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## HANDOUT 1:

# MENTORING AGREEMENT WORKSHEET

We, \_\_\_\_\_ and \_\_\_\_\_, have  
NAME OF MENTEE NAME OF MENTOR  
 voluntarily decided to enter into a mentoring relationship. We agree on the following guidelines to help make this relationship a rewarding experience for us both:

### 1. Duration of mentoring relationship

The mentoring relationship will last for \_\_\_\_\_ .  
ONE SEMESTER, ONE YEAR, ETC.

### 2. Mentoring activities

(Examples: Home visits, individual mentoring, group mentoring, tutoring, meetings with teachers and/or parents, etc. Be as specific as possible about the activities you plan to do.)

We agree that the mentoring relationship will consist of the following activities:

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

### 3. Meeting frequency

We will meet at least \_\_\_\_\_ every \_\_\_\_\_.  
NUMBER OF TIMES WEEK, MONTH, SEMESTER, ETC.

These meetings will take place at \_\_\_\_\_.  
MENTEE'S HOME, SCHOOL, ETC.

### 4. Contact information

The mentoring meetings will be a priority for both of us. If either one of us cannot make a meeting, he or she will notify the other person at least \_\_\_\_\_ in advance and the meeting will be rescheduled.  
AMOUNT OF TIME

Mentor contact information:

\_\_\_\_\_

Mentee contact information:

\_\_\_\_\_

### 5. Mentor responsibilities

Mentors are role models. They also can serve as liaisons between a girl, the school administration, parents, and others. In some cases, a mentor may meet with teachers or parents to monitor her mentee's academic progress and well-being. In other situations, the mentor may organize extracurricular events and activities. We agree that the mentor's role in our mentoring relationship is to:

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

(If applicable) The mentor is expected to report to \_\_\_\_\_ regarding the mentee's progress and/or activities every \_\_\_\_\_.  
NAME OF ORGANIZATION  
FREQUENCY

The report will be in the following form: \_\_\_\_\_.

### 6. Mentee responsibilities

Mentees engage in a mentoring relationship to learn, to receive guidance, and to grow. Mentees play an important part in ensuring the success of the mentoring relationship by stating the expectations they have and by participating in mentoring activities. We agree that the mentee's responsibilities in our relationship are to:

- |          |          |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

### 7. Termination of the agreement

If the mentee or the mentor violates part of the mentoring agreement, they will work together to decide if the mentoring relationship can be repaired or if it should be terminated. If the mentee and the mentor cannot agree on a way to resolve a problem, another person may be contacted to mediate a solution. The mentoring partnership will be terminated if either the mentor or the mentee believes that the parties can no longer work together.

**We hereby agree to the above terms of our mentoring relationship.**

\_\_\_\_\_  
MENTOR'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT OR GUARDIAN'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
MENTEE'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF SPONSORING ORGANIZATION

\_\_\_\_\_  
DATE

## HANDOUT 2: **MENTORING GUIDELINES**

- 1.** Work with the mentee to define common goals for your mentoring relationship.
- 2.** Establish regular meeting times. Frequent contact with your mentee will let her know you are there to support her.
- 3.** Show you are interested in your mentee. Ask about her family, her favorite school classes, and her dreams for the future. Without intruding on the girl's privacy or asking for confidential information, you may want to find out more information about your mentee by talking to her teachers or acquaintances.
- 4.** Share your experiences with the girl when appropriate. This way the girl knows something about you, too. She may be inspired by your experiences and feel that she "is not alone."
- 5.** Respect the relationship. Be on time to appointments, prepare necessary materials, and honor the mentee/mentor contract. Do not use your position as mentor to force a girl to do something she does not want to do.
- 6.** Be a good listener. Let the girl do most of the talking. Empathize with the girl and put yourself "in her shoes" to better understand her situation.
- 7.** Foster trust and honesty. If your mentee does not trust you, the relationship will be severely compromised. Don't make promises you can't fulfill.
- 8.** Assist your mentee in finding solutions to her problems. Do not immediately offer a solution that you think is best. Ask questions that will help her come to a healthy, positive solution. Remember that the girl's solution may not be the same as yours.
- 9.** Don't be judgmental or criticize your mentee. Help her assess a situation and make decisions for herself, but do provide guidance.
- 10.** Be a positive role model. Remember that your actions sometimes speak louder than words.
- 11.** Empower the mentee to make good decisions. Remember that a mentee will sometimes learn a valuable lesson by making her own decision, even if it is a poor decision. Your mentee needs to find her own path in life, but you can help point her in the right direction.
- 12.** Determine how your mentee learns best. For example, some mentees will need to talk through their problems, while others will want more feedback from you. Help your mentee assess her strengths and weaknesses.
- 13.** Maintain confidentiality. Do not share information about your mentee with anyone else, unless the girl's health or well-being is in danger.

14. Ask others for advice. If you do not know how to address a girl's particular problem, consult another mentor, a health worker, or other professional in the community. Consult the organization with which you are working to mentor the girl. If you need more information, contact local organizations or do research on the Internet.
15. Be patient! Working with young people is not always easy and sometimes time-consuming, but you'll be surprised by the rich rewards.

## HANDOUT 3:

# INTERNATIONAL RIGHTS CONVENTIONS

## Convention on the Elimination of all Forms of Discrimination Against Women (Summary of excerpts)<sup>1</sup>

**Article 3** guarantees women the same human rights and fundamental freedoms as men.

**Article 6** promises to take all appropriate measures, including legislation, to suppress all forms of trafficking in women and the exploitation of prostitution of women.

**Article 7** guarantees women the right to vote in all elections and to run for office and serve in the government.

**Article 10** guarantees total equality for women in education, including: working to reduce the number of girls who drop out of school; equal opportunity to participate in sports; and access to information on health and family planning.

**Article 11** ensures equality for women in employment including equal pay and paid maternity leave; guarantees that women will not be punished or dismissed as a result of pregnancy or marital status.

**Article 12** promises equality in health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning.

**Article 16** guarantees men and women: the same right freely to choose a spouse and to enter into marriage only with their free and full consent; the same rights and responsibilities as parents, irrespective of their marital status; the same rights to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights; equal property rights for spouses. Finally this article bans the engagement or marriage of children.

## Convention on the Rights of the Child (“Child-friendly” version, excerpts)<sup>2</sup>

**Article 1** Everyone under 18 years of age has all the rights in this Convention.

**Article 2** The Convention applies to everyone whatever their race, religion, abilities, whatever they think or say, whatever type of family they come from.

**Article 6** All children have the right to life. Governments should ensure that children survive and develop healthily.

**Article 12** Children have the right to say what they think should happen when adults are making decisions that affect them and to have their opinions taken into account.

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1. <http://www.un.org/womenwatch/daw/cedaw/cedaw.htm>

2. [http://www.unicef.org/magic/media/documents/what\\_rights\\_flyer\\_english.pdf](http://www.unicef.org/magic/media/documents/what_rights_flyer_english.pdf)

**Article 19** Governments should ensure that children are properly cared for and protect them from violence, abuse and neglect by their parents or anyone else who looks after them.

**Article 23** Children who have any kind of disability should have special care and support, so that they can lead full and independent lives.

**Article 24** Children have the right to good quality health care, to clean water, nutritious food, and a clean environment, so that they will stay healthy. Rich countries should help poorer countries achieve this.

**Article 28** Children have a right to an education. Discipline in schools should respect children's human dignity. Primary education should be free. Wealthy countries should help poorer countries achieve this.

**Article 31** All children have a right to relax and play, and to join in a wide range of activities.

**Article 32** The Government should protect children from work that is dangerous, or that might harm their health or their education.

**Article 34** The Government should protect children from sexual abuse.

**Article 35** The Government should make sure that children are not abducted or sold.

**Article 38** Governments should not allow children under 15 to join the army. Children in war zones should receive special protection.

## **African Charter on the Rights and Welfare of the Child**

The African Charter on the Rights and Welfare of the Child recognizes many of the same rights as the Convention on the Rights of the Child. It also specifically protects children from harmful social and cultural practices that may hurt the health or life of the child and customs and practices that discriminate on the basis of sex or other status. This includes child marriage and the betrothal of girls and boys before the age of 18.



## HANDOUT 4:

# TWO LETTERS, TWO LIVES<sup>1</sup>

### Letter 1:

Dear Mariama,

Greetings! I hope you are well. I am sorry I have not written in so long, but I have been so busy taking care of things here. I apologize ahead of time for my poor handwriting and grammar. It's been so long since I have had time to write.

How is your family? How is your husband? I remember that when we were in school together he was always trying to get your attention at football games!

I am not sure exactly where my husband is living at the moment. He left two months ago to find work and I have not heard from him since. I have also heard he is looking for a second wife, now that I have had my fourth baby. My youngest daughter, who is now one year old, has had diarrhea for the last three months and I do not know what to do anymore. Since my husband has not sent money, I cannot take her to the health center. I tried to get a job in a nearby town, but since I never got my diploma like you did, no one will hire me. I do not know how I would have time to work outside the home, anyway. My oldest daughter, who is 10, is in school, but if I have another baby, she will have to stay home and help me with the little ones.

I hope your new job is going well. I look forward to receiving a letter from you soon.

Your friend,

Haby

### Letter 2:

Dear Haby,

Greetings! I was so happy to receive your letter, although it made me sad to hear that your husband has left and you are now taking care of the children by yourself. Since he was so much older than we are, I never got to know him, but I am sure he will be in touch with you soon.

My husband is doing fine. He now manages his own Internet café and coaches football in his spare time! Our eldest son is now 6 years old. He has already started playing football with his father! He started school this year and really likes it.

My daughter Binta is now 3. She has had problems with eye infections, but thankfully the doctors were able to treat them. Now she can see very well now and she runs around the house trying to keep up with her big brother! Binta spends most of the day with our neighbor, who has volunteered to look after her. In exchange for her help, my husband allows her to use the Internet each week. I also look after her children on the

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1. Adapted from an activity in *Choose a Future! Issues and Options for Adolescent Girls*, The Centre for Development and Population Activities (CEDPA), Washington, DC, 1996.

weekends when I am not working. I have been working almost full-time now as an assistant accountant at the electric company. I guess those maths classes I took have finally paid off!

A neighbor mentioned he is going to be in your village next week, so I am sending some money with him for you to take your baby to the health center.

I miss you and hope that you can come for a visit soon!

Your friend,

Mariama

## Discussion Questions

- What is the relationship between Mariama and Haby?
- How did they get to know each other?
- Where do they live now?
- What are the differences in Haby's and Mariama's lives? Are there any similarities? Describe each woman's family situation.
- How would you describe the tone of each letter? Explain your answer.
- How has education played a role in Mariama's life? In Haby's life? In their husbands' and children's lives?
- Is either one of these women's situations common in your community? Why or why not?
- What are the advantages or disadvantages of Mariama's life? Of Haby's life?
- If you were Haby or Mariama, how would you feel?
- Is there any advice you would offer to either Mariama or Haby?

HANDOUT 5:

# GOALS WORKSHEET

SHORT-TERM GOAL	LONG-TERM GOAL
Benefits in reaching my goal	Benefits in reaching my goal
What might stand in my way?	What might stand in my way?
What do I need to learn or do?	What do I need to learn or do?
Who will encourage me?	Who will encourage me?
Plan of action: steps I will take	Plan of action: steps I will take
Completion date	Completion date



## HANDOUT 6:

# AMINATA'S STORY

One day, Aminata was surprised by all the trash she saw around her high school. She realized the trash came from students and teachers, who get rid of what they do not want by throwing items over the school wall. As a result, paper, plastic bags, and other items blew around the school and into neighboring fields and houses. Surrounded by rubbish, the school looked ugly.

In her health class, Aminata learned that garbage pollutes the environment and often harms animals. She also learned that when children play in the trash piles, they spread germs that make people sick. And they can get hurt from broken glass or aluminum cans. Aminata also had heard some people complaining that they had to pick the trash from their fields. For all these reasons, she decided that something needed to be done about the problem.

Aminata mentioned to some of her friends that she thought they should stop throwing their trash over the wall. A few of them laughed and told her that everyone in the town throws their trash outside. It was no big deal, they said. Some of Aminata's friends agreed that what they did was bad for the environment and made their school look ugly, but they told her they didn't know where else to throw their trash.

Aminata decided to talk about the garbage issue with her health teacher. The teacher agreed that the school's trash was becoming a big problem. He took Aminata to talk to the school principal, who asked Aminata to speak at the parents' association meeting the next day.

At the meeting, Aminata explained pollution's harmful affects on animals, children, and the environment. It also made the school look dirty. Some parents told Aminata that the garbage had always been there and they didn't think the parents' association needed to do anything about it. Aminata explained that the rubbish affects everyone in the community, even the animals and plants. Finally, the parents agreed to use school association's funds to purchase barrels or bins for the school so that people could throw their trash in one place and burn it regularly.

During the following week, Aminata and her friends went from class to class explaining the harmful effects of garbage and instructing students to throw their trash into the barrels. As Aminata was walking to school one month later, she couldn't believe her eyes: There was no trash blowing in the wind.

## Discussion Questions:

- What problem did Aminata identify in her community?
- How did Aminata decide to solve the problem? Did she solve it alone or did she have help?
- What community resources did Aminata use?
- Did Aminata encounter any obstacles while trying to solve the garbage problem? If so, what did she do to overcome those obstacles?
- What leadership characteristics did Aminata display? How would you describe her leadership style?
- Have you ever acted as a leader and helped solve a problem or organize something in your community? If so, what did you do? What challenges did you encounter? How did you resolve them?



## HANDOUT 7:

# TIPS FOR MANAGING STRESS

### Get Your Body Ready for Stress

We know that we cannot avoid stress, so we should be ready for it physically. Here are some **dos** and **don'ts**:

DO get plenty of sleep—at least 8 hours (including prior to exams).

DO eat a nutritious diet.

DO exercise—play a sport, take a walk, etc.

DO try taking slow, deep breaths for 10 minutes; tense your muscles and then relax them, starting with your head and neck, going all the way to your toes; sit quietly, eyes closed, and rotate your head/neck slowly—first to the right, then left, then in a circle.

DO take time to have fun; take breaks from studying and working.

DON'T eat too many sugary snacks or drinks.

DON'T drink too much coffee, tea, or other drinks containing caffeine.

DON'T stay up all night studying for exams.

DON'T smoke, drink alcohol, or use illegal drugs.

DON'T do things that will endanger you physically, like walking alone in dangerous places.

DON'T spend time with people who want to pressure you into making bad decisions or participating in harmful activities.

### Get Your Mind Ready for Stress

Here are some things that the girls can try to build up their mental muscles against stress.

DO develop positive friendships and relationships.

DO set realistic goals for yourself.

DO expect difficulties—frustration, failure, disappointments, sorrow, and pain.

DO learn to put difficult situations in perspective. Look for the bright side of situations.

DO practice imagining positive images. Sit quietly, eyes closed, and think of a place you like (a beach, a grove of trees, your grandmother's house). Let go of the stressful feelings and let the peace of these places fill your thoughts.

DO think of what you and your friends will do when you overcome a stressful situation, such as an illness.

DO laugh and sing. Take time to have fun.

DO seek support and understanding from people you trust, including family, friends, mentors, elders, teachers, and spiritual leaders.

DON'T withdraw and quit talking about your feelings.

DON'T start negative behaviors, such as being disruptive at school or disrespectful of elders.

DON'T deny or ignore stress and its effects on you.

DON'T give up your positive cultural or spiritual values.

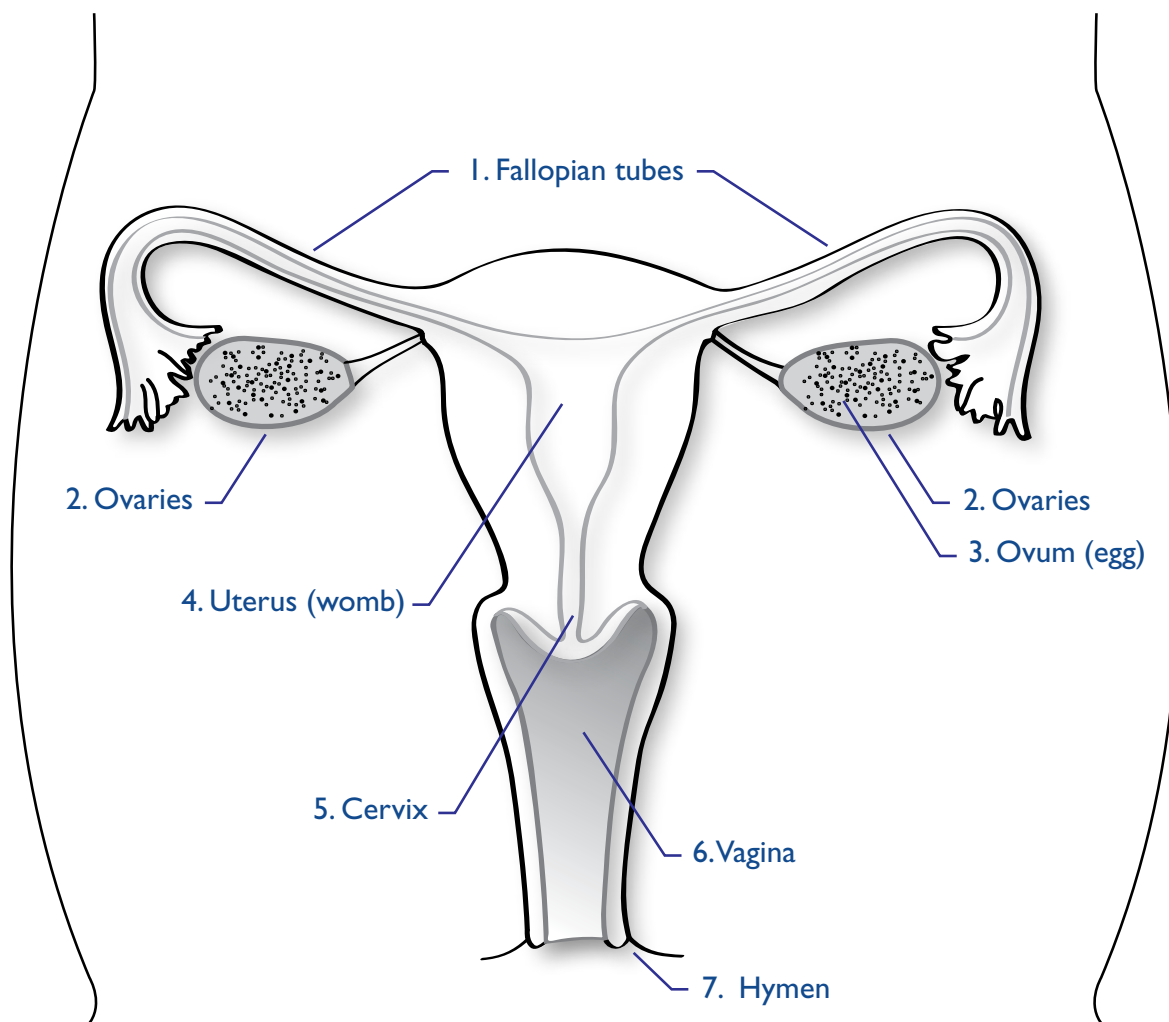
### **Some other tips**

Get organized, plan ahead, break up your work into manageable tasks, seek assistance from others, and accept that a certain amount of stress is normal!



HANDOUT 8:

# FEMALE INTERNAL REPRODUCTIVE ANATOMY

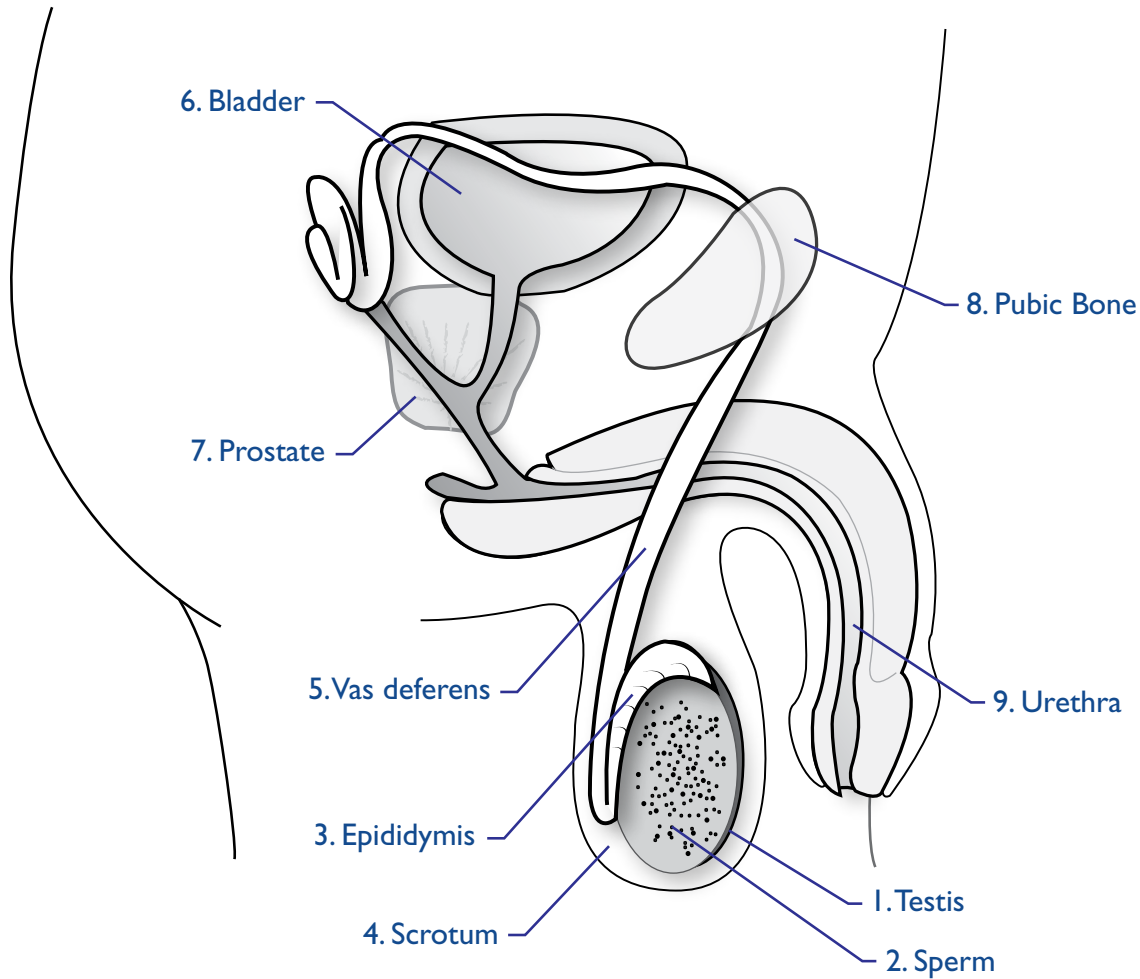


- 1. Fallopian tubes:** A pair of ducts connecting the ovaries to the uterus
- 2. Ovaries:** A pair of glands that produces ova (eggs)
- 3. Ovum (egg):** The female reproductive cell
- 4. Uterus (womb):** A hollow muscular organ that supports the fetus before birth
- 5. Cervix:** The lower end of the uterus that opens into the vagina
- 6. Vagina:** The passage leading from the uterus to the outside of the body
- 7. Hymen:** A thin membrane covering the vaginal opening



HANDOUT 9:

# MALE INTERNAL REPRODUCTIVE ANATOMY



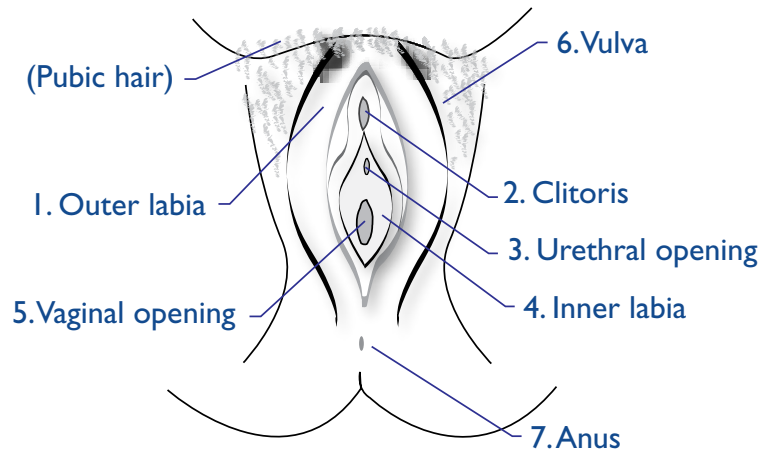
- 1. Testis (*testes, plural*):** One of two glands that produce sperm
- 2. Sperm:** The male reproductive cell
- 3. Epididymis:** Transfers sperm from the testis to the vas deferens
- 4. Scrotum:** External skin sac surrounding the testes
- 5. Vas deferens:** Conduit for sperm from the epididymis to the penis
- 6. Bladder:** Sac that holds urine
- 7. Prostate:** Gland surrounding the bladder and urethra
- 8. Pubic Bone:** Bone in the lower part of the abdomen
- 9. Urethra:** Tube that transfers urine from the bladder to the penis



## HANDOUT 10:

# EXTERNAL REPRODUCTIVE ANATOMY

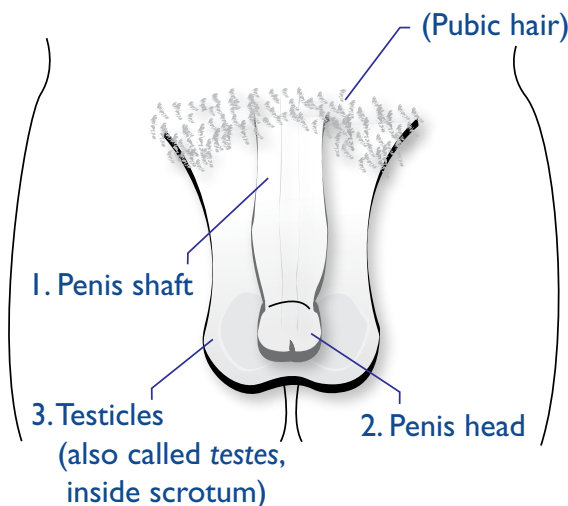
## FEMALE



- 1. Outer labia:** Two rounded folds of tissue surrounding the vaginal opening
- 2. Clitoris:** Small organ responsible for female sexual pleasure
- 3. Urethral opening:** Opening through which urine leaves the body
- 4. Inner labia:** Narrow folds of tissue inside the outer labia
- 5. Vaginal opening:** Opening leading to the vagina
- 6. Vulva:** External female genitalia including the labia, clitoris, and vaginal opening
- 7. Anus:** Opening through which fecal matter leaves the body

## MALE

- 1. Penis shaft**
- 2. Penis head**
- 3. Testicles (inside scrotum)**





## HANDOUT II:

# CARING FOR YOURSELF DURING MENSTRUATION

1. Change menstrual pads or tampons regularly. If you use reusable cloth pads, be sure to clean them thoroughly with soap to prevent bacteria from growing.
2. Bathe daily and keep the vaginal area clean to prevent infections.
3. Take a walk or participate in another form of exercise to reduce cramps.
4. Get adequate rest.
5. Eat healthful foods, including fruits, vegetables, and foods rich in iron such as leafy greens, liver, sardines, and beans and lentils.
6. If you experience headaches or cramps, try one of the following: massaging the lower abdomen or back, taking a warm bath, drinking a hot beverage, or taking a pain-relief medication such as aspirin. (Be sure to consult an adult before taking medication.)



**Remember:** Just because you have your period doesn't mean you have to change your daily activities. Girls who are menstruating can still play sports and attend school.





## HANDOUT 12:

# PREGNANCY PREVENTION TRUE OR FALSE

STATEMENT	ANSWER
You can't get pregnant the first time you have sex.	<b>False:</b> A girl or woman may become pregnant the first time she has sex. A boy or man may get a girl or woman pregnant the first time he has sexual intercourse.
A girl cannot get pregnant if she has not started menstruating.	<b>False:</b> A girl's or woman's body releases an egg before menstruation occurs. A girl who has not yet had her first period can also get pregnant.
If you clean your vagina immediately after having sex, you won't become pregnant.	<b>False:</b> Cleaning your vagina with water, soap, or other chemicals will not prevent a pregnancy after intercourse. Once sperm have been ejaculated, they cannot be washed out of the vagina.
A girl or woman cannot get pregnant if she does not have sexual intercourse.	<b>True:</b> A girl or woman cannot become pregnant if she does not have sexual intercourse.
If you love the person with whom you have sex, you will not become pregnant.	<b>False:</b> Love does not influence or determine whether a person will become pregnant.
If you have sex standing up, you can get pregnant.	<b>True:</b> No matter what position you are in, sexual intercourse can lead to pregnancy.
If a man pulls his penis out of the woman's vagina before ejaculation, she will not become pregnant.	<b>False:</b> Even before a man ejaculates, a small amount of semen and sperm are released and can cause a pregnancy.
You will not become pregnant if you have sex with a man who is much older than you.	<b>False:</b> The boy's or man's age is irrelevant. You may become pregnant no matter how young or old your partner is.
If you are menstruating (bleeding) and you have sexual intercourse, you may become pregnant.	<b>True:</b> Even during menstruation, a girl or woman can become pregnant.
You cannot get pregnant if you urinate immediately after having sexual intercourse.	<b>False:</b> Urine does not pass through the reproductive system and cannot "clean out" sperm.
A reliable method of birth control, such as a condom or the birth control pill, can prevent pregnancy.	<b>True:</b> When used correctly, modern forms of birth control are highly effective in preventing pregnancy.

*Adapted with permission from Choose a Future! Issues and Options for Adolescent Girls, The Centre for Development and Population Activities (CEDPA), 1996, [www.cedpa.org](http://www.cedpa.org).*



## HANDOUT 13:

# FACTS ABOUT COMMON CONTRACEPTIVES



**Remember:** Some methods of contraception are better suited for some people than others. Before choosing a method of contraception, be sure to consult with a health care professional!

	HOW DOES IT WORK?	HOW EFFECTIVE IS IT?	BENEFITS	DISADVANTAGES
<b>Male Condom</b>	The condom fits over a man's penis. It prevents pregnancy by preventing sperm from entering the woman's vagina, uterus and Fallopian tubes. It also prevents fluids from being shared, thus preventing STIs including HIV. A male condom should not be used at the same time as a female condom. The male condom is made out of a material called latex. Many condoms are lubricated. However, some people like to add lubrication. Only water-based lubricants (not oil-based ones such as Vaseline) should be used with a condom.	If used correctly and consistently, condoms are <b>nearly 100 percent</b> effective in preventing pregnancy and HIV transmission.	<ul style="list-style-type: none"> <li>• Inexpensive (and sometimes free)</li> <li>• Available in many locations, such as shops, health clinics, VCT centers, or schools</li> <li>• Easy to use</li> <li>• The most effective method (besides abstinence) of preventing transmission of HIV/AIDS and other STIs</li> </ul>	<ul style="list-style-type: none"> <li>• Must be used correctly to ensure effectiveness</li> <li>• Must be put on directly before sexual intercourse, when the man's penis is erect</li> <li>• Use of this contraceptive is dependent on the male partner</li> </ul>
<b>Pill</b>	The pill (also called an oral contraceptive) is made of artificial hormones that prevent a woman's body from ovulating (producing an egg) each month. As a result, the woman cannot become pregnant. A health professional must prescribe the pill.	If taken regularly, the pill is <b>99 percent</b> effective in preventing pregnancy.	<ul style="list-style-type: none"> <li>• Easy to use</li> <li>• Does not interfere with sexual intercourse</li> <li>• Woman controls use</li> <li>• Often decreases the amount of bleeding and cramps during the menstrual period</li> <li>• In some women, reduces the likelihood of pelvic inflammatory disease, and ovarian and endometrial cancer</li> <li>• Use is not dependent on the male partner</li> </ul>	<ul style="list-style-type: none"> <li>• Must be taken every day</li> <li>• Some women who take the pill experience weight changes, spotting (infrequent bleeding), or vaginal infections</li> <li>• Does not protect against STIs including HIV/AIDS</li> </ul>

	HOW DOES IT WORK?	HOW EFFECTIVE IS IT?	BENEFITS	DISADVANTAGES
<b>Depo-Provera</b>	Depo-Provera is a hormone injected into a woman's body once every three months. The hormone prevents ovulation, prevents sperm from reaching the egg, and prevents a fertilized egg from implanting itself into the uterus. Depo-Provera must be prescribed and injected by a health professional.	Depo-Provera is more than <b>99 percent</b> effective.	<ul style="list-style-type: none"> <li>• Lasts for three months</li> <li>• Does not interfere with sexual intercourse</li> <li>• Can be used while breastfeeding</li> <li>• Woman can control use</li> </ul>	<ul style="list-style-type: none"> <li>• May cause irregular bleeding, weight gain, or headaches</li> <li>• Some women may experience a delay in becoming pregnant after discontinuing use</li> <li>• Does not protect against STIs including HIV/AIDS</li> </ul>
<b>Female Condom (Femidom)</b>	The female condom is similar in shape to the male condom. It is made out of a strong material called polyurethane (a type of plastic). The female condom can be inserted into the vagina several hours before sexual intercourse. The female condom prevents exchange of fluids, including semen, thus preventing pregnancy and HIV transmission. The female condom is pre-packaged with a water-based lubricant. The female condom should not be used at the same time as the male condom.	If used correctly, the female condom is <b>95 percent</b> effective in preventing pregnancy.	<ul style="list-style-type: none"> <li>• Easy to use</li> <li>• Can be inserted prior to sexual intercourse</li> <li>• Some users report that the female condom is more pleasurable to use than the male condom</li> <li>• Protects against STIs, including HIV (also covers more of the external genitalia than male condom)</li> </ul>	<ul style="list-style-type: none"> <li>• Not widely available</li> <li>• More expensive than the male condom</li> </ul>
<b>IUD (Intra-Uterine Device)</b>	The IUD is a small device inserted into a woman's uterus. The IUD disrupts normal ovulation, impedes the sperm's ability to reach the egg, and prevents a fertilized egg (if fertilization does occur) from implantation in a woman's uterus. An IUD must be inserted by a health care professional.	More than <b>99 percent</b> effective.	<ul style="list-style-type: none"> <li>• Always in place</li> <li>• Can remain in place for 1–10 years, depending on type</li> <li>• Woman controls use</li> </ul>	<ul style="list-style-type: none"> <li>• May cause cramps, bleeding, infertility</li> <li>• In rare cases, could puncture the uterus</li> <li>• Does not protect against STIs including HIV/AIDS</li> </ul>

	HOW DOES IT WORK?	HOW EFFECTIVE IS IT?	BENEFITS	DISADVANTAGES
<b>Sterilization</b>	<p>A surgical procedure that makes a man or a woman unable to produce a baby. In men, a doctor seals, cuts or ties the vas deferens, which prevents sperm from traveling from the testicles and into the penis.</p> <p>In a woman, a doctor blocks or ties the woman's Fallopian tubes to prevent ovulation (monthly release of egg into uterus).</p>	More than <b>99 percent</b> effective.	<ul style="list-style-type: none"> <li>• Eliminates the need for further use of contraception (except to prevent STIs/HIV)</li> <li>• Does not affect sexual desire or intercourse</li> </ul>	<ul style="list-style-type: none"> <li>• Requires a surgical procedure</li> <li>• Expensive compared to other forms of contraception</li> <li>• May cause side effects including pain, ectopic pregnancy (in women), bleeding, or infection</li> <li>• Permanent</li> <li>• Does not protect against STIs including HIV/AIDS</li> </ul>
<b>Traditional Methods</b>	<p><b>1. Lactational amenorrhea (Breastfeeding):</b> After childbirth and during breastfeeding, a woman may not ovulate, thus preventing pregnancy.</p> <p><b>2. Rhythm method:</b> A woman determines when she can and cannot get pregnant (by monitoring vaginal mucus, body temperature, and menstrual bleeding). She abstains from sex or uses contraception during fertile periods.</p> <p><b>3. Withdrawal</b> (coitus interruptus): A man takes his penis out of the woman's vagina immediately before ejaculation.</p>	<p><b>1. Breastfeeding</b> is 98 percent effective only during the first six months after childbirth and only if a mother breastfeeds regularly and does not have a menstrual cycle. Effectiveness is not consistent among all women.</p> <p><b>2.</b> Among most users, the <b>rhythm method</b> is only 75–80 percent effective in preventing a pregnancy, although it can be more than 90 percent effective if used consistently and correctly.</p> <p><b>3.</b> The <b>withdrawal method</b> is 81 percent effective for most users, although it may be up to 94 percent effective if practiced regularly and correctly.</p>	<ul style="list-style-type: none"> <li>• Low cost</li> <li>• Does not require a prescription</li> </ul>	<ul style="list-style-type: none"> <li>• Least effective of all other contraceptive methods</li> <li>• For many women, fertile times are difficult to determine and track</li> <li>• May be difficult for a woman to refuse sex during fertile periods</li> <li>• Not recommended for adolescents</li> <li>• Cannot be used if a woman experiences irregular menstrual cycles</li> <li>• Do not protect against STIs including HIV/AIDS</li> </ul>

Other less common birth control methods include: the diaphragm, sponge, spermicides and the cervical cap. To find out more about them, consult a health care professional your area. Norplant, a contraceptive composed of six hormone “rods” inserted underneath the skin of a woman’s arm, was discontinued in 2002.



## HANDOUT 14:

# CONTRACEPTIVE MYTHS AND FACTS

Sometimes a man cannot use a condom because his penis is too large.	<b>MYTH.</b> Explanation: A condom is made out of a material that can expand to several times its size. To emphasize the point, blow up the condom like a balloon or put it on your arm to see how much it can expand!
If a woman takes birth-control pills for several years, she may not be able to get pregnant later.	<b>MYTH.</b> Explanation: Although a woman who has taken birth-control pills for several years may experience a delay in becoming pregnant, using birth-control pills will not affect a woman's ability to become pregnant later.
The "withdrawal" method is not a very effective method of pregnancy prevention. (Be sure to explain that "withdrawal" is when a man removes his penis from a woman's vagina before ejaculation.)	<b>FACT.</b> Explanation: The withdrawal method is only about 80 percent effective in preventing pregnancy. Moreover, it does not provide any protection against the spread of STIs including HIV.
Women who use contraception tend to have a lot of sex.	<b>MYTH.</b> Explanation: A woman who uses contraception is not any more likely than a woman who does not use contraception to engage in sexual activity.
Certain family planning methods cause infertility.	<b>MYTH.</b> Explanation: If used correctly, no contraceptives cause infertility.
If a male condom is in good condition, it may be used a second time.	<b>MYTH.</b> Explanation: A male condom should never be used more than once. After a condom is used, it should be disposed of immediately.
Condoms are a good method of preventing the spread of STIs including HIV/AIDS.	<b>FACT.</b> Explanation: If used correctly, condoms are very effective at preventing STIs including HIV/AIDS.
Buying contraception makes a person have sex with a lot of people.	<b>MYTH.</b> Explanation: Buying contraception does not make a person have sex with lots of people; he/she may simply wish to postpone or space out pregnancies for health or financial reasons.
If a girl carries a condom with her, she should be willing to have sex with her partner.	<b>MYTH.</b> Explanation: Just because a girl or woman carries a condom does not mean her partner should expect her to have sex.
Birth-control pills prevent the spread of STIs.	<b>MYTH.</b> Explanation: Birth-control pills only prevent pregnancy. They do not prevent against STIs including HIV/AIDS.
Condoms decrease sexual pleasure.	<b>MYTH.</b> Explanation: When used correctly, condoms do not decrease sexual pleasure.
Abstinence is the only form of birth control that is 100 percent effective.	<b>FACT.</b> Explanation: Only sexual abstinence is 100 percent effective in preventing pregnancy and the transmission of STIs.





## HANDOUT 15:

# HIV/AIDS MYTHS AND FACTS

(Note to facilitator: Write down the statements below onto separate pieces of paper, or make a photocopy of the handout and cut the statements in the left column into separate pieces of paper. Do not distribute the answers in the right column to students. These are explanations for you to read aloud to them.)

Medicines exist that can treat HIV/AIDS. However, there is no cure for the disease.	<b>FACT.</b> Explanation: Several medications can delay the development of HIV into AIDS. Other medicines can treat infections that someone with AIDS may have. These medicines, however, are only treatments for existing symptoms. There is no medicine that will actually cure someone of HIV/AIDS.
The people most at risk of contracting HIV/AIDS are girls and women.	<b>FACT.</b> Explanation: Girls and women are more likely than boys and men to be infected by HIV/AIDS for a variety of biological, social, and cultural reasons. Almost 60 percent of those infected with HIV in sub-Saharan Africa are women, and girls are two to six times more likely than boys to become infected.
You will not get HIV or AIDS if you eat out of the same bowl or drink out of the same cup as someone who is infected.	<b>FACT.</b> Explanation: Unless an HIV-infected person has an open, bleeding wound in his/her mouth, eating with him or her does not put you at risk of becoming infected.
Sub-Saharan Africa is the region the most affected by HIV/AIDS in the world.	<b>FACT.</b> Explanation: Of the 33.2 million people infected with HIV, an estimated 22.5 million live in sub-Saharan Africa.
In NAME OF YOUR COUNTRY, approximately PERCENT of people are living with HIV.	(Cite statistics pertaining to your country from Annex 6 or consult the internet if your country is not in the table in Annex 6.)
Abstinence is the only 100 percent effective method for preventing the sexual transmission of HIV.	<b>FACT.</b>
Having unprotected sex with certain people, such as young girls or virgins, will cure someone who has HIV/AIDS.	<b>MYTH.</b> Explanation: There is no cure for HIV/AIDS. If someone who has HIV/AIDS has sexual intercourse and does not use a condom, he or she could spread the virus to another person. The age of the person having sex does not affect HIV/AIDS transmission.
HIV/AIDS is a disease that foreigners spread in Africa.	<b>MYTH.</b> Explanation: HIV/AIDS affects people from all countries of the world. Its spread within Africa has been due to several factors, including poverty, conflict, and certain cultural practices and beliefs.

Because people with AIDS will eventually die, it is better if they do not know they have the disease.	<b>MYTH.</b> Explanation: There are several advantages to knowing your HIV/AIDS status. First, a person who knows he has HIV/AIDS can obtain medicine that will help treat infections and increase the person's quality of life. The person may live longer and be able to take care of his or her family. However, if a person does not know that he is infected with HIV, he or she may spread it to other people. He or she will also develop AIDS sooner.
Some types of mosquitoes transmit AIDS.	<b>MYTH.</b> Explanation: No mosquitoes can transport HIV/AIDS. HIV cannot survive in a mosquito's body.
If a pregnant woman is infected with HIV, her baby will become infected as well.	<b>MYTH.</b> Explanation: Not all women who are HIV-infected will transmit the virus to their babies. Transmission depends on several factors, such as how much of the virus is in the mother's body during pregnancy. In addition, some modern medicines can prevent HIV transmission from a mother to her unborn child. While these medicines are not 100 percent effective in preventing HIV transmission, it is very important that a pregnant woman with HIV visit a health clinic to learn more about preventing mother-to-child transmission.
Some people have been cured of AIDS.	<b>MYTH.</b> Explanation: No one has ever been cured of HIV/AIDS. No traditional or modern medicines cure the disease.
Kissing someone is one of the most common ways to get HIV.	<b>MYTH.</b> Explanation: HIV is primarily transmitted through blood, semen, vaginal fluids, and breast milk. You cannot get it from closed-mouth kissing or kissing someone on the cheek. Deep, open-mouth kissing can carry a low risk if open sores or bleeding gums are present.
Only people who have sex with many people are likely to get HIV.	<b>MYTH.</b> Explanation: Anyone who has unprotected sex (sex without using a condom) is at risk for getting HIV. People who have sex with only one partner can become infected if the person they have sex with is HIV-positive. For example, a married woman who has sex only with her husband may become infected with HIV if her husband is having sex with other people.

## HANDOUT 16:

# SEXUALLY TRANSMITTED INFECTIONS— SIGNS AND SYMPTOMS

SEXUALLY TRANSMITTED INFECTION (STI) NAME	SYMPTOMS	EFFECTS	TREATMENT
<b>GONORRHEA</b>	<ul style="list-style-type: none"> <li>• Most women who are infected have no symptoms.</li> <li>• For some women, symptoms will include pain during urination, increased vaginal discharge (milky white or yellow/green), or bleeding between periods.</li> <li>• In men, gonorrhea can cause a burning pain during urination, painful or swollen testicles, or a white, yellow, or green discharge.</li> </ul>	<ul style="list-style-type: none"> <li>• Untreated gonorrhea can lead to serious, permanent health problems in both men and women, including sterility or pelvic inflammatory disease (PID) in women.</li> <li>• Gonorrhea can cause abdominal pain, vomiting, and irregular menstrual periods.</li> <li>• Women with gonorrhea can pass it on to newborns, causing blindness, joint infection, or blood infection.</li> </ul>	Gonorrhea can be cured with antibiotics.
<b>CHLAMYDIA</b>	<ul style="list-style-type: none"> <li>• Most women do not have symptoms.</li> <li>• Symptoms for women may include abnormal vaginal discharge.</li> <li>• Men may experience discharge from their penis or a burning pain during urination, as well as itching around the opening of the penis.</li> </ul>	<ul style="list-style-type: none"> <li>• If untreated, chlamydia can spread to the uterus or Fallopian tubes and can cause permanent damage, including chronic pelvic pain, infertility, and miscarriage.</li> <li>• Chlamydia may cause pregnant women to deliver prematurely. Chlamydia also can cause eye and respiratory tract infections in newborns.</li> <li>• If exposed to HIV, women infected with chlamydia are up to five times more likely to contract the virus.</li> </ul>	Chlamydia can be cured with antibiotics.
<b>CHANCROID</b>	<ul style="list-style-type: none"> <li>• Most women do not have symptoms.</li> <li>• Symptoms may appear three to seven days after infection and include small, painful sores on the genitals.</li> </ul>	<ul style="list-style-type: none"> <li>• The presence of sores or ulcers, the common symptom of chancroid, increases a person's likelihood of becoming infected with HIV if exposed.</li> </ul>	Chancroid is curable with antibiotics.

<b>SEXUALLY TRANSMITTED INFECTION (STI) NAME</b>			
	<b>SYMPTOMS</b>	<b>EFFECTS</b>	<b>TREATMENT</b>
<b>HERPES</b>	<ul style="list-style-type: none"> <li>• Most people are not aware they are infected.</li> <li>• Some people will develop painful blisters on the genitals or mouth.</li> <li>• Other symptoms include headache, fever, muscle aches, and chills.</li> </ul>	<ul style="list-style-type: none"> <li>• Sores may appear repeatedly throughout a person's lifetime.</li> <li>• Herpes can be passed to a newborn and cause blindness, brain damage, and death.</li> <li>• People with herpes sores are more likely to contract HIV if exposed to the virus.</li> </ul>	There is no cure for herpes. However, the virus can be treated with antiviral medications.
<b>SYPHILIS</b>	<ul style="list-style-type: none"> <li>• Many people have no symptoms.</li> <li>• Symptoms during the primary stage include a sore (chancre) on the vagina or penis.</li> <li>• If a person is not treated during the primary stage, secondary stage symptoms include a rash on the palms of hands or soles of feet, fever, headache, hair loss, and sore throat.</li> <li>• Late stages of the disease are marked by difficult muscle coordination, paralysis, numbness, gradual blindness, and dementia.</li> </ul>	<ul style="list-style-type: none"> <li>• If untreated, syphilis can damage the internal organs, including the brain, nerves, eyes, heart, liver, and bones.</li> <li>• Syphilis can lead to blindness, stroke, and death.</li> <li>• Pregnant women can pass syphilis to their unborn child, causing serious deformities and stillbirth.</li> <li>• Babies born with syphilis may not have symptoms but may experience developmental problems or die if not treated.</li> <li>• The presence of a syphilitic sore means a person is at higher risk of contracting HIV, if exposed.</li> </ul>	Syphilis is curable with penicillin.
<b>TRICHOMONIASIS</b>	<ul style="list-style-type: none"> <li>• Trichomoniasis is caused by a parasite most commonly found in the vagina (for women) or urethra (for men).</li> <li>• Symptoms in women may include a yellow-green discharge with a strong odor, pain during urination or intercourse, and itching in the genital area.</li> <li>• Most men do not have symptoms. Some men may experience mild discharge, irritation or a burning pain after urination or ejaculation.</li> </ul>	<ul style="list-style-type: none"> <li>• Genital inflammation can increase a woman's risk of contracting HIV, if exposed.</li> <li>• Pregnant women may give birth to under-weight babies.</li> </ul>	Trichomoniasis can be cured with a prescription medication.

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<b>SEXUALLY TRANSMITTED INFECTION (STI) NAME</b>			
<b>SYMPTOMS</b>	<b>EFFECTS</b>	<b>TREATMENT</b>	
<b>HPV (Human Papilloma Virus)</b>	<ul style="list-style-type: none"> <li>• Most people do not have symptoms.</li> <li>• Some people may develop genital warts, which can appear weeks to months after infection.</li> </ul>	<ul style="list-style-type: none"> <li>• Certain types of HPV can cause cervical cancer in some women.</li> </ul>	HPV is treatable with medications and, in some cases, may go away on its own.

