

## Life Skills



Life skills are practical behaviors needed to meet the demands of everyday life. Young people who are adept at life skills are better equipped to make healthy choices and avoid risky behavior. Some examples of life skills are critical thinking, being assertive, and developing good support networks.

If you have time, you can introduce these skills during pretest and posttest counseling. You can also refer clients to other services to learn more.

### Developing Critical Thinking

Help young people learn to be wise “consumers” of information. Offer clients these tips to becoming critical thinkers:

- ◆ Do not accept everything you read or hear as truth. Look at the source of the information. Is the person who told you knowledgeable and reliable or might they just be repeating false rumors? Did you get your facts from a tabloid newspaper or a respected news source? What about the Internet? Did the site look professional, and was it sponsored by a reputable organization?
- ◆ Consider the goals of the source of your information. Is someone trying to sell you something? Are people who say they are your “friends” really looking for someone to engage

in risky behavior with them? If people have only their own best interests in mind, you would be wise to question their messages.

- ◆ Remember the saying: If something sounds too good to be true, then it probably is not true. Will having sex make you more beautiful, manly, or healthy? No. Will having sex mean he or she will love you forever? No. Will taking drugs solve all your problems and leave you carefree? No. Question anything that sounds like a quick and simple solution to a problem.
- ◆ Ask! If you read or hear something that does not seem true, ask a teacher, trained peer counselor, adult counselor, religious leader, parent, or other trusted adult.

## Being Assertive

Being assertive means being confident, standing up for oneself and what one thinks is right, and believing in oneself. Assertive people are less likely to be influenced by peer pressure and more likely to make long-term positive behavior change. People who are assertive:

- ◆ Speak clearly and firmly, but politely
- ◆ Maintain eye contact when speaking to others (when culturally appropriate)
- ◆ Avoid arguments with people who disagree with you; simply state your opinion and agree to disagree
- ◆ Find role models who seem assertive — such as a teacher, relative, or friend — and watch how they act
- ◆ Remember that being assertive is not the same thing as being aggressive

Acknowledge that it is not always easy to be assertive, but suggest that practicing can help.

## Developing Good Support Networks

Encourage your clients, whether or not they decide to be tested, to seek out people who support them. Supportive friends, family, and others can be a remedy for depression and loneliness and can encourage young people in their quest to lead happier, healthier lives.



Supportive people:

- ◆ Are honest and genuine
- ◆ Respect their friends
- ◆ Do not pressure their friends to do something that is dangerous or wrong
- ◆ Are trustworthy
- ◆ Do not tease, hurt, or abuse people
- ◆ Listen
- ◆ Maintain confidentiality
- ◆ Want what is best for the people they care about

Your clients may feel bad if they recognize that a certain “friend” or family member is not supportive. Acknowledge their feelings and encourage them to choose more positive friends.



# Creating a Referral Network



**R**arely can a single facility, agency, or community group deliver all the services that youth need. A well-established referral network is vital to meeting the needs of young people and maintaining contact with those who require on-going support. A good referral network should:

- ◆ Increase youth's access to needed services.
- ◆ Ensure confidentiality.
- ◆ Track referrals between organizations in the referral network.
- ◆ Document referrals and their outcomes.
- ◆ Solicit feedback from clients to see if the organization to which they were referred met their needs.

You can create a referral network for your clinic or program by using the following pages and by taking these steps:

- ◆ Create a referral book or a set of referral cards.
- ◆ List the names of other reputable organizations in your community that work with adolescents.
- ◆ List their address, telephone number, and the name of a person for young clients to contact. Try to ensure that this contact person has experience working with youth.
- ◆ Make this list available to all staff in your clinic or program.
- ◆ Regularly update your referral book to ensure that contact information, location, or hours of any of the organizations in your network have not changed.

For more information on developing an effective referral system, see “Establishing Referral Networks for Comprehensive HIV Care in Low-Resource Settings,” which is available online at <http://www.fhi.org/en/HIVAIDS/pub/guide/refnet.htm>.

## Organizations/clinics that provide HIV-related services

Name of organization	Address	Telephone
1.		
2.		
3.		
4.		

## Organizations/clinics that provide contraceptive services

Name of organization	Address	Telephone
1.		
2.		
3.		
4.		

## Organizations/clinics that provide STI screening/treatment

Name of organization	Address	Telephone
1.		
2.		
3.		
4.		

## Organizations/clinics that provide care for victims of sexual violence

Name of organization	Address	Telephone
1.		
2.		
3.		
4.		

## Organizations/clinics that provide psychological or mental health counseling

Name of organization	Address	Telephone
1.		
2.		
3.		
4.		

## Organizations that work with adolescents (YWCA, YMCA, scouts, youth groups, etc.)

Name of organization	Address	Telephone
1.		
2.		
3.		
4.		

# Resources

**F**amily Health International. *VCT Toolkit*. Arlington, VA: Family Health International, 2002-2004. Tools from this kit are summarized below, which is available at: <http://www.fhi.org/en/HIVAIDS/pub/guide/vcttoolkit.htm>

- ◆ Boswell D, Baggaley R. *Voluntary Counseling and Testing and Young People: A Summary Overview*, 2002. This 28-page booklet summarizes issues related to VCT and youth, including the relevance and rationale of VCT for youth, approaches and service models to consider, the diversity of young people, barriers to consider, advocacy messages, short case studies, and more.
- ◆ Sangiwa G. *A Guide to Establishing Voluntary Counseling and Testing Services for HIV*, 2002. This 11-page guide describes what a program establishing VCT services needs at the assessment, design, and implementation phases, and summarizes minimum staff, space, equipment, and supply needs.
- ◆ Sangiwa G, Kamenga C, Boswell D, et al. *HIV Voluntary Counseling and Testing: A Reference Guide for Counselors and Trainers*, 2004. This 125-page guide includes basic information on HIV/AIDS and other STIs, HIV testing issues, counseling concepts, strategies to promote behavior change, pretest and posttest counseling frameworks, care and social support issues, loss and bereavement issues, counselor support issues, monitoring and supervision issues, and ethical issues.
- ◆ Sangiwa G. *Voluntary Counseling and Testing for HIV: A Strategic Framework*, 2003. This short (nine-page, plus appendices) description of a strategic framework provides a conceptual approach to undertaking the various aspects of a VCT program.
- ◆ Walkowiak H, Gabra M, van Praag E, et al. *Commodity Management in VCT Programs: A Planning Guide*, 2002. Done in conjunction with Management Sciences for Health, this 39-page guide summarizes issues related to HIV test kits and other commodities at VCT services, with a case study from Zambia and recommendations.

## Other Resources

Finger W. *HIV: Voluntary Counseling and Testing. YouthLens No. 3.* Arlington, VA: Family Health International/YouthNet, 2002.

<http://www.infoforhealth.org/youthwg/youthlens.shtml> (scroll to No. 3).

This four-page research brief synthesizes the research and programmatic directions on the issue of VCT and youth available at the time of publication, summarizing demand for services, impact of VCT on behavior, and programmatic challenges.

Horizons Program, Kenya Project Partners, Uganda Project Partners. *HIV Voluntary Counseling and Testing among Youth Ages 14 to 21: Results from an Exploratory Study in Nairobi, Kenya, and Kampala and Masaka, Uganda.* Washington, DC: Population Council, 2001.

<http://www.popcouncil.org/pdfs/horizons/vctyouthbaseline.pdf>

This report focuses on the attitudes and opinions toward VCT of youth in Kenya and Uganda who either have or have not taken a VCT test.

International Planned Parenthood Federation/South Asia Regional Office (IPPF) and United Nations Population Fund (UNFPA). *Integrating HIV Voluntary Counselling and Testing Services into Reproductive Health Settings: Stepwise Guidelines for Programme Planners, Managers and Service Providers.* London: IPPF/South Asia Regional Office and UNFPA, 2004.

[http://www.unfpa.org/upload/lib\\_pub\\_file/245\\_filename\\_hiv\\_publication.pdf](http://www.unfpa.org/upload/lib_pub_file/245_filename_hiv_publication.pdf)

This 77-page set of guidelines for integrating VCT into reproductive health settings is based on the experiences of four project sites who piloted VCT services into existing reproductive health services, two in India and two in the Ivory Coast. Staff and clients at these four sites contributed to the development of the guidelines. The guidelines

are designed to help reproductive health services planners, managers, and providers integrate VCT into their services.

McCauley A, Juma MA, Kirumira E, et al. ***Attracting Youth to Voluntary Counseling and Testing Services in Uganda, Horizons Research Summary***. Washington, DC: Population Council, 2004.

<http://www.popcouncil.org/horizons/ressum/vctyth/vctythsum.html>

This eight-page report provides results from a program that established youth-friendly VCT services and a youth-centered media outreach campaign and measured the success of the intervention.

McCauley AP. ***Equitable Access to HIV Counseling and Testing for Youth in Developing Countries: A Review of Current Practice, Horizons Report***. Washington, DC: Population Council, 2004.

<http://www.popcouncil.org/pdfs/horizons/vctythrvw.pdf>

This 18-page report reviews VCT programs for youth worldwide and gives recommendations for increasing access to such programs for youth in developing countries.

Revised guidelines for HIV counseling, testing: technical expert review of CDC HIV counseling, testing and referral guide. ***MMWR Recommendations and Reports***. November 9, 2001/50(RR);1-58.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5019a1.htm>

This 51-page, online publication summarizes the findings of the U.S. Centers for Disease Control and Prevention (CDC) expert group that revised the VCT guidelines in 2001. It includes useful tables and charts on counseling and HIV testing issues.

World Health Organization. *Rapid HIV Tests: Guidelines for Use in HIV Testing and Counselling Services in Resource-Constrained Settings*. Geneva: World Health Organization, 2004.

<http://www.who.int/hiv/pub/vct/en/rapidhivtests/en.pdf>

These 48-page guidelines from WHO, done in collaboration with the U.S. Centers for Disease Control and Prevention, provide a valuable reference tool on the evolution of approaches to HIV testing and counseling, advantages of using rapid tests, testing strategies and practical considerations for rapid tests, quality assurance, and suggested protocols and checklists regarding counseling for negative and positive results.

*Youth-Friendly Services programs area page on the Web site of the Interagency Youth Working Group.*

[http://www.infoforhealth.org/youthwg/prog\\_areas/youth-friendly.shtml](http://www.infoforhealth.org/youthwg/prog_areas/youth-friendly.shtml)

This site links to numerous resources including reports, tools and curricula by WHO, FHI, Pathfinder, CEDPA, IPPF, PSI, and others.

# Notes

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