

Adolescent Health Club Discussion Guide



Breakthrough ACTION Liberia



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**Breakthrough
ACTION**
FOR SOCIAL & BEHAVIOR CHANGE

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Acronyms

AIDS	Acquired Immunodeficiency Syndrome
CHA	Community Health Assistant
CHSS	Community Health Services Supervisor
CHV	Community Health Volunteer
HIV	Human Immunodeficiency Virus
HPV	Human Papillomavirus
MOH	Ministry of Health
SBC	Social and Behavior Change
STI	Sexually Transmitted Infection
USAID	United States Agency for International Development

Overview of Breakthrough ACTION

Breakthrough ACTION is USAID’s global flagship social and behavior change (SBC) project led by Johns Hopkins Center for Communication Programs. In Liberia, Breakthrough ACTION collaborates with the Ministry of Health (MOH) and USAID service delivery implementing partners to implement quality SBC activities that will result in improved demand and use of health services for malaria; maternal, neonatal, and child health; family planning/reproductive health; adolescent health; water, sanitation and hygiene; and to help informed communities engage in behaviors to prevent zoonotic and non-zoonotic infections, in line with the Global Health Security Agenda.

Introduction

The MOH, in collaboration with Breakthrough ACTION Liberia, is conducting an adolescent health campaign among young people ages 10–19. According to the 2019 Liberia DHS, Liberia has a teenage pregnancy rate of 31% and to address this high rate, the campaign will use several media to provide reproductive health and family planning information that will encourage young people take action to adopt safer health behaviors and improve positive health outcomes.

Objectives

- Reduce negative and adopt safer health behaviors amongst adolescents
- Implement quality and effective SBC activities for adolescents on the uptake and utilization of family planning services
- Improve communication between parents and adolescents

About This Guide

The MOH and partners developed this guide for adolescent health education with support from Breakthrough ACTION Liberia. Health club supervisors and peer educators will use this guide in both communities and schools to educate young people aged 13–16 years on sexual and reproductive health. The lessons in the booklet are designed for use by Adolescent Health Club facilitators and address the facilitator directly.

For Adolescent Health Clubs

1. The club will meet at a set day and time selected by the youth based on their schedule and availability.
2. The meeting will last for one hour.
3. During each meeting, attendees will discuss one topic.
4. The youth will ask questions and supervisor will provide clarity.
5. During each recap or summary session, adolescents will serve as facilitator.

6. One adolescent will serve as note and record-keepers for club activities.
7. Supervisors will note concerns, challenges, and recommendations.

For peer education for in-school adolescents

1. The school health clubs will once a week on a set day and time set by the school authorities to educate their peers on health issues.
2. The students will meet at an ideal place provided by the school to conduct a meeting for health education.
3. Selected peer educators will facilitate the session
4. The school administrator will help guide the process to avoid disturbances during the meeting.
5. One teacher (science or health) will co-facilitate the session with the peer educator.
6. A CHW and the District Reproductive Health Supervisor will visit each group at least once a month to provide supportive supervision, as well as respond to any technical questions
7. Students will discuss one topic per week.
8. The teacher will note concerns, challenges, and recommendations.

Lesson 1: Goal Setting

1.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

1.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of the opening questions below to the group. Allow participants both to disagree with one another and to build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

- What is goal setting?
- Why is it important?
- When is the right time for goal setting?
- How do you get started with goal setting?
- What are the steps in setting goals?
- What happens when we do not set goals in life?
- How do we achieve our goals?

1.3. Digging In: Talking Through the Main Points

Share the following information.

What is goal setting?

Goal setting is a step toward achieving something you want to achieve. It starts with identifying who you are, who you want to be, and why you want to be that person. After that, you make a plan for how you will achieve your goal, then work towards achieving it.

Why is goal setting important?

Goal setting helps identify a direction toward potential success.

When is the right time to set a goal?

There is no time better than now. You are growing, you are getting older, and very soon some of you will be out of high school. You will need a direction to guide you through your life journey. Without any goals, finding success becomes more difficult. The goals you set should be based on your individual needs, what you want to achieve, and what you can do on a regular basis, such as daily or weekly.

Simple steps to get started with goal setting

- **Step 1: Start by brainstorming/thinking**
You may have a lot of possible goals floating around in your mind, or you may be completely stumped about where to start. Either way, taking time to brainstorm can help you identify some focus areas and pinpoint what you're hoping to accomplish. If you need clarity on some issues that come up during brainstorming, ask people you consider a role model to help.
- **Step 2: Think in terms of small, medium, and large**
All of your goals do not have to be large-scale and immediately life changing. In fact, you should have big and small goals that require varying amounts of time to complete. Think in terms of long-term goals (one year, five years, ten years), short-term goals (this week, this month, this year), and mini-goals (now). You should have a mix of all three in your goal process.
- **Step 3: Get Out of Your Comfort Zone**
Give yourself an opportunity to really experience valuable change by pushing your limits. This process may be something you do not want to do, but the more you're willing to test yourself and take risks, the more you have to gain. Create goals that require stepping out of your comfort zone in order to fully experience growth.
- **Step 4: Make Your Goals Exciting**
Many goals are ignored or forgotten simply because they are boring. Setting goals that excite you will make it easier for you to stay committed and motivated during the process. If the goal isn't one that keeps you moving, it may not be a valid goal.
- **Step 5: Put It All in Writing**
Sometimes seeing things in black and white makes them seem more real. Make it common practice to write all of your goals down on paper. Not only will this give you a concrete set of metrics to measure your success, but it can help keep you focused.
- **Step 6: Create a Goal Check-In Schedule**
The most effective goal setting process is one that requires regular thought, modifications, and analysis. If you set a schedule for checking in on your progress, you will be able to make goal setting a common activity in your life and one that you are entirely comfortable with. You may want to break your check-in schedule down into a monthly or even weekly basis, especially for your mini-goals.

How can we set "smart" goals?

Studies show that setting specific, challenging, and obtainable goals lead to achievement. In your goal setting process, make sure to use "SMART" goals. What is a "SMART" goal you ask? A "SMART" goal is:

- **Specific:** The goal is well-defined and focused or directed to a particular thing, (e.g., you want to pass all courses with "excellent" marks)
- **Measurable:** The goal is something that you can track and monitor (to see how you're doing!).
- **Attainable:** The goal is not just desirable, but also realistic and possible for you to achieve.

- Relevant: The goal relates to where you are in your life and where you want to be.
- Time-bound: The goal has a concrete deadline.

What happen when we do not set goals in life?

- Without goals, you may struggle to get what you need or want.
- People without goals go wherever life takes them – breaking large-term goals and “mini-goals”, you can help write your achieve your vision for the future.

How do we achieve our goals?

Visualize your success, make reasonable sacrifices, stay committed, strive to overcome challenges, and review and revise your plans as circumstances and your goals change.

1.4. Goal Setting Activity

To finish the goal setting session, explain to participants they will play a “throw the ball” game (if a ball is not available, use whatever is available, safe, and convenient, e.g., a stick or a lightweight, clean shoe). The purpose of this game is to help participants identify trusted supporters in their lives that can help them work toward their goals.

Remind participants that this is the first session, and the group will be exploring many important, sensitive topics that relate to their lives. They can find help by identifying people they feel safe in sharing personal issues with, like sex and pregnancy, staying in school, and fears and achievements, and more.

Explain to the participants they are going to throw the ball from person to person. When a person catches the ball, they will say aloud their name, one quality they think is important in a trusted friend, and the name or title of a person they feel they can confide in.

1.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 2: Self-Esteem and Confidence

12.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session’s topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

2.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

1. What do you know about self-esteem or confidence?
2. Why might having self-esteem be important?
3. What does someone with high self-esteem look like? What choices do they make?
4. What does someone with low self-esteem look like? What choices do they make?
5. How do you think about your self-esteem? Is it something you think about?

2.3. Digging In: Talking Through the Main Points

What is self-esteem and confidence?

Self-esteem is what we think, feel, and believe about ourselves, the conviction that one has the ability to meet life's challenges and to succeed.

In what ways can high self-esteem and confidence enable us to realize our potential?

- Increased sense of self-worth: The more self-confidence a person has, the more they value themselves and their abilities. This is what creates that “hold your head up high” feeling in life!
- More happiness and joy in life: The more self-confident you are, the happier you are with yourself and the more you enjoy what life has to offer.
- Less fear and anxiety: When confidence is high, you can accept, adapt, learn, gain, and benefit from any situation in life. In this way, you naturally replace fear and anxiety with greater confidence in yourself and your capabilities.
- Freedom from social anxiety: The more secure you feel in your self-worth, the less worried you'll be about what others think of you in social situations—this allows you to enjoy being with people more freely.
- More peace of mind and less stress: Freedom from self-doubt, fear, and anxiety naturally translates into greater peace of mind and a more stress-free life.
- More energy and motivation to act: The more confident you are that you can achieve things you want to achieve (like personal goals or dreams), the more motivated and energized you are to take action to achieve them.
- Greater success: Each of the benefits above help you achieve things you want to achieve faster and more easily, which means you will enjoy more success in life.

Why do people have low self-esteem and confidence?

People may develop a low self-esteem for many reasons. Many of the reasons relate to a person's interpersonal relationships and the level of support they receive from people around them. Some common causes of low self-esteem include:

- Unhappy childhood: Having an unhappy home, where parents are critical and unsupportive, can cause someone to develop a low self-esteem.
- Poor relationships: Being treated poorly by family members, friends, and partners can cause someone to have a low self-esteem and sense of worth.
- Stressful life events: Going through personal struggle and major life events can cause people to have low self-esteem. This can differ from person to person, but includes, but is not limited to, parents getting a divorce, parents losing money or their home, or the death of a close loved one.
- Mental health challenges: Some people are predisposed to suffer more anxiety or depression and may have lower self-esteem because of it.
- Poor academic performance: Everyone wants to make a successful pass in school but when an adolescent cannot perform well in school it lowers their self-esteem and confidence.
- Internal mindsets: Some people are overly critical on themselves and do not see any of their positive attributes. This can lead to a low self-worth.

What does low self-esteem look like?

Adolescents with low self-esteem ...

- See themselves as inferior to others, disrespected and undervalued. They may refuse to do group activities that involve cooperation
- Feel insecure and some have a paralyzing fear of failure
- May have a lack of discipline, commitment, and the ability to take responsibility
- Try to stand out, and due to their constant need for attention, may lie and be deceitful

What might having low self-esteem and poor confidence lead adolescents to?

Young people with low self-esteem may be more likely to:

- Get pregnant: Youth who have lower self-esteem may be more likely to get pregnant, and getting pregnant and the struggles that may come with that may further lower self-esteem.
- Drop out of school: Many adolescents who are forced to drop out of school—either because of lack of finances, family pressure to work and contribute to family upkeep or pregnancy—feel low because their peers are in school, and they are not.
- Engage in criminal behavior: Adolescents drawn to crime may already have low self-esteem, and attract further ill treatment from their friends, which makes it worse.
- Abuse alcohol and drugs: Many adolescents who have a low self-esteem abuse alcohol and drugs. They may think it raises their esteem, but it does not.

How can we develop self-esteem and confidence?

Building self-esteem has a huge impact on how you experience and react to things. For someone with high self-esteem, not getting a job might be a disappointment, but not the end of the world. However, for some with low self-esteem, not getting a job could lead to overwhelming sadness and make them want to give up on trying again. Building your self-esteem allows you to have positive and negative experiences but the confidence to maintain and focus on the positives.

Strategies to build up self-esteem

- Be positive about yourself and value yourself as a person
- Avoid listening to someone who only says negative or hurtful things to you
- Question self-judgement
- Set realistic goals and do your best to achieve them, but, have empathy for yourself when you're not able to meet your goals.
- Make friends who say supportive things.

Points to remember in fostering self-esteem

- Be positive: Talk to yourself in a positive way, similar to how you would talk to a friend. Find and acknowledge any positive sides or potential outcomes of situations and experiences that at first seem challenging.
- Focus on yourself: Don't compare yourself to others as there will always be people that by comparison, we feel less strong, fast, smart, or attractive, among other things. Remember, those people have other shortcomings, and they compare themselves to others, too.
- Recognize what makes you special: Focus on positive, unique qualities about yourself (e.g., a talent for singing, a charming laugh). Write a list of some of these qualities and refer to it when you feel down.
- Accept that some things can't change: Focus on things that you can improve rather than dwelling on the past or on things that you can't alter
- Handle negative thoughts and comments: Every time you think something negative about yourself, challenge yourself to stop and look for real evidence that what you said is true. You will find that much of your negative thoughts about yourself is not the truth.
- Have fun: Schedule and find fun things to do every week.
- Exercise: Being active and exercising is one of the best ways to fight sadness and help you feel better and stronger. Even simple physical activities like going on walks with friends and family members can contribute to your happiness.

2.4. Self-Esteem Activity

To finish the session on self-esteem, tell the group they are going to think about ways that they can build their self-esteem when meeting challenging situations. Organize the participants into groups of 3–

5 people. Read the five scenarios one at a time, and after each one, ask the small groups to think how each scenario would affect their self-esteem and about how they might be able to build your self-esteem during or after each of these scenarios. Remind the participants that they may not be able to stop bad things from happening, but they can learn how to respond to bad situations by learning and growing.

Scenario 1: You were late for class and the teacher shouted at you in front of your classmates and friends.

Scenario 2: Your father left your mother and married another woman.

Scenario 3: Your boyfriend left you because you weren't ready to have sex.

Scenario 4: Your best friend always competes with you and puts you down.

Scenario 5: Your mother calls you stupid.

Bring everyone back to the larger group. Ask people what their ideas were about how to respond to each scenario and to build their self-esteem. Were there ideas that they could use in every scenario?

2.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 3: Peer Pressure

3.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

3.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information). Spend no more than 10 minutes talking through these questions.

- What is peer pressure?
- What are some examples of peer pressure?
- How does it affect young people?
- How can we avoid and resist peer pressure?
- Have you experienced peer pressure? How did it feel? How did you handle it?

3.3. Digging In: Talking Through the Main Points

What is peer pressure?

When a person feels they must do the same thing that other people their age do, this is called peer pressure. Peer pressure means someone influences another to do something they usually would not do, or it can stop someone from doing from what they want to do. A peer can be anyone you see as an equal in age or ability.

How does peer pressure affect young people?

Peer pressure can be an especially influential factor during adolescence, as at this time you are transitioning toward adulthood and figuring out important things in your life. As a young person, peer pressure can affect you in many ways, including

- The way you dress
- Whether you use alcohol or drugs
- Your decision to have a boyfriend/girlfriend
- Your choice of friends
- Your academic performance
- How you talk
- When you choose whether to have sex or not
- How you treat others

How does peer pressure influence teenage pregnancy?

Many teens are pressured by their friends and romantic partners to have sex. With little or no knowledge of its consequences, they may become pregnant or impregnate their partner. For example, a boyfriend may pressure you into having sex before you're ready. Or a group of friends may encourage you to have sex and feel like you need to have sex to "fit in" with the group. Parents may pressure you into having a child or marrying before you feel ready. These are all forms of peer pressure that can lead to teenage pregnancy.

How can you avoid peer pressure?

- Stay away from people who pressure you to do things that seem wrong, dangerous, or is otherwise something you don't want to do. A real friend does not pressure their friend into doing something they don't want to.
- Learn how to say "no," and practice how to avoid or get out of situations which feel unsafe or uncomfortable.
- Remember, resisting peer pressure only requires you to think for yourself. Don't let other people think and make decisions for you.

- Spend time with other kids who resist peer pressure. It helps to have at least one friend who is also willing to say "no."
- If you have problems with peer pressure, talk to an adult you trust, like a parent, teacher, or your service provider at the clinics.

3.4. Peer Pressure Activity

Read the following to the group:

To finish our session on peer pressure, we're going to do some role-plays in pairs. By role-playing daily interactions you will likely be involved in, you'll brush up on important social skills. That way, you'll feel more prepared for day-to-day scenarios—and be ready to say no, or however else you feel, when you are in that situation.

Now get into groups of two. For each scenario, we will have one person play the instigator, or the person that is trying to make you do something, and the other person will play the person that does not want to partake. After role playing each scenario, we'll talk through what different groups thought of as a way to respond.

Then read each scenario, one at a time.

Scenario 1: You are kissing your boyfriend/girlfriend. You haven't had sex yet, and your boyfriend/girlfriend says they want to have sex right now, otherwise they're going to break up with you.

Scenario 2: You are hanging out with a friend, and she offers you alcohol and drugs.

Scenario 3: Your best friend is pregnant. She is still in school with you, but you're not sure if she is going to be able to keep going to school. She says that you should have a baby, too, so that your babies can be friends. You aren't sure and want to stay in school.

Scenario 4: You are in bed with your boyfriend. You have had sex before, but always with a condom. He says that he wants to try having sex without a condom because he heard that it feels much better.

Scenario 5: You are still in school. You've had a boyfriend, who is a couple years older than you, for a couple years and really love him. He says that he wants to start a family and for you to quit school, since he's started a job.

3.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 4: Understanding Healthy Relationships

4.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session’s topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

4.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another’s answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information). Spend no more than 20 minutes talking through these questions.

- Thinking about last week, when we talked about peer pressure, what qualities do you want in a friend?
- What makes that person a good friend? Why do you want that person to be your friend?
- What makes a person a good boyfriend or girlfriend? Or a good future husband or wife?
- What are characteristics that make for a bad friend or romantic partner?
- How do friendships and romantic relationship differ in terms of these qualities?
- How do self-esteem, peer pressure, goal setting, and healthy relationships all relate?

4.3. Digging In: Talking Through the Main Points

What are qualities to look for in a romantic partner or friend?

There are several key qualities that any important person in your life should have, such as:

- Trust: They trust you and you feel that you can trust and rely upon them
- Support: They support you and your decisions
- Feel good: They make you feel good and “build you up” (i.e., help build your sense of self)
- Respect: They respect you and your decisions, including not pressuring you to do something that you don’t want to do
- Encourage you: They encourage you to do the right things, (i.e., encouraging you to stay in school)

What are characteristics may act as a warning sign of an unhealthy relationship?

There are also some characteristics that act as warning signs to watch for:

- Anger: They are not able to control their anger – this is particularly a red flag for romantic relationships. Friends and romantic partners will always fight, but it is not healthy when someone has uncontrollable anger.
- Controlling/manipulative: They try to get you to do something or say something by making you feel guilty. Friends and romantic partners should be equal in decision making.

- Depreciate: They make you feel like your concerns or thoughts are invalid, wrong, or unimportant. Friends and romantic partners should support and encourage you, not put down your ideas.
- Malicious: They belittle you or make you feel small and unimportant – this is can be a form of verbal abuse. Friends and romantic partners should love and support you, not make fun or be mean to you.

4.4. Healthy Relationships Activity

Divide the group into smaller groups. Explain that you are first going to read several scenarios. For each scenario, you will first have them individual complete the sentence without telling their small group. Ask participants to be as honest as possible and answer how they would actually respond. After waiting for 1–2 minutes for them to consider how they would finish the statement, pose these questions:

- What characteristics or warning signs do you see in this scenario?
- How would you realistically respond? How would you like to respond?
- What do you think is the best course of action in this scenario?

Read each scenario, one at a time, first allowing for individual thought and then to discuss the three discussion questions.

Scenario 1: If my friend made fun of me in front of other people at school...

Scenario 2: If my friend knows that I don't like to drink, but keeps bringing drinks to my house for me to drink...

Scenario 3: If my friend asks for me to lie to her parents so that she could stay with her boyfriend and have sex with him for the first time...

Scenario 4: If my boyfriend said that I can't see my friends because he loves me and always wants to see me...

Scenario 5: If my boyfriend gets mad at me and threatens to break up with me because I am not ready to have sex yet...

If time allows, pose the remaining questions to the small groups:

- Are there things you would rather not do, but you would do it if a good friend asked you to? Participants do not have to disclose what this is, but try to explain or understand why one would make this decision to do something, which she would rather not do.
- When is friendship no longer healthy or good for you?
- What are two things you would not do for your friends, no matter what?

4.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 5: Body Changes, Puberty, and Menstruation

5.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

5.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

- What is puberty?
- What are some changes that take place in the body during puberty?
- What is menstruation?
- What is menstrual hygiene?
- How can you maintain good hygiene during a menstrual period?
- What are the effects of poor menstrual hygiene?

5.3. Digging In: Talking Through the Main Points

What is puberty?

- Puberty is the period during which your body goes through many changes to prepare for adulthood. Through these changes, after puberty, your body will be ready to have a baby (for girls to get pregnant and boys to be able to get girls pregnant). Puberty is different for every person and you should not expect to look or look the same way as your friends of the same age.
- During puberty, your body goes through changes that affect your hormones – this often causes adolescents to feel emotional ups and downs. This is very normal.
- Puberty is also a time where your body will start having many changes – especially in your genital regions (e.g., body hair growth around your vagina and penis, breast growth for girls)
- Puberty is also when you start to feel sexual desires and may make you want to experiment with others. These are all very normal feelings. However, sexual desire does not mean that you have to have sex.

- As you go through puberty and start to think about sex more often, this when it is crucial that you learn about how to be safe, use contraceptives, and not start having sex before you are ready.

What is menstruation?

- Menstruation or period — is when blood and tissue from your uterus comes out of your vagina. It usually happens every month. It usually begins between 11–16 years of age.
- Menstruation happens when the lining of the womb (or uterus)—which is where the egg is fertilized and grows into a baby—breaks and down and leaves the body because pregnancy did not happen during that month
- When a girl begins to see her period, it is a sign that she can become pregnant if she has sexual intercourse

What is menstrual hygiene?

- Menstrual hygiene refers to women and adolescent girls using clean menstrual management materials (e.g., sanitary pads or cloths) to absorb or collect blood. Menstrual hygiene materials can be changed in privacy as often as necessary for the duration of the menstrual period. Menstrual hygiene also means using soap and water for washing the body as needed and having access to appropriate facilities to dispose of used menstrual management materials.
- Menstrual hygiene and management can be important in ensuring that your everyday life is not interrupted by menstruation. It ensures that you can continue with your daily routine, including going to school, going to work, or doing household work. It can also prevent potential situations that may feel embarrassing; in turn, menstrual hygiene can help make you feel confident about yourself and your body. In this sense, maintaining proper menstrual hygiene is important for your well-being and development.

How to maintain good hygiene during periods

- Use clean pads, cloths, or tampons for only as long as instructed and no longer. Usually, you should change them at least two or three times a day, even when the menstrual flow is light. Using damp or dirty menstrual supplies or using them for too long can lead to
 - Urinary tract infections
 - Increased incidents of rashes in genital area
 - Increased reproductive tract infections
 - Increased risk of cervical cancer
 - Tampons in particular, when left inside the body for more than four hours, can make you sick.
- Always remember to keep spare menstrual supplies in your bag or pockets before and during your period.

- Wear comfortable, well-fitting clothing, with underwear preferably made of a cotton blend. Thick and tight-fitting underwear, trousers, or shorts do not allow the skin to breathe, which increases likelihood of infection.
- Keep the vaginal area clean
 - Wash the vaginal area with warm water and mild soap as frequently as possible, at least twice a day is highly recommended. Avoid getting water or soap inside your vagina.
 - Wash new underclothes before use to avoid infection, rinsing them thoroughly.
 - Never use scented tissues, wipes, or douches to clean the vagina. They may cause rashes or irritation.
- When using reusable sanitary pads or cloths, be sure to take good care of them. They need to be cleaned thoroughly after use, fully dried in sunlight, and packed and stored in a clean, dry place. Failing to clean and maintain reusable pads can lead to infections.
- Wear only one pad or other menstrual management method at a time, even when flow is very heavy. Wearing two pads or cloths, one on top of the other, can cause serious damage and infection. Always use only one pad at a time and keep changing the pads as frequently as possible to handle the heavy flow.
- Take care and be safe when disposing of used supplies.
 - Always wrap the used pads in paper or cloth before disposing to avoid bad smells and spread infections. Throwing away pads without wrapping them first causes bad smells and attracts insects.
 - Wash your hands thoroughly with soap and water after wrapping up and disposing the item.

For Boys Clubs: How Boys and Men Can Support Menstrual Hygiene

Men and boys have an essential role to play in effective menstrual hygiene, but many men are nervous about menstruation, whether acknowledging it, speaking about it or comfortably buying menstrual products for their partners. Men have a meaningful part to play in this conversation; as brothers, fathers, uncles, cousins, and teachers to name a few. Men can take actions to advocate for clean and private bathrooms, role-model period positive behavior to students, communicate care and empathy rather than disgust and shame, or even buy pads for the women in your life!

Men and boys can also help in constructing toilets, incinerators, water facilities at schools, homes and the communities to help support menstrual hygiene for women and girls during their periods.

5.4. Menstrual Hygiene Activity

Divide the group into smaller groups. Explain that you are first going to read a story and then in small groups, they are going to discuss questions about the story. Read the story:

Nora's Story

My first period came when I was 12. I was very frightened because I didn't know how I could have hurt myself so far inside. I was scared. It was the weekend, and I was at home. I pinched my mother's cotton wool and plaster and put them in my panties. Before long I removed the plaster because it was very uncomfortable. I was worried. The bleeding had not stopped so I added more cotton wool. At night when I bathed and saw there was no fresh blood, I was happy and relieved. I did not use any cotton wool.

In the morning I cried when I saw the blood on the sheets. I then started thinking I may have some bleeding disease. I went to buy my own cotton wool because I thought my mother would notice that some of hers was missing. On Monday, I told my best friend at school. Her first question was, "Did you sleep with a boy?" I cried. The blood stopped coming on Tuesday. I had done my best not to leave any traces of my disease in the house and at school. I waited for the next weekend to come and went to visit my Aunt Mary. She was the only person I could trust. I knew I could talk to her about the bleeding. When I finished telling my aunt what had happened, she said, "Nora, you are a woman now—just like me." She then told me in great detail about periods, pregnancy, sexual intercourse, and having babies.

All the way through, she spoke like these were really normal things. I was surprised but felt good. She even asked if I had any questions. At the end she said that I must not talk to anybody about the things she told me, except for my closest friends or people that I trust. She especially said that I shouldn't tell Mama until she has had a chance to speak to her. I am lucky to have such a loving aunt. I just wished that my mother had prepared me for this important event, so that I wouldn't have been so scared.

In small groups, have the participants discuss the following questions:

- Why did Nora not tell her mother about the bleeding?
- Why did Nora cry when her friend asked her if she had slept with a boy?
- How does this story relate to real life?
- What advice and information are most young people given in real life?
- How would you act differently if you were Nora?

For Boys Clubs: Additional Questions

As it may be hard for boys to the previous questions, consider these additional and supplementary questions:

- How did this story make you feel?
- How do you think you could help support girls like Nora in your life?
- What puberty-related experiences do boys go through?

5.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. If appropriate to the setting, close with a prayer. Give them an assignment for the next meeting.

Lesson 6: Having Sex Before You're Ready

6.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

6.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants both to disagree with one another and to build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

- What is sex?
- What are the different types of sex practices?
- What do we mean when we say "having sex before you're ready" or "early initiation of sex"?
- Why do some people have sex at an early age?
- What are the effects of having sex at an early age?
- What are the benefits of delaying sex?

6.3. Digging In: Talking Through the Main Points

What is sex?

Sex is often defined as sexual intercourse, or a man's penis being inserted into a woman's vagina. Without using contraception, sexual intercourse will often lead to pregnancy. To define sex more broadly, as it incorporates many different behaviors, sex can be thought of as when two people use their bodies to make them feel good.

What is early initiation of sex and what are its effects on young people?

For the purposes of this conversation in Liberia, early initiation of sexual practices means engaging in sexual activities before the age of 18. However, having sex before you're ready may be different for every individual person. Some people may be ready to have sex at the age of 16. Other people may not be ready to have sex until 20. Every person is different, which is why it is important to understand your wants and values, and respect the wishes of others.

Different kinds of sexual practices or activities

Physical Types of Sex

- Vaginal sex
- Oral sex
- Anal sex

Practices with Partners

- "Casual" sex, or sex without a committed relationship
- Sex with multiple partners
- Any of the above without condom and/or contraceptive use

Why do people have sex before they're ready?

- **Lack of knowledge:** Most young people do not have adequate information on the importance of delaying sex, often because parents and other older adults in their lives don't discuss it with them. Young people usually rely on their peers, who usually provide minimal and inaccurate information about sex. Without better information about what it means to have sex early, they struggle to make informed decisions about having or delaying sex.
- **Peer pressure:** When a young person feels they must do the same things that other people their age do, this is called peer pressure. Peer pressure can influence young people to do something they usually would not do, or it can stop them from doing something they would like to do. This includes influencing young people's attitudes and decisions about sex.
- **Early marriage:** Early marriage refers to a girl who enters a marriage before the age of 18, usually because adults commit her to the marriage due to religious and/or traditional practices. Early marriage results in girls becoming sexually active when they are not yet physically or psychologically ready to deal with childbirth.
- **Culture/tradition:** Some local cultural and traditional practices may encourage early initiation of sexual practices.
- **Drugs/alcohol use:** Using drugs and alcohol affects a person's judgment, which can lead to risky behaviors, including having sex. It also makes young people more vulnerable to sexual predators.
- **Influence from media:** Young people may see sexual activity or sexually suggestive behavior depicted in books, photos, magazines, television, or on social media and become interested in or feel pressured by it to have sex.

- **Lack of parental monitoring or mentorship:** Parental care and mentoring helps educate and safeguard young people from early initiation of sexual activities.

Effects of having sex too soon

Having sex before they're ready exposes young people to many sexual and reproductive health problems. Youth who begin having sex at a young age are more likely to practice risky sexual behaviors, such as having multiple sexual partners and incorrectly or inconsistently using condoms.

Having sex before you're ready can lead to a wide variety of negative life outcomes, including the following:

- Increased risk of contracting a sexually transmitted infection (STI)
- Increased risk of out-of-marriage pregnancy and childbirth
- Increased risk of single parenthood
- Decreased marital stability later in life
- Increased likelihood of maternal and child poverty
- Increased risk of teenage pregnancy
- Increased risk of wanting an abortion
- Increased maternal perinatal or neonatal mortality, i.e., young mothers are more likely to die during or after childbirth

Why is delaying sex important?

Delaying sex can avoid the risks that come with sex—like pregnancy and STIs—until a person is ready to prevent and/or handle such risks. Delaying also helps young people focus on other important things, like friends, school, sports, activities, having fun, and planning for the future.

6.4. Discussing Delaying Sex

To finish the session, instruct participants to get into small groups of 3–5 people. Give the groups the questions listed below one by one, giving them time to discuss each one among themselves. After groups have had several minutes to discuss the questions, ask each group to share some of their ideas.

- What would happen if you or your sexual partner got pregnant today?
- How would your life change if you or your sexual partner got pregnant?
- What would you have to give up if you or your sexual partner got pregnant?
- What are reasons you might choose to delay having sex?
- How else can you protect yourself or your sexual partner from getting pregnant?
- How do you think these questions are different for girls and boys?

6.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 7: Teenage Pregnancy

7.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

7.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants both to disagree with one another and to build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

- What is teenage pregnancy?
- Why is teenage pregnancy a concern?
- How does teenage pregnancy affect a young person?
- What are the factors that lead to teenage pregnancy?
- How can teenage pregnancy be prevented?

7.3. Digging In: Talking Through the Main Points

What is teenage pregnancy?

"Teenage pregnancy" refers to when a girl 19 years of age or younger becomes pregnant. A girl can get pregnant if she has unprotected vaginal sex with a man at any age after she's begun having regular monthly periods.

Is teenage pregnancy a concern?

Yes. It is a concern for the young mother, the child, the family, and the community.

How does it affect a young person?

- Adolescent pregnancy and childbearing often lead girls to drop out of school. Although some programs are making efforts to enable them to return to school after childbirth, missing school nonetheless may jeopardize girls' future education and employment opportunities. That means a lot of mothers who get pregnant as teenagers may end up living in poverty.

- Teen pregnancy is more likely to result in premature birth and health risks or complications. Complications during pregnancy and childbirth are the leading cause of death among 15–19-year-old girls around the world.
- Fathering a child as a teenager can be life-changing. While teen fathers don't have to worry about the health implications of pregnancy and childbirth, they still face similar difficulties staying in school and earning a living.

How does teenage pregnancy affect the child?

- The child could be born underweight.
- The mother may depend on others for support for the care of the child.
- The child may be malnourished since the mother can't afford to support the child and is dependent on others. This can later lead to stunting and creates a cycle of malnutrition in the family.
- The child may enter school late due to parents' inability to send them to school, since they are more likely to be poor or have other difficulties.
- The child may also drop out of school.
- A child of a teen is more likely to also become pregnant in their adolescence due to the above factors.

How does teenage pregnancy affect your family and community?

- Since teens struggle to take care of themselves and their babies, they look up to others in the family or community for support.
- They look up to the family or other community members to help babysit, take care of the baby, and provide baby supplies (e.g., clothing, items for feeding the baby, medicines).
- Lack of education among young teens who could otherwise be future leaders also affects society as a whole.

What factors may lead to teenage pregnancy?

- Individual level factors
 - Unprotected sex, including not using modern contraceptive methods or using them incorrectly
 - Lack of information about sexual and reproductive health
 - Inadequate access of services provided to young people in some areas
 - Myths about family planning
- Interpersonal (family, friends, partners) factors
 - Peer pressure from romantic partners
 - Peer pressure from friends and peers to "fit in" and have children
 - Parental pressure, including the need to fulfill parents' expectations of having children, starting a family, giving them grandchildren, and following in their steps

- Poor parental communication, which can worsen due to the stigma that surrounds conversations around sexual and reproductive health
- Parental income and the extent of a girl’s education
- Community and societal factors
 - Family, community, social pressure on girls to marry and become mothers while they are still children
 - Early marriage, which becomes more likely when girls are denied the right to make decisions about their sexual and reproductive health and well-being
 - Sexual violence: 9% of women in Liberia have experienced sexual violence, while 60% of women in Liberia have experienced physical violence

How can you prevent teenage pregnancy?

- Delaying or abstaining from sex as an adolescent
- Talking to a trusted family member about your sexual health
- Talking with your sexual partner about preventing pregnancy if you are already having sex
- Talking with someone that you trust if you have any concern (like a midwife at the clinic or another adult that you trust)
- If you have already started sex, talk to your health care provider about which family planning method to use

7.4. Teenage Pregnancy Activity

To continue the session on teenage pregnancy, talk to the participants about why people do what they do. Note that many different circumstances and feelings influence people’s decisions about whether to have sex. Sometimes people can have mixed feelings.

In your meeting space, designate one side of the area as an “Agree” side and another as a “Disagree” side. Read the following aloud to the group:

To explore this topic, I will read a few statements. These are values statements, meaning there is no right or wrong response to any of them. For each statement, if you agree, go stand on the “Agree” side. If you disagree, go to the other side. Please go to one side or the other, even if your view is somewhere in between the two sides. When everyone has moved, some of you will have an opportunity to share your view.

Read each statement. After each statement, allow time for students to move to their “side.” Allow two comments from each side. Then go on to the next statement even if the conversation has not come to an end. Read as many statements as time allows.

Statements

- If a girl loves her boyfriend, she should show it by having sex with him.

- I feel bad for boys because they have to act as if they want sex all the time, even when they don't want it.
- I think it's okay to give someone money or a gift and expect sex in return.
- Men and women have the same amount of power in relationships in Liberia.
- Portrayals on television, in magazines, and on the radio make young people feel that they should be having sex.
- A lot of girls I know have sex because they feel obligated to do so.
- Sexual intercourse is always an extremely intimate and personal experience for the two people involved.
- A lot of people who decide to have sex regret it later.
- A lot of people who decide not to have sex regret it later.
- Both a man and a woman should be able to say no to "sex" at any time, even if a couple has already had sex.
- Before they have sex, most teens talk thoroughly with their partner about whether they both feel comfortable and want to have sex, as well as about how to protect against infection and pregnancy.

Final questions to think about and discuss in a larger group

Read the questions aloud.

Why is it important for young people to think clearly about the reasons for their choice to have or not have sex?

Probe for sense of comfort, safety, voluntariness, and pleasure, as well as protecting one's health.

How might the conversation around teenage pregnancy differ for boys and girls? What are some considerations that girls have to make that boys don't have to think about?

Probe for the larger impact teenage pregnancy may have on a girl's life – it will change her body, may impede her from returning or finishing school. She is also at risk of having to raise the baby alone, if the boy decides he is not ready to start a family.

What are some ways that we can become more aware of what is going on, how we feel, and what we want and do not want?

Probe for writing in a journal, talking to someone trusted, thinking honestly.

7.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 8: Overview of Lessons 1, 2, 3, 4, 5, 7

Use Session 8 for review and open discussion about the first of club sessions.

Lesson 9: The Importance of Modern Contraception and Family Planning

9.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

9.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information). Spend no more than 10 minutes talking through these questions.

- What are modern contraceptive methods?
- Why are the benefits of using contraceptive methods?
- What is the difference between contraception and family planning?
- What are some benefits of family planning?
- Who is eligible to take contraceptives?
- How can you access contraception?

9.3. Digging In: Talking Through the Main Points

What is family planning and contraception?

Modern contraceptive methods are tools, such as physical barriers or medicines, that can help a couple prevent having a baby. An individual can use a contraceptive at any time.

Family planning helps people plan how they want to have their children, when they want to have, how many children they want to have and when they want to stop having children.

What are common contraceptive methods?

Some modern contraceptive methods that boys and girls in Liberia use are:

- Condoms:

- What it is: A latex covering that goes over the penis and acts as a barrier that is effective at preventing pregnancy. Condoms are most commonly used by men, but female condoms, which are inserted into the vagina, can also sometimes be found.
- How long it lasts: Must be used every time you have sex.
- Side effects: Few to none
- Reversible: Can get pregnant again immediately when not using condoms.
- STI protection: Condoms are the only contraceptive method that protects against all STIs.
- The “pill”:
 - What it is: A daily pill that a woman takes to prevent pregnancy.
 - How long it lasts: Pill must be taken every day in order to be effective. Missing days can reduce the pill’s effectiveness.
 - Side effects: Mild side effects that usually go away after the first 2–3 months of taking the pill.
 - Reversible: Women can get pregnant within 1–2 months after stopping the pill.
 - STI protection: The pill does not protect against STIs.
- Depo-provera:
 - What it is: An injection that is given regularly to a woman that prevents her from becoming pregnant.
 - How long it lasts: Injection must be given every three months to prevent pregnancy.
 - Side effects: Mild side effects that usually go away after the first 2–3 months of getting depo-provera injections.
 - Reversible: Completely reversible, however, it may take several months after the final depo shot to resume regular menstruation.
 - STI protection: Does not protect against STIs.
- Intra-uterine device (IUD):
 - What it is: A small piece of plastic that is put inside the uterus by a health provider.
 - How long it lasts: Can last up to 10 years.
 - Side effects: Mild side effects that usually go away after the first 2–3 months of getting an IUD.
 - Reversible: After being removed, women can become pregnant within one month.
 - STI protection: Does not protect against STIs.
- Implants:
 - What it is: A small rod about the size of a matchstick that is surgically placed inside a woman’s upper arm.
 - How long it lasts: Can last 3–5 years
 - Side effects: Mild side effects that usually go away after the first 2–3 months of getting an implant.
 - Reversible: After being removed, women can become pregnant within one month.
 - STI protection: Does not protect against STIs.

Why are family planning methods important?

Modern contraceptives and family planning can be beneficial for the following reasons:

- It helps people decide when to begin having children
- It helps people decide how far apart they want their children to be born
- It helps people control the number of children they want to have
- It helps people control when they want to stop having children
- It helps reduce unwanted pregnancy
- It helps reduce the risk of pregnancy-related complications, diseases, and death. Having a baby at a young age can especially result in dangerous complications.
- It helps reduce the risk of developing uterine cancer
- It helps ensure babies are born healthy. Young mothers are especially at risk, as they are more likely to give birth to underweight babies and are at higher risk of death giving birth.
- Some contraceptive methods help control many menstruation-related symptoms and disorders
- It allows adolescents to follow education and career goals that may be interrupted by having children. This empowers people and increases their ability to earn more.

Who can use, take, or is eligible for contraception/family planning methods?

Everyone at reproductive age who is not ready or wants to have a child is eligible. They can be sexually active or be thinking about becoming sexually active. Contraceptives and family planning need to be considered before a person decides have sex.

How can you access contraception/family planning methods?

You can get family planning methods from the nearest clinic, health center, hospital, or Youth Friendly Centers, and from CHAs.

9.4. Family Planning Activity

To continue the session on modern family planning use, tell the group they will play a game: “True or False.” First, organize the participants into small groups of three to five people. Explain you will read five statements, and the small groups will discuss each statement and decide whether it is true or false.

As you read through statement by statement, have each group discuss and then bring the larger group together to discuss the statement. Make sure that everyone knows the correct answer and that all of the talking points listed in the response sections below are mentioned.

STATEMENT 1: A WOMAN CAN ONLY GET PREGNANT IF SHE HAS SEX OFTEN.

Response: False! Pregnancy can occur after a woman’s first-time having sex. For some women, it might take only having sex one time to get pregnant. Other women may be sexually active for many months or more before they get pregnant. Contraception is only effective if it is used every time you have sex.

STATEMENT 2: A WOMAN CAN’T GET PREGNANT IF A MAN, WHO IS NOT WEARING A CONDOM, WITHDRAWS BEFORE FINISHING.

Response: False! A woman can still get pregnant even if her male partner withdraws before finishing sex. Sometimes small amounts of semen will come off the man's penis in the middle of sex, which can lead to pregnancy. Only contraceptive methods can effectively reduce the risk of pregnancy.

STATEMENT 3: A WOMAN CAN PREVENT PREGNANCY IF SHE SWALLOWS AN ORAL CONTRACEPTIVE PILL RIGHT BEFORE SEX.

Response: False! For oral contraceptive pills to be effective, women must take them every day and at the same time for several weeks before having sex. Talk to your health provider to help figure out this timeline.

STATEMENT 4: A WOMAN CANNOT GET PREGNANT IF SHE HAS SEX IMMEDIATELY BEFORE OR AFTER HER MENSTRUAL PERIOD.

Response: False! A woman's fertile period depends on the length of her menstrual cycle, which can change from month to month. Though some people use a natural family planning approach, which tracks the cycle to reduce the likelihood of pregnancy, it is the least effective form of contraception and many women who use it still get pregnant when they don't want to.

STATEMENT 5: A WOMAN CANNOT GET PREGNANT IF SHE WASHES OUT HER VAGINA IMMEDIATELY AFTER HAVING SEX.

Response: False! Sperm move very quickly and by the time a woman washes herself out, the sperm may have already moved toward the fallopian tubes and egg.

STATEMENT 6: SOME CONTRACEPTIVE METHODS CAN LEAD TO WOMEN NOT BEING ABLE TO HAVE A BABY IN THE FUTURE.

Response: False! No modern contraceptive methods are known to cause infertility. Studies have proven that women that use modern contraception are able to have babies at the same rate as women who have never used contraceptive methods.

Statement 7: PREVENTING PREGNANCY IS A WOMAN'S JOB SINCE SHE IS THE ONE THAT CARRIES THE BABY.

Response: False! Both men and women are responsible for preventing pregnancy. This will look different for every couple and is why couples communication and waiting to have sex until both person are ready is so important. Though modern contraceptive is very effective, there is always a small chance a couple can get pregnant, even when on contraception.

9.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 10: Preventing STIs and HIV

10.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

10.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

- What do you know about STIs and HIV?
- What is the connection between HIV and other STIs?
- What are the causes of STIs and HIV?
- How can STIs be prevented?
- How can a person with HIV prevent passing HIV or STIs to others?
- What happens if an STI is left untreated?

10.3. Digging In: Talking Through the Main Points

What is an STI?

- Sexually transmitted infections, or STIs, are infections that spread from person to person through sexual activity, including anal, vaginal, or oral sex. STIs are caused by bacteria, parasites, and viruses.
- Many health care providers use the term "infection" instead of "disease," because a person with an infection may have no symptoms but still require treatment. When untreated, STI can become a disease.
- Human immunodeficiency virus, or HIV, is a sexually transmitted infection which, when untreated, can progress to a disease called Acquired Immunodeficiency Syndrome (AIDS). Other examples of STIs include chlamydia, gonorrhea, human papillomavirus (HPV) infection, and syphilis.

What is the connection between HIV and other STIs?

- Behaviors that put people at risk for STIs also increase their risk for HIV. Having an STI can make it easier to get HIV. For example, STIs can cause a sore or a break in the skin, which then makes it easier for HIV to enter the body. If someone has both HIV and other STIs, they may also be at increased risk to transmit HIV to someone else.

Causes of STIs and HIV

- Having sex, especially without consistently and correctly using condoms
- Having sex with many partners
- Having sex while/after using drugs or alcohol; drugs and alcohol impairs a person's judgment, which can increase the likelihood of risky behaviors

How can a person reduce the risk of getting STIs?

Sexual abstinence (never having vaginal, anal, or oral sex) is the only way to eliminate any chance of getting an STI. But if you are sexually active, you can take the following steps to lower your risk for STDs:

- Stick to one faithful sexual partner
- Get tested if you think you may have an STI or HIV
- Use condoms correctly every time you have sex
- Do not drink alcohol or use drugs before and during sex

How can a person with HIV prevent passing HIV to others?

- Avoid having sex without a condom.
- Take HIV medicines that a health care provider has prescribed to you daily. Treatment with HIV medicines (called antiretroviral therapy or ART) helps people with HIV live longer, healthier lives.

What are the symptoms of STIs?

- Symptoms of STIs may differ depending on the type of STI, and not everyone will experience the same symptoms. Examples of possible STIs symptoms include painful or a burning sensation during urination, unusual discharge from the vagina or penis, or fever.
- STIs may not always cause symptoms. Even if a person has no symptoms from an STI, they may still pass the STI on to other people. Talk to your health care provider about getting tested for STIs and ask your sex partner to do the same.

Can STIs be treated?

- STIs caused by bacteria or parasites can be cured with medicine. There is no cure for STIs caused by viruses, but treatment can relieve or eliminate symptoms and help keep the STI under control.
- Treatment also reduces the risk of passing on the STI to a partner. For example, although there is no cure for HIV, HIV medicines can prevent HIV from advancing to AIDS and greatly reduce the risk of HIV transmission. In fact, when someone is on HIV treatment, they can live a completely normal life, including not transmitting HIV to their partner and not transmitting HIV to their children.
- Human papilloma virus (HPV) is the one STI that now has a vaccine. HPV can lead to cervical cancer, anal cancer, throat, as well as other forms of cancer. Get the HPV vaccine right away, if it is available to you (for both girls and boys).

What happens if STIs or HIV go untreated?

- Left untreated, STIs such as gonorrhea, syphilis, chlamydia, genital herpes, and human papillomavirus, can lead to long-term complications. These complications include blindness, bone deformities, brain damage, cancer, heart disease, infertility, birth defects, and even death.

- Untreated HIV can advance and overtake your immune system, get worse over time and may lead to death.

What should I do if I think I might have an STI?

- If you think you might have an STI, visit the nearest clinic to get tested right away. The sooner that you are able to diagnose and treat an STI, the better your health will be. By testing and treating your infection, you will also lower your risk of transmitting the infection to sexual partners.

10.4. Preventing STIs Activity

To end the session on HIV and STIs, tell the group they will discuss risk and different behaviors’ level of risk. Explain that many choices that we make can make behaviors more or less risky.

Section the room into: “More risk,” “Moderate risk,” and “Less risk” areas. Read off one item listed in the “behavior” section of the table below, and then ask participants to go into the part of the room that aligns with the degree of risk they think is associated with that behavior. Once they are finished, read off the “level of risk” section. Make sure you hit the selected talking points in italics.

FOR STIS AND HIV, HOW RISKY ARE DIFFERENT BEHAVIORS?	
BEHAVIOR	LEVEL OF RISK
Kissing	Less risk <i>As long as both mouths are healthy and not bleeding or having any sores</i>
Vaginal sex without a condom	More risk STIs/HIV can be pass on to partner through vaginal sex. You cannot tell if someone has an STI/HIV just by looking at them. The risk can be lowered by using condoms.
Sharing needles for piercing ears	More risk <i>Unclean needles can spread bloodborne diseases, such as HIV</i>
Oral sex	Moderate risk <i>Many STIs such as chlamydia, gonorrhea, and herpes can be spread through oral sex, especially if the person has any sores or open cuts in their mouth. Risk can be lowered by using condoms.</i>
Hugging a friend with HIV	Less risk <i>HIV cannot be transmitted through touch alone</i>
Masturbating alone	Less risk <i>You are acting alone</i>
Having multiple sexual partners	More risk

	<i>Any additional partner increases your risk. Risk can be lowered by using condoms during every sexual act with every partner. However, it is best to only have one partner.</i>
Getting drunk and having sex	More risk <i>When you are drunk, it is easy to forget to wear condoms.</i>
Having sex without a condom	More risk <i>Having sex without a condom even one time can lead to pregnancy or getting an STI. You can reduce your risk by wearing condoms correctly and consistently every time.</i>

Remind participants some amount of risk exists for almost any situation. Ensure that all participants have understood each point and have asked all questions that they have.

10.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. If appropriate to the setting, close with a prayer. Give them an assignment for the next meeting.

Lesson 11: Substance Abuse

11.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session’s topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

11.2. Setting the Scene: Stimulating Questions that Will Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another’s answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

- What is drug abuse?
- What are its effects?
- What are the factors that contribute to drug abuse?

- How can it be prevented?
- Who is affected by drug abuse?

11.3. Digging In: Talking Through the Main Points

What is drug abuse?

Drug abuse or substance abuse refers to dependence upon certain chemicals for the purpose of creating pleasurable effects on the brain. Drug abuse occurs when you repeatedly use a substance despite the harm it may cause in your life.

Most commonly used substances which may be abused by adolescents:

- Alcohol
- Marijuana
- Tobacco

Effects of Alcohol and Drug Abuse

Being curious about alcohol and drugs is normal. However, remember that recreational drugs (marijuana, cocaine, heroin) are illegal to use in Liberia at all times; using or possessing them can lead to imprisonment. Alcohol is illegal to use before age 18.

While not everyone that uses substances abuses them, alcohol and recreational drugs are highly addictive, leading to dependency. Once addicted to substances like alcohol and drugs, a person may experience:

- Death due to misuse, overdose, or reckless behavior due to being impaired
- Impaired ability to move well or think clearly. This can lead to engaging in extreme or dangerous actions
- A desire to focus only on drugs and alcohol, losing interest in other activities
- Receiving poor grades and even rejection and expulsion from school
- Unemployment
- Losing friends and family members
- Becoming dull, antisocial, depressed, tired, aggressive, or otherwise feeling or behaving poorly.
- Being more likely to engage in criminal activities such as robbery, theft, and homicide, especially as dependency gets stronger and the need for money for drugs grows
- If using intravenous drugs and sharing the same syringe with other people, contracting diseases like HIV
- If using alcohol, failure of vital organs like the liver and kidneys, which ultimately leads to death. Other substances may have similarly bad effects on organ function.

Factors that contribute to substance abuse

Some of the reasons a young person may end up addicted to recreational drugs or alcohol:

- Peer pressure to use alcohol and drugs
- Availability of drugs from other young people
- Learned behavior from others at home, in school, or the community
- Media (e.g., alcohol being advertised on television)
- Social media (e.g., social networks may connect a user to someone who offers or enables substance use)

Prevention and control

Some ways to avoid use and abuse of substances or seek help if you are abusing them:

- Seek counseling and education on alcohol and drug abuse from a trusted official, provider, or teacher
- When counseling is not available or isn't helping, seek medical advice or assistance from a rehabilitation center. Rehabilitation centers in particular can help someone overcome and live with addiction and its consequences.
- Avoid peer pressure and end any unhealthy relationships that may encourage you to abuse substances
- Ask for help from family and friends

11.4. Substance Abuse Activity

Explain to the group that when a young person is faced with a situation where they might encounter drugs or alcohol, some tools may help. Introduce the ideas of “Stay,” “Walk away,” or “Get help.”

Read the following:

Stay

Sometimes you may decide to stay in a situation with drugs or alcohol, or you feel you can't leave. Speak to the people involved using “I statements.” First, help them understand how you feel by saying “I feel” and then name the emotion you feel. Then, say “when” or “because” and describe the behavior that makes you feel that way. Finally, identify how you want the behavior to change.

For example, if your father asks you to buy him alcohol and you do not feel comfortable doing so, you could say something like, “I feel angry when you ask me to buy your beer for you. I feel scared at the alcohol shop because men stare at me. I don't want to be sent to any alcohol store anymore.”

Walk Away

Another tool to use is to walk away. If someone is drunk or high, you may not be able to reach them by talking. In a situation like this, you could walk away.

Even if someone is your girlfriend or boyfriend or parent, you can still walk away. Leave immediately and go to a safe place. Talk to them again when they are sober.

Get Help from a trusted friend or adult

The third tool you can use is to get help from a trusted friend or adult.

Now tell the group you will read four scenarios; after each scenario is read, the participants will think through what they would do: stay, walk away, or get help. After reading a scenario, ask anyone who volunteers to respond to explain their thinking.

Scenarios

1. Linda is out with her friends. Everyone is drinking and they are teasing her, hoping to make her drink with them even though she does not want to drink. What should Linda do?
2. Margaret passes the night club and alcohol/liquor store on the way home. Men sit outside and stare at her and yell at her and she fears for her safety. What should Margaret do?
3. Susan is out with a guy and realizes she has had too much to drink during their time together. What should Susan do?
4. Charlotte's father has come home drunk and yelling. Charlotte does not feel safe when he is drunk. What should Charlotte do?

10.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 12: Parent-Child Communication

12.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

12.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

- Why youth be helped by having open communication with their parents and adults?
- How is communication like between parents and youth?
- Do you think parents and youth have changed or are changing the way they communicate recently?

12.3. Digging In: Talking Through the Main Points

What is parent-child communication?

Parent-child communication is an open and effective way of having discussion between a parent (father, mother, or guardian) and a child in order to provide information, advise or counseling for a child on sexual and reproductive health and other issues.

The benefits of parent-child communication

- Effective communication between parents and children makes youth feel that they are heard and understood by their parents, which is a boost to their self-esteem.
- When parents provide accurate information, create open lines of communication, and clearly express their values and beliefs, their children are much more likely to adopt safer behaviors, such as avoiding drugs and alcohol, staying in school, delaying sexual initiation, and, for adolescents who are sexually active, using condoms to prevent teenage pregnancy and STI transmission and/or other contraceptives to prevent pregnancy.
- It strengthens emotional bonds between parent and child and generates security and confidence. Children that trust their parents are more likely to come to them when they have important questions or want advice.

Barriers to communication between parents and children

- Avoiding parental advice-many youth think/feel some parental advice are old fashion/old school for them. They may not want to listen or may avoid having conversations with their parents
- Threatening: This can make your child feel afraid or resentful and create communication gaps.
- Judging and criticizing: If you constantly point out the negative, you can make your child feel inferior, rejected, and have low self-confidence.
- Embarrassing and ridiculing: When you make your child seem bad in front of other people, you can make them feel unloved.
- Interrogating: Constantly asking about things can make children think you don't trust them or that you suspect them of something wrong.
- Social networks: Technology makes it easy to spend all day chatting with friends, but it becomes a distraction when it comes to communication between parents and children.

Tips to improve communication

To improve communication between parents and children, it's important to create a climate of trust and to understand how children and young people communicate. Some tips to achieve this include:

Listen carefully

When your parents is talking about something important, leave aside what you're doing and just pay attention. Also, show interest in what they're explaining and listen to their point of view, even if it's difficult to understand.

On the other hand, let them finish speaking before you ask questions. No parent likes to be interrupted while they're talking.

Ask questions

Whenever possible, you should ask questions of things that concern your wellbeing. Be respectful in raising your concerns or asking questions. Your parents deserve your respect.

12.4. Parent-Child Activity

To finish the session on parent-child communication, tell the group they will put together three skits that highlight different styles of communication. Ask for six people to volunteer to be actors, two people to a skit.

While other participants talk quietly, give each of the three pairs their skit to practice. Give them five minutes to practice and then have them come back to perform.

Skit 1: Two people meet. One of them starts to talk, getting so excited and involved in what they are saying that the other person does not get a chance to say anything. The other person tries to speak, ask a question, respond to a question, or make a suggestion, but the first person talks on so much that the second person remains silent and eventually gives up trying.

Skit 2: Two people meet. Both start telling the other something they are concerned about; each one speaks about a different concern. Neither one is listening to the other, and both are talking at the same time.

Skit 3: Two people meet and greet each other. One person asks a question about the other's interests, gives the other person time to answer while the first listens, and then the other person asks the first person asks a question and responds the same way. They go back and forth in a real conversation, with open sharing of news and opinions.

Stop each skit once the point has been made (i.e., about two to three minutes per scene). After each skit, ask the entire group the following.

- What did you see happening in this scene?
- How does this skit relate to real life?

After you are finished discussion each skit individually, ask

- What causes the kind of communication shown in Skit 1 and 2?
- How could these people improve their communication?
- How does this relate to how you talk to your parents?

12.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 13: Nutrition and Healthy Eating

13.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

13.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

1. What is nutrition?
2. What are healthy and less-healthy foods?
3. Is it easy for you to eat healthy? Why or why not?
4. How do you talk to your family about healthy eating?

13.3. Digging In: Talking Through the Main Points

- What do you know about nutrition?
- What is healthy eating?
- Why is nutrition important?

What is nutrition?

Nutrition is the study of how food and drink affect our bodies, with special regard to important nutrients necessary to support human growth and health.

What is healthy eating?

- Healthy eating means eating different types of food so that the body gets the nutrients (protein, carbohydrates, fats, vitamins, and minerals) for normal growth and development.
- Food nourishes the body and gives us energy to get through each day. Healthy eating leads to good health and is a key element in human development, from the prenatal and early childhood years to later life stages. Healthy eating also helps reduce the risk of many chronic diseases.

Why is good nutrition important?

- Good nutrition protects you against many chronic and non-communicable diseases (e.g., diabetes, cancer, heart disease)
- Nutrition provides the energy and factors we need to function physically and mentally at our best. It reduces our risk of illness and injury because our body has the right nutrients to repair, restore, and protect itself.

The six types of elements of nutrition and its importance to our bodies

- **Protein:** Protein is essential for muscle growth and health. Protein is found in foods like meat, fish, chicken, eggs, and beans.
- **Carbohydrates:** Carbohydrates provide energy and make up a large part of our diet. Foods high in carbohydrates include rice, cassava, bread, potatoes, eddoes, yam etc..
- **Fats:** Fats are also a source of energy, and our body can store fat to use later. We need to consume a moderate amount of fat to survive.
- **Vitamins:** Vitamins are essential for our body to conduct various processes, such as healing wounds. Fruits and vegetables are particularly good sources of vitamins.
- **Minerals:** Found in most foods, including meats, grains, fruits, and vegetables, minerals are, like vitamins, help conduct various processes of the body. Mineral deficiencies, which can be common, can cause health problems.
- **Water:** The body needs plenty of water every day to function properly and stay alive.

How do we eat healthily?

If you eat or drink more than your body needs, you'll put on weight because the energy you do not use is stored as fat. If you eat and drink too little, you'll lose weight or have other health problems. Therefore, to eat healthily, eat what your body needs, not too much or too little. Eating a wide range of foods ensures you're getting a balanced diet and your body is receiving all the nutrients it needs. In general, the fresher and less processed your foods are, the healthier you will be.

10.4. Nutrition Activity

To end the session on nutrition and healthy eating, tell the group they will discuss risk and different foods and their level of nutrition. Explain that the types of foods we eat have big effects on our health.

Section the room into: "Healthy," "Not very healthy," and "Unhealthy" areas. Read off one item listed in the "Food" section of the table below, and then ask participants to go into the part of the room that aligns with the degree of nutrition they think is associated with that food. Once they are finished, read off the "level of nutrition" section. Make sure you hit the selected talking points in italics.

FOOD AND ITS LEVEL OF NUTRITION	
FOOD	LEVEL OF NUTRITION
Potatoes	Not very healthy <i>Though potatoes are not unhealthy, they also do not have a lot of vitamins or nutrients. Potatoes should be eaten in moderation.</i>
Bananas	Healthy <i>Bananas have a lot of vitamins and minerals and are an important part of a healthy life.</i>
Salt	Unhealthy <i>A small amount of salt is needed by the body; however, a lot of salt will lead to high blood pressure and other diseases. Eat only in small amounts.</i>
Sweet potatoes	Healthy <i>Sweet potatoes are filled with vitamins and minerals. Eat a lot of sweet potatoes!</i>
Sugary sweets (cookies, candy, cake)	Unhealthy <i>Sugary sweets are some of the unhealthiest foods. Unlike some other unhealthy foods (e.g., salt), they do not contain any minerals at all. Sugary sweets lead to weight gain and too many can lead to diabetes. Eat only in small amounts (e.g., on special occasions).</i>
Fish	Healthy <i>Fish are one of the healthiest foods! They contain many vitamins and minerals and should be eaten regularly.</i>
Fast and fried food	Unhealthy <i>Fast and fried foods (e.g., fried potatoes, hamburgers) are cooked with unhealthy oils and when consumed often, quickly lead to diseases like high blood pressure, high cholesterol, and diabetes. Eat fried foods sparingly.</i>
Greens	Healthy <i>Greens have high amounts of vitamins and minerals and are low in calories. Greens should be eaten regularly and not cooked with excess oil or salt.</i>

Remind participants that all food is okay in moderation – however, unhealthy foods should be eaten sparingly and instead replaced with healthy foods. Ensure that all participants have understood each point and have asked all questions that they have.

13.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. Give them an assignment for the next meeting.

Lesson 14: Malaria

14.1. Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

14.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

1. What is malaria?
2. How can we protect ourselves against malaria?
3. What makes it difficult to stick to our normal malaria prevention behaviors?

14.3. Digging In: Talking Through the Main Points

What is malaria?

Malaria is a mosquito-borne parasitic disease that causes high fever, severe chills, and sweating.

Who is at risk of malaria?

- Pregnant women
- Children under five years

How is malaria spread?

By a female *Anopheles* mosquito. If a mosquito bites a person already infected with malaria, it can also become infected and spread the parasite on to other people.

How can you prevent malaria?

- By cleaning your environment around the home, clearing vegetation around the home, and draining stagnant water to reduce mosquito populations
- Sleep under an insecticide-treated mosquito nets. The female *Anopheles* mosquito, which transmits malaria, mostly bites at night, so, as the Ministry of Health reminds us, mosquito nets are one of the most effective and cheapest ways of preventing malaria transmission.

What should I do if I think I might have malaria?

Go to a hospital or clinic whenever you have a fever to get tested for malaria. Always get tested before pursuing treatment; taking malaria treatments when you don't have it could cause harm.

14.4. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. If appropriate to the setting, close with a prayer. Give them an assignment for the next meeting.

Lesson 15: Planning for a Prosperous Future

15.1 Introduction

Welcome all Adolescent Health Club participants. Introduce the session's topic as the final topic of the curriculum and a way to wrap everything up and think toward the future. Warm up the group, referring to Appendix A for potential energizers, before starting the session to increase engagement and enthusiasm, or use these energizers at another appropriate interval during the session.

To conclude the clubs, this session will allow participants to think through what they have learned, think about how it will affect their future, and overview other topics (e.g., values, health, and money) that will also have big effects on their life.

15.2. Setting the Scene: Stimulating Questions to Build Momentum

Set the scene for the session by asking some of these opening questions to the group. Allow participants to disagree with one another and build on one another's answers. Politely correct any information participants share that is factually incorrect, taking care not to embarrass the person that stated the false information. Spend no more than 10 minutes talking through these questions.

1. What values are most important to you?
2. How do these values effect your life and behavior?
3. What is health and what makes someone healthy?
4. What is the importance of money?

15.3. Digging In: Talking Through the Main Points

Values heavily shape our lives

Values are the people's principles, beliefs, ideals, and goals. Values can heavily shape your life, depending on what you value the most. Values are often shape by our loved ones, our community, our gender, and our society. We all prioritize values differently, but some common values are:

- Honesty: the value of honesty, or telling the truth
- Family: the value of family and loved ones, including parents, grandparents, aunts, uncles, siblings, etc.

- Religion: the value of one’s religion and prayer
- Loyalty: the value of being a good friend and family member and standing by people in times of trouble
- Wealth: the value of money in your life
- Good health: the value of health and taking care of your body
- Education: the importance of finishing school and becoming educated
- Cultural traditions: the value of tradition in your life, including respecting elders
- Helping others: the value of helping others in your family, community, etc.

Why should I prioritize the value of health?

Health is one of the most important components of your life. Although health is the absence of disease, it is much more than that and also includes mental health, physical health, and more. If you do not have your health, you will not be able to live a long and prosperous life. There are many components that go into your health. Nutrition is a very important component of your ongoing health and eating healthy will have the biggest impact on your lifespan and over health.

In addition to nutrition, exercise is a big component of health and disease prevention. Regular exercise reduces the risk of diseases such as diabetes, stroke, colon cancer, and breast cancer. It also lowers blood pressure and improves cholesterol. Exercise, such as brisk walking, running, and jumping helps strengthens bones and also improves cardiac (heart) health.

How does exercise help with your mental health?

Physical exercise stimulates the body’s production of endorphins, a chemical that improves mood. Exercise reduces the risk of depression, increases self-esteem, increases self-confidence, and promotes restful sleep. It also improves thinking and learning skills and can improve school performance.

How does exercise help with your physical health?

Physical exercise burns calories and helps people avoid weight gain and maintain a healthy weight. Maintaining a healthy weight reduces the risk of diseases such as type II diabetes and high blood pressure and will ultimately lead to a longer and healthier life. People vary in the amount of exercise they need and should be considered closely with your diet. However, most experts agree that you should exercise for 30 minutes at least four times a week.

How does being financially secure improve your health?

Many families and youth struggle with money. Being financially insecure, or not having enough money to pay for bills, food, housing, etc., causes a lot of stress. Increased stress leads to higher rates of disease, decreased life span, increased drinking behavior, and more. There are things that you can do to make yourself more financially stable and independent:

- Find ways to save: Are there ways to save on costs so that you can build savings for any future expenses?
- Cut down on wasteful spending: Think about unnecessary things that you do not really need (e.g., clothes, jewelry, shoes, electric gadgets)
- Income generating: Are there any income generating activities or small jobs that you can get to be able to save for the future?
- Develop livelihood skills or education: Continuing education and increasing technical skills will lead you to more financial independence as you will have more economic opportunities.
 - Skills that are highly desirable include: hairdressing, tailoring, soap making, pastry, carpentry, masonry, electrical skills

How does can volunteering and being involved in my community benefit me?

Youth engagement in their communities leads to relationship building, increased empathy, and ultimately, better health outcomes all around. Being involved in your community will help you become a more empathetic person and understand the situation of your neighbors and community members. Volunteering and being involved in your community can also help build leadership skills, gain work experience, and lead to economic and employment opportunities. There are many ways to be involved in your community, including:

- Joining community cleaning campaigns and mobilization efforts (e.g., cleaning community roads, around hand pumps, at health facilities and schools)
- Joining town hall meetings to help improve community development
- Joining other community development efforts (e.g., community building and construction activities sponsored by government and non-government organizations)

15.4. Planning for a Prosperous Future Activity

As a final activity, tell the group they will put together everything that they have through about in the adolescent health club lessons. Instruct participants to get into small groups of 3–5 people. Give the groups the questions listed below one by one, giving them time to discuss each one among themselves. After groups have had several minutes to discuss the questions, ask each group to share some of their final thoughts.

- Thinking back on Week 1 (goals), how have your goals changed?
- If you had to select one goal for the future, what would you say?
- How do your values relate to this goal?
- How might your health and financial security affect your ability to turn the goal into reality? And what can you do to improve your financial security to meet your goals?
- Why might it be important for women to be financially independent?

For Boys Clubs: Additional Questions

In addition to the questions above, consider these additional and supplementary questions:

- How do you think your values, goals, and priorities differ from girls'?
- How do you feel about finances and your responsibilities?
- How might a girl feel if she was completely dependent on her partner for finances?

15.5. Conclusion

To conclude, invite the young people to ask questions, make comments, or provide input. Summarize what the group discussed. If appropriate to the setting, close with a prayer. Give them an assignment for the next meeting.

Lesson 16: Overview of Lessons 9, 10, 11, 12, 13, 14, and 15

Summarize what the group discussed previously and allow adolescents to ask questions.

Week 17–20

Graduation and certification of adolescents

Role of the club supervisor, the community, and Breakthrough ACTION Liberia during graduation

- In collaboration with the County and District Health Teams and Breakthrough ACTION Liberia, the club supervisor will mobilize parents and community to organize, support, and conduct graduation activities.
- The community will provide the venue.
- Community leaders will provide support for refreshments.
- Breakthrough ACTION Liberia will provide the certificates for graduating members.

Certification of participating schools as healthy life partner

Breakthrough ACTION Liberia will also provide certificates to all participating schools.

Week 21–24

The clubs will transition to community care.

Appendix A

List of Energizers

My Favorite Things

At the first session, work to make everyone feel comfortable and get to know their group members better. Have participants get into pairs, introduce themselves, and describe one of their favorites—whether it is their favorite food or animal or something else—and why it’s their favorite. After a couple minutes, have partners introduce each other and share this information with the larger group.

Two Truths and a Lie

Organize everyone into groups of three. Everyone will introduce themselves and provides three pieces of information about themselves, one of which is not true. For example, “My name is Henry. I like singing, enjoy reading mysteries, and I love to watch table tennis.” The other group members take turns guessing which of the items is a lie.

Who is the Leader?

Participants sit in a circle. Ask one person to volunteer to leave the room or area. After they leave, the rest of the group chooses a “leader.” The leader must perform a series of actions, such as clapping, or tapping a foot, which the whole group then copies. The volunteer comes back into the room or area, stands in the middle of the circle, and tries to guess who is leading the actions. The group protects the leader by not looking at them. The leader must change the actions at regular intervals, without getting caught. When the volunteer spots the leader, they join the circle, and the person who was the leader leaves the room to allow the group to choose a new leader.

Who are You?

Ask for a volunteer to leave the room or area. While the volunteer is away, the rest of the participants decide on an occupation for them, such as a driver or a fisher. When the volunteer returns, the rest of the participants mime activities. The volunteer must guess the occupation that has been chosen for them from the activities that are mimed.

Killer Wink

Before the game starts, privately ask someone to be the “the killer” and ask them to keep their identity a secret. Explain that one person among the group is the killer and they can kill people by winking at them. Everyone then walks around the room in different directions, keeping eye contact with everyone they pass. If the killer winks at someone, that person has to play dead. Everyone who did not fall “dead” has to try and guess who the killer is.

Word Statues

Ask the group to move around the room, loosely swinging their arms and gently relaxing their heads and necks. After a short while, shout out a word. The group must form themselves into statues that describe the word. For example, if you shout, “peace.” All the participants have to instantly adopt, without talking, poses that show what “peace” means to them. Repeat the exercise several times. Other words to try include, “water,” “chicken,” “scared,” “brave,” or anything else you want to use.

Simon Says

Have everyone stand up. Tell the group that they should follow instructions when you start the instruction by saying, “Simon says ...” Explain that if you do not start an instruction with “Simon says,” then the group should not follow the instructions! Begin by saying something like, “Simon says clap your hands” while clapping their hands. The participants follow. The facilitator speeds up the actions, always saying “Simon says” first. After a short while, choose an instruction but omit saying “Simon says.” Those participants who do follow the instructions anyway are out of the game and must sit down. The game can be continued for as long as it remains fun.

Mime a lie

Everyone stands in a circle. Start by miming an action and ask the person on your right to say your name and ask, “What are you doing?” You reply that you are doing something completely different from what you are miming; for example, the facilitator mimes swimming, but says, “I am washing my hair.” Then person to the facilitator’s right then has to mime what the facilitator said that they were doing (e.g., if you said, “washing my hair,” then the person to the right mimes washing their hair). The person to their right says their name and asks, “What are you doing?” Again, the person who is miming will say something different from what they are doing. Go around the circle in this way until everyone has had a turn.

Clap exchange

Participants sit or stand in a circle. Send a clap around the circle by doing the following: face the person on your right and clap once in unison. Then, as quickly as possible, the person on your right turns and claps with the person on their right, and then that person turns and claps, and so on. Send many claps, with different rhythms, around the circle at the same time.

Marooned

Divide the participants into teams. Ask the participants to pretend they are marooned on an island. Have the teams work together to choose three items they would have brought with them if they knew there was a chance that they might be stranded. Note that the teams are only allowed three per team, not per person. Allow each team a couple minutes to select their items and then give each team a chance to present their three items and defend their choices to the larger group.

Telephone

Divide the participants into two equally-sized groups. Group participants should sit or stand in a circle in their groups. The facilitator quickly whispers a word or phrase (such as, “I had rice and meat for dinner and fell asleep outside”) to one participant from each group. This participant passes the message in a whisper to the next person and so on. The last person shouts out the message. Once the message has gotten around both groups, the last person will say the phrase aloud. The group with the ending phrase closest to the facilitator’s original words are the winners.

What is the Adverb?

One participant leaves the room or area, and the others choose an adverb; for example, “quickly” or “sleepily.” When the person who left returns, they must find out what the adverb is by commanding people to do various actions in the way that the adverb describes. For example, if the person who left says, “Talk that way”, the group must talk quickly or sleepily. After each command, the participant tries to guess the word. Note to facilitator: An adverb describes a verb. A verb is an “action” word. For example, “walk” and “run” are examples of verbs. “Quickly,” “slowly,” and “sleepily” are all examples of adverbs.

Knees Up

Note: do not do this activity if physical distancing is in effect due to COVID

Participants stand in a close circle with their shoulders touching. They then turn, so that their right shoulders face the center of the circle. Ask everyone to put their hand on the shoulder of the person in front and to carefully sit down so that everyone is sitting on the knees of the person behind them.

Do you know your neighbor?

Break the group into two or three smaller groups (or stay in one, if your group is small). Have each person in the group take turns saying their given and surnames and one fact about themselves (such as, “I work with pets,” or, “I love very spicy foods”). Choose one person to stand in the middle —this person is “It.” “It” should point to another person and ask them to tell them about the youth to their right or left. The person pointed to has 10 seconds to give the identified person their name as well as “the fact” about that person. If the person cannot give the information, then they have go into the center and is “It.” The person who was “It” previously sits in the now empty seat in the circle. The game ends as soon as everyone has been “It” or when everyone has been “introduced.”