. What will you say?

SESSION SUMMARY

-  TIME: 5 minutes

-  We all have a responsibility to understand and assess the risks related to the choices we make. We need to know that we have the option to make safer and healthier choices, such as exercising, hanging out with friends who do not pressure us to do things, and building our confidence by saying 'no.'

TOPIC 6: GENDER ROLES

This session aims to equip children in care and care leavers with knowledge on gender and its impact on how we think and the decisions we make.



90 minutes



Notebooks, pens, flip charts, marker pens, blue tack/masking tape

Session objectives

- Understand what we mean by the word gender
- Understand how gender stereotypes can influence our thinking and choices
- Develop tools for recognizing and addressing gender stereotypes

Session outline

- Welcome
- Homework review
- Understanding gender
- Understanding how gender stereotypes can affect our thinking and choices
- Ideas and tools for addressing gender stereotypes
- Setting homework
- Summary



Note to facilitator: this can be a sensitive and challenging topic for participants. It is imperative to remind participants only to share what makes them feel comfortable. Recognize any participant becoming upset and outline how participants can acquire support after the session.

Welcome—10 minutes

- Warmly greet and welcome the participants
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Outline objectives of the session

Discussion of homework—5 minutes

Below is a guiding question for the discussion:

- Invite two or three participants to read aloud how they would educate the under 15s football team on the effects of cigarettes, alcohol, and drug abuse

On a flip chart, record the key points



ACTIVITY 1: Introduction to gender

⌚ TIME: 10 minutes

Brainstorm:

- What is the difference between boys and girls?



Every society has expectations about how boys and girls should behave, communicate, and act and the roles and responsibilities they should embrace because they are either a girl or a boy. For example, girls conventionally cook and clean; are permitted to cry; are never the hero; are supposed to look pretty. Boys are never to show emotion, do not cook or clean, and are traditionally mechanics, doctors, and truck drivers.

Being a boy or a girl should not stop us from achieving what we want to do in this world, unless it harms ourselves or others. It is important to understand that society created a construct that mostly remains to this day about how boys and girls are expected to exist.

Violence against another human being is never acceptable. Whether the person is a girl, boy, nonbinary, woman, or man, violence is never the answer because everyone deserves to be treated equally and with respect.

DEFINITIONS¹²

Gender: The traits associated with one sex, including behavioral, cultural, or psychological traits. What society or culture expects from people based on whether they are male or female. How society wants you to behave, think, or act, because you identify as a boy or girl.

Gender Role: Expectations of how men and women should act and what their roles are within society

Gender Stereotype: An oversimplified or biased description of the abilities of men and women

Sex: Either of the two major forms of individuals that occur in many species and that are distinguished respectively as female or male especially based on their reproductive organs and structures. This word is also used to refer to sexual intercourse.

Intersex: When a person is born with both male and female biological characteristics.



ACTIVITY 2: My strengths

TIME: 15 minutes

Ask participants to sit in a circle. They should each imagine they are their opposite sex

- Each person stands up and says what they think they should be good at as the opposite sex, starting with: “As a boy/girl, I’m...” For example, a girl might stand up and say “As a boy I’m strong!”
- Once everyone has participated, ask participants to repeat the exercise but saying their personal gender. For example, a girl might stand up and say “As a girl, I’m strong!”
- Ask participants which of the statements was true for both girls and boys? Which were not and why?

Brainstorm:

- In your community, what roles are reserved for boys or girls?
 - How can these roles limit your abilities?
 - Are girls expected to communicate differently from boys?
 - Are the consequences for behavior different for boys and girls?



ACTIVITY 3: Being a boy, being a girl

TIME: 30 minutes


Split participants into two groups: one with girls and one with boys

- Give each group two large pieces of paper. Ask each group to draw a parallel line on each

¹² Life Skills and Health Curriculum for the Adolescent Girls Empowerment Program (AGEP) 2013. Population Council

piece of paper. This will be the life journey for 'Cynthia' and 'Julius'. Mark 'just born' at the start of the line and '80 years old' at the end. In between, mark years 5, 11, 18, 25, 40, and 65. Write or draw things about Cynthia's or Julius' life at each mark. This could be which school they attend, a job they hold, whether they have a family, what their daily life looks like, if they have grandchildren, where they have traveled, etc.

- Put each group's life journey for Cynthia next to each other and the same with Julius' life journey
- Compare the groups' ideas about life journeys for Cynthia and Julius. Brainstorm the following:
 - How are their lives similar? How are they different?
 - What might Julius and Cynthia want to do differently in their lives?
 - How can they make this happen?

 **When a young man is told to “act like a man,” it usually means avoiding emotion, displaying strength, and being a successful provider. Boys are taught that they have certain privileges compared to girls. Unfortunately, ‘acting like a man’ may drive boys to engage in risk-taking behaviors or use violence as a way of proving their manhood and power. On the other hand, when a young girl is told to “act like a woman,” it can mean being submissive, not complaining, and acting sexy but never too smart. This may result in her not achieving her full potential academically or in her career and being voiceless when she is harmed or disrespected.**




ACTIVITY 4: My heroes


 TIME: 15 minutes


Ask participants to imagine their heroes or role models. They can be famous people or people only known to the individual

- If they feel comfortable, ask participants to share their heroes with the group.


 *The facilitator may choose to have a couple of examples, such as female leaders like Wangari Maathai and powerful but non-violent men such as Eliud Kipchoge.*


- What makes them your hero or role model?

 *The facilitator may choose a role model, such as Wangari Maathai because she won the Nobel Peace Prize for her contribution to sustainable development, democracy, and peace; or runner Eliud Kipchoge because he said “Athletics is not so much about the legs, it’s about the heart and mind.”*

-  Identify someone in your community who has challenged gender roles. What did they do? What challenges did they face? What was the end result?

SESSION SUMMARY

 TIME: 5 minutes

-  As we become more aware of how some gender stereotypes can negatively impact our lives and communities, we can think constructively about challenging them and promoting more positive gender roles and relations in our lives and communities. Therefore, we are free to create our ideas about gender (gender norms) and how we wish to live our lives. Our culture and society influence gender, but this can be challenged and changed.

TOPIC 7: STARTING TO THINK ABOUT MY CAREER PATH

This topic is designed to support participants to start thinking about career choices and the steps they may need to take to achieve their career of choice.



90 minutes



Notebooks, pens, flip charts, marker pens, blue tack/masking tape

Session objectives

- Understand the different career options
- Learn how to find and keep a job
- Identify key skills in entrepreneurship or the job market
- Understand what is required to set-up a business

Session flow

- Welcome
- Homework review
- Main session
- Summary
- Assigning homework

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Outline objectives of the session

Discussion of homework—5 minutes


- Who did you identify in your community as challenging gender roles?
- What have they done or are doing that makes them stand out to you?



Even though finishing school and starting work may seem like a long way off, thinking about your career now is important because it can influence what you choose to study.



ACTIVITY 1: What do I want to do?

 TIME: 20 minutes


Participants get into pairs

- Explain that we will be talking about careers. A career is a profession for which one trains, and which is recognized as their calling. It is something you wish to do or work towards in your life. It requires long-term goals and engaging in something you are passionate about.
- Each person tells their partner the following:
 - What you thought you wanted to be when you were a young child

- What your family and friends might want you to do
- What you now think you may want to do as a career
- *Inform participants that it does not matter if they are not sure what they want to do for a career*
- Participants will then arrange themselves into a big circle. Ask each participant to give feedback on their partner's career answers.


Discuss as one big group:

- If you have one, how does your chosen career make you feel?
- If you have not discovered your career goal, how does that make you feel?
- How can staying and progressing in school or continuing education with vocational training or university help you achieve your life goals?

 **Explain: some people do not figure out the career they aspire to until much later in life. If you have not yet discovered your career calling, that is okay. This session is designed to help you understand what is important to you and your future. Either having a chosen career or not having one yet can feel like immense pressure. It is essential to recognize this and release that additional pressure off yourself while exploring your options. Continue pondering ideas, discover other subjects you can study to support your goals, and talk to people who have intriguing careers and ask them how they got there.**



ACTIVITY 2: Mapping my career path


 TIME: 20 minutes

Give each participant a piece of paper and a pen. Ask participants to draw a life timeline with their chosen career at the end (they can select one they might enjoy if they do not know what their chosen career is at this time)

- Participants draw five footprints along the timeline and write the steps they need to take to get to their chosen career. The facilitator may choose to draw an example timeline with ideas, such as talking to a mentor, and studying hard
- Participants show their timeline to the people sitting next to them
- As a group, agree on fundamental steps that can be adopted to achieve career goals, such as staying in school and studying



ACTIVITY 3: What are my strengths and skills?

 TIME: 15 minutes

Ask participants to think of their favorite school subject but not to state it aloud

- Participants will now stand up and walk around the room, finding others who fancy the same subject as them
- In their mini groups, ask participants to think about the following:
 - What careers might be to a specific subject?
 - What skills do these subjects teach us?
- Come back together and share answers as a group. The facilitator might choose to provide an example, such as: "Math is my favorite subject. It can help me be a teacher, engineer, computer programmer, or banker. It teaches me to be confident with numbers, solve problems, and be a strong logical thinker."
- Next, form into one big group and discuss the following:
 - What skills do I need to learn outside of school? The facilitator might choose to give an example, such as good communication, staying open-minded, and being adaptable.
 - Where else can I learn these skills?



Explain: school teaches us many foundational skills, including subject lessons. However, there are some skills we need to continue strengthening outside of schools, such as listening, excellent communication, and relationship building.



ACTIVITY 4: Elevator pitch

TIME: 15 minutes; MATERIALS NEEDED: flip chart, marker pen, masking tape

An elevator pitch is a clear, brief message or a commercial about you. It communicates who you are, what you are good at, and why someone should start a conversation with you. It is typically about 30 seconds long, which is the time it takes people to ride from the top floor to the bottom of a building in an elevator.

For example, “Hi, my name is Betty, and I’m a student in school. My favorite subject is geography, and I want to be a pilot when I am older. I would love some ideas for how I can learn more about becoming a pilot. I also love gardening, and I teach younger children how to grow vegetables every Tuesday as part of our community project. My secret skill is that I can do handstands!”

- Participants have five minutes to create and write their elevator pitch
- Participants get into pairs and time each other to make sure it is no more than 30 seconds long
- Participants get into groups of five and read their elevator pitches to each other

Get back into one big group and discuss the following:

- Did you hear any unique elevator pitches? If so, what made them memorable?



Learning how to speak about yourself and your skills confidently and concisely is very important; it can also help you later in life with interviews and employment opportunities.



Write about why you have chosen the career you are interested in pursuing and what you hope to achieve. If you do not know which career path you wish to explore, write about something you might be interested in doing as a career.

SESSION SUMMARY

TIME—5 minutes



It might seem early to start thinking about a career. However, planning can help us choose a pathway that supports our occupation, such as what subjects we choose to study, what volunteering opportunities we accept, and the work experiences we procure. We can also change our minds, especially if we think the career we thought we wanted to do is not as motivating for us as we initially imagined after conducting research. Talking through career options with a mentor, teacher, or friend can be useful.

TOPIC 8: MONEY MATTERS

This session aims to equip children in care and care leavers with the necessary budgeting and saving skills.



90 minutes



Notebooks, pens, flip charts, marker pens, blue tack/masking tape

Session objectives

- Better appreciate and prioritize spending
- Acquire knowledge on how to spend and save money consistently

Session outline

- Welcome
- Homework review
- Main session
- Summary
- Assigning homework

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Outline the objectives of the session

Discussion of homework—5 minutes

- Ask participants to write their career choice on a sticky note and attach it to the wall
- Discuss as a group how many different career ideas there are amongst the participants
- Ask for two or three volunteers to talk about what they hope to achieve by pursuing their careers.



ACTIVITY 1: how much does it cost?

 TIME: 15 minutes

The facilitator splits participants into two or three groups and explains that they will say one of the items listed below. They must agree on what price they think or know the item is and write it down. The group with more correct answers wins.


- One kilogram bag of rice
- A tube of toothpaste
- A newspaper
- 10 onions
- Five bananas

- A t-shirt
- One liter of milk
- A new book to read
- A packet of six pens

 **Explain: it is vital to understand how much things cost to learn how much money we need and how to budget.**



ACTIVITY 2: How we spend our money

 TIME: 25 minutes

Debbie has just been reintegrated back in with her family. At home, there is her mom and two younger brothers. Debbie gets money (2,000KSh) to buy essential groceries for the whole family for one week.

In groups of four, participants discuss and agree upon the following:


- Create an itemized shopping list that Debbie will take with her to the store
- The total amount of money Debbie will spend
 - Next, come back together as one big group and compare shopping lists and the total amount spent.

Ask participants:

- What was easy about the activity?
- What was challenging about the activity?



ACTIVITY 3: Savings

 TIME: 20 minutes

Participants arrange into groups of four and discuss the below case study using the following question:

- How can Fred and Deborah each save money to buy the phone they want?


Fred and Deborah have both decided that they want to save up and buy themselves mobile phones. Deborah wants a phone as soon as possible; Fred wants to save more money and buy a phone with a great camera. Fred and Deborah each receive the same amount of pocket money every week because they are responsible for buying their own schoolbooks.

Budgeting essentials:

- Only spend the money you possess: going into debt is not healthy for your mental or financial well being
- Discover where you can save money on cheaper items. However, it is not always better to buy the cheapest option; sometimes it is smarter to get a higher quality product that lasts longer
- Decide what is needed and what is nice to have. Make a savings plan if something needs time for gathering money.
- Keep a record of money you have and money you have spent
- Regularly check that you are not spending more than you have



ACTIVITY 4: How important is money?

 TIME: 10 minutes

Brainstorm:

- How important is money?
- What do you think is as important or more important than money?



Explain: money is essential; it enables us to pay for items we need in life, such as food, shelter, electricity, and clothing. It also enables us to pay for things we want in life, such as new clothes or books. Money, however, cannot buy everything. For example, it cannot buy healthy friendships, kindness, integrity, or thoughtfulness.



Your friend tells you they want to spend their money, meant for schoolbooks, on a mobile phone. What do you say to your friend and why?

SESSION SUMMARY



TIME: 5 minutes



Keep money in perspective and control money by knowing what you have and how you spend it. Start budgeting and saving now, and it will become another great skill that you possess.

TOPIC 9: CITIZENSHIP

This session helps equip children in care and care leavers with knowledge and skills on the values and behaviors that define them as Kenyans. It also outlines the key documents that may be needed and how to acquire those documents. The session lists the various social protection programs that exist and how to enroll in those programs.



90 minutes



Notebooks, pens, flip charts, marker pens, blue tack/masking tape

Session objectives

- Discuss some of the values important to Kenyans and others
- Understand children's rights and the Kenyan Bill of Rights

Session outline

- Welcome
- Homework review
- Main session
- Summary
- Assigning homework

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Outline objective of the session

Discussion of homework—5 minutes

- What would you say to your friend and why?
- What could your friend do to save money so that they can buy a phone?



ACTIVITY 1: Pillars of character¹³

 TIME: 20 minutes

There are six pillars of character that help to create healthy individuals and a healthy society¹⁴. They are:

1. Trustworthiness
2. Respect
3. Responsibility
4. Fairness

¹³ <https://charactercounts.org/program-overview/six-pillars/>

¹⁴ From the Josephson Institute of Ethics https://web.engr.uky.edu/~jrchee0/CE%20401/Josephson%20EDM/Making_Ethical_Decisions.pdf

5. Caring

6. Citizenship

- Prepare six flipcharts with each of the values and stick them on the wall spaced out
- Divide participants into six groups and ask each group to stand with one of the six values
- Each group discusses the following and writes their answers on the flipchart:
 - What does this value (for example, respect) mean to you?
- After two minutes, each group moves to the next poster. Give each group two minutes for the first three posters, then one minute for the last three
- Get into one big group

Discuss:

- What challenges do you face in owning these values?
- Do you think any of the values are more important than the others? If so, why? If not, why not?
- Can you think of any other values needed in life to help create happy and healthy societies? (Refer to Annex 8.10 page 47 for additional notes.)



ACTIVITY 2: Going global

 TIME: 15 minutes;  MATERIALS NEEDED: Flip chart, marker pens

Participants assemble into one big circle. Put a piece of flipchart paper and pens in the middle of the circle

- Ask participants to think of national and globally famous people that they admire. For example, sports personalities, leaders, scientists, and advocates. When they think of someone, they can write that name on the flipchart
- Read aloud all the names on the flipchart

Discuss:


- Can you identify some of the key characteristics that define one or more people on the list?
- Are there any characteristics that all or most of them hold?



Values can sometimes be challenging to uphold. The people we admire are often those who always sustain their values, including during tough situations. When we uphold our values, we are also shining examples to others.



ACTIVITY 3: What will you do?

 TIME: 25 minutes


Participants assemble into three groups. Give each group two scenarios (listed below) to discuss

- Each group then presents to the full group their two scenarios
1. You are about to conduct your national exams, but you have been performing poorly in school. You are not overly concerned about your school grades because your father has already spoken to someone who will make sure you receive the top marks.
 2. You have noticed that some children buy sweets and biscuits on their way to school. They eat and then throw paper wrappings on the road. Yesterday they laughed at an older man when he told them they were littering.
 3. Your classmate got pregnant over the school holidays. She recently gave birth and is unsure whether she will return to school because of the gossip and ridicule from classmates.
 4. You overheard your football team members speak about changing the play hours because they do not want Peter, who is disabled, to join their team again. They blame him for being too slow and making their team lose the tournament.

5. You are aware that your friend Johnson has been using your name to lie to his parents when he is late returning home from school. He says he is at your house helping you with homework.
6. Someone said that their friend saw you bravely standing up to a bully last week. Everyone is congratulating you. You say thank you; however, it was not you who stood up to the bully.

Discuss as one big group:

- What can make standing up for our values hard?
- What could we do if people in our friend circle have different values to ours?

 **Explain the importance of honesty, integrity, keeping our environment clean, kindness, and standing for truth. Sometimes standing for these values may make you unpopular with peers, but it is important to have values and stand by them. It is also acceptable that others may have different values to ours; having those values are not harmful to themselves or others.**




ACTIVITY 4: Kenya's Bill of Rights

 TIME: 10 minutes

Brainstorm:

- What do we mean by 'children's rights'?
- What rights do you have?


 **Explain: Kenya's Bill of Rights outlines that everyone's rights should be respected and outlines the State's responsibilities to uphold them. The Bill of Rights demonstrates Kenya's commitment to upholding the United Nations Convention on the Rights of the Child and the United Nations Universal Declaration of Human Rights. Regarding young people, the Bill says that:**


The State shall take measures, including affirmative action programs, to ensure that the young people—

- a. Access relevant education and training
- b. Have opportunities to associate, be represented, and participate in political, social, economic, and other spheres of life
- c. Access employment
- d. Are protected from harmful cultural practices and exploitation

Homework: What does being Kenyan mean to you, and why?

SESSION SUMMARY

 TIME: 5 minutes

 The Kenyan author Kola Tubosun was once asked what being Kenyan meant to him. This was his response:

How would you describe 'the people of Kenya' to someone who has never met them or even heard about the country?

Beautiful. Talented. Hardworking. Enterprising. The country is a vibrant space of the different cultural streams of African, Asian, and European origins. Its landscape and history have become part of the global imagination.

What does 'identity' mean to you?

Identity is an ever-changing unity of difference and sameness; particularity and universality. Identity is the imagined container of multitudes. I am — Kikuyu, Luo, Maasai, Kalenjin, Mijikenda, Kissi, Luhya, Saboot etc., meaning I share a certain history with all who call themselves Kikuyu, Saboot etc., but I am also Kenyan, meaning I share a geographic and historical space with all other Kenyans. I am African. I am black. I'm a citizen of the world.

TOPIC 10: MANAGING CHANGES IN OUR LIVES

This session aims at preparing participants for coping with significant life changes, including life outside of care. The session is intended to help the participants recognize the tools they must manage change, including moving on from a CCI.



90 minutes



Notebooks, pens, flip charts, marker pens, blue tack/masking tape

Session objectives

- Describe a safe and secure place/environment used during the transition
- Visualize their journey or immediate goals and plans
- Identify a potential mentor or caregiver
- Understand the benefits and challenges of transitioning to family and/or community care

Session outline

- Welcome
- Homework review
- Reestablishing family and community relationships
- Identifying mentors
- Summary
- Assigning homework



Note to facilitator: this can be a sensitive and challenging topic for participants. It is imperative to remind participants only to share what makes them feel comfortable. Recognize any participant becoming upset, and outline how participants can acquire support after the session

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Outline the objectives of the session

Discussion of homework—5 minutes

Guiding questions for discussion

Ask each pair to present their business plan proposal assignment

- Ask volunteers to note key national documents that they need
- Check which is the most requested document and explain how to acquire it



Changes in our lives can be big or small; moving from our CCI to another place of care or returning home to be with our family is a tremendous change. The previous sessions have hopefully enabled you to see the strengths and skills you have and equip you with additional ones to help you manage both larger and smaller changes to feel more prepared for the next stage of your life.



ACTIVITY 1: How I'm feeling about me or my friends leaving care

 TIME: 10 minutes

Brainstorm:

- If you are leaving the CCI: how do you feel about it? Support participants to think about the practical and emotional aspects of transitioning from care
- If your friend is leaving the CCI: how do you feel about it?
- How might others be feeling about you or themselves leaving care?



The experience of leaving care is very individual, and no two people have the same experience. Practically there might be many changes, such as switching schools, finding new friends, and reuniting with old friends and family. Emotionally these can impact us. They can bring additional stress, anxiety, excitement, frustration, and happiness. Being aware of all the practical and emotional changes we are going through can help us use some of our skills, such as self-care and resilience, and our knowledge, such as how to access the support we need. All these tools help make changes more comfortable to navigate through and even enjoy.



Activity 2: Islands¹⁵

 Time: 20 minutes

Break into groups of five and distribute a piece of flipchart paper to each team

- Ask the groups to imagine that they are on an island. While on that island, they see another island they have never seen nor heard about before.
- They can draw the islands on a piece of paper or stick them together to represent two islands. Now ask the group to choose one island to stand on.
- Each group discusses the following:
 - Should we build a bridge to reach the new island or a wall to protect ourselves?
- Each group discusses the pros and cons of each decision and makes a final choice (each person in the group can make a different choice)
- Gather into one big group. Ask all participants to raise their hands if they built a bridge, and then the same thing with those that built a wall. Ask if anyone chose a different path? Ask participants to explain why they either built a bridge, a wall, or something else entirely.



Note: Relate constructing a bridge to reaching out to family or community members while building a wall relates to choosing not to make contact. Highlight that there are no right or wrong decisions.



Some people choose not to reunite with their family, often due to the circumstances in which they left the family home. No one over 18 years old is required to return home. If you choose to, it is likely to take time, patience, and support to work through the circumstances that led you to leave home and rebuild some relationships. When possible, get support from your CCI even if you have left. Go at your own pace, and lean on your support networks, such as friends and your mentor. You may also choose to access counseling to support you with the process, like other family members. If you feel unsafe at any point, trust your instinct, and get advice and support before taking further steps in the reintegration process.



Some families may choose not to rebuild a relationship with the young person who left the family home, which can be painful. However, with the support from your friends, mentor, and counseling, you can manage this transition too and emerge more resilient.



During the transition from care, let the planners know that you are interested in meeting the family. They will then draw a plan of how you will be involved in the process. If you have already left care, speak to your contact person at the CCI.

¹⁵ <http://www.youthgroupgames.co.uk/fun-games-teach-life-skills.html>



ACTIVITY 3: Overcoming loneliness

 TIME: 10 minutes;  MATERIALS NEEDED: Flip chart, pens

Participants return to their groups


- Ask the groups to imagine they have traveled to the island. They can compare this to returning to their community where they grew up or into a new community.
- Their friends have all gone to neighboring islands and they are feeling isolated and alone. What can they do to address this loneliness?
- On a piece of flipchart paper, ask participants to write or draw ideas for overcoming loneliness and isolation
- Get into one big group and compare answers



Find people who enjoy doing what you enjoy doing, whether reading, playing a sport, singing, or cooking. Volunteering is an excellent way to meet people and develop your experience at the same time. We also live in a time where distance is no longer a significant barrier, thanks to the internet; you can video call friends and family who are not nearby.



ACTIVITY 4: My life journey

 TIME: 10 minutes

Explain to participants that they will return to one of the first activities in session 1. We will now think about our own futures and life stories.

- Ask participants to close their eyes, sit back and relax, and imagine their life next year
- Explain to participants that they are now going to think about our own futures and life stories.
 - Close your eyes, sit back, and relax, and imagine your life next year
 - Where and with whom are you living? Who are your friends?
 - What will you do in your spare time? Will you be in school? What support might you need on this life journey?
 - Who is your role model? Why are they your role model?
 - What are your talents, hobbies, and sports?
 - What else do you do in your spare time?
 - Is there anything you are worried about?

Next, imagine yourself in five years. Ask some of the same questions from above. What are your goals or vision?

- What support might you need on this life journey?

Ask participants to open their eyes and relax for a few minutes

- Ask them to reflect on what they just envisioned— the various stages of their lives
- Ask participants to share something about their life journey that changed or developed after they initially completed the activity
- Ask participants whether they have any new concerns since they first did the activity and whether any previous concerns still need addressing



Take time to address concerns where they may apply to more than one participant. For specific individual concerns, ask the individuals to speak to the facilitator or a trusted adult at the end of the session.



ACTIVITY 5: Mentoring

TIME: 10 minutes

Draw a non-gendered figure on flipchart paper and explain to the participants that it is the outline of a mentor

■ Brainstorm and write answers around the figure :

1. What is a mentoring relationship?
2. Who can be a mentor?
3. What experiences and skills should a mentor have?

A mentoring relationship is a professional relationship with boundaries and agreed upon times you are in contact (for example, for one hour a week for six months). At the start of a mentoring relationship, the mentor and mentee should agree on a Code of Conduct and objectives for the relationship.

Mentors are trusted adults in the community who commit to supporting someone. They may be professionals in a field of work you are interested in entering, have particular life skills you want to develop or have life coaching experience. Some mentors also know about human rights, Kenyan legislation, finance, psychosocial support, or other relevant skills. All mentors need to have excellent listening and communication skills.



ACTIVITY 6: Choosing a mentor

TIME: 10 minutes


Ask participants to think about their current life situation and fill out the table below:


What is causing me difficulty right now?	How would I like my mentor to support me?	What skills and experience do I want my mentor to possess?

Determine what you need in a mentor. What do you aim to gain from that relationship?

- Check the qualities of the person (s) you may consider as a mentor. Are they patient? Would they share similar dreams as you? Are they easily available? Are they honest with their feedback?
 - Identify an enthusiastic and reliable mentor who can help you with several issues instead of having numerous mentors
 - If you feel comfortable, take the initiative. Otherwise, you can ask for support from a friend, teacher, or another trusted adult. Approach your potential mentor and tell them you would like to learn from them. Do not list your expectations during the first meeting, and do not expect too much of their time
 - Once you find a mentor, commit to your mentoring sessions. Preparation includes preparing for the sessions and communicating with your mentor about the issues you would like help. Do your part and do not sit back and wait for the mentor to help you
 - Be respectful and be considerate of time
 - Always act with integrity in the mentoring relationship. This relationship is professional. Never ask for or accept money or items and do not socialize. Report any behaviors that you do not feel comfortable with to a trusted adult.
- Think about whom you might want as your mentor. Make a list of their relevant skills and experience. How might you approach the situation and ask them to be a mentor? If they say no, who else might you approach?

SESSION SUMMARY

 TIME: 5 minutes

 Managing change is a crucial skill to learn—it means using many of the tools we have learned in this program, including resilience, mental well-being, and clear communication about what we want and need.

Leaving care is a big step. However, so is coming into care, going to secondary school, taking an exam. Changes are a part of life, and they help us grow. Keep using your tools and get advice and support when you are unsure how to manage a situation, you feel overwhelmed, or you get stuck. Change can provide incredible learning experiences and can even be fun and exciting.

Finally, think about the people you would like to invite for your graduation. Each participant can invite two people to the ceremony (although you do not need to invite anyone).

FINAL SESSION: GRADUATION

This session enables participants who have attended 80% of the sessions to celebrate the program's completion alongside their guests.



90 minutes



How I'm Feeling survey, tape, pieces of paper, pencils, certificates, snacks

Session objectives

- Enabling participants to view their skills and strengths development by re-taking the survey
 - Complimenting others and receiving compliments to help participants recognize their own and others' skills and strengths
 - Recapping on key information and skills developed throughout the program
 - Celebrating the life skills session graduates
-

Session flow

- Welcome
 - Review of homework
 - How I'm Feeling survey
 - Complimenting each other
 - Recap on learnings from the program
 - Graduation ceremony
 - End the program
-

Welcome—10 minutes

- Greet and welcome the participants warmly
- Thank the participants for choosing to attend the sessions
- Participants are free to open the session with a song or prayer
- Play an icebreaker game
- Display the group standards and review them
- Outline the objectives of the session

Discussion of homework—5 minutes

- Review the participants' homework on identifying mentors
- At this point, also cover any questions the participants may have about the sessions



ACTIVITY 1: How I am feeling survey

TIME: 15 minutes; MATERIALS NEEDED: printed survey, pens

Remind participants that the survey is to help assess the effectiveness of the sessions for their learning and skills development

- Give each participant a survey and ask them to fill it out as truthfully as possible

Some participants may feel less optimistic or more anxious about things than you did at the start of the program. If this is the case, it may be because you have started thinking through some of the significant life changes coming up, which can seem overwhelming. However, you have also learned lots of tools and identified many of your existing strengths and skills which will help you throughout your life journey. Please remember to accept help and support when you are in need. If you are worried, talk to the facilitator or another trusted adult at the end of the session.



ACTIVITY 2: Complimenting each other

TIME: 15 minutes; MATERIALS NEEDED: paper, masking tape, pens)

Give each participant a piece of paper, tape, and a pencil

- Ask participants to form into pairs. Each person writes one compliment about the other person on the piece of paper (making sure their partner cannot see), and then sticks the piece of paper on their partner's back. The compliment should not be about their appearance, rather a quality such as 'brave,' or 'most likely to start a business'
- Participants go around the room, adding to what is already written on each other's backs
- Next, give the guests pencils and ask them to write something on the backs of the participants whom they know
- Ask participants to take the piece of paper off their backs and read what is written
- Get into one big circle and ask participants:
 - Were you surprised by what was written?

What have you most enjoyed about working together?



ACTIVITY 3: What we have learnt

TIME: 15 minutes

Participants and guests all sit in a circle together

- Ask participants to stand up and state the most important skill that they learned or realized from the program.
- Encourage everyone to clap after each participant has spoken
- Note: The facilitator should encourage the participants to join KESCA



ACTIVITY 4: Certificates


TIME: 10 minutes

Participants and guests all sit in a circle together

- The facilitator, or where possible, a respected member of the community, awards each participant with their certificate
- Ask participants to stand up when they receive their certificates and encourage everyone to clap





ACTIVITY 5: celebrating success

 TIME: 15 minutes

Participants choose how they wish to celebrate with their guests. For example, with an ice-breaker or activity they enjoyed, a song or a dance.

PROGRAMME SUMMARY

 TIME: 5 minutes

 Hopefully, this program has helped participants recognize some of their strengths and skills and develop new skills. However, all skills need practicing regularly, and life is all about learning.

“Learning is a treasure that will follow its owner everywhere.”

– CHINESE PROVERB

“Always walk through life as if you have something new to learn and you will.”

– VERNON HOWARD

“Anyone who stops learning is old, whether at twenty or eighty.”

– HENRY FORD

ANNEX 1

GLOSSARY¹⁶

Aftercare support: A process whereby various services are offered to children after they leave alternative care and move on to independent living or get reunified with their families.

Alternative care: Alternative care is a formal or informal arrangement whereby a child is cared for overnight outside the parental home, either by a decision by the judicial, administrative authority, a duly accredited body, or at the initiative of the child, his or her parent(s), primary caregivers, or spontaneously by a care provider in the absence of parents—also referred to as “care” in this document.

Attachment: a bond or tie between an individual and an adjunct figure based on the need for safety, security, and protection.

Caregiver/carer: a parent or guardian who is charged with the responsibility for a child’s welfare.

Care leaver: child or young person who is leaving or has left an alternative care placement. He or she may be entitled to assistance with education, finances, psychosocial support, and accommodation to prepare for independent living.

Case management: The process of ensuring that an identified child has his or her needs for care, protection, and support met. This is usually the responsibility of an allocated social worker who meets with the child, the family, any other caregivers and professionals involved with the child in order to assess, plan, deliver, or refer the child and or family for services, and monitor and review progress.

Case Worker: the primary worker responsible for a case. This person maintains responsibility for the individual case management process from identification through to case closure.

Charitable Children’s Institution: a home or institution established by a person, corporate or non-corporate, religious organization, or NGO approved by the National Council for Children’s Services (NCCS) to manage a program for the care, protection, rehabilitation, or control of children.

Child: any human being under the age of 18 years.

Child abuse: any individuals, institutions, or processes do or fail to do, which directly harms young people or damages their prospects of safe and healthy development into adulthood. The Children Act, 2001 defines child abuse as anything that causes physical, sexual, psychological, or mental injury to a child. There are four types of child abuse: physical abuse, neglect, sexual abuse, and emotional maltreatment. All four are typically found in combination rather than individually.

Community: the individuals, or groups of people, organizations, and institutions (formal and informal) where the child and family live.

Facilitator: a person who helps a group identify and solve problems by structuring the discussion and intervening when necessary to improve the effectiveness of the group’s processes and outcomes.¹⁷ They have basic training on life skills and conduct sessions with care leavers to promote knowledge/skill gain, initiate, and sustain behavior change.

Family: includes relatives of a child, including both immediate family (mother, father, step-parents, siblings, and grandparents) and extended family, also referred to as relatives or ‘kin’ (aunts, uncles, and cousins).

Institutional care: the short-term or long-term placement of a child into any non-family-based care situation. Similar terms include residential care, orphanage, and group care.¹⁸

Life skills: various skills that young people can learn regarding social development and living and coping independently. These skills include self-awareness, problem-solving, learning to negotiate, decision-making, creative thinking, critical thinking, effective communication, in-

¹⁶ Unless otherwise stated, definitions and terms taken from the Government of Kenya. (2014). Implementing the Guidelines for the Alternative Family Care of Children in Kenya or Government of Kenya. (2019). Case Management for Reintegration of Children to Family and Community-based Care. Draft.

¹⁷ Reference for Business. Definition and role of facilitator accessed at: <https://www.referenceforbusiness.com/management/Ex-Gov/Facilitator.html>

¹⁸ Better Care Network. Toolkit definitions accessed at: <https://bettercarenetwork.org/toolkit/glossary-of-key-terms>

terpersonal relationship skills, conflict resolution, empathy, coping with emotions, and stress management, money management, raising a family, and running a home.¹⁹

Mentors: trusted adult community members who commit to work in support of vulnerable young people. They have basic training on children's rights and laws protecting children, life skills, adolescent health, income-generating activities, active listening, and how to provide psychosocial support offered by organizations. Through their presence in the community and by making regular visits, the mentors encourage young people to attend school, avoid risky behaviors, access basic services, and provide psychosocial support.

Monitoring visits: regular home visits with the child and family to ensure that the reintegration process is in the child's best interest. The visit ensures the family meets the child's needs; they progress on their care plan and provide any further referrals or psychosocial services. These visits may also involve interacting with neighbors, extended family members, or service providers.

Reintegration: the process by which a child is reunited and can integrate with his or her biological parents or extended family or legal guardian. During this process, activities are implemented to equip the child and the family with the necessary skills and resources for proper reintegration and readjustment.

Reunification: the process of bringing together the child and family or previous care-provider to establish or re-establish long-term care.

Risk factors: any attributes, characteristics, or exposures of an individual, including a child, that increase the likelihood of developing a disease, injury, or other forms of harm to their wellbeing.

Self-care: activities and practices that we can engage in regularly to reduce stress and maintain and enhance our short- and longer-term health and wellbeing.²⁰

Service provider: an individual employed or attached to a formal institution that provides professional care or services.

Social and behavior change: communication to change behaviors, including service utilization by positively influencing knowledge, attitude, and social norms.²¹

Supported independent living: a young person receives support in her or his own home, a group home, hostel, or another form of accommodation, to become independent. Support/social workers are available as needed and at planned intervals to help and support but not to provide supervision. Assistance may include timekeeping, budgeting, cooking, job seeking, counseling, vocational training, and parenting.

Supervision: a relationship that supports the facilitator's technical competence and practice, promotes wellbeing, and enables effective and supportive monitoring of the life skills implementation.²²

Youth and young person: interchangeable terms referencing people between the ages of 15-24 years.²³

19 Ibid.

20 University of Buffalo, School of Social Work. Introduction to self-care accessed at: <http://socialwork.buffalo.edu/resources/self-care-starter-kit/introduction-to-self-care.html>

21 Health Communication Capacity Collaborative. Social and behavior change communication saves lives accessed at: http://ccp.jhu.edu/wp-content/uploads/JHU_Social_and_Behaviour_FULL_OUTLINES_V2.pdf

22 Child Protection Working Group. (2014). Interagency Guidelines for Case Management in Child Protection. Retrieved from: http://www.cpcnetwork.org/wp-content/uploads/2014/08/CM_guidelines_ENG_.pdf

23 United Nations. Definition of youth accessed at: <https://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-definition.pdf>

ANNEX 2

LIFE SKILL TRAINING EVALUATION AND FEEDBACK FORM

This form is to be filled by participants of the facilitator's training.

Training dates/session dates: _____

Facilitator _____ Venue _____

Please complete the evaluation form. Your feedback is confidential and will only be used to help us improve the content and delivery of the training/session

Criteria			
What I thought about the sessions			
What I thought about the length of each session			
What I learned from the sessions			
I was heard and able to give my views			
Instructions were clear and understandable			
What I thought about the trainer			
The sessions were engaging			
The sessions were fun			

ANNEX 4

CHILD PROTECTION AND SAFEGUARDING POLICY

Kenya Society of Care leavers code of Conduct for Personnel working with children

Statement of Commitment

Kenya Society of Care leavers provides an open, friendly environment for everyone participating in our Programs. KESCA strives to provide high quality Programs to young people; these programs are safe and welcoming. KESCA seeks to involve children, caregivers, and colleagues, associates to ensure these standards are maintained.

All adults providing or assisting with activities for young people have special responsibilities to them. Abuse takes several forms and affects children in different ways. You should be aware of the impact your words and actions have on children. Good conduct not only prevents incidents and allegations, but also helps to highlight any conduct by other people that is unsafe or unprofessional.

This Code of Conduct details the type of practice we require of all adults involved with our Program. The Code of Conducts ensures everyone follows the following rules when in contact with children. This Code of Conduct will assist in ensuring the safety of children who participate in our projects promote good practice, and reduce the likelihood of false allegations. Everyone in our project working with children must abide by the following Code of Conduct. They should:

1. Be professional and always maintain the highest standards of personal behaviors.
2. Put the care, welfare, safety, and needs of a child first.
3. Recognize the trust placed in adults by children, and understand the power held over children by adults. Treat this trust and power with the highest responsibility.
4. Always work in an open and accountable manner. Work in view of others whenever possible, be wary of working alone and unobserved, and be willing to accept questions or criticism regarding good practice.
5. Expect others to work in an open and accountable manner.
6. Do not be under the influence of alcohol, drugs, or any illegal substance when engaged with this program.
7. Use appropriate and respectful forms of discipline and communication. Physical aggression, intimidation, verbal abuse, rebuke, and persistent shouting are not acceptable. Any form of assault (e.g., hitting, kicking, pinching, etc.) will come with consequences and be recorded as a serious incident. When working with children, positive messages are most effective.
8. Only use appropriate language; do not swear, and never make sexual or suggestive comments to a child. If a child makes such comments, enforce boundaries with your response.
9. Do not appear to favor one child or show interest in one child more than another; treat all children equally with respect and dignity.
10. Give enthusiastic and constructive feedback, rather than negative criticism.
11. Ensure that if a group of mixed gender children goes on a trip, they are accompanied by a male or female member of staff, volunteer, or helper.
12. Ensure that when on trips away from home, you do not share a room with a child or enter their room. The only exception is if an agreement was made beforehand that the child/children require additional support or supervision or if there is an emergency.
13. Ensure that you do not invite children to come into your home.
14. If you are required to transport a child in your car, obtain written parental consent. Never engage in rough, physical, or sexually games, this includes horseplay.
15. Never allow or engage in any form of inappropriate touching.
16. Report immediately any suspicion that a child could be at risk of harm or abuse.
17. Never do things for a child that they do themselves.

18. Never allow allegations made by children to go unrecorded or not acted upon.
19. Be a good role model and avoid use of bad language in front of children.
20. Do not discriminate against a child because of their age, gender, disability, culture, language, racial origin, religious belief, or sexual identity.
21. In the case of games/sports, use physical contact with children only when absolutely necessary. If contact is necessary (e.g., coaching or first aid), then explain to the child what the physical contact is for and change your approach if he or she appears uncomfortable. Any form of sexual activity with a child is unacceptable and could lead to disciplinary or legal action.
22. Design and use training methods and programs appropriate to the individual child.
23. Be aware of situations that could be misunderstood or manipulated by other adults. For example, if an official is alone with a child in a clubhouse, changing room, or car, he or she may be vulnerable to allegations of misconduct.
24. Be vigilant and aware of how children can misinterpret actions.
25. Actions made with good intentions can seem intrusive or intimidating to some children. Sometimes children become attracted to the adults working with them. Adults should be aware of the impact of their actions and should sensitively address any misunderstanding.

If a concern about a child's welfare comes to your attention:

Recognizing the signs of abuse can be difficult unless there are signs of physical or behavioral change. However, abuse may be suspected from something the child says or by something another person says or seen or heard. It is essential to be aware and vigilant and to deal with facts objectively. Take seriously any suspicion or allegation of abuse, or any disclosure of concern made by a child or adult.

- I. If a concern comes to your attention, record information, including relevant details. Be sure to record opinions or feelings as such; do not record them as facts. Do not question or interview the people involved in the incident of concern.
- II. For a child to disclose abuse takes great courage, they tell you because they want your help and for it to stop.
- III. Do not make promises of confidentiality but explain that you will need to contact other professionals who will be able to help. Listen to what the child says and do not suggest ideas. Use open questions such as ones that cannot be answered simply by "yes" or "no." Record what is said as soon as possible. It is important to use the exact words spoken by the child, recording facts and not opinions.
- IV. You must report any concerns within the area of Child Protection (physical, emotional, or sexual abuse, neglect, or bullying), in confidence and without delay, to the Designated Children's Officer.
- V. It is very important that you do not tell anyone else about the complaint until you discuss the situation with the Children's Officer. This includes the alleged offender or perpetrator.
- VI. Any information you give, or the fact that you gave it, will always remain confidential.

Declaration

I _____ confirm that I have read and understand this Code of Conduct and will abide by all its terms & provisions.

Signed: _____ Date: _____

Kenya Society of Care leavers Office

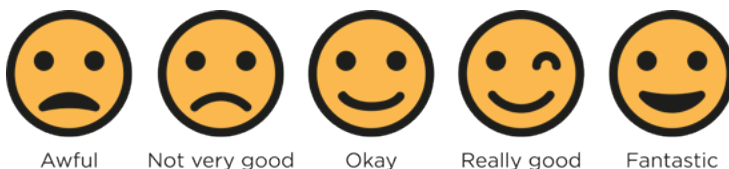
ANNEX 5

FEEL GOOD SURVEY

Hello,

Today we are going to answer some questions on the sheet of paper I hand out to you. This is called a Feel-good survey. I will give you a number and you will put that number on the top of your sheet. This survey is not like a test in school, it is a fun activity. We want to know how you feel about some important things. Please answer the following questions below. Put a checkmark (✓) next to the answer that best describes your situation.

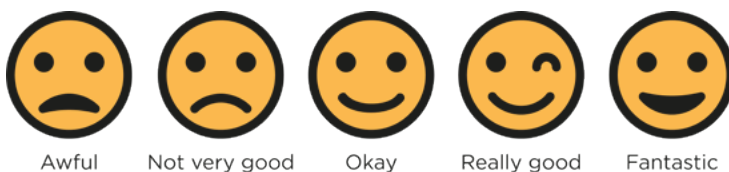
1. When thinking about your past experiences, how do you feel?



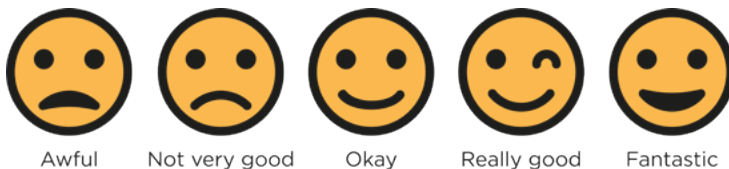
2. When thinking about your life now, how do you feel?



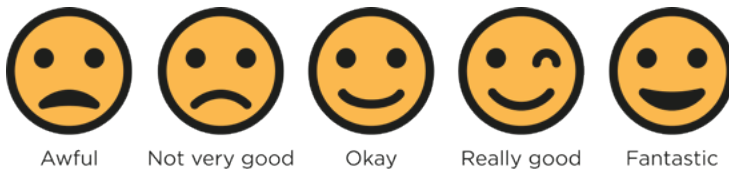
3. When thinking about your future, how do you feel?



4. How do you feel about leaving care?



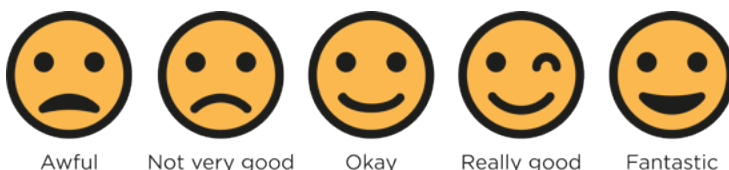
5. When thinking about your physical health, how do you feel?



6. When thinking about your mental and emotional health, how do you feel?



7. When thinking about your friends, how do you feel?



8. When thinking about your family, how do you feel?



Awful Not very good Okay Really good Fantastic

9. At this moment, rate yourself on the following:



Awful Not very good Okay Really good Fantastic

10. Rate how happy you feel:



Awful Not very good Okay Really good Fantastic

11. Rate how calm you feel:



Awful Not very good Okay Really good Fantastic

12. Rate how resilient you feel (able to spring back from challenges):



Awful Not very good Okay Really good Fantastic

13. Rate the knowledge you have:



Awful Not very good Okay Really good Fantastic

14. Rate the support you have:



Awful Not very good Okay Really good Fantastic

ANNEX 6

JOB AID —WARNING SIGNS AND SELF-ASSESSMENT FOR BURNOUT (TIPS FOR FACILITATING)²⁴

Assess Your Warning Signs	Checklist For Positive Coping Behaviors	Checklist For Negative Coping Practices
<ul style="list-style-type: none"> • I have disturbed sleep, eating, or concentration issues • I isolate myself from family, friends, and colleagues • I fail to take regularly scheduled breaks • I enjoy my work less than in the past • I find myself bored, disinterested, or easily irritated by clients • I have experienced recent life stressors such as illness, personal loss, relationship difficulties, financial problems, or legal trouble • I feel emotionally exhausted or drained after meeting with certain clients • I find myself thinking of being elsewhere when working with clients • I am self-medicating, overlooking personal needs, and overlooking my health • I find my work less rewarding and gratifying than in the past • I am feeling depressed, anxious, or agitated frequently • I am enjoying life less than in the past • I find myself experiencing repeated headaches and other physical complaints. • I sit staring into space for hours and can't concentrate on my work 	<ul style="list-style-type: none"> • I take regularly scheduled breaks • I take vacations periodically and do not bring work with me • I have friends, hobbies, and interests unrelated to work • I exercise regularly, have a healthy diet, and maintain an appropriate weight • I limit my work hours and caseloads • I participate in peer support, clinical supervision personal psychotherapy, and/or journaling as preventive strategies • I attend to my religious and spiritual side • I regularly participate in relaxing activities (e.g., meditation, yoga, reading, music) • I regularly participate in activities that I enjoy and look forward to doing 	<ul style="list-style-type: none"> • I self-medicate with alcohol, drugs (including over the counter and prescription), and food • I seek emotional support and nurturance from clients • I keep taking on more and try to just work my way through things • I try to squeeze more into the day, get more accomplished , and measure success by how many tasks I complete and by how much I can accomplish in a day • I isolate, avoid colleagues, and minimize the significance of stresses in my life • I know that distress and impairment are for others and do not take seriously the warning signs I experience • I believe that everything will turn out fine just because I say so! (Barnett, 2008)

²⁴ Adapted from: <https://societyforpsychotherapy.org/distress-therapist-burnout-self-care-promotion-wellness-psychotherapists-trainees-issues-implications-recommendations/>

ANNEX 7

JOB AID—IDENTIFYING POST-TRAUMATIC STRESS (TIPS FOR FACILITATING)

Post-traumatic stress disorder (PTSD) is diagnosed after a person experiences symptoms for at least one month following a traumatic event²⁵. However, symptoms may not appear until several months or even years later.

SYMPTOMS

Re-experiencing the trauma through intrusive distressing recollections of the event, for example:

- Flashbacks
- Nightmares
- Repetitive and distressing images or sensations
- Physical sensations; such as pain, sweating, feeling sick or trembling

Emotional numbness and avoidance of places, people, and activities that are reminders of the trauma.

- Pushing memories of the event out of mind, often distracting themselves with work or hobbies.²⁶
- Dealing with their feelings by trying not to feel anything at all (emotional numbing)
- Becoming isolated and withdrawn, and they may also give up pursuing activities they used to enjoy

Hyperarousal / Increased arousal such as difficulty sleeping and concentrating, feeling jumpy, and being easily irritated, angered, and constantly aware of threats, extreme alertness, and easily startled.

Hyperarousal often leads to:

- Irritability
- Angry outbursts
- Sleeping problems (insomnia)
- Difficulty concentrating

Difficult beliefs or feelings²⁷

- Feeling like you cannot trust anyone
- Feeling like nowhere is safe
- Feeling like nobody understands you
- Blaming yourself for something that happened
- Overwhelming feelings of anger, sadness, guilt, or shame

²⁵ <https://adaa.org/understanding-anxiety/posttraumatic-stress-disorder-ptsd/symptoms>

²⁶ <https://www.nhs.uk/conditions/post-traumatic-stress-disorder-ptsd/symptoms/>

²⁷ <https://www.mind.org.uk/information-support/types-of-mental-health-problems/post-traumatic-stress-disorder-ptsd/symptoms-of-ptsd/#.Xg3zrEczaUk>

ANNEX 8:1

BACKGROUND READING FOR TOPIC TWO: EFFECTIVE COMMUNICATION

Types of Communication:

- **Verbal communication:** the sharing of information using speech. It can either be written or spoken. The effectiveness of the verbal communication depends on the tone of the speaker, clarity of speech, volume, speed, body language, and the quality of words used in the conversation. The success of verbal communication depends not only on an individual's speaking ability but also on their listening skills.
- **Non-Verbal communication:** the use of communication without using the spoken word. Examples include gestures, facial expressions, shaking hands, body language, eye contact, hugging, etc. Non-verbal communication is useful in helping to reinforce what was said, complementing, or ascending a message. It supplements whatever is said in words, such as people nod to acknowledge and move their hands to give directions
- **Intrapersonal Communication:** Communication with oneself. It involves thinking, analyzing, interpreting, assessing, contemplating, feeling, etc. It is to reflect the individual self to clarify something. It is an activity that takes place in our mind, wherein a person is involved in a conversation with himself or herself, commonly known as 'self-talk' or 'inner speech'
- **Interpersonal Communication:** communication between two or more people through verbal or non-verbal messages.²⁸ It is supported by verbal and nonverbal communication. This calls for an individual also to have skills like persuasion, negotiation, listening, assertiveness, etc.

Improve your Communication Skills²⁹

Make eye contact: Establish eye contact with the person with whom you are speaking. Looking directly at the other person with whom you are conversing shows interest and gives respect. Looking away is a sign of disinterest and is bad manners.

Speak clearly and correctly: Using clear pronunciation, not rushing speech, and using good grammar are all aspects of communication. Take turns and do not interrupt. Do not jump into a conversation just because you feel like talking. Practice self-control.

Pay attention and respond appropriately: Give undivided attention to the person(s) you are communicating with at any given time. Do not engage in distracting behavior like chewing gum, playing with your pen, looking at your phone, etc.

Enter conversations politely: There is a correct way to join a conversation that follows proper manners. Learn how to approach a person or group, smile at those in conversation, and listen to what people are saying. If someone joins an active conversation, smile and nod to recognize the person joining, acknowledge when the speaker finishes, and the group can greet the newcomer and make introductions.

End conversations pleasantly: Walking away from a conversation with excellent manners are a crucial skill to possess. A decent way to do this is to leave a conversation by saying some pleasantries, such as "I promised to be home in an hour, so I need to go now, but it was really nice talking to you."

Learn how to control your volume and keep private matters private: Resist from asking personal questions to persons you are meeting for the first time.

Understand nonverbal communication and cues: Rude facial expressions like eye-rolling and grimaces, as well as yawning at a speaker, hair twisting, turning one's back to the speaker, fingernail picking, checking your watch are all poor manners. Nonverbal actions and behaviors can make people feel bad. Learning to read other people's nonverbal cues is an important lesson too.

Learn how to provide appropriate and timely feedback: Remember it takes two people to communicate.

Jot down notes of important discussions and use them as references or reminders of action points.

28 <https://keydifferences.com/difference-between-intrapersonal-and-interpersonal-communication.html>

29 <https://whatsfordinner.net/articles/article-Six-Communication-Skills-Every-Child-Should-Know.html>

As much as possible, **try to remember and address people by their names.** Calling someone by name shows that you value the relationship, and they are more likely to pay attention to the conversation.

Beware **of barriers that may hinder proper communication, e.g.,** loud noise, age perceptions, complex language, etc.

Key components of good communication

- **Completeness of the message:** Communication must be clear both verbally and in meaning so that someone can easily understand what you are communicating.
- **Clarity:** The message to be conveyed or sent must have clarity and integrity for better understanding. Clarity of thoughts and ideas enhances the meaning of the message.
- **Conciseness of the Message:** Short and intelligible message sent to the receiver streamlines communications. It saves time and money as the message is understood at once.
- **Consideration of physical setting and the recipient:** To make communication more effective, the overall physical setting, i.e., the media of communication and the work environment, must be considered. The content of the message must consider the attitude, knowledge, and position of the recipient
- **Courtesy:** The sender's message should be drafted or prepared to be polite, reflective, and enthusiastic. It must show the receiver's respect and be positive and focused on passing a specific message on to the receiver.
- **Correctness of the message:** The drafting of the message should be done so that the final message does not have any grammatical errors nor repetitive words and sentences. The message should be exact, correct, and well-timed
- **Appropriate for the person or people:** For example, if you are communicating with younger children or someone with limited knowledge of the language you are using, you may utilize simpler language.
- **Listening technique:** Ensure that you listen well, actively, and respectfully, while paying attention to your body language and that of the speaker
- **Feedback** is a crucial part of communication and is vitally required by all concerned in a communication process.

Please note cultural barriers or different interpretation of some nonverbal cues. For example, in some cultures eye contact is important, while in others it is considered rude to maintain eye contact.

Barriers to Effective Communication Barriers are those instances that can stall or distort communication. When communicating, it is important to pay attention to barriers to overcome them.

Main Barriers include:

- Judgmental attitudes can be reflected when someone exhibits excessive analysis, making value-based comments, name calling, bossiness, ridiculing, and strong judgments,
- Physical barriers e.g., noise, physical disability (deaf/blind), etc.
- Use of jargon/complicated/ unfamiliar or technical words
- Cultural barriers: issues around gestures or personal space vary from community to community, e.g., in some communities, young people or women are prohibited from speaking to men
- Perception barriers: different people perceive issues differently. Messages must be simple and straightforward to ensure there is no room for a different interpretation
- Technological barrier: technological advancement may be a barrier to communication. For example, how many people can participate in a Skype call in your village?

Listen attentively, keep it short, ask questions, notice body language, playback, and summarize.

Assertiveness

Assertive: Being assertive is affirming confidently and having the ability to stand up for your own or other people's rights in a calm, honest, and positive way. Avoid being aggressive. Being assertive is the delicate balance between aggressive and passive behavior.

Passive: Compliance with the wishes of others and can undermine individual rights and personal needs. Many people adopt a passive response because they have a strong need to be liked by others.

Aggressive: Behavior that fails to consider the views or feelings of other individuals. Those behaving aggressively will rarely show praise or appreciation, and an aggressive response tends to put others down. Aggressive responses encourage the other person to respond in a non-assertive way, either aggressively or passively.

You may find that you respond differently — whether passively, assertively, or aggressively — when you are communicating in different situations.

To be assertive, you must:

- Know what you want
- Be sure it is fair and factual
- Ask for things clearly and use “I” statements. For example, you can say ‘I would like to attend evening classes’ instead of ‘You are always giving me work in the evenings’.
- Stay calm
- Accept praise and criticism

Being assertive in communication³⁰

- Face the other person, keep your shoulders back and chin up, and make eye contact. Have a serious facial expression, but do not frown or appear hostile.
- Do not fidget.
- Try to avoid using filler words such as “um,” “you know,” “uh,” and “like,” when speaking
- Keep your voice calm and soft. You do not need to be loud, but you do need to make yourself heard. If the person you are talking to does not appear to be listening, try a firm “excuse me” to get their attention
- Speak slowly; rushing when you talk is an admission that you do not expect people to take the time to listen
- Be clear and specific in your explanations and direct in your requests. Your statements should be short and to the point. They should provide facts and specifics rather than vague hints. For example, directly saying “Will you please ...?” is much more effective than “Maybe you could...”
- Disagree respectfully. For example, I do not agree with what you are saying, but may I add this point?
- Learn to say no when necessary; know your limits

Tips

- State the problem, “Teacher, you have given two different instructions.”
- Make a request, “Can you allow me to finish one assignment before starting the other?”
- Getting clarification, “Can you explain what you want completed again?” and “If I heard you correctly...”

How to manage conflict

- Learn how to manage strong emotions like yelling, getting frustrated, or temptations to hit or throw items. Do not name-call. Yelling makes situations worse.
- Talk and listen actively. Give each other/everyone a fair chance to express their opinions calmly and respectfully. Pay attention to your nonverbal communication and that of the other person.
- Know when to walk away; walking away is not a sign of weakness. If all else fails, walk away from the situation and revisit the issue later when you have cooled down.
- Focus on the present issues; avoid raising issues from the past because it impairs the ability to resolve the issue at hand and only ends up assigning blame.

³⁰ <https://middleearthnj.wordpress.com/2014/04/14/5-ways-parents-can-teach-assertiveness-to-teens/>

- Negotiate and allow time for mediation.
- In all situations, have an attitude that allows for negotiation and strengthens the relationship. Stay motivated until the conflict is resolved.
- Be willing to forgive and let go of something; resolution is about the ability to forgive or let go of issues
- What is teamwork?

Teamwork is the combined effort of a team to achieve a goal, objective, or task. This is achieved when individuals use their skills to achieve a common goal. For example, when you form groups to work on a school assignment together

Why is teamwork important?

Teams can brainstorm and achieve solutions to difficult problems. It offers an opportunity to exchange ideas and imagining creative ways of handling an issue. Members can take advantage of each other's strength to achieve something together.

Qualities of a good team player

What are the qualities of a good team leader? Allow the group to brainstorm and write down their answers

- Reliable: He or she is dependable and available when needed. They follow through on tasks and keep deadlines.
- Effective communication: good team players communicate effectively, timely, and with respect.
- They listen actively and voice their concerns genuinely and respectfully.
- Committed: team players display passion and commitment for their teams and other tasks.
- Flexible: teamwork means the adaptability to changing situations. They actively seek out and involve others in decision making, knowing that diversity of opinions leads to the optimal solution.

ANNEX 8:2

BACKGROUND READING FOR TOPIC THREE: KEEPING MYSELF SAFE

SESSION ONE: KEEPING MYSELF SAFE AND WHAT TO DO WHEN I FEEL UNSAFE

Abuse:

Young people who live in care may be more susceptible to abuse due to a lack of consistent caregiving parents or caregivers who can protect them from harm.

- A. Physical abuse involves any action that brings physical pain or discomfort to a child, including slapping, pinching, punching, pushing, burning, or throwing objects to hurt or punish the child. There are often external injuries (wounds or bruises), but the abuse may not always be detectable. Physical abuse is almost always accompanied by emotional abuse.
- B. Emotional abuse wounds a child or young person's emotions and spirit, leaving psychological marks that can last a lifetime. Children or young people who experience emotional abuse are "hit" every day with words that demean, shame, threaten, blame, or intimidate them. Emotional abuse destroys a child or young person's self-confidence and self-esteem. It results in the sense of worthlessness and inadequacy, especially when expressions of love, support, and reassurance are withheld.
- C. Sexual abuse can entail genital or oral stimulation and fondling, sexual intercourse, or indecent exposure. It may also be violent, as in rape.
- D. Neglect results in young people who lack shelter, food, health etc. and as a result exposes them to the abuses mentioned above.
- E. Additional forms of abuse: child marriage, corporal punishment, child labor, bullying/teasing, stigma and discrimination, human trafficking

How can I keep myself safe?³¹

Some body parts are to be kept private. Genitalia is referred to as private because the reproductive organs are not for everyone to see. People should not see your private parts unless you grant consent.

Body boundaries: no one should touch their private parts, and no one should ask them to touch somebody else's private parts. Sexual abuse often begins with the perpetrator asking the child to touch them or someone else.

1. Keeping secrets about our bodies is not okay. Most sexual perpetrators will tell a child to keep the abuse a secret. This can be completed in a friendly way, such as, "I love playing with you, but if you tell anyone else that we played, they will not let me come over again." Perpetrators can also be threatening: "This is our secret. If you tell anyone, I will tell them it was your idea, and you will get in big trouble!" Tell your parents/guardian if someone is forcing you to keep a body secret.
2. No one should take pictures of your private parts. People who abuse children love to take and trade pictures of naked children online. This puts you at risk.
3. Learn how to get out of scary or uncomfortable situations. Learn how to say no to older peers and adults.
4. The body boundaries rules still apply, even if you know someone or that person is a child. Teachers, uncles, aunts, coaches, etc., should never see you naked, ask for your naked photo, or touch you inappropriately.
5. People closest to children are often the perpetrators, including family members. People can groom families, sometimes for years, to abuse children. This preparation makes it harder for children to speak out as they think, often correctly, they will not be believed and gives perpetrators easier access to children because parents trust them.

When to report abuse

- Children report abuse as soon as it has happened, or they may wait for several weeks, months or even years. Some children endure abuse once, and some are subject to repeated abuse.
- Children should be encouraged to report abuse as soon as possible, or as soon as they feel

³¹ <https://www.heysigmund.com/are-you-teaching-your-toddler-skills-to-prevent-sexual-abuse/>

able to. If they are worried, they are at risk of abuse; they must report before further harm occurs.

- Where possible, reporting a case of sexual violence to the police and or hospital as soon as it happens is essential in enabling the collection of evidence for treatment and legal purposes.³² Most abuses are criminal acts and punishable by law.
- Encourage children and adults not to be embarrassed or intimidated and report any form of abuse IMMEDIATELY.
- Understand that some people may not want to report or may have been abused for several years before they report. Do not criticize their decision not to report sooner. Instead, support and encourage them to report the incident now.
- How to report abuse
- Report any form of abuse immediately to the designated safeguarding lead.
- Children and young people should be made aware of how they can report abuse and to whom. If the child is not affiliated with an organization, they can talk to a trusted adult, the gender desks available at police stations, etc.
- If sexual abuse has taken place and the child or young person may be in a situation where they do not have a support person or designated lead, such as after reintegration, they should be informed about the importance of preserving evidence, e.g., keeping clothing , underwear, body fluid, etc. and not to shower until the police have taken evidence.
- Sometimes, people feel embarrassed to report abuse. In such instances, use anonymous hotlines that are available to you.
- Call Child help line 116, a 24-hour, toll-free phone service that links young people in need of care and protection to essential services and resources.

Top tips for staying safe both online and offline

- Do not meet with strangers. If you must meet a stranger, do so with a friend in a public place, and let a trusted adult or friend know that you are meeting those people
- Do not divulge personal information, such as your phone number, place of residence, school, or work details, etc.
- Do not accept gifts if they make you feel uncomfortable. If the reason does not feel right, or the gift appears to be in exchange for something you are not ok with, rejecting it is fine
- Set boundaries. For example, do not kiss, hug, or allow friends into your bedroom.
- Take responsibility and speak up when you see or suspect that something is not right
- Notify the authorities (guardian, parent, chief, teachers, etc.) if you feel vulnerable or suspect perpetrator behavior. Speak up!
- Be proactive: keep yourself safe online and be responsible. Report concerns as soon as you have them. You are not alone and there are people to support you.
- Think before you post: do not share when you are feeling emotional, anything you put into cyberspace stays there, even if you delete it.
- Cover your webcam when you are not using it.
- Avoid websites you are not sure about, particularly adult-only and websites promoting anorexia, self-harm, etc.
- Do not chat online with people you do not know. If you do, do not share any personal information.
- Change your passwords regularly and do not write them down.
- Be aware when online gaming. It is easier to feel safe sharing things with avatars but it poses risks.
- Avoid sharing 'live' updates such as sharing your current location on social media.
- Do not give in to peer pressure, blackmail, or other threats: report them.

³² Sexual violence. A guide to management of the chain of evidence by service providers, LVCT

- Seek advice from ChildLine, a teacher, or a parent, and report inappropriate and illegal web content.
- Support your friends to also stay safe online.

How can I have a more favorable experience online?³³

1. Clean your feed

- It is not always easy to tell why you are feeling down when you are online. Take some time to go through your social media feed to work out what makes you feel good and what does not. Use the following tips to help you keep your experience online more pleasant:
- Try unfollowing or muting accounts that annoy you, upset you, or take up too much of your time.
- Remember, you do not have to be on every social media channel. Try deleting one app from your phone for a week and see if that improves your mood.
- Try limiting your time on social media before you go to sleep and when you first wake up.
- Before you post or comment on anything online, ask yourself, “Am I doing something positive for myself and the people who will see this?”

2. Find your crowd

Whatever your passions are in life, you are not alone. There are accounts that will interest and excite you and help you explore your passions.

Being part of a positive online community can sometimes give a boost to your mental health. Here are some tips to help you find your communities:

- See which accounts the people you enjoy following are following themselves and explore the hashtags they use to discover similar content
- Follow accounts that make you feel good, keep you interested, and share positive content
- Build your positive personal following, as well as following confident people. Did you know that you can select who follows you and what they can see?
- You are not alone; whatever your passion is, other people will share it with you online.
- Find like-minded online communities and use social media to fuel your passions
- It is important to remember that while many online mental health communities are positive spaces, some can be negative for you and your recovery. Avoid any spaces that encourage you to do things that are harmful to your physical or mental health. If you are struggling with things with experiences online, talk to someone you trust.

3. Say hey

You never know what someone else is going through and, whether you realize it or not, your support could make all the difference.

Social media is a great place to let your friends know you have not forgotten them, that you care about them and that they matter. Getting involved in making the online world a more positive place could give you a boost too. Here are some tips to get you started:

What change would you like to see in the world? Use your feed to support the causes you care about and help make them happen.

Check your mood before using social media and think about what you are going to do before logging in. Ask yourself if social media is going to make you feel better or worse?

Remember: not all the advice you get online is from experts, even if it comes from people who know what you are going through. Positive communities will never advise you to do anything harmful or make you feel more inadequate.

4. Do not compare yourself to celebrities that you find online.

Unfollow such individuals and then address the issue causing that insecurity. Remind yourself that what you see online is only a portion of another person’s life and not their entire truth. Your favorite influencer will have things that they are insecure about. Often people do not post about their insecurities because they do not wish to be vulnerable. Remember that you are

³³ <https://youngminds.org.uk/find-help/looking-after-yourself/social-media-and-mental-health/>

doing fantastic and are at a stage in life where you are supposed to be—it is not a competition between you and your followers.

How can I deal with online bullying?

Bullying is never acceptable, whether it is at school, home, or on the internet. If you are being harassed online, seek assistance from someone you trust.

- You can block and report the people involved, or, if you feel unable to block someone, try muting them. They will not know you have muted them, and you will not have to see their posts or messages anymore.
- You can also use your social networks' privacy settings to limit what they can see on your profile. See below for tips on how to block, report, or mute people on social media.

How can I look after my privacy?

Here is advice to help you decide what to share, how to avoid oversharing, and how to look after your privacy online.

- **What you put online stays online** - even things you delete can be saved or screenshotted, including Snapchat snaps meant for just one friend.
- **Online strangers are still strangers:** forums and group chats can be a great way to connect over topics you may not discuss face to face, but do not feel pressured to share more than you feel comfortable.
- **It is easy to over-share** on social media sites, especially if you forget who can see your profile. You can use social media channel settings to create lists so that only people you trust can see all your updates. For example, Instagram allows you to make your account private, or you can use the Close Friends tool to share your stories with only a specific group of people you have selected.

Privacy is possible—make sure you use social media site settings to protect your information. Do not hesitate to block anyone who makes you feel uncomfortable.

Wellbeing and Social Media

Social isolation: Despite the significant number of likes and followers, internet use decreases time for face-to-face interaction, reducing the benefits of things like touch, hugs, etc. Many children and young people reported that they felt lonely despite having hundreds of friends on social media platforms.

Sleep deprivation: Some studies have shown that compulsive use of social media led to a lack of sleep because most people spent 'sleep hours' on social media; excessive use of screen time eventually interferes with the ability to fall asleep.

Obesity: This is due to the lack of physical activity and poor dietary habits associated with such a sedentary lifestyle.

Psychological Problems: Social media use is linked to cognitive impairment. Some symptoms include distraction, procrastination, attention deficit hyperactivity disorder (ADHD), and inhibits independent thinking in some adolescents

Behavioral problems: Social media use is linked to behavioral addictions, such as gambling, jealousy, etc., which are related to peer pressure from the internet. Some young people report that they developed obsessive or addictive monitoring behaviors; engaged with extreme diets and/or exercises, and experienced heightened levels of body dissatisfaction because of accessing content from social media.

Emotional health: Social media use is linked to emotional states like depression, anxiety due to friends liking or not liking posts, feeling a need to belong, peer pressure, cyberbullying, etc.

Privacy violations: Social media exposes one to a global world that may lack restrictions, e.g., unsolicited adverts, receiving unwelcomed content, inclusion in unsolicited groups or pages, having content shared without approval, etc.

How to avoid cyberbullying

1. Limit time on social media
2. In case of bullying, do not retaliate; instead save the evidence

3. Block and report the bullies using the reporting feature available
4. Do not share any content that you would not like leaked out. 'internet never forgets'
5. Do not share too much information, e.g., a profile photo of you in your school uniform
6. Conduct yourself with dignity and respect
7. Protect your account by using passwords and do not share your passwords with others
8. Report any incidents of cyberbullying to the authorities

Report

Report to the police, caregiver, or a trusted adult if someone you only know from the internet asks for your photos, videos, personal information, or requests to meet with you.

ANNEX 8.3

BACKGROUND READING FOR MODULE THREE: KEEPING MYSELF SAFE

SESSION TWO: HEALTHY AND UNHEALTHY RELATIONSHIPS

Unhealthy relationships:

An unhealthy relationship can take on different forms. In general, it is where one person does not feel comfortable in a relationship. Being uncomfortable in a relationship may be due to equal power. This can look like one person feeling undervalued. There can also be too much arguing, a lack of respect, a little trust, a lack of integrity, or someone is prevented from being who they are or want to be. We will go through some different forms of unhealthy relationships through this session. It is important to remember that an unhealthy relationship can also be a relationship that does not feel right.

In the previous session, we talked about abuse; abusive behaviors can occur in unhealthy relationships. In this session, we look at a wide range of relationships: family, friends, and intimate partners. All the following apply to all these types of relationships.

Controlling relationships

A controlling relationship is where one person tries to control the other. It can include becoming jealous, angry, threatening to harm themselves or the other person, telling someone what to wear or say. For example, there may be 'rules' they must live by not to anger the other person.³⁴

Being controlled by someone can make you feel cautious, desperate, hopeless, and fearful. Abusive behavior in a controlling relationship can be physical (for example, hitting someone to make them do as they are told). Abusive behavior can also be emotional (name-calling or making them feel fearful or guilty), sexual (controlling or forcing sexual behaviors) and or neglectful (depriving the other person if they do not behave in the way the other person desires, such as not giving them affection or denying access to money or a phone).

Violent relationships

There are high levels of violence in relationships between parents and their children or partner violence. No form of violence is acceptable. A violent relationship may only have rare physical violence incidents, but the fear of violence makes people afraid in the relationship. All forms of violence are abusive.

Belittling relationships

In belittling relationships, an individual is not respected for who they are and may feel afraid to say or act in specific ways. This can include experiencing humiliation and criticism; ignoring or putting someone down; mocking someone's family; challenging friends; or criticizing their job. Some behaviors are 'excused' because of gender; a woman's place is in the home; women are the property of men; but none of these are valid, and are unacceptable.

Listening to your inner voice

Often, we may not know what is wrong with a relationship, but it just does not feel right. If our inner thoughts and feelings tell us we are not safe or comfortable in a relationship, listening to that voice and acting on it is important. A first step may be to speak to someone you trust.

Peer pressure³⁵

Feeling pressured to take drugs? Here are tips for dealing with that pressure:

1. Remember that you are not alone. It is easy to think you are the only one who has not tried drugs, but most young people do not consume drugs.
2. Understand your position on issues such as sex, drugs, and alcohol. Knowing where you stand makes it easier to stay true to your values.

³⁴ <https://1q7dqy2unor827bqjls0c4rn-wpengine.netdna-ssl.com/wp-content/uploads/2015/12/Controlling-Behaviour-in-Relationships-talking-to-young-people-about-healthy-relationships.pdf>

³⁵ <https://www.talktofrank.com/get-help/dealing-with-peer-pressure>

3. Think about how you would like to respond if someone offers you drugs so that you are prepared with a response.
4. Try to understand who is offering you the drugs and why. Friends should understand if you say no. However, people who do not know you well may expect something in return.
5. Say no firmly but clearly and without making a big deal of the situation. If the person tries to persuade you, do not feel pressured to change your mind.
6. Remember that, although they may not show it, your mates will respect you more if you are assertive and clear about what you do and do not want to ingest.
7. Look around. You will soon notice that you are not the only one worrying about other people's perceptions. Try to focus on your own opinion of yourself - in the end, that is all that matters.
8. Are you worried about your mates being pressured? Do not keep it to yourself; talk to them or someone you trust.
9. If you are finding it hard to be yourself within your friend group, take a step back and think about whether it is time to find a new crowd.

Self-esteem³⁶

Self-esteem is how we see and feel about ourselves. Many people will have low self-esteem at some point in their life. It can be caused by several things: comparing yourself to your friends, problems with family, school, or your health. Sometimes the feeling passes naturally, but occasionally it is necessary to help yourself feel better by seeking council.

If you tackle low self-esteem early, it can help prevent depression or anxiety from developing. You can start to build your self-esteem today with these seven steps:

Step 1: Understand why you focus on negative thoughts

- What negative thoughts do you have about yourself?
- When did you start having these thoughts?
- What happened to make you think this way?

Step 2: Challenge the negative feelings

Ask yourself if there is another way to look at things? What advice would you give to a friend who was having similar negative feelings? Remind yourself about things that have happened which prove these negative thoughts to be false. Include examples that prove they are not true. Maybe the thing that caused those feelings has stopped.

Try writing down a list of these things that help you feel less negative. Read this list the next time you feel low.

Step 3: Focus on the positive

Write down your best feature, the last time you received a compliment, and the last time you did something for someone that made you feel good. These might seem like small things, but it is important to recognize all the good things about you. This list shows a few reasons why people appreciate you for being you.

Talking to your 'inner child' can help you recognize the good things about yourself. Your inner child is the part of your personality that still reacts and feels like a child. So, for example, you can write down things that you loved doing as a child to help you remember that feeling: I am a great football player, I draw well, I love playing with my friends, etc.

Step 4: Find the right people

How do the people around you make you feel?

Spend more time with the ones who make you feel good and less with those who do not make you feel confident about yourself or spend considerable time criticizing others.

³⁶ <https://youngminds.org.uk/find-help/looking-after-yourself/believe-in-yourself/>

Step 5: Get Active

Think about doing something you enjoy doing or try something new. If you already have a hobby, do it more often. But remember, you do not have to keep plugging away at a hobby you do not enjoy just because you *think* you must like it.

Step 6: Set yourself some goals

Choose something you know you can already do and challenge yourself, but keep your goals realistic. Achievements can give you a positive feeling and remind you just how much you are capable of achieving.

Step 7: Tell someone

If you are struggling with negative feelings about yourself, talk to someone you trust, like a family member, teacher, or school nurse.

You can also talk to your teacher, religious leader, or parent who can help you find the kind of support that might be available to you in your area.

If you find it hard to talk to someone you know face-to-face, look for online counseling services.

ANNEX 8.4

BACKGROUND READING FOR TOPIC FOUR: MY HEALTH

SESSION 1: MY BODY, EVERYTHING YOU NEED TO KNOW ABOUT PUBERTY

Reviewed by: Steven Dowshen, MD <https://kidshealth.org/en/teens/puberty.html>

More Than a Funny Word

OK, so it is a funny word . . . but what is puberty, anyway? Puberty is the word to describe when your body begins to develop and change.

During puberty, your body will grow faster than at any other time in your life, except for when you were an infant. Back then, your body was growing rapidly, and you were learning new things every day. You will also be growing and developing rapidly during puberty. Except for this time, you will not have diapers or a rattle, and you will have to dress yourself!

It is good to know about the changes that come with puberty before they happen, and it is imperative to remember that everybody goes through this stage of development. No matter where you live, whether you are a girl or boy, or whether you like hip-hop or country music, you will experience the changes that happen during puberty. No two people are exactly alike, but one thing all adults have in common is living through puberty.

Time to Change

When your body reaches a certain age, your brain releases a special hormone that starts puberty changes. It is called the gonadotropin-releasing hormone, or GnRH for short. When GnRH reaches the pituitary gland (a pea-shaped gland that sits just under the brain), this gland releases into the bloodstream two puberty hormones: luteinizing hormone (LH for short) and follicle-stimulating hormone (FSH for short). Boys and girls have both hormones in their bodies. Depending on whether you are a girl or boy, these hormones change different parts of the body.

For guys, these hormones travel through the blood and give the testicles the signal to begin producing testosterone and sperm. Testosterone is the hormone that causes most of the changes in a guy's body during puberty. Sperm cells must form for men to reproduce.

For girls, FSH and LH target the ovaries, containing eggs that have been there since birth. The hormones stimulate the ovaries to begin producing another hormone called estrogen. Estrogen and FSH, and LH cause a girl's body to mature and prepare for pregnancy.

So that is what happens during puberty — it is all these new chemicals moving around inside your body, turning you from a teen into an adult with new levels of hormones .

Puberty usually starts sometime between age 7 and 13 in girls and 9 and 15 in guys. Some people start puberty a bit earlier or later, though. Each person is a little different, so everyone starts and goes through puberty on his or her body's own schedule. This is one reason why some of your friends might still look like kids, whereas others look more like adults.

It Doesn't Hurt . . . It's Just a Growth Spurt

"Spurt" is the word used to describe a short burst of activity, something that happens in a hurry. Furthermore, a growth spurt is just that: Your body growing fast! When you enter puberty, it might seem like your sleeves are always getting shorter, and your pants always look too long -- it is because you are experiencing a significant growth spurt. It lasts for about 2 to 3 years. When that growth spurt is at its peak, some people grow four or more inches in a year.

This growth during puberty will be the last time your body grows in height. After that, you will be at your adult height. Nevertheless, your height is not the only thing that will be changing.

Taking Shape

As your body grows in height, it will change in other ways, too. You may gain weight, and it is possible to start seeing changes in your body's overall shape. Guys' shoulders will become wider, their bodies may become more muscular, and their voices will drop an octave and become deeper. For some guys, breasts may grow a bit, but this growth goes away by the end of puberty for most of them. Guys will notice other changes, too, such as the lengthening and widening of the penis and the enlargement of the testicles. All these changes mean that their bodies are developing as expected.

Girls' bodies usually become curvier, and they gain weight on their hips. Their breasts develop, starting with just a little swelling under the nipple. Sometimes, one breast might develop more quickly than the other, but this evens out most of the time. With all this growing and developing, girls will notice an increase in body fat and occasional soreness under the nipples as the breasts start to enlarge, which is normal.

Gaining some weight is part of developing into a woman, and it is unhealthy for girls to go on a diet to try to stop this normal weight gain. If you ever have questions or concerns about your weight, talk about it with your doctor.

Usually, about 2 to 2½ years after girls' breasts start to develop, they get their first menstrual period. Menstruating is another indicator that lets a girl know puberty is progressing, and the puberty hormones are working. Girls have two ovaries, and each ovary holds thousands of eggs. During the menstrual cycle, one of the eggs drops from the ovary and begins a trip through the fallopian tube, ending up in the uterus (the uterus is also called the womb).

Before the egg drops from the ovary, the uterus has built its lining with extra blood and tissue. If the egg is fertilized by a sperm cell, it stays in the uterus and grows into a baby, using that extra blood and tissue to keep it healthy and protected while developing.

Most of the time, though, the egg is only passing by. When the egg does not get fertilized, the uterus no longer needs the extra blood and tissue, leaving the body through the vagina as a menstrual period. A period (when blood flows) usually lasts between three to seven days, and about two weeks after the start of the period, a new egg is released, which is called ovulation. Ovulation means your matured egg gets released from one of your ovaries and into the associated fallopian tube, where it hangs out for 24 hours, waiting to be inseminated. If no sperm are present, your egg will disintegrate in one day.

Hair, Hair, Everywhere

Well, maybe not everywhere. But one of the first signs of puberty is hair growing where it did not grow before. Guys and girls both begin to grow hair in their armpits and in their pubic areas (on and around the genitals). It begins by looking light and sparse, and then as you go through puberty, it becomes longer, thicker, heavier, and darker. Eventually, guys also start to grow hair on their faces.

About the Face

Another thing that comes with puberty is acne and pimples. Puberty hormones trigger acne. Pimples usually start during puberty and can stick around through adolescence and into the teen years. You may notice pimples on your face, upper back, or on your chest. To combat acne, it helps to keep your skin clean. Your doctor will be able to offer some suggestions for clearing acne. The good news is that acne usually gets better or disappears by the end of adolescence.

Putting the P.U. in Puberty

A lot of teens notice that they have a new smell under their arms and elsewhere on their bodies when they enter puberty, and it is not a pleasant one. That smell is body odor, and everyone gets it. As you enter puberty, the hormones affect glands in your skin, and the glands make chemicals that smell bad. These chemicals put the scent in adolescence! adolescence!

So, what can you do to feel less stinky? Keeping clean is a good way to lessen the smell. You might want to take a shower every day, either in the morning before school, or the night before bed. Using deodorant every day can help keep body odor in check, too.

There's More?

Guys and girls will also notice other normal body changes as they enter puberty. Girls might see and feel a white, mucus-like discharge from the vagina. This does not mean anything is wrong — it is just another sign of your changing body and hormones.

Guys will also notice that their voices may “crack” and eventually get deeper.

Guys will start to get erections (when the penis fills with blood and becomes hard). Erections happen when guys fantasize and think about sexual things or sometimes for no reason at all. They may experience something called nocturnal emissions (or wet dreams) when the penis becomes erect while he is sleeping and ejaculates. When a guy ejaculates, semen, a fluid that contains sperm, exits the penis. That is why they are called wet dreams — they happen when you are sleeping. Your underwear or the bed might be a little wet when you wake up. Wet dreams become less frequent as guys progress through puberty, and they eventually stop.

Change Can Feel Kind of Strange

Just as those hormones create changes in the way your body looks on the outside, they also create changes internally, too. While your body is adjusting to all the new hormones, so is your mind. During puberty, you might feel confused or have strong emotions that you have never experienced before. You may feel anxious about how your changing body looks.

You might feel overly sensitive or become easily upset. Some teens lose their tempers more than usual and get angry at their friends or families.

Sometimes it can be challenging to deal with all these new emotions. Usually, people are not trying to hurt your feelings or upset you intentionally. It might not be your family or friends making you angry — it might be your new “puberty brain” trying to adjust. While the adjustment can feel difficult in the beginning, it will gradually become more comfortable. It can help talk to someone and share the burden of how you feel — a friend or, even better, a parent, older sibling, or adult who has gone through it all before. You might have new, confusing feelings about sex — and many questions. The adult hormones estrogen and testosterone are signals that your body is giving you new responsibilities, like creating a child. That is why it is vital to get all your questions answered.

It is easy to feel embarrassed or anxious when talking about sex, but you need to be sure you have all the right information. It is better to be momentarily uncomfortable than to walk into a situation uneducated. Some teens can talk to their parents about sex and get their questions answered. But if you feel funny talking to your parents about sex, there are many other people to talk to, like your doctor, a school nurse, a teacher, a school counselor, or another adult you can talk to comfortably.

Developing Differently

People are all a little different from one another, so it makes sense that they do not all develop in the same way. No two people are at the same stage in the puberty process, and everyone changes at their own pace. Some of your friends may be getting curves, whereas you do not have any yet. Maybe your best friend’s voice has changed, and you think you still sound like a kid with a high, squeaky voice. Additionally, maybe you are sick of being the tallest girl in your class or the only boy who must shave.

But eventually, everyone catches up, and the differences between you and your friends will be similar. It is also good to keep in mind that there is no right or wrong way to look. That is what makes us human — we all have qualities that make us unique, on the inside and the outside.

Inside the teenage brain³⁷

Adolescence is a time of significant growth and development inside the teenage brain.

The main change is that new connections in the thinking and processing part of your child’s brain (called the grey matter) are pruned. At the same time, other connections strengthen. This is the brain’s way of becoming more efficient, based on the ‘use it or lose it’ principle.

This pruning process begins in the back of the brain. The front part of the brain, the prefrontal cortex, is remodeled last. The prefrontal cortex is the brain’s decision-making part, responsible for your child’s ability to plan and think about the consequences of actions, solve problems, and control impulses. Changes in this part continue into early adulthood.

Because the prefrontal cortex is still developing, teenagers might rely on the brain called the amygdala to make decisions and solve problems more than adults do. The amygdala is associated with emotions, impulses, aggression, and instinctive behavior.

Have you noticed that sometimes your child’s thinking and behavior seems quite mature? However, at other times your child seems to behave or think in illogical, impulsive, or emotional ways? The back-to-front development of the brain explains these shifts and changes—teenagers are working with brains that are still under construction.

Building a healthy teenage brain

The combination of your child’s unique brain and environment influences the way your child acts, thinks, and feels. For example, your child’s preferred activities and skills might become ‘hard-wired’ in the brain.

³⁷ Raising Children—the Australian Parenting website, <https://raisingchildren.net.au/pre-teens/development/understanding-your-pre-teen/brain-development-teens>

How teenagers spend their time is crucial to brain development. So, it is worth thinking about the range of activities and experiences your child is into—music, sports, study, languages, video games. How are these things shaping the sort of brain your child takes into adulthood?

You are an important part of your child's environment. You mean a lot to your child. How you guide and influence your child will be essential in helping your child to build a healthy brain too.

You can do this by:

- encouraging positive behavior
- promoting good thinking skills
- helping your child get lots of sleep

Behavior strategies for teenage brain development

While your child's brain is developing, your child might:

- take more risks or choose high-risk activities
- express more and stronger emotions
- make impulsive decisions

Here are some tips for encouraging good behavior and strengthening positive brain connections:

Let your child take some healthy risks. New and different experiences help your child develop an independent identity, explore grown-up behavior, and move towards independence.

Help your child find new creative and expressive outlets for feelings. Your child might be expressing and trying to control new emotions. Many teenagers find that doing or watching sports, listening to music, writing, and other art forms are good outlets.

Talk through decisions step by step with your child. Ask about possible courses of action your child might choose and talk through potential consequences. Encourage your child to weigh up positive consequences or rewards against negative ones.

Use family routines to give your child's life some structure. These might be based around school and family timetables.

Provide boundaries and opportunities for negotiating those boundaries. Young people need guidance and limit-setting from their parents and other adults.

Offer frequent praise and positive rewards for desired behavior. This reinforces pathways in your child's brain.

Be a positive role model. Your behavior will show your child the behavior you expect.

Stay connected with your child. You will probably want to keep an eye on your child's activities and friends. Being open and approachable can help you with this.

Talk with your child about their developing brain. Understanding this important period of growth might help your child process their feelings. It might also make taking care of the brain more interesting for your child.

Teenagers are often passionate about their interests, especially ones that give them opportunities to socialize. You can help your child develop skills and confidence by supporting your child's interests, activities, and hobbies.

Strategies for teenage brain development:

Brain growth and development during these years mean that your child will start to:

- think more logically
- think about things more abstractly and understand that issues are not always simple
- pick up more on other people's emotional cues
- logically solve complex problems and see problems from different perspectives
- get a better perspective on the future

You can support the development of your child's thinking with the following strategies:

Encourage empathy. Talk about feelings—yours, your child’s, and other people’s. Highlight the fact that other people have different perspectives and circumstances. Reinforce that many people can be affected by one action.

Emphasize the immediate and long-term consequences of actions. The part of the brain responsible for future thinking (the prefrontal cortex) is still developing. If you talk about how your child’s actions influence both the present and the future, you can help the healthy development of your child’s prefrontal cortex.

Try to match your language level to the level of your child’s understanding. For important information, you can check that your child has understood by asking your child to tell you in their own words what they have just heard.

Help your child develop decision-making and problem-solving skills. You and your child could work through a process that involves defining problems, listing options, and considering outcomes that make everyone happy. Role-modelling these skills are important too.

Sleep and teenage brain development

During the teenage years, your child’s sleep patterns will change. This is because the brain produces melatonin at different times of the day. This makes your child feel tired and ready for bed later in the evening. It can keep your child awake into the night and make it difficult for your child to get up the next morning.

- Sleep is essential to healthy brain development. Try the following tips:
- Ensure your child has a comfortable, quiet sleep environment.
- Encourage ‘winding down’ before bed—this should be done away from screens, including phones.
- Reinforce a regular sleeping routine. Your child should aim to go to bed and wake up at regular times each day.
- Encourage your child to get enough sleep each night. On average, teenagers need between 8-10 hours each night.

Risk-taking behavior and the teenage brain

The teenage brain is built to seek out new experiences, risks, and sensations—it is all part of refining those brain connections.

Also, teenagers do not always have much self-control or good judgment and are more prone to risk-taking behavior. This is because the self-monitoring, problem-solving, and decision-making part of the brain—the prefrontal cortex—develops last. Hormones are also thought to contribute to impulsive and risky behavior in teenagers. Teenagers need to take risks to grow and develop.

You can support your child in choosing healthy risks—like sports and travel—instead of negative ones like smoking and stealing. All risk-taking involves the possibility of failure. Your child will need your support to overcome any setbacks.

Stress and the teenage brain

With so many changes happening to your child’s brain, it is especially important that your child is protected and nurtured.

The incidences of poor mental health typically increase during the teenage years. It is thought this could be related to the fact that the developing brain is more vulnerable to stress factors than the adult brain.

Teenage stressors can include alcohol and other drugs, high-risk behavior, experiences like starting a new school, peer pressure, or major life events like moving to a new house, or the death of a loved one.

But too much protection and attention might not be good for your relationship either.

Instead, staying connected and involved in your child’s life can help you learn more about how your child is coping with stress. It can also help you keep an open relationship with your child and ensure that they see you as someone they can talk to—even about embarrassing and uncomfortable topics.

It is thought that children are more likely to be open to parental guidance and monitoring during their teenage years if they have grown up in a supportive and nurturing home environment.

Every teenage child is unique, and teenagers respond to stress in different and unique ways. You know your child best, so it is okay to trust your instinct on how to support your child if they are going through a stressful time. It is also okay to ask for help from friends, family members, or professionals like your General Practitioner.

Getting help

Every child experience changes at a different rate.

If you are concerned about your child's rate of development or you have concerns about your child's changing body, thinking or behavior, you could start by talking to a school counselor or your GP. If you are worried, you could look for a counselor or psychologist. You do not need a referral, but you might prefer to have your GP recommend someone.

Menstrual hygiene

- 1.** Menstruation is a normal and healthy process that affects all women. It is bleeding through the vagina each month for three-seven days in a cycle. Cycles do not happen on the same day every month—especially at first.
- 2.** Menstruation is one of the signs of puberty in the female body alongside visible signs such as the growth of breasts, hair under the arms and between the legs (pubic hair); and changes in body size and shape.
- 3.** Menstrual bleeding over three-seven days is sometimes called a 'period'. Periods start when girls are between 10 and 16 years old. It is normal for periods to start at different ages.
- 4.** Periods start when the brain sends chemical messengers called 'hormones' to parts of the body which are used to create babies.
- 5.** A period happens when the female eggs have not 'met' a male sperm during sex. It is like a nest inside the womb and when this is not needed it comes out as blood.
- 6.** Periods stop when a pregnancy starts. It is one of the first signs that an egg has been fertilized by a sperm inside the womb.
- 7.** Bleeding is heavier at the start of a period and some people feel pain in their stomach, have headaches, and they can feel sad and angry.
- 8.** Pads made of cloth, 'sanitary towels', tampons, and menstrual cups are all used to catch the bleeding.
- 9.** No-one should be shy to buy or ask about pads or sanitary options at schools, shops, or clinics. Bleeding happens to all women and it is normal.
- 10.** It is important to wash and keep your body clean and fresh and change the pads or tampons or empty the cups as least twice a day or more at the beginning of the period.
- 11.** For some, period pain is very bad. Friends and family can help encourage girls when they miss school or other activities due to the pain. Make sure they drink enough fluids, eat a balanced diet, and take pain relieving tablets if needed.

ANNEX 8.4

BACKGROUND READING FOR TOPIC FOUR: MY HEALTH

SESSION 2—HIV

Children nine to 12 years old think a lot about their bodies. Many of them are entering or going through puberty. At this age, children also feel a lot of peer pressure—pressure from other children their age to try new, and possibly dangerous, things. Now is an appropriate time to tell them how HIV is spread. Since HIV is commonly spread by sexual contact, now is the time to give your children correct information about sex. Tell them about the importance of sexual health and safe sex. Let them know that sharing needles or syringes for injecting drugs, steroid injection, informal tattooing, or body piercing can put them at risk for contracting HIV. Teach preteens that they have choices in life and that the decisions they make today could affect them for the rest of their lives. You may also want to tell your children that it is okay for them to talk to an adult they trust (parent, teacher, older relative) if they feel unhappy, pressured, or bullied.—from The Well Project³⁸

HIV is a virus spread through certain body fluids that attack the body's immune system, specifically the CD4 cells, often called T cells. Over time, HIV can destroy so many of these cells that the body cannot fight off infections and disease. These special cells help the immune system fight infections. Untreated, HIV reduces the number of CD4 cells (T cells) in the body. This damage to the immune system makes it harder and harder for the body to fight off infections and some other diseases. Opportunistic infections or cancers take advantage of a weak immune system and signal that the person has AIDS.³⁹ According to UNAIDS (2018), about 1.7 million people were living with HIV in Kenya. Kenya's HIV transmission is driven by sexual transmission. More than half (51%) of all new HIV infections in Kenya in 2015 occurred among adolescents and young people (aged 15-24 years), a rapid rise from 29% in 2013.

Information about HIV

The HIV Virus is weak. It can only live where it is warm inside the fluids of the human body. It must pass from one human to another without being exposed to the air so that it can stay warm.

The virus hides only in blood, vaginal fluids (the moistness in your vagina), semen, and breast milk. There must be enough fluid with a virus in it to make transmission possible.

This means that HIV transmission happens only through:

- Sex, when either vaginal fluid (female) or semen (male) passes very closely into the other body (any sex)
- Blood transfusion, a medical procedure during which one person's blood is carefully and deliberately added to another person's blood
- From a woman to the baby growing inside her during pregnancy, while the baby is being born, or through breast milk if the baby has sores in the mouth or in the stomach. A baby is unlikely to get sores if the baby only has breast milk, with no other foods, for up to six months, and then has no breast milk thereafter

The following do NOT carry any risk:

- Any contact between a person with HIV and anyone else when no vaginal fluid, semen, or blood directly enters the other person's body straightaway (there is no HIV virus in saliva)
- Kissing, because there is no HIV virus in the mouth, and saliva can also kill the virus
- Insects or other animals — the HIV virus only lives in humans

If a person with HIV is taking HIV treatment, the risk of the virus passing to someone else is much lower. This is because the HIV drugs lower the amount of virus in the person's body fluids, which makes it harder for each individual virus to duplicate (make more copies of itself).

What Causes HIV and AIDS:⁴⁰ To begin, let's discuss the way our bodies operate. Our body is incredibly smart and every day there are special ways it protects us from getting diseases from harmful germs we either breathe, eat, drink, or touch. Our body has a particular way of protecting us, called the immune system. When something new comes into our body, like a germ

38 <https://www.thewellproject.org/hiv-information/talking-your-children-about-hiv-hiv-awareness-children#Talking%20to%20Children%20of%20Different%20Ages>

39 <https://www.cdc.gov/hiv/basics/whatisshiv.html>

40 <https://www.childrenforhealth.org/the-collection/hiv-aids/>; <https://kidshealth.org/en/parents/hiv.html>

or a virus, our body quickly gets to work to protect us and makes the invading germ or virus leave our body quickly. This is how the immune system stops germs and viruses making us ill.

HIV is a germ called a virus (the V is for virus). It is an especially dangerous virus that stops our body protecting itself well from other germs. When a virus gets into our body it tricks our body into doing what the virus wants it to do. The HIV virus is dangerous because it stops our immune system working properly so it cannot protect us from other germs and viruses. By stopping our immune system working properly the HIV virus can make our bodies weak and eventually we may develop a disease called AIDS. HIV destroys CD4 cells (also called T cells). CD4 cells are part of the immune system.

HIV can be passed from mothers to babies. When mothers take ART, it helps prevent babies from getting HIV before they are born. Mothers taking ART can also prevent babies from getting HIV through their breast milk. Babies use their mothers' blood to help them grow inside the womb, and when they are born they can come into contact with their mother's blood. When a mother takes ART, she can reduce the chance that her baby will get HIV. The ART medicine reduces the amount of HIV in the body. Mothers who are breastfeeding their babies and taking ART are less likely to pass HIV to their babies.

After time and without medicine, people with HIV develop AIDS. AIDS is a group of severe illnesses, and these make the body weaker and weaker. When HIV gets into our bodies, it stops our immune system from working correctly. After a person has had HIV for a long time and does not have medicine, their immune system gets quite tired and stops defending them against germs. When this happens, people with HIV get weak and can get many illnesses. This is when we say they have AIDS.

HIV is invisible and lives in blood and other liquids in the body that are made during sex. HIV can be passed 1. During sex 2. From infected mothers to babies, and 3. In blood. HIV lives in blood and liquids (semen and vaginal fluid) made by the body during sex. We can pass HIV from person to person when we come into contact with their body's fluids during sex or with their blood. Mothers can pass HIV to their babies before they are born because their blood helps the baby grow. After a baby is born, HIV can also pass from a mother to the baby when she breastfeeds her baby.

How Is HIV Diagnosed: Health care providers usually diagnose HIV through blood tests. Someone who has HIV is said to be "HIV positive." Tests also are available without a prescription at the drugstore. With your parents/guardian's permission, you can do the test at home.

HIV is diagnosed as AIDS when someone

- has fewer than 200 CD4 cells or
- develops an AIDS-defining condition

How Are HIV and AIDS Treated: Medicines (antiretroviral/ARVs) can help people with HIV stay healthy. They can also prevent HIV from progressing to AIDS. Health care providers prescribe a combination of different medicines for people with HIV and AIDS. They must be taken exactly as prescribed or they will not work. These medicines help keep the number of CD4 cells high and reduce the viral load of HIV (how much HIV is in the body).

Regular blood tests will check the number of CD4 cells in the body (called the CD4 cell count) and the viral load. If an HIV-positive person's CD4 count gets low, doctors prescribe daily antibiotics. This prevents pneumocystis pneumonia, which happens in people with weakened immune systems.

Can HIV Be Prevented?

We cannot see HIV and we cannot see who has HIV. To reduce the risk of contracting HIV, people should:

- Be faithful to one sexual partner
- Get tested and treated for STDs (sexually transmitted diseases); having an STD increases the risk of HIV infection
- Consider taking a medicine every day (called PrEP or pre-exposure prophylaxis) if you are high risk of infection (e.g. in a rape incident)
- Do not inject drugs or share any kind of needle
- Do not share razors or other personal objects that may touch blood

- Do not touch anyone's blood from a cut or sore
- Informal tattooing or body piercing can put you at risk for getting HIV
- If you are a mother, get support from a health care provider to ensure that your unborn child is HIV free

HIV Treatment

The treatment has significantly improved for people with HIV. By taking medicine and getting regular medical care, HIV-positive people can live long and healthy lives. A medicine called 'Anti-Retroviral Therapy' (ART) helps them live long lives. ART are medicines that work together to stop HIV from being active in the bloodstream of someone with HIV. It makes the virus slow down and reduces the amount of HIV in the body. When someone knows they have HIV, they can take ART before they become ill with AIDS. Beginning ART sooner rather than later can help stop HIV from spreading from person to person. It is important to find out if you have HIV to take ART before you get ill with AIDS.

If you have HIV, make sure that:

- go to all doctor visits
- take all medicines exactly as directed
- go for all follow-up blood tests
- understand what HIV/AIDS is and how it spreads
- stay physically active, get enough sleep, and eat well

Remember

- 1. You can play, share food, drink, hold hands, and hug people with HIV and AIDS. It is safe, and it is not possible to catch the virus this way. People with HIV and AIDS need care and kindness. We can show we care by playing, holding hands, hugging, and doing all the things we usually do with friends with people who have HIV. We can learn why we cannot catch HIV from everyday activities. We can learn how HIV is passed from person to person, so we know how to be safe around someone with HIV or AIDS.**
- 2. People with HIV and AIDS sometimes feel afraid and sad.** Like us, they need love and support, and so do their families. They need to talk about their worries. Many families care for someone with HIV and AIDS and many young people have HIV and AIDS. We can learn more about HIV and AIDS so we can understand how people with HIV and AIDS might feel. We can learn to listen when someone with HIV or AIDS wants to talk about their feelings. We can help our school and our community become more supportive places for people with HIV and AIDS.
- 3. To help themselves and others, people who think they may have HIV or AIDS must go to a clinic or hospital for testing and counseling.** It is important to get tested for HIV if someone thinks they may have HIV or AIDS. Getting tested allows people with HIV to get the medicines they need. Taking anti-retroviral therapy medicines can help people with HIV reduce their chance of passing it on to someone else. The hospital or clinic will give the person counseling about HIV and the test, what it means, and what will happen next if they have HIV.

ANNEX 8.5

BACKGROUND READING FOR TOPIC FOUR: MY HEALTH

SESSION 3, MENTAL HEALTH

What is mental health?

According to WHO, Mental health is a state of well-being in which every individual realizes his or her own potential, can cope with the everyday stresses of life, can work productively and fruitfully, and can contribute to her or his community.

Children can struggle with a range of issues as they grow up. Some of the common mental health-related issues they experience include:⁴¹ relationship problems for example, family, peers, teachers, etc.

- eating or body-image issues
- bullying (including cyberbullying)
- abuse (physical, emotional, or sexual)
- feeling sad or depressed
- worry or anxiety
- self-harm or suicide

Mental Health “Red Flags:”⁴²

- Excessive sleeping, beyond usual teenage fatigue, which could indicate depression or substance abuse; difficulty sleeping, insomnia, and other sleep disorders
- Loss of self-esteem
- Abandonment or loss of interest in favorite pastimes
- An unexpected and dramatic decline in academic performance
- Weight loss and loss of appetite, which could indicate an eating disorder
- Personality shifts and changes, such as aggressiveness and excess anger that are sharply out of character and could indicate psychological, drug, or sexual problems
- Self-mutilation, or mention of hurting himself or herself
- Obsessive body-image concerns
- Excessive isolation
- Abandonment of friends and social groups

How to improve mental health

- **Build Trust:** a child’s relationship with a parent plays a large role in a child’s mental health. Developing a feeling of safety and security starts with building trust between a child and parent/guardian.
- **Foster Healthy Relationships with Others:** The relationship a child has with her parents is vital, but it is not the only relationship that matters. A mentally healthy child will have several relationships with other family members, such as grandparents, cousins, friends, and neighbors.⁴ Have play dates with other kids in your neighborhood.
- **Learn Healthy Ways to Manage Stress:** while it is important to protect yourself from traumatic events, you cannot prevent yourself from experiencing stress. For example, stress may come from having exams, disagreement with friends or parents, etc. Learn skills to deal with those circumstances, e.g., writing in a journal, talking with a friend, playing with friends, taking a walk, etc.
- **Establish Healthy Habits:** having a healthy diet, a good night’s sleep, and plenty of exercise is necessary for your physical health and mental health. Mindfulness and gratitude can also have a significant impact on mental health. Practice gratitude by saying thank you, naming

41 <https://www.healthdirect.gov.au/kids-mental-health>

42 <https://www.verywellfamily.com/improve-childrens-mental-health-4154379>

your blessings, and giving back to society.

- Develop Self-Esteem: developing self-esteem can have a significant boost to your mental health.
- Develop new skills. Explore talents and interests. Get involved in activities that are challenging and help mold you into a better version of yourself.
- Take Time Out: No matter how busy you are, it is important to take a break to recharge. Step back and do something that you enjoy like a hobby, go on a walk, or get some rest.
- Be on the Lookout for Red Flags and seek professional help. If you notice signs that you feel sad or overly anxious about normal situations, there might be a problem, especially if activities like going to school or meeting new people feels overwhelming. A change in mood or behavior that lasts more than two weeks could be a sign of a problem.

Ways to Relax

1. Switch off the screens—turn off your phone, tablet, and computer and go and do something that does not involve tech gadgets.
2. Develop a hobby - a hobby away from school or work can help you switch your brain off from school/work pressures.
3. Exercise - increases your heart rate and releases endorphins that make you feel good. Going for a run, cycling, swimming, or team sports such as football or netball are all great exercise. Choose one you love and build your exercise routine around that.
4. Walking - as moderate exercise, walking releases “feel good” endorphins. It can also help you switch off by taking your time to observe your surroundings and walk in a steady rhythm. Walking can be a less stressful way to travel than being stuck in slow moving traffic. Fresh air helps you relax and sleep better.
5. Spend time in the natural world—an old Zen proverb says: “You should sit in nature for 20 minutes a day. Unless you are busy, then you should sit for an hour.” Start gardening or tending to your plants or flowers to relax.
6. Take a long warm bath.
7. Watch a TV show or read a book - escapism is a great way to switch off from reality and help your mind relax.
8. Meet a friend - leave a stressful situation and spend some time with a friend. Talking things over, having some laughs and hearing a different perspective can take your mind off things and help you wind down.

Emotional wellbeing

We can learn to manage stress and feel better and more balanced by making changes in:

- The way we behave
- The support we receive from other people
- The way we think about and understand the stressors

Our thoughts, activities, and mood are interrelated, which means that:

- - How we feel affects the way we think and what we do.
- - The way we think and what we do also affects how we feel
- - Changing what we do also affects how we think and feel

When we feel down or depressed, we cannot be the best students/children/employees we can be and may not attend sufficiently to our needs and responsibilities.

Anger is a natural, though sometimes unwanted, or irrational emotion that everybody experiences from time to time. While it is normal to feel angry when you have been wronged, anger becomes a problem when you express it in a way that harms yourself or others. Chronic anger that gets out of control can have serious consequences for your relationships, health, and state of mind.

Anger is a normal, healthy emotion, however, there is a difference between angry feelings and aggressive behavior. Kids can learn to label their feelings to verbalize feelings of anger, frustration, and disappointment. Try saying, “It is okay to feel angry, but it is not okay to hit.”

You can manage anger by using time outs, walking away, doing other calming activities like coloring, drawing, etc.

How do you manage your stress or anger⁴³?

You can manage your stress or anger by doing what you enjoy doing, increasing your positive interactions, and encouraging positive thoughts.

a) What do you enjoy doing?

Knowing what you like to do can help generate ideas to improve your mood when you feel down, e.g., playing football, knitting, reading a story book, watching a movie, etc.

b) Increase positive interaction with others

Our relationships with other people affect our mood. When people are feeling down, they often:

- Have less contact with others, avoid others
- Have lower tolerance, feel more irritable
- Feel more uncomfortable around people
- Act quieter and are less talkative
- Are more sensitive to being ignored, criticized, or rejected
- Some people tend to become hyperactive

c) Thoughts

Thoughts are like self-talk, like having a conversation with ourselves. Thoughts can help or harm our moods and feelings. When we feel stressed or overwhelmed, harmful thoughts can make us feel even worse.

Learning to be aware of your thoughts in stressful situations and how you talk to yourself at such times can help you protect your mood and feelings. The best way to stop negative thoughts is through 'thought interruptions,' where you tell your mind to stop thinking about something negative. Also, 'time projection,' which when we are sad or depressed, can help us imagine ourselves moving forward in time to a point when things will be better.

⁴³ Le, H. N. (2017). The Mothers and Babies Course: Integrated Version. Facilitator's Manual. George Washington University

ANNEX 8.6

BACKGROUND READING FOR TOPIC FOUR: MY HEALTH

SESSION 4: RESILIENCE

Can one learn to become more resilient?

You can learn certain attitudes, skills, and behaviors that will boost your resilience. Being resilient does not mean that you will not experience pain and emotional distress in a difficult or traumatic situation. However, it does mean that you can regain your balance and strength and perhaps even be stronger than before. It involves learning certain behaviors, thoughts, and actions, which anyone can do, e.g., courageous, Assertive, decisive, informed.

What are the building blocks of resilience?

- A combination of factors promotes resilience. Research indicates that primary among these are **caring and supportive relationships**. Such relationships are characterized by love, trust, encouragement, security, and offer role models
- Other important factors include **coping skills**, such as the process of making and executing realistic plans to manage demands that you are facing; realistic self-appraisal and healthy self-esteem; communication and problem-solving skills; and being able to regulate strong emotions and impulses
- Develop **a belief in yourself**, others, the world around you and your ability to cope. In Psychology, this is referred to as a sense of self-efficacy
- Develop the ability to make **sense of hardship** on an emotional-spiritual level—to find some meaning. When bad things happen, the common question is, “Why me?” Spirituality can help one to put one’s trust in a higher power, to find some purpose, and to come to terms more easily with what had happened

ANNEX 8.7

BACKGROUND READING FOR TOPIC FIVE: MAKING SAFER AND HEALTHIER CHOICES

Facts about alcohol

- An illness that can be very addictive
- Can cause anxiety, depression, other mental health and physical health issues
- One of the leading causes of road accidents
- It can seriously damage the liver and destroys brain cells
- It affects judgment and makes you more likely to take risks, putting you more at risk of harm
- Can cause death

Facts about smoking

- It increases your likelihood of getting certain types of cancer and heart disease
- You put others at risk because they breathe in the smoke too
- It stays on your clothes and in your house, so it can be dangerous, especially to babies, children, and pets
- Every cigarette you smoke reduces your lifespan by 11 minutes
- It contains nicotine, which is very addictive
- It can cause death

Facts about drugs

- There are lots of different types, and many also have specific names only used on the street
- Can lead to a change in perceptions, senses, risk assessment, risk-taking, thus putting you more at risk of harm
- Can cause anxiety, depression, other mental health issues, and physical health issues
- Can be very addictive
- Can be mixed with other substances that are also dangerous—dealers do this because they make more money from it
- It can cause death

Video games and online communication⁴⁴

A video game is interactive digital entertainment that you “play” on a computer, tablet, or phone.

A good game will be the right one for how old you are. Games are rated like movies, and your guardian can help figure out which ones you should use. If you can choose one that gets you up and moving, that’s even better.

Some studies have shown that certain video games can improve hand-eye coordination, problem-solving skills, and the mind’s ability to process information. But too much video game playing may cause problems.

- It is hard to get enough active play and exercise if you are always inside playing video games; without enough exercise, kids can become overweight.
- Overdoing video games can also affect other important stuff, like friendships, and how well a kid performs in school. Also kids who play violent video games might act more aggressively.

How to develop healthy video gaming habits:⁴⁵

- Playing only games with a G or PG rating (appropriate to your age)

⁴⁴ <https://kidshealth.org/en/kids/video-gaming.html>

⁴⁵ <https://raisingchildren.net.au/preschoolers/play-learning/screen-time-healthy-screen-use/healthy-gaming-children-teens>

- Making sure there is an adult around to help understand a game or solve problems
- Playing only at certain times of the day, such as after schoolwork and before dinner or on the weekends
- Having fixed periods of time for play that have been agreed in advance with your caregiver
- Avoid games that involve playing with others online, especially strangers
- Compete respectfully

Identify games that encourage you to move around, improve your literacy, etc.

Substance abuse: According to WHO, substance abuse is the harmful or hazardous use of psychoactive substances. This includes alcohol and illicit drug use. Substance abuse refers to a strong desire to take the drug, difficulties controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state.⁴⁶

Some drugs are more addictive than others. Depending on the drug, some are more addictive than others. Users can also abuse prescription medicines, e.g., codeine and codeine-based cough syrups like benylin, pethidine, morphine, betapyn, syndol, cozepam, ketamine, etc. In 2016, 1338 drug-related deaths were reported, mostly from an opioid overdose. There were 49 drug-related deaths per million people in Kenya in 2016.⁴⁷

Drug and alcohol abuse leads to addiction where the user needs the alcohol or drug to feel normal and failure to which he/she gets withdrawal symptoms like headaches, anxiety, etc.

For a variety of reasons, adverse childhood experiences, a high incidence of psychological and behavioral problems, and feelings of loss and fragmentation following time in care—young care leavers are considered particularly vulnerable to having or developing drug problems.

⁴⁶ https://www.who.int/topics/substance_abuse/en/

⁴⁷ <https://www.nation.co.ke/newsplex/opioids/2718262-4700848-tm1dqf/index.html>

ANNEX 8.8

BACKGROUND READING FOR TOPIC SIX: GENDER ROLES

What should I know about gender?⁴⁸

- Gender equality means that individuals' rights, responsibilities, and opportunities will not depend on whether they are born male or female.
- Child marriage threatens the wellbeing of girls. It denies girls access to education and other fundamental human rights.
- Female genital mutilation (FGM) is an extreme form of violence against women and girls.
- Do not stand for bullying or teasing based on gender. Do not tease your friends, such as saying, "You are a boy, do not be a sissy."
- Explore different activities that interest you, even if those activities are deemed unfit for the opposite sex; for example, girls interested in football.
- Boys and girls should feel free to explore their emotions.
- Attribute compliments to achievements and abilities rather than appearance.
- Read books and watch movies showing girls and boys taking on unconventional roles at home, in the workplace, and in school.
- Identify role models that defied gender stereotypes and aim to learn from them, e.g., Wangari Maathai.
- Aim for inclusive play and interaction at school or in your community.

⁴⁸ <https://www.unicef.org/gender-equality>; <https://novakdjokovicfoundation.org/how-to-send-positive-gender-messages-to-children/>

ANNEX 8.8

BACKGROUND READING FOR TOPIC SEVEN: THE BEGINNING OF MY CAREER PATH

Career planning⁴⁹

Talk to your school counselor or teacher regarding how they help kids plan for their life careers- Discuss careers with your caregiver to help you identify the types of things you enjoy doing the most. Look for career opportunities in your area or community that allow kids to learn specific careers. Exploring your options can help eliminate or spur interest in different fields that you may not have expected.

Remember that it is okay to change. Change brings about learning, and no one must stay in the same career forever. However, do stay with a decision long enough to give it a chance to pay off.

Be sure to prioritize. There are different factors involved in choosing a career: time, money, opportunities, vacation days, and location. Determine what is most important to you in a career opportunity, as this is important in deciding the type of career in which you will flourish. Some jobs pay very well but will afford little free time.

Reflect—what type of career would suit you?

The first step towards finding a fulfilling career is thinking about the type of career you would enjoy doing. It is also important to consider what you think a 'good' career for you entails. For some people, a fulfilling career might mean one that pays well, whereas others might see a promising career as one that allows you to manage your workload. For some, they may value freedom and wish to start their own business.

Values

- To help you determine what a fulfilling career looks like to you, try arranging the following statements in order of how important they are to you:
- A job with a high paying salary is important to me
- I value having the freedom to work using personal initiative
- I enjoy being part of a team and working with other people towards a common goal
- I take direction well, and I prefer to follow instructions
- I want to be my own boss

Consider the order in which you have placed these statements. The points you placed at the top of your list are the values that are most important to you. Try to keep values in mind when conducting your research, which may impact the type of career you want to pursue.

Interests:

How do you spend your time after school and on the weekends? Do you have a particular hobby that you enjoy? Do you play any sports? Do you spend most of your time with friends in your own company?

Your personal interests can be a good starting point for reflecting on possible career options. If you are able to find a career working in an industry that you have a genuine passion for, then you will get more job satisfaction and will generally be happier with your career choices.

Skills: What are you good at? Do you have a talent for writing? Are you skilled with numbers? Maybe you can play the guitar? Whereas every skill can be developed, most of us have one or two that just seem to come naturally to us. When it comes to reflecting on your career options, it can help to think about what skills you already have in your toolkit. If you are a people person and are good at speaking with people, then perhaps a career in sales or public relations would be good for you? Or if you work well with numbers, then perhaps you should consider a career in finance or management?

49 <https://www.brighthubeducation.com/parenting-teens/128736-planning-a-career-for-life-for-teens/>

Qualities:

Are you a naturally outgoing person, or are you more reserved? Do you prefer to think things through logically or trust your instincts? Taking the time to think about your personal qualities can help ensure that you choose a suitable career tailored to your personality. For example, some careers are known for being high-pressured and busy, whereas others are known for being more creative or requiring you to think on your feet.

ANNEX 8.9

BACKGROUND READING FOR TOPIC EIGHT: MONEY MATTERS

All about money:⁵⁰

- People earn money through working; by providing goods or services. Money comes from working hard and receiving a remuneration for a service or a good.
- Learn the difference between a want and a need; emotional purchases, a desire (wants), necessary ones, or something for survival (needs)
- Work within your budget. Learn how to prepare budgets by starting off with one for your school shopping.
- Start saving early. Save your pocket money for something you will need in the future. You can put your savings in an old tin or better still, if able, open a bank account where your money will be safe and can earn an interest (money grows value over time). Please note that even debts/loans earn an interest over time.
- Prepare a wish list of the things you may wish to obtain. Sit down with your caregiver/guardian/teacher and prioritize which items are important to have and set a goal and timeline for when you will purchase them.
- If you cannot afford to pay for it now, then understand that you cannot afford it. Beware of credit and taking loans to meet your budget and be cautious of money lending apps. Loans earn huge interest and thus are expensive to repay.
- You will be required to pay taxes to the government from your employer or business. Taxes are money that the government collects from its citizens in order to provide services like roads, healthcare, etc.
- Learn to share -- donate money to charity or support a worthy cause in your community. Keep in mind that giving affects the people receiving as well as positively impacting the giver, too.
- Learn how to be content -- do not yearn for things simply because you have seen a friend with that specific item. It is normal, however, to have those feelings.

⁵⁰ <https://www.parents.com/kids/responsibility/money-management/lessons-teach-kids-about-money/>; <https://www.thesimpledollar.com/financial-wellness/how-to-teach-kids-about-money-from-toddlers-to-teens/>; <https://www.daveramsey.com/blog/how-to-teach-kids-about-money>

ANNEX 8.10

BACKGROUND READING FOR TOPIC NINE: CITIZENSHIP

PILLARS OF CHARACTER⁵¹

- **Trustworthiness:** Be honest and do not deceive, cheat, or steal. Be reliable and keep promises. Have the courage to do the right thing even when it is difficult. Be loyal — stand by your family, friends, and country.
- **Respect:** Treat others with respect; do not insult or call other people bad names. Be considerate of the feelings of others. Do not threaten, hit, or hurt anyone. Deal peacefully with anger, insults, and disagreements.
- **Responsibility:** Keep on trying and always do your best. Use self-control and be self-disciplined. Think before you act — consider the consequences. Be accountable for your choices. Take care of your environment.
- **Fairness:** Share and do not show favoritism. Play by the rules and lose honorably. Be open-minded and listen to others. Do not take advantage of others.
- **Caring:** Be kind and compassionate and show you care. Express gratitude, forgive others, and offer help to people in need. Treat people with kindness and generosity. Protect and care for the environment.
- **Citizenship:** Cooperate with others. Make your school, community, or country better. Get involved in community affairs, stay informed, and importantly vote! Be a good neighbor and obey laws and rules. Respect authority.

THE BILL OF RIGHTS

As a Kenyan citizen, you are entitled to many rights as outlined in Chapter 4 of the constitution of Kenya.

Every child has the right--

- (a) To a name and nationality from birth; The Constitution of Kenya 37
- (b) To free and compulsory primary education
- (c) To essential nutrition, shelter, and health care
- (d) To be protected from abuse, neglect, harmful cultural practices, all forms of violence, inhuman treatment and punishment, and hazardous or exploitative labor
- (e) To parental care and protection, which includes equal responsibility of the mother and father to provide for the child, whether they are married to each other or not
- (f) Not to be detained, except as a measure of last resort, and when detained, to be held
 - (a) For the shortest appropriate period
 - (ii) Separate from adults and conditions that take account of the child's sex and age.

A child's best interests are of paramount importance in every matter concerning the child.

(1) A person with any disability is entitled--

- (a) To be treated with dignity and respect and to be addressed and referred to in a manner that is not demeaning.
- (b) To access educational institutions and facilities for persons with disabilities that are integrated into society to the extent compatible with the interests of the person.
- (c) To reasonable access to all places, public transport, and information.
- (d) To use Sign language, Braille, or other appropriate means of communication; and
- (e) To access materials and devices to overcome constraints arising from the person's disability.

The State shall ensure the progressive implementation of the principle that at least five percent of the members of the public in elective and appointive bodies are persons with disabilities.

⁵¹ <https://charactercounts.org/program-overview/six-pillars/>

The State shall take measures, including affirmative action programs, to ensure that the children and young people—

- (a) Access relevant education and training.
- (b) Have opportunities to associate, be represented and participate in political, social, economic, and other spheres of life.
- (c) Access employment.
- (d) Are protected from harmful cultural practices and exploitation.

ANNEX 9: CERTIFICATE OF COMPLETION



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KENYA SOCIETY OF CARE LEAVERS

This is to certify that:

has successfully participated in
life skill sessions—practical life skill for care leavers
by care leavers.

Signature _____ Date _____



Kenya Society of Careleavers
KESCA

Changing
THE WAY WE
care

ANNEX 10

FACILITATOR'S FEEDBACK FORM

Instruction: This form is to be filled by a supervisor who will be observing a facilitator during a session. It will be used to provide feedback to the facilitator. It should be completed after the session, not during so that the person filling out the feedback form can be attentive during the session .

Name of facilitator: _____ Date: _____

Evaluator: _____ Community/Group name: _____

Statement	Yes	No
Did the facilitator seat people so that all could see each other (circular or semi-circular position)?		
Did the facilitator remain at the same level as the other participants?		
Did the facilitator introduce the topic well (who he/she is, topic, time, etc.)?		
Did the facilitator speak loud enough, slowly, and clearly so that everyone could hear?		
Did the facilitator use proper eye contact with everyone?		
Did the facilitator change his/her voice intonation (not monotone)?		
Did the facilitator verify that people understood the main points using open-ended questions?		
Did the facilitator ask the participants open-ended questions?		
Did the facilitator give participants adequate time to answer questions?		
Did the facilitator recap messages or key points from the last session?		
Did the facilitator encourage comments by paraphrasing what people said (repeating statements in his/her own words)?		
Did the facilitator encourage comments by nodding, smiling, or other actions to show he/she was listening?		
Did the facilitator always reply to participants in a courteous way?		
Did the facilitator prevent domination of the discussion by one or two people?		
Did the facilitator encourage timid participants to speak/participate?		
Did the facilitator summarize the discussion?		
Did the facilitator reinforce statements by sharing relevant personal experience or by asking others to share personal experiences?		
Did the facilitator explain the home assignment clearly?		
Did the facilitator follow up on the home assignment?		

Provide an overall evaluation of the facilitator's performance in the space below. Include specific observations, including comments about content/educational messages.

Score: _____

Comments:

ANNEX 11

REFERENCES AND ADDITIONAL RESOURCES

Brakarsh, J. (2017) *Singing to the Lions: A facilitator's guide to overcoming fear and violence in our lives*. Baltimore: Catholic Relief Services.

Food Security and Nutrition Network Social and Behavioral Change Task Force. 2014. *Care Groups: A Training Manual for Program Design and Implementation*. Washington, DC: Technical and Operational Performance Support Program.

Griffiths, M., Fernandez, M. T., Pontes, H. M., & Kuss, D. J. (2018). Excessive and problematic use of social media in adolescence:

Goodyear, V.A., Armour, K.M., & Wood, H. (2018). *The Impact of Social Media on Young People's Health and Wellbeing: Evidence, Guidelines and Actions*. Birmingham, UK: University of Birmingham.

Laws of Kenya. The constitution of Kenya 2010. National Council for Law Reporting with the Authority of the Attorney General

Le, H. N. (2017). *The Mothers and Babies Course: Integrated Version. Facilitator's Manual*. George Washington University.

Leonora Borg (2014) Nothing about us without us; A toolkit for organizations working or wanting to

work with adolescent street-connected girls. CSC

Life skills Manual. Peace corps. 2001

Medrano T, Tabben-Toussaint A. Manual 2: Guidelines and Programming Options for Protecting Vulnerable Children in Community-based Care and Support Programs; FHI 360 Child Protection Toolkit. Research Triangle Park, NC: FHI 360; 2012.

REPSSI (2017), *The Journey of Life Trainer's Manual Global Edition*: Facilitator's Guide. Johannesburg: REPSSI. www.repssi.org in collaboration with CRS.

Vicki Welch et al (2018) In and beyond the care setting: relationships between young people and care workers. CELCIS

<https://www.apdk.org/index.php>

<https://nfdk.or.ke/>

<http://www.youthfund.go.ke/>

<https://www.medicalnewstoday.com/articles/15929.php>

<http://www.warrick.k12.in.us/schools/yankeetown/docs/character.pdf>

<https://www.thepragmaticparent.com/how-to-identify-perpetrators-and-protect-your-children/>

HM government (2016) Keep on caring, supporting your people from care to independence

John Hopkins Bloomberg school of public health/Center for communication Programs (2011) *Go girls Community based life skills for Girls: A training manual*. Baltimore, Maryland.

<https://adaa.org/understanding-anxiety/posttraumatic-stress-disorder-ptsd/symptoms>

<https://www.nhs.uk/conditions/post-traumatic-stress-disorder-ptsd/symptoms/>

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/post-traumatic-stress-disorder-ptsd/symptoms-of-ptsd/#.Xg3zrEczaUk>

Life Skills and Health Curriculum for the Adolescent Girls Empowerment Program (AGEP) 2013. Population Council

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