

WELCOME TO PARENTS CARES!



Of all the jobs that we will have in our lives, being a parent is perhaps the most challenging and the most rewarding. As parents, we want to raise our children to be as healthy as possible. We strive to provide our children with a safe, nurturing, and supportive environment. We want to help them gain the knowledge, value, attitudes, and skills that they need to become adults who can take care of themselves and their parents, and who contribute positively to their communities. The parent's role is important in ensuring our children grow up to be happy and successful adults.

What we do and what we say to our early on makes a big difference as they grow into older adolescence and adulthood. In other words, parents Cares!

The parents Cares! Program is designed to help you do what you do as a parent better. Over the next five weeks, we will talk about ways you can protect your child from the negative outcomes of unhealthy sexual behaviors. This participant manual contains information that will be covered in the five sessions. To get the most out of each session, bring this manual with you to each session. Thank you for choosing parents cares

SESSION 1

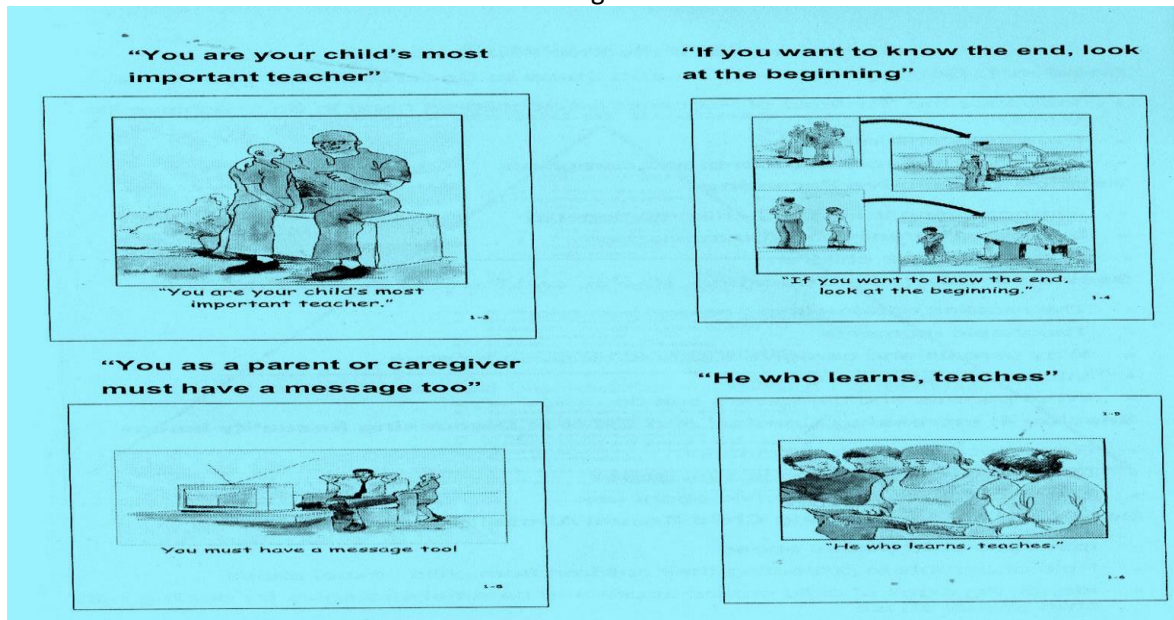
Getting to know you and steps to understanding your child



"The one who asks questions don't lose his way."

GOALS OF FAMILIES CARES

- >Strengthen your ability to be health teachers for your children.
- >Increase your awareness about the health risks children face, such as pressure to have sex, and prepare you to help your children face these risks.
- >Encourage you to take an active role in educating your children about sexuality issues early. The risks children face begin when they are young so parents need to start communicating with them early.
- >Support you as a parent, in promoting your own values with your children. This program will not tell you what information to tell your children about sex; instead it will help you figure out what you want to tell your children, based on your own values.
- >Strengthen your approaches to parenting so you can help your children navigate through their adolescence and grow up safe and healthy.
- >Encourage you to share the information from this program with your friends and family. Have fun and enjoy our time together.



"You must have a message too!"

"If you want to know the end, look at the beginning."

"You are your child's most important teacher."



"He, who learns, teaches."

OVERVIEW OF THE 5 SESSIONS

SESSION 1: getting to know you and steps to understanding your child

Introduce the “pyramid of Success” (what children need to do to achieve life goals).

>Pressures children face.

>The important role of parent.

SESSION 2: Effective parenting.

>Strengthening the parent-child relationship.

>Improving parent communication.

> Supervising children.

SESSION 3: Sexuality Education, Sexual health and Parent as sex Educators

>The realities of adolescent sexual behavior

>Why parents should be sex educators?

>Information about puberty

>What parents can do

SESSION 4: Increasing Comfort and Skills in Discussing sexuality Issues

>Reproductive health information

>Difficulties of discussing sexual issues

>Tools for talking to your child about sex

SESSION 5: Discussing Sexuality and Handling peer pressure

>Communication practice with children

>Four-step parenting plan for peer pressure>Graduation



PYRAMID OF SUCCESS

Life Goals >Finish school Have a fulfilling

job >have a loving relationship >

Have children >participate in community activities

Necessary Child Characteristics >Self -confidence and high self-

esteem >Pride in cultural heritage (Traditions, Customs, History, Strengths)

>Self-discipline >healthy physical habits >Good study and learning habits >resists peer pressure.

FOUNDATION Parents Should Provide >Be a good role model >Communicate with child openly, honestly, and frequently >Support children to succeed in school > Teach children values > Teach children good behavior >Teach children to make sexually healthy choices

UNDERSTANDING PRE-ADOLESCENTS AND ADOLESCENTS

Adolescence is a period when young people develop the attitudes and skills that foundation for adulthood. It is a tough time emotionally. At home you may see that your child wants to be an independent adult one day but still acts very childlike the next.

Adolescents go through a lot of emotional, social and physical changes. Relationships with others also change. Adolescents say that parents and their opinions still matter to them. Your child may want to spend more time with friends and even start talking or acting a lot like them, but don't give up on trying to stay close to your child and spending time together. Remember parents still matter.

Adolescents feel that their experiences are unique and that no one can really understand them. This is a good time to show them that you can understand. Adolescent bodies are changing too. Most 9-12 year olds have started to experience changes in their bodies such as development of breasts and genitals, sexual arousal, and menstruation for girls. This process is tough for them and sometimes for parents too. As their bodies start to mature, adolescents begin engaging in some adult-like behaviors and will start having sexual feelings. Some adolescents will initiate sexual activities.

EXAMPLE NODE-LINKING MAP

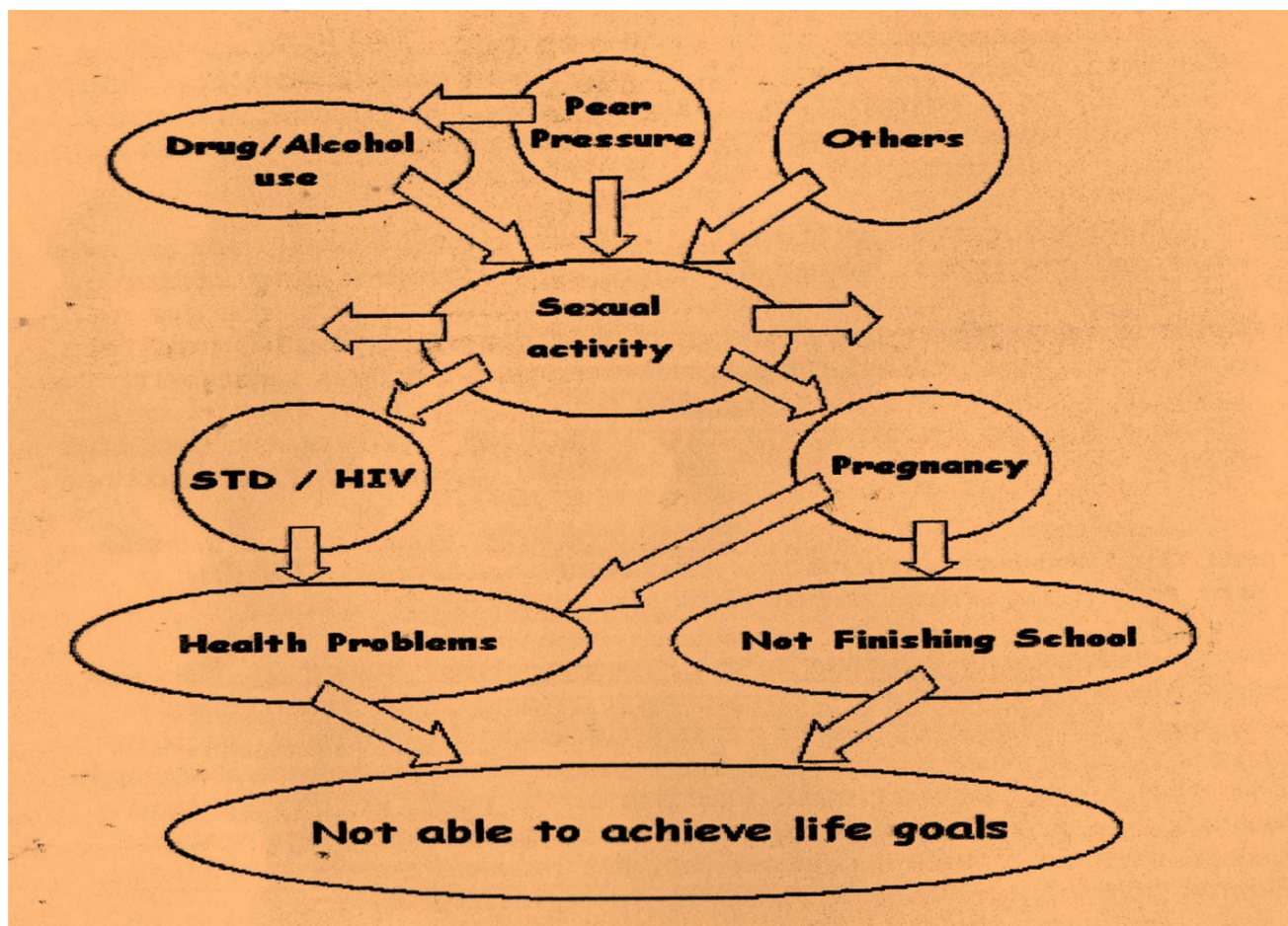
(Drugs/Alcohol use) (Peer pressure) (Others)

(Sexual activity)

(STD/HIV) (Pregnancy) (Health problems)

(Not Finishing school)

(Not able to achieve life goals)



WHY FOCUS ON CHILDREN 9 TO 12 YEARS

What you do now when your child is 9 to 12 years will lay the foundation for what happens in future. If parents wait too long to discuss issues such as sexuality they have their chance to have the greatest impact. Your children are entering puberty and is occurring at ages than in the past. Children can be very cruel to each other at this stage. Parents (s) can improve their relationship with the child by offering the unconditional love that peers/ friends often don't provide. Children are bombarded with sexual information everyday and they need parents to filter it. Your child needs to know about sexual issues from you (from your words and actions). It is very important time to help your children develop the values, attitudes, maturity, and skills that will help them make good decisions about sex throughout adolescence and adulthood.



"A fly that loves you is the one that settles on you."

STRENGTHENING THE PARENT-CHILD RELATIONSHIP

Be a good role model. Act in ways that earn your child's respect, and model the behavior you would like to see in your child. Pay attention to your child's positive behavior. Encourage your child a lot. Use encouraging statements such as; > that's the way! You can do it, you're figuring it out, and you're trying so hard, I have faith in you.

Spend one-on-one time with your child. Try to find something that you and your child enjoy doing together (for example cooking, washing, looking after animals, gardening, fishing, playing game, reading to each other)
Communicate. Relationships between parents and their children are greatly improved when there is good communication.

EFFECTIVE PARENT- CHILD COMMUNICATION



A fly that loves you is the one who settles

Strengthening the parent-Child Relationship

Be a good role model. Act in ways that earn your child's respect, and model the behavior you would like to see in your child.

Pay attention to your child's positive behavior.

Encourage your child a lot. Use encouraging statements such as

That's the way!

You can do it!

You're figuring it out!

You're trying so hard!

I have faith in you.

Spend one-on-one time with your child. Try to find something that you and your child enjoy doing together (for example, cooking, washing, looking after animals, gardening, fishing, playing games, reading to each other).

Communicate. Relationships between parents and their children are greatly improved when there is good communication.

Really listen to you child.

>**Make eye- contact:** If you looking at something else when your child is talking to you or while you are talking to your child, it shows a lack of interest in your child.

>**Listen with a closed mouth:** Try to interrupt your child while he/she is talking it's very frustrating. Think about how you feel when someone frequently interrupts you!

>**Let your child know that you have listened:** You can do this by repeating what your child said or by making appropriate comments.

>**Let your child talk too.** Don't take over the conversation. Ask for your children's opinion and take turns talking.

> **Make your verbal and nonverbal messages are the same:** Avoid "mixed" messages where the verbal and non-verbal messages you send are inconsistent. Only part of what we communicate is done through nonverbal vocal characteristics such as tone and volume, and through body movements such as facial expressions. To get your child to open up, ask why, what, and how questions rather than questions that can be answered with "yes" or "no" or other one-word responses.

Stick to the present issue during conflicts: Don't dwell on past problems. Focus on creating solutions to problems rather than on who is to blame.

>be respectful and avoid put-downs. Use "I" messages. "I" messages involve describing how you feel about something rather than making accusations. An example of an "I" message is I get very worried if I don't know where you are, rather than "You are so immature"



SUPERVISING YOUR CHILD

When your child leaves the home, you should always know:

1. Where they are going
2. Who they will be with
3. When they will be home
4. What they be doing

SESSION 2



HOMework ASSIGNMENT

Practice your communication skills with your child over the next week. Here some examples of what you could say to your child to start conversations:

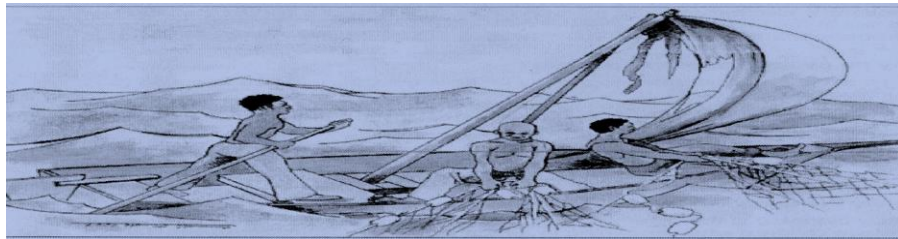
- What's going on?
 - >What up?
- I see that you are...
- It's cool that you...
- What do you think about (any topic of interest)?
- Tell me about what's going on in (any school subjects)?

Know at least things whenever your child leaves the home without you.

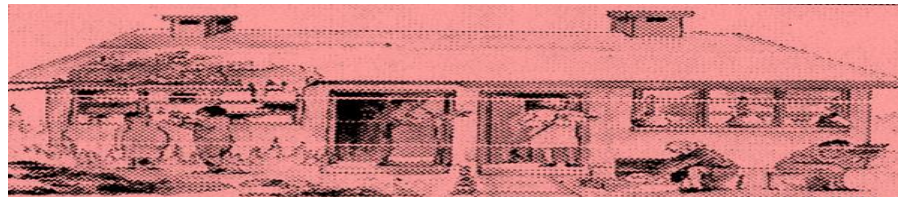
>Where they are going, who they will be with, what they will be doing, when they will be home.

SESSION 3

PARENTS' Role in Sexuality Education



“Decide that you want it more than you afraid of it.”
“Let not what you cannot do; tear from your hands what you can.”



“If you want to clean a calabash, start from the inside.”



“If you are on the road to nowhere, find another road.”

“Why should parent’s guardians worry?”

“Why should parents/guardians worry?”

WHAT DOES IT MEAN IT MEAN TO BE SEXUALLY

Know your values when it comes to sexual activity.

Understand sexual development and the consequences of actions.

Be educated about the risk involved in sexual activity. If you don't, ask. Be confident in your ability to negotiate sexual situations in a way that keeps you protected from these risks.

Respect yourself enough to take care of yourself.

Be open and honest with your partner and expect the same back.

REALITIES OF ADOLESCENT SEXUAL BEHAVIOR.

Rates of **HIV** infection, sexually transmitted infections, and pregnancy are particularly high among young people.

Globally, half of all new **HIV** infections occur among people younger than 25 years.

In Africa, more young women than young men are infected with **HIV**.

Many young adult with AIDS contracted the HIV infected when they were adolescents

Most young people do not know much about **HIV / AIDS** and especially their risk of contracting HIV or sexually transmitted infections or of becoming pregnant.

AIDS, HIV, HERPES SIMPLEX, GONORRHEA, SYPHILLIS.



“Why should parents/guardians worry?”



“Why should parents/guardians worry?”



“Why should parents/guardians worry?”

WHAT PARENTS CAN DO TO HELP THEIR ADOLESCENTS MAKE SEXUALLY HEALTHY

Be clear about your values and attitudes. Model responsible alcohol use. Be knowledgeable about sexuality. You should be able to provide accurate information and know where to get more information if you need it.

>Discuss puberty with your children, discuss sexuality with your children, Discuss drugs and alcohol with your children, Be available, so your children feel comfortable coming to you when they have questions. Try to understand you're your adolescent's point of view. Don't just lecture. Foster responsible decision-making. Help adolescents gain understanding of the values you want them to develop. Set and maintain limits for dating and other activities outside of school. Stay actively involved in your adolescent's life. Ask questions about your adolescent's friends and romantic partners. Offer to assist adolescent's friends and services when needed.

PARENTS AS SEX EDUCATORS

Children want information about sex from their parents. Parents need to start discussing sex-related issues with their children when they are still young, before they become sexually active. Parents need to talk about sex issues again and again. When parents discuss sex issues with their children in an open and responsive way, children are less likely to engage in risky behavior. Parents need to provide information at the right time. Ask your children what questions they have and provide answers. Provide information based on their needs at that age. As your children get older, parents can build on the information you have already provided. When parents do not talk about sex with their child, there is a consequence: the child will learn about sex from other sources that may be inaccurate or incomplete. This may result in risky behavior by your children.

SOCIAL AND EMOTIONAL CHANGES AMONG ADOLESCENTS

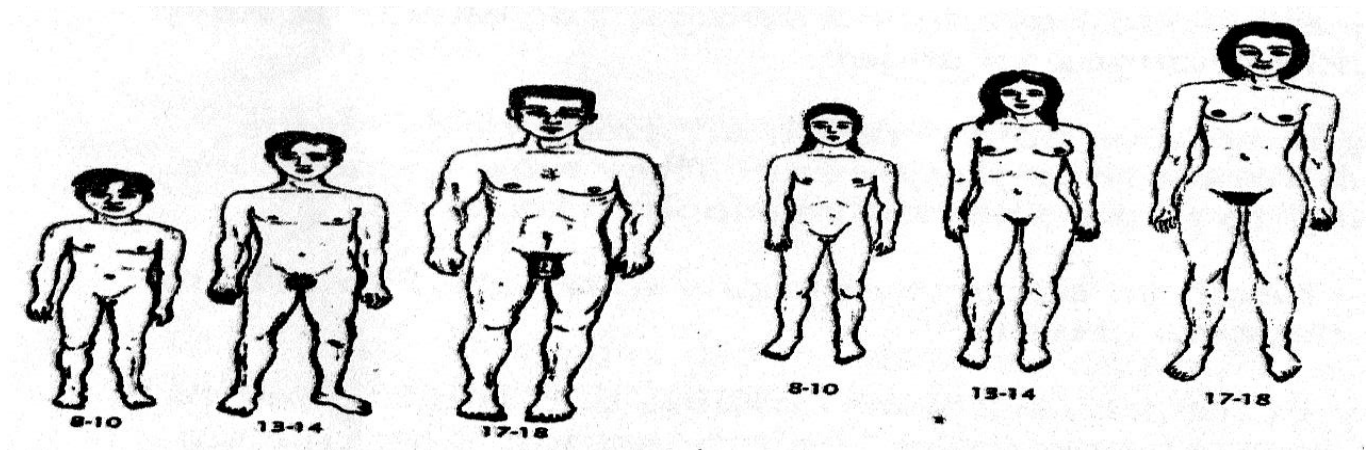
They may have concerns about being accepted by their friends. They want to fit in and be like their peers. That is why some of them may start to act and dress like their peers. They struggle between dependence (needing their families a lot) and independence (pushing their family away and making their own decisions). At one point they may seem like they need the support of the family and at another time they want to do thing on their own. Some young people may even become rebellious to authority.

They may also have mood swings; for example, happiness quickly changes to anger. They may have concerns about their body image, acne, and the clothes they wear. They may spend more time trying to make themselves look attractive. They begin to become sexually attracted to others and may develop crushes. They often believe that nothing bad will happen to them, no matter how risky their behavior. They have a feeling of being invincible. There as parents let us try to be close to our children so that we may be able to help them through the many changes they are experiencing.

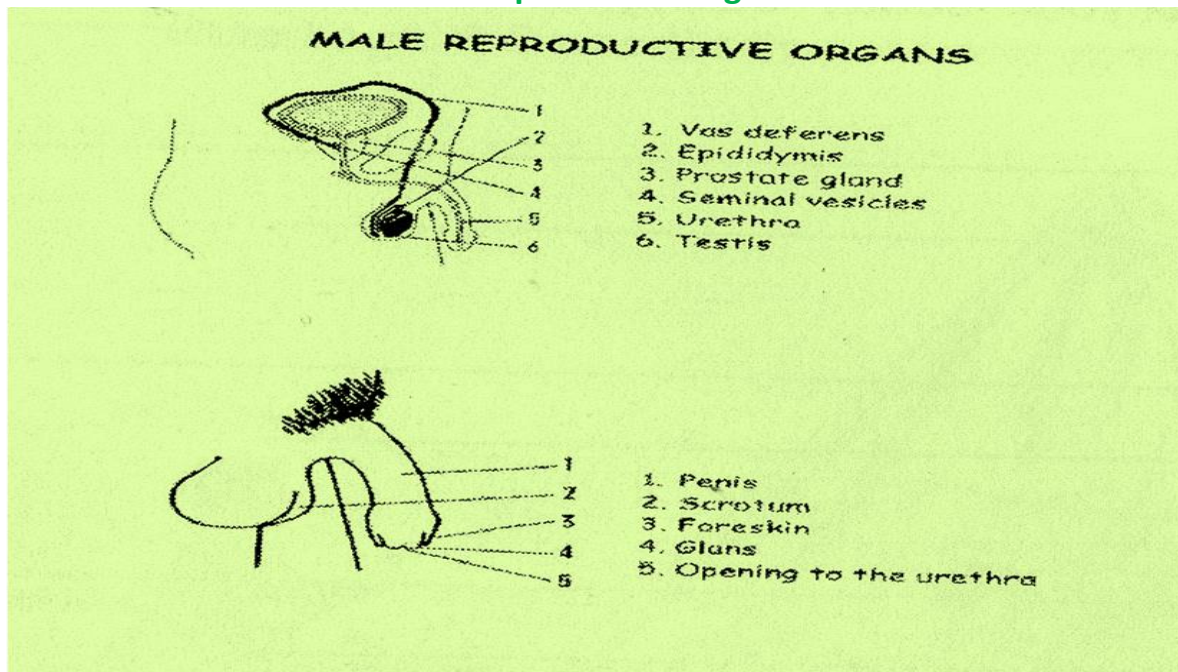
For Girls	For Boys
Breasts and hips develop	Breasts swell (slightly)
Body becomes curvy	Testes, Scrotum, Penis develop
Menstruation(period)	Sperm production
Acne (pimples)	Acne (Pimples)
Sweat more actively	Sweat more actively
Voice changes	Voice deepens
Underarm hair	Underarm hair
Pubic hair	Pubic hair

Other body hair/(legs, arm, chest, face)
Muscles develop
Discharge from vagina

Other body hair/ (legs, arm, chest, face)
Muscles develop
Night emission, wet dreams



Male reproductive organs



1. Vas deferens
2. Epididymis
3. Prostate gland
4. Seminal vesicles
5. Urethra
6. Testis

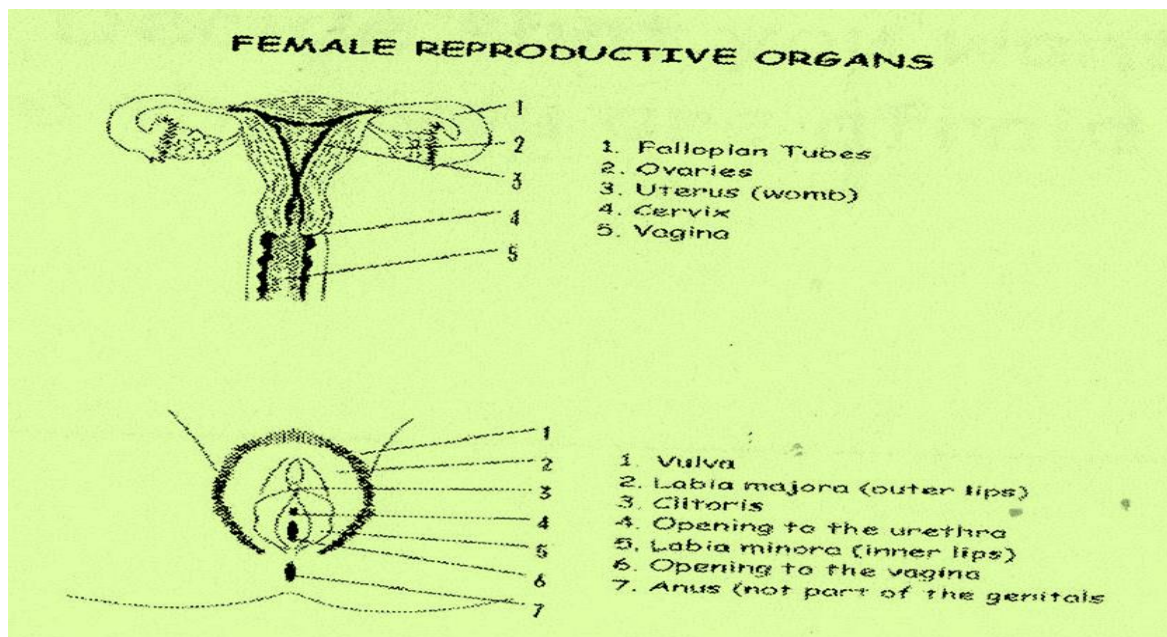
1. Penis
2. Scrotum
3. Foreskin
4. Glans
5. Opening to the urethra

Sperm is produced in the testicles. The testicles are held in a sack of skin called the scrotum shown in the picture. Sperm travel from the testicle to the penis. In the penis is a tube called the urethra. The urethra is a passage for both urine and semen. Semen is the fluid that contains sperm and leaves a man's penis when he ejaculates. Ejaculation is when semen comes out of a boy's or a man's erect penis due to sexual excitement. Semen is released or ejaculated from the opening at the end of the penis during sexual intercourse or wet dreams.

One of the changes that our male children will be experiencing is wet dreams are the uncontrolled release of semen from the penis during sleep. They are caused by sexual excitement from dreams, physical stimulation like rubbing against bedding, or even having a full bladder. It does not necessarily mean that one is thinking about having sex.

People mature at different ages and boys may experience wet dreams at varying ages.

FEMALE REPRODUCTIVE ORGANS



1. Fallopian Tubes
2. Ovaries
3. Uterus (Womb)
4. Cervix
5. Vagina

2. Clitoris
3. Opening to the urethra
4. Labia minor (inner lips)
5. Opening to the vagina
6. Anus (not part of the genitals)

1. Vulva Labia majora (outer lip)

In the female reproductive system, there are two ovaries, which produce eggs. About once a month one mature egg is released from an ovary. This process is called ovulation, the periodic release of a mature egg from an ovary. The egg then moves through Fallopian tubes on its way to the uterus (womb). In the fallopian tubes the egg can merge with one sperm cell to form the beginning of a baby, if unprotected sex takes place during the time of ovulation. This process of merging is called fertilization.

If a female and a male have sex within several days of the female's ovulation, fertilized can occur. The uterus (womb) is the place where a fertilized egg develops into a baby. This is called pregnancy lasts an average of 9 months. During birth, the baby passes through the cervix and comes out through the vagina. The vagina is the opening leading to the outside of the body. It serves three purposes. It is where the penis is inserted during intercourse, where menstrual flow passes, and where the baby comes out during childbirth.

During puberty, hormones are produced that trigger the ovaries to start releasing one egg every month. The egg will travel from the ovary to the womb through the fallopian tubes. Every month the uterus prepares itself for a possible pregnancy. The wall of the womb thickens for the preparation of pregnancy. If the girl doesn't get pregnant, the tissues leave the body through the vagina mixed with blood. This is called "men striation" or "Having a period." A period will happen approximately once every month.

SESSION 3

HOMEWORK ASSIGNMENT

Think about 3 specific ways you can help your child become sexually healthy. You may want to call your “buddy” during the week to help you come up with 3 specific ways. You may want to write these 3 things below:

Practice your communication skills with your child over the next week. Here are some examples of what you can say to your child to start conversations:

What’s going on?
I see that you are
It’s good that you are
What do you think about (any topic of interest)?
Tell me about what’s going on in (any school subject)

Know at least these things whenever your child leaves the home without you:

Where they are going
Who they will be with
What they will be doing
When they will be home

What does it mean to Be Sexually Healthy?

Know you’re when it comes to sexual activity.
Understand sexual development and the consequences of your actions.
Be educated about the risks involved in sexual activity. If you don’t know, ask.
Be confident in your ability to negotiate sexual situations in a way that keeps you protected from these risks.
Respect yourself enough to take care of yourself.
Be open and honest with your partner and expect the same back.

Realities of Adolescent Sexual Behavior

Adolescence is typically a healthy time of life. Most health problems adolescents experience are sex related (sexually transmitted infections, HIV, teen pregnancy), as we saw in the node-linking map.
Rates of HIV infection, sexually transmitted infections, and pregnancy are particularly high among young people.
Globally, half of all new HIV infections occur among people younger than age 25 years.
In Africa, more young women than young men are infected with HIV.
Many young adults Aids contracted the HIV infection when they were adolescents.
Most young people do not know much about HIV / AIDS and especially their risk of contracting HIV or sexually transmitted infections or of becoming pregnant.

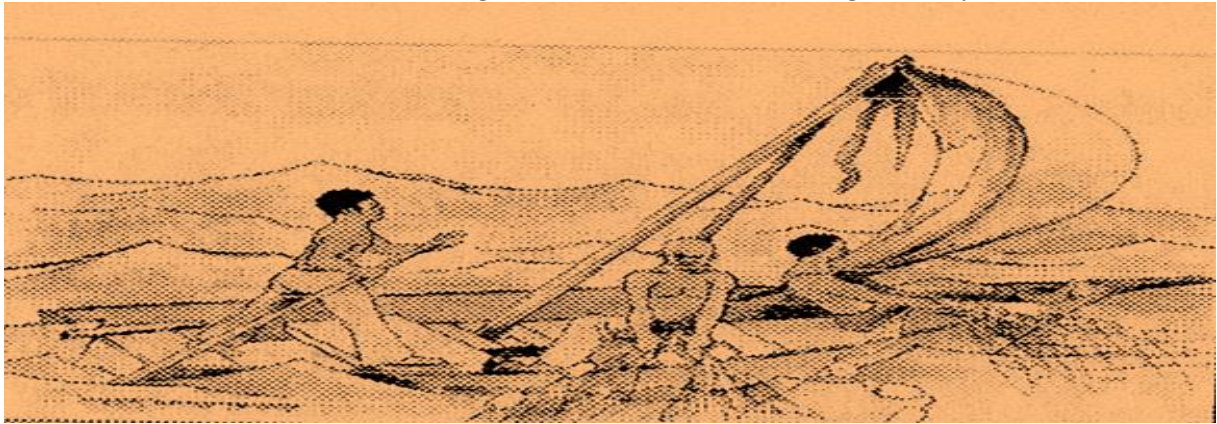
What Parents can do to help Their Adolescents make sexually healthy choices

Be clear about your own values and attitudes.
Model sexually healthy attitudes in your own relationships.
Model responsible alcohol use.
Be knowledgeable about sexuality. You should be able to provide accurate information and know where to get more to get more information if you need it.
Discuss puberty with your children.
Discuss sexuality with your children.
Discuss drugs and alcohol with your children.
Be available, so your children feel comfortable coming to you when they have questions.
Try to understand your adolescent’s point of view. Don’t just lecture.
Foster responsible decision-making.
Help adolescents gain understanding of the values you want them to develop.

Set and maintain limits for dating and other activities outside of school.
Stay actively involved in your adolescent life.
Ask question about your adolescent's friends and romantic partners.
Offer to assist adolescents in accessing healthcare services when needed.

SESSION 4

FAMILIES CARE! Increasing Comfort and Skill in Discussing Sexuality Issues



“Decide that you want it more than you are afraid of it.”

ADDITIONAL INFORMATION ABOUT SEXUAL TOPICS ABSTINENCE

Abstinence means not engaging in any form of sexual intercourse. It is the most effective method for avoiding unwanted pregnancy and sexually transmitted infections also called STIS, including HIV. It is possible for people who have sex in the in the past to decide not to have sex. This is called secondary abstinence, and can reduce your chances of getting HIV.

Why do people choose to abstain?

To avoid an accidental pregnancy or sexually transmitted infection (STI), including HIV

1. To avoid an accidental pregnancy or a sexually transmitted infection, including HIV
2. To wait until they're older
3. To wait till they finish school
4. To wait for a long term relationship
5. To follow religious or cultural expectations

Family planning/ Contraception Oral contraceptive pill

A woman must take one pill at approximately the same time each day as prescribed to be fully protected from pregnancy. (The oral contraceptive pill contains hormones.) The oral contraceptive pill prevents pregnancy: it does not prevent STIs or HIV infection. Depo- provera It is long acting and a woman has to receive a new injection of the product every 3 months to prevent pregnancy effectively. (Depo-provera contains hormones.) Depo- provera.

Prevents pregnancy; it does not prevent STs or HIV infection.

Intrauterine Device (IUD).

The IUD is a plastic or copper object that is inserted into a woman's uterus by a health care provider. The IUD contains a hormone that prevents sperm from joining with the egg by changing the lining of the uterus and fallopian tubes. Once it is inserted it will work for 5-12 years before it must be replaced. The duration of effectiveness depends on the type used. The IUD prevents pregnancy: it does not prevents STIs or HIV infection

Norplant: Norplant is another long-acting method of contraception. Two small capsules filled with hormones are implanted under the skin of the upper arm where they are left for as long as five years. The implant procedure is done by a medical professional. Norplant prevents pregnancy; it does not prevent STIs or HIV infection.

Male condom. It fits over the erect penis and catches the semen and sperm when the man ejaculates. Proper use of condoms means correct and consistent use of condoms with every sex act. The male condom provides protection against STIs or HIV and pregnancy.

Female condom. It is worn in the vagina by the woman during sexual intercourse and catches semen and sperm when the man ejaculates. Like the male condom, female condoms provide protection against STIs, HIV and pregnancy.

Emergency contraceptive pills.

This is a method that can be used AFTER a woman has had unprotected sex (for example if the condom burst during sexual intercourse or if the woman has been sexually assaulted). She will have to take several pills immediately after unprotected sex and repeat the dose 12 hours later. This is an emergency measure and should not be considered as a regular form of family planning. The emergency contraceptive pill helps prevent pregnancy after having sex; it does prevent STIs or HIV infection

Sexually transmitted infections

Sexually transmitted infections (STIs) are transmitted through sexual intercourse. Some infections, such as genital herpes, genital warts, and HIV, are caused by viruses and have no cure. Other infections, such as **syphilis, trichomoniasis, gonorrhea, and Chlamydia**, are caused by bacteria and can be treated with antibiotics. Sexually transmitted infections can cause either genital ulcers (syphilis and genital herpes) or genital discharge and pain during urination (gonorrhea, chlamydia, and trichomoniasis). Sometimes infections do not cause any sign or symptom at all, and the person infected will not notice anything abnormal.

Sometimes, if not treated, the infection will move upwards to the female tubes or to the male testicles. Such infections are serious and can lead to major problems such as infertility and ectopic pregnancy (Pregnancy outside the womb).

If a person notices an ulcer on the genital area or a discharge from the vagina or penis, it is important for him or her to seek immediate healthcare. If one's sex partner has these symptoms, it is also important to seek immediate healthcare, since you may have gotten the infection too. The health provider will ask questions and examine the genitals before prescribing the needed drugs. The person with a sexually transmitted infection will need to take all the drugs as prescribed, and use a condom or abstain during treatment. It is important that any sexual partners are also treated. Otherwise the partner may give the infection back, even after successful treatment. The health professional provides counseling about reducing risky behavior.

HIV / AIDS.

HIV is the virus that causes **AIDS**. **HIV** gradually weakens the immune system – the part of our bodies that fights off infections and diseases and keeps us healthy. A person can have **HIV** and not know it because he or she might not feel sick. Even if a person doesn't know that he or she has HIV, he or she can pass it to others. The good news is that HIV is preventable.

A person can be infected with HIV through exposure to the blood, semen, vaginal fluids, or breast milk of a person living with the virus. Unprotected sex (intercourse without a condom) is the main way HIV is spread from one person to another person. HIV can also be transmitted through mother-to-child transmission either during pregnancy, at birth, or through breast feeding. This can be prevented if the mother takes medication to prevent passing HIV to her baby. Use of contaminated sharp objects that have been used by or contaminated sharp objects that have been used by an HIV positive person can also transmit the virus.

HIV is not transmitted through insect bites or mosquito bites, through sharing food or drink, by kissing or hugging, by swimming together or sharing clothes or towels, by using public restrooms, or by witchcraft.

AIDS is the last stage of HIV infection. After about 8-10 years with a weakened immune system, a person's body cannot fight certain infections, like tuberculosis and some kinds of pneumonia. There is no cure for AIDS, but there are medicines available now that can help people with AIDS live longer. They are called antiretroviral drugs or ARVs. The pills need to be taken every day for the rest of one's life. While that may sound easy, people sometimes forget to take their pills every day. That can make the virus even more dangerous. The pills can also have some very serious side effects. To benefit from ARVs and other services you must know your HIV status.

HOW TO AVOID HIV

- Knowing your own and your sex partner (s)' HIV status by being tested.
- Being faithful to one partner when both you and your partner are HIV negative.
- Using a new condom (male or female) correctly every time you have sexual intercourse.
- Reducing the total number of sexual partners you have, and in particular, not having more than one sexual partner at the same time.
- Circumcising males. Male circumcision is the removal of the folds of skin that covers the head of the penis. Medical circumcision reduces the risk of getting HIV by reducing the possibility of tear and injury to the penis during sex and removing cells that are vulnerable to HIV infection. However, while circumcision reduces a man's risk of HIV infection. Even circumcised males must practice safer sex.
- Getting treatment if you have, thought you might have a sexually transmitted infection. It is important for you and your partner to get tested and treated so you do not keep passing the STI to each other. Having an STI may increase the possibility of getting HIV.
- Avoiding risky sexual practices such as having sex while infected with a sexually transmitted infection, including:
 - Dry sex, which involves putting substances in the vagina to make it dry.
 - Having sex during menstruation.
 - Having sex with somebody with many other sexual partners.
 - Having sex with somebody who has a sexually transmitted infection.

Avoiding having sex while drunk or being high. Often when a person is drunk or high, he or she may not be able to make a healthy or safe decision, which could lead to sex without a condom, or sex with someone who has a lot of other partners.

EXAMPLES OF QUESTIONS THAT 9-12 YEAR-OLDS SAID THEY WANTED TO ASK THEIR PARENTS

- Why do girls' periods come on?
- How do you get AIDS?
- What other sexually transmitted infections can one get?
- How does it feel to have sex?
- Why do you have babies when you have sex?
- Can I have a baby at the young age of 12 years?
- How do you use condoms?
- Why do people have pubic hair?
- Can sex make you feel good?
- What do you do when a boy tries to force you into sex?
- Why do you have to use condoms?

FIVE TOOLS FOR TALKING TO YOUR CHILD ABOUT SEX

1. Be prepared

- Know your own values and communicate them clearly.
- Decide what topics you will and won't talk about with your child.
- Think about what you might say in advance so that when faced with a question, you will be able to answer easily.
- Talk to other parents and learn from their experiences.

2. Relax

- You don't need to know all the answers.

3. Start now

- It's up to you to begin conversations with rather than waiting for your child to initiate conversation.

4. Listen to your child.

Don't turn questions away. When your child asks, feel free to answer.

Ask why the child is asking the question.

Listen to your child's point of view.

5. Talk about sex again and again and again.

Talk early and often.

Use teachable moments.

Use everyday opportunities to clarify sexual issues.

Talk about all types of things. Some examples of topics you can talk about include:

Understanding their bodies and body changes

Making healthy choices handling peer pressure

Knowing when you are ready to be sexually activate

SEX EDUCATION TOPICS

Information about understand their bodies and how their bodies change as they grow and develop.

How to handle peer pressures to have sex.

Informative about sexually transmitted infections (STIs).

Information about abstinence.

Information about birth control of family planning.

Information about condom use.

Information about menstruation.

Information about how to know when you are ready to be sexually active.

Information about proper hygiene.

WHAT YOU CAN EXPECT IN SESSION 5

What are we doing?

Next week you will have an opportunity to practice the communication skills that we have learned

What can you expect?

Only bring one child (aged 9-12).

Your child will participate in two exercises with you during the session:

You will have a conversation with your child on an issue that is important to you and your child using the characteristics of good communication skill discussed in session 2.

You and your child will listen to an audio about teens discussing peer pressure. After the audio you will have an opportunity to try out the four-step parenting plan for peer pressure that we will discuss at that beginning of next week's session.

After each discussion the children will leave the session. You will have an opportunity to discuss your experience, give feedback, and receive feedback from the facilitators and other parents.

Your child will participate with you in the closing ceremony for parents cares

HOMEWORK ASSIGNMENT

One of the purposes of this group is to let you start thinking about the sexual values you want impart to your children. For the homework assignment, think about the sexual values you want to impart to your children and what messages you need to convey to your child to share those values. It may be helpful to write your thoughts below.

Sexual Values I want to Impart in my child

What sex-related issues I need to Discuss with my Child

Example: Responsibility

Example: wait to have sex until you are married

WHAT IS CHILD SEXUAL ABUSE

Child sexual abuse is forcing or tricking a child is not sexual activities. Even in cases where it may seem like a child is not tricked or forced, but participating willingly, mentally and physically most children are not ready for sexual activity. They usually do not understand what sex is, and / or the consequences of engaging in it. Because of this, they are not able to agree to engage in sexual activity.

Some children of the same age and ability may explore their sexual feeling with one another. However, sexual activity between an adult and a child or between children with whom there is a large difference in age, status, ability (mental, emotional, physical), or power is generally considered sexual abuse.

A sexual activity may often involve body contact or touching, but may also be non-touching behaviors such as looking or showing, making sexual comments, or sending sexually explicit messages or pictures through email or cell comments, or sending sexually explicit messages or pictures through email or cell phones.

Inappropriate behaviors that are child sexual abuse may include:

- 1) Touching a child's genitals (penis, testicles, vagina, breasts or buttocks) for sexual pleasure or any other purpose that cannot be justified by age appropriate caretaking or medical reasons;
- 2) Forcing a child to touch their own or someone else's genitals or playing sexual games; or
- 3) Putting an object or body parts (like fingers, tongue or penis) inside the vagina, in the mouth or in the anus of a child for sexual pleasure or other purpose; or
- 4) Forcing or coercing child to put an object or body parts (like fingers, toe or a penis) inside the vagina, in the mouth or in the anus of an adult for sexual pleasure or other purpose.

Non-touching behaviors include:

- 1) Showing children inappropriate materials such as pictures of genitals or videos of people having sex;
- 2) Showing a child someone else's genitals for sexual pleasure;
- 3) Asking children to interact sexually with one another;
- 4) Encouraging or making a child engage in sexual activities to earn money, food or other gifts; or
- 5) Making unwanted sexual comments on the phone or in text messages, in notes or letter, in person, or through computers.

Strategies for protecting your Child within your Family and Community within your family:

- 1) **Increase supervision** and be knowledgeable about child's friends, media use and other activities.
- 2) **Show love and support.** Children who have close relationships with their parents or caregivers are at lower risk for child sexual abuse.
- 3) Be careful about **where your children sleep**
- 4) **Pay attention to who is in your home** and the interaction between family and non-family members and your children, remembering that children experience abuse from both family members and friends of the school are at higher risk of sexual abuse.
- 5) **Be aware that sexual abuse can also happen at school** or on the way to school by other students, teachers, and other school staff.

WITHIN YOUR COMMUNITY:

Talk to your colleagues, friends, relatives, and family. You can help break the silence around child sexual abuse.

Observe what is happening in your community; if you ever see suspicious behavior between an adult and a child or two children, talk to that child's parents or another person who can provide protection for that child.

Learn about the resources and services in your community. There are organizations such as district health offices and local NGO's that may be able to help protect your child or support your child if he or she is sexually abused. Find out if there is a child protection team at the district health office that can provide you and your child with assistance and / or referrals.

Promote adding child safety lessons in your child's school and youth-saving NGO classes and child protection policies

Create a network with other parents who are concerned about their children's safety to organize discussions for your school, organization, neighborhood or community.

Practice "collective parenting." Build a community monitoring network where parents help each other to monitor their children.

Raise awareness about the impact that cultural traditions have on sexual abuse

Possible signs of child sexual Abuse.

Physical symptoms of abuse may include:

Showing symptoms of sexually transmitted infections (STIs) or pregnancy.

Shows signs of sexual abuse such as soreness, difficulty walking or sitting, pain, bleeding, or bruises around genitals

Emotional symptom of abuse may include:

Experiences a sudden change in appetite, behavior, personality, school performance, or concentration.

Writes or draws sexual and / or frightening images.

Resists normal routine activities such as bathing, undressing or toileting

Intentionally hurts him/herself through drug or alcohol use, burning or cutting.

Runs away from home

Refuses to talk about a secret shared with an older child or adult.
Shows strange, adult-like or unusual sexual knowledge and / or inappropriate sexual behavior with other children.

Other symptoms of abuse may include:

Suddenly have toys, money or other gifts without reason.
Suddenly has other benefited (such as car rides to places or food).

BEING AWARE OF CHILD SEXUAL ABUSE

Children are often scared or nervous to tell someone that they have been sexually abused. He or she may worried that :

They are responsible for the abuser's behavior

The abuser may hurt them or their families if they tell no one will believe them or be able to do anything about it.

They will get in trouble or be blamed

Their parents will be upset or angry at them or possibly abandon them

Telling will disrupt the family, especially if the abuser is a friend, neighbor or family member.

Most children do not go and tell their parents or caregivers directly that they were sexually abused:

They might describe the behavior (such as someone touched their genitals) to their parent or caregiver.

The child might accidentally tell about the abuse without actually saying it, through comments like "I know someone who touches girls in a bad way"

SUPPORTING A CHILDREN HAS BEEN SEXUALLY ABUSED

Talk to your child

Stay calm: yelling or being angry will scare your child and make him or her think that you are angry with him or her.

Ask simple, direct questions about what happened in order to get the information you need.

Listen care carefully to what your child says.

Believe your child. Acknowledge any discomfort your child is showing about disclosing what happened and offer praise for him / her courage to talk about it.

What happened is not his / her fault: it is important the child to not blame him / herself.

Tell your child that you love him /her and support him or both with your words and your body (such as staying close to him / her or hugging him/her).

Tell your child what happen next. Let him/her know what you plan on doing with the information.

TAKE ACTION

Remove your child from the situation.

Seek med medical and mental health services for your child and family.

Report the abuse to authority

Call 116 child helpline for more support

Know your national laws about child sexual abuse.

Find local or national services that can help your child, such as district health offices, sexual violence support organizations, or places to report the abuser.

HELP YOUR CHILD HEAL

Provide opportunities for your child to talk- he or she will probably have more questions about what happened.

Admit that you may not know the answers to all of all his or her questions.

Remind him/her that it was not his/her fault. Children tend to feel guilty and blame themselves. It is important that help him/her reduce his/her self-blame.

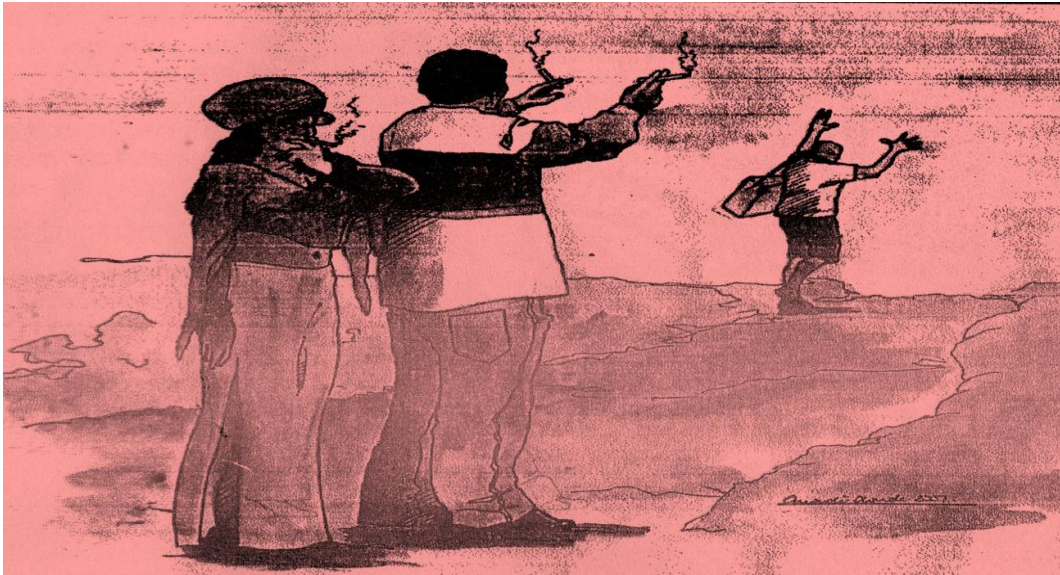
Remind your child that you love him/her and show it through words and body language.

Local Resources for Child sexual Abuse

Your Full Names	Contact information (Name, phone Number, E-mail)	Services provided

SESSION FIVE

Discussing Sexuality and Handling peer Pressure
DISCUSSION TOPICS FOR PRACTICE WITH CHILDREN



“Ain’t gonna let nobody turn me around.”

School performance
Bodily changes during puberty (e.g. development of pubic hair or breasts)
Menstruation
Wet dreams
Choosing friends
Boyfriends / Girlfriends

4-STEP PARENTING PLAN FOR PEER PRESSURE

- 1) The four ways in which parents can help their children better handle peer pressure are:
- 2) Help your child plan ahead. Sit down with your child and identify the peer pressure situations they may confront.
- 3) Help your child recognize signs of potential problems. For example, if you have a daughter, let her know that if a boy or a man wants to take her to a lonely place, it may be a risky situation. If you have a son, let him know that if his friends what him to drink alcohol or smoke bhang, it may be a risky situation.
- 4) Help your child think ahead about what he or she can say and do when confronted with specific situations involving peer pressure.
- 5) Role- plays such situations with your child so that they are able to act wisely if they find themselves in such situations.

SUMMARY AND REVIEW

Pyramid of Success

Three are certain characteristics needed for our children to realize their life goals.
Some health choices such as sexual activity during adolescence can keep them from reaching their goals.

Parents as Sex Educators

Start talking with your children about sex and sexual issues when they are young, before they become sexually active.

Provide your children with the right information at the right time.

Give them honest, correct answers to their questions.

Give the information based on their needs at that age.

Have conversations with them and again and again. Each time building on earlier conversations as they get older

Five Tools for Talking to your Child about Sex

- 1) Be prepared.
- 2) Relax.
- 3) Start now.
- 4) Listen to your child.
- 5) Talk about sex again and again and again. Don't just talk about sex or sexual issues, talk about all types of things.

Responding to peer pressure

- Help your child plan ahead.
- Help your child recognize signs of potential problems.
- Help your child think ahead.
- Role plays situations with your child.

Strengthening the parent- Child Relationship

- Pay attention to your child's positive behavior.
- Provide your child with a lot of encouragement.
- Find interests that you share and spend one-on-one enjoyable time with your child.
- Practice effective communication with your child.
- Ask open-ended questions.
- Really listen without interrupting.
- Encourage conversation and do not monopolize.
- Be open to other views and respectful of them.
- Make sure your words, body, and tone are all saying the same thing.
- Stay in the present, focus on solutions.
- Use "I" messages to own your own feelings.
- Supervise to help prevent problems.
- Know where your child is going.
- Know who your child will be with.
- Know what your child will be doing.
- Know when your child will return home.