

Guides work on the life skills curriculum

Guiding peer education the Kenyan way

Hilary Russell

Adolescents are greatly influenced by what their peers say and do. This is particularly true when the adults in their lives are uncomfortable discussing with them sensitive topics such as sex. This leaves their peers as the only source of information and authority.

Peer education is thus a vital component of programmes that seek to motivate adolescents to reduce risky sexual behaviours and provide crucial facts on HIV and AIDS.¹

Kenya Girl Guides Association (KGGA) has been collaborating with Family Health International (FHI) on peer education and behaviour change programmes for adolescents since 1999. Recently, KGGA began a new programme with unique features, with technical support from FHI and under the auspices of the USAID-funded AIDS, Population, and Health Integrated Assistance Programme (APHIA II).

The innovation is that 32 Girl Guides, whose average age is 13, helped to develop an interactive life skills curriculum and a peer education handbook. The first of these complementary pieces is used for adult-led training for guiding units; the second is for peer education delivered in schools by Girl Guides for classmates ages 10–14.

The handbook is now being used in classes 4 through 7 in at least 750 schools in the

Coast and Rift Valley provinces of Kenya and the number will soon increase to more than 900.

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The commitment of KGGA and the enthusiastic support of school authorities and Kenya's Ministry of Education made the programme possible. UNICEF's Sara Communication Initiative is another key ally, as its comic books and stories about a spirited, self-reliant adolescent girl named Sara provide empowering messages that can help to overcome real-life challenges and promote appropriate decision-making.

The making of the handbook

During two workshops, Girl Guides representing urban and rural schools

mapped out the curriculum and wrote the first draft of the peer education handbook. The girls chose 12 session topics, which included self-esteem and being a good friend; values and school performance; taking care of common illnesses; understanding feelings of attraction; communication skills for protection and talking to helpful adults.

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Two girls, one from each province, wrote up each topic and tested it with their peers at school. They presented their work for the whole group at the second workshop, and adult facilitators helped to merge contributions into one effective session. As participant Jane Wambui, 15, put it, her involvement has made her “look at the world in a different way,” and feel “like a hero,” since she is able to “save people from HIV.”

The edited handbook includes a page of helpful definitions as well as advice on preparing sessions, action planning, leading joint sessions, making referrals to adults and health services, and reporting on

The contents of one session

The handbook's contents for session five, communication skills for protection, are provided by way of example.² It begins with a game traditionally known as "Simon Says," (with "Mary" substituted for Simon). After introductions, the following questions are posed and answers suggested: "How do we communicate? (with our bodies and voices). What are types of communication? (passive, assertive, and aggressive)."

The skit demonstrates how to say no to sex:

Girl: (walking home together) "I'm so glad to be done with class, but I have so much homework."

Boy: "You're so beautiful and study so much. Why don't you take a break? Come home with me and we can relax."

Girl: (angrily) "No, I don't want to 'relax' with you alone."

Boy: (smiling) "Why not? I know exactly what to do. We can play sex."

Girl: (assertively) "I said no and I mean no. Not now and not with you. I don't want to play sex."

Boy: (embarrassed) "I'm sorry. "

These questions are then posed:

What do we learn from the skit?

How does the girl communicate with the boy?

Can any student also refuse sex this way? How?

The story read aloud is about how a girl walking home from church said no to drugs:

A man drove by and slowed to talk to her through the window. He talked smoothly and tried to give her drugs. She was scared that a man would try that. But as a brave girl, she refused. She said confidently, "No, I don't want drugs. Not now. Not ever!" Then she ran home to tell her parents what had happened.

The students are asked to state what they learned, how the girl communicates, why it is important to use assertive communication, and how they can become more comfortable in using it to refuse to get involved in dangerous activities that others suggest.

sessions. The text integrates the enduring values of the Girl Guide movement rather than treating HIV and AIDS education as a stand-alone item.

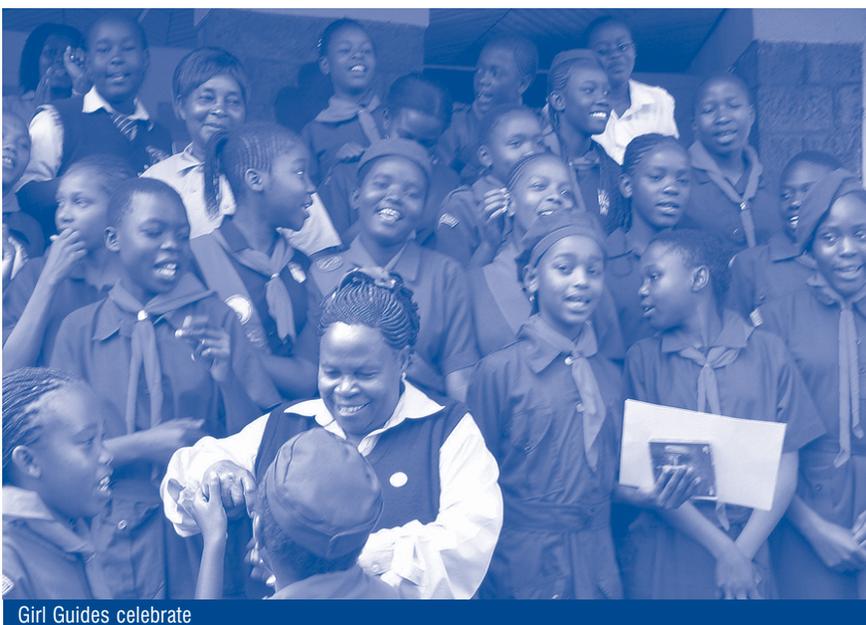
How the handbook is used

Girl Guide Patrol Leaders use the handbook to conduct peer education in their schools and to reach out to the community and

supportive adults. About four Patrol Leaders per school are chosen by their peers from within a unit of 50 Girl Guides who have taken a 24-hour course in life skills over three school terms, mostly during lunch or the afternoon free period. The selected Patrol Leaders then attend a five-day peer education training course delivered by adult Girl Guide Leaders (usually teachers).

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Over the school year, the Patrol Leaders lead 12 peer education sessions with other Girl Guides as co-facilitators. Sessions lasting between 25 and 40 minutes are presented bi-monthly in the order given in the handbook for the



Girl Guides celebrate



Peer educator at work

same group of students, and they engage participants – boys as well as girls – in age-appropriate, entertaining, and participatory ways.

Each session begins with an 'energiser': a song, game, or other fun activity. The peer educator then poses general questions that introduce the session topic and launch discussions. Girl Guides or other students then act out a skit or two that reflects adolescent experience and closely relates to the topic, using the handbook's scripts and stage directions. After the presentation, the Patrol Leader asks the students questions about what they saw and what should be done next.

The next activity is a story, read aloud by a team member who has practised doing so in advance. Students then answer questions and identify lessons. To close each session, its main messages and the positive outcomes that need to be pursued are summarised and repeated.

Leaders of these peer education sessions say that they have resulted in "changed lives and improved grades." According to Maureen Anita, 14, participants "no longer use drugs and others have stopped

engaging in sex. They continue to tell us to teach them more."

The response from parents has also been extremely positive. Catherine Simiyu's mother said she hadn't appreciated her daughter's great potential and self-confidence until she saw her facilitate a session in front of a large crowd of adults.

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And, Ann Muhambe's mother, Antonia Lutagesa, said she had seen "a transformation" in her daughter, who is now "a very responsible girl." Another mother testified that she herself had benefited from what her two daughters had shared about decision-making, self-esteem, HIV and AIDS, and other topics.

Other handbook features

A section of the handbook focuses on challenging situations that a peer leader may face. A table lists potential problems

in one column; blank spaces opposite are to be filled in with a "positive response" by the Patrol Leader, in consultation with an adult Leader.

Among situations foreseen are participants who distract others, laugh when personal information is shared, or ask questions whose answers are not known. Another table lists some questions that individual students may ask and provides spaces for names and facilities to which they should be referred.

The handbook includes a simple "diary" form on which Patrol Leaders and adult Guide Leaders report on what they have done and with how many students. With this form and the standardisation that the handbook offers, it is possible to know exactly what several thousand adolescents in Kenya are hearing and saying about the dangers of HIV and AIDS and early sex and what they should do to take responsibility for their own health and wellbeing and that of others. ■

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1. For a review of current thinking on youth peer education programs, see Susan E. Adamchak, "Youth Peer Education in Reproductive Health and HIV/AIDS: Progress, Process, and Programming for the Future," *Youth Issues Paper 7*. Arlington, Va.: YouthNet Program, Family Health International, 2006.
<http://www.fhi.org/en/Youth/YouthNet/Publications/YouthIssuesPapers.htm>
2. M. Pribila, *Discovering the Potential of Patrol Leaders: A Curriculum of Peer Education Sessions for Use with Students in Primary School*. Nairobi, Kenya: Family Health International, 2008.