

Jipende! MAKEOVER MANUAL



Acknowledgement

This Peer Education Guide is based on previously prepared manuals by other organizations for projects, such as the Health Communication Partnership's Peer Education Guide for Ethiopian Sex Workers. It has been adapted and adjusted to the T-MARC Project context, working with grantees who work directly with women engaged in sex work and transactional sex.

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Preface

This manual was developed for the Tanzania Marketing and Communications for AIDS, Reproductive Health, Child Survival and Infectious Diseases (T-MARC) project, a five-year USAID Private Sector Program (PSP) initiative managed by AED. The objective of this manual is to provide information and lessons to educate women engaged in sex work in order to promote healthy lives and behaviours.

This manual is part of a comprehensive package of risk reduction services which includes: peer outreach and education (e.g., correct and consistent condom use, sexual health, and empowerment); mass media; condom distribution; counselling and testing; referrals and treatment for sexually transmitted infections (STI); and linkages with care and treatment facilities to be implemented by local partner grantees.

About AED/T-MARC

T-MARC project is a five-year initiative with a mission to contribute to improvements in the health status of Tanzanian families and reduce the transmission and impact of HIV/AIDS managed by AED. T-MARC is forming public-private partnerships in order to develop and expand consumer markets for a broad range of health products (e.g., condoms, contraceptives, diarrheal treatment products, malaria prevention and treatment products, etc.) and promote behavior change that will improve public health. On April 1, 2007, the independent Tanzanian-led and controlled T-MARC Company Ltd (Tanzania Marketing and Communications) took over implementation of the T-MARC project under the supervision of AED. T-MARC Company Ltd. is an independent, Tanzanian-owned and run organization registered in Tanzania as a not-for-profit business.

AED is a non-profit organization working globally to improve education, health, civil society and economic development--the foundation of thriving societies. In collaboration with local and national partners, AED fosters sustainable results through practical, comprehensive approaches to social and economic challenges. AED implements more than 250 programs serving people in all 50 U.S. states and more than 150 countries.



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INTRODUCTION

This Training Guide is part of T-MARC's broader program which will build on the work done in the past to create healthier lives for sex workers, and to reverse the growing numbers of women who are infected with HIV. The first iteration of this Guide will be tested in Tanzania by sex workers who will play an important role in refining the approach over time.

The program is designed especially for sex workers who work in establishments (small bars, hotels, local drink houses) and other services – such as music, food, and drink. We will work with sex workers as wells as owners/managers, clients, current partners/husbands.

This Guide is meant to be used by women who, previously or currently, engage in sex work. These women will be trained in the use of the Guide's methodology and will have shown:

- Interest in being peer leaders on the topic of HIV prevention and personal health;
- A set of natural abilities to gather women in the establishments where they work, and at other sites to encourage them to support each other; and
- Have confidence to use these draft materials and give honest and creative feedback for their revision over time.

Past experiences in Tanzania, as well as successful programs worldwide, put great value on the role of peer leaders. For example, they can be a:

- Credible source of practical information for other sex workers;
- Inspiring and realistic role models for personal care while doing sex work; and
- Reliable leaders in the direction of the overall program and it strategies to reach establishment owners as well as clients of sex workers.

Peer Leader's Goal

Our goal is for one ex-sex worker to team with one current sex worker to implement the sessions of this guide. They will gather groups of women in large establishments, and other sites, at least 10 women per group, and small establishments and sites, of at least 3 women per group.



Reasons to Preparing this Guide

Although study data varies widely, there is no doubt that the risk of HIV and other sexually transmitted diseases is high among sex workers in many places around the world. In Tanzania, adult HIV prevalence is estimated at 6% and HIV surveillance focuses on the general adult population (Preliminary Report of the Tanzania HIV/AIDS and Malaria Indicator Survey). However, evidence suggests that specific populations are at increased risk for HIV infection, including female sex workers (FSW) (Saidi H.Kapiga et al. 409-07). In Mainland Tanzania, some organizations such as T-MARC are embarking on targeting sex workers in HIV prevention efforts in specific high risk areas.

The causes of this risk are complex and the personal knowledge or choices of sex workers are not enough to explain the causes either. Experience shows that sex workers can indeed live healthier and longer lives if they come together to build their knowledge of risks, exchange strategies for protection, support each other to make changes, and encourage others to support them too.

Similar successful efforts in other parts of the world have found that sex workers want:

- Assistance with issues such as identifying difficult or threatening clients;
- Access to free or low cost condoms;
- Opportunities to laugh and have fun while addressing serious issues; and
- Respect for their work as a profession.

Experience from other countries also show that sex workers want and need to pay attention to other issues that they face such as the need for food, shelter and personal safety. Although this Guide does not address these issues head-on, it does intentionally provide solutions to solving similar problems they are facing and also help them to develop self-confidence.

Many sex workers have families (i.e. children) and are concerned about the health of others they interact with. While HIV positive rates among sex workers in urban Tanzania appear to be high, many sex workers do not know their status and some prefer not to know it. This Guide encourages safe behaviors regardless of status. This Guide can be used by peer leaders in a wide number of organizations. We encourage that it be used so we can benefit from what we learn from the sex workers as we go along.



Places for Peer Gathering

This Guide will be field tested in phases in one or two cities or towns, in both large and small establishments selected by the peer leaders themselves.

Due to the competitive nature of their work, sex workers are often challenging to gather in one place. The only way to reach them is to go where they are - to connect over time, individually and in small groups. This Guide is meant to be used with great flexibility by peers who talk with other sex workers one-on-one, or in groups of various sizes, as opportunities arise.

We will initially focus our effort on establishments such as bars, hotels, smaller liquor stores and groceries, and smaller leisurely places where sex workers are found. These establishments will have:

- Supportive environment from owners/managers;
- Male and female condoms available;
- Nearby health facilities of quality services for these women including: HIV pre and post test counseling, testing and STD treatment; and
- Women sex workers whose experience and personality would make them strong peer leaders to direct the project and help design future phases.

Timing for Peer Gathering

Sex workers will be the ones to decide when and how these peer gatherings actually take place. We will consult with the women to determine what makes most sense. The participants can stay longer than the suggested time if they engage in an in-depth and intense discussion. We hope that peer leaders will try out this Guide on different days of the week and at different hours. What works best in one place may not work best elsewhere. The goal is to be flexible and responsive to the women. Peer learning sessions at establishments should only begin after the establishment owners have participated in a session and have offered their support.

Changes We Expect to See After the Sessions

The sessions of this Peer Learning Guide are mainly focused on achieving the following changes among participating women:

- Sex workers will protect themselves through more consistent and correct use of condoms with their clients, partners/boyfriends;
- Sex workers will identify the need for clinic visits and treatment for STDs;



- Sex workers will identify the need for clinic visits and VCT Services;
- Sex workers will be more assertive in their interactions with clients and partners/boyfriends, especially in negotiating condoms use;
- Sex workers will expand their sense of self and their connection to other women co workers;
- Sex workers will avoid risky situations and seek ways to create safer lives for themselves; and
- Sex workers who have made changes to better protect themselves will influence their peers in a positive way to protect themselves as well.

Expected Changes from this Program:

- Sex workers, clients and partners/boyfriends will be more likely to accept consistent and correct male and female condom use with sex workers; and
- Sex workers' clients will use condoms (male or female) consistently and correctly when having sex with other women/wives in order to protect their family.

This Guide focuses on peer learning sessions among sex workers. We hope that the dialogue and action that it encourages among women result in:

- New and stronger networks of sex workers in and across establishments;
- Improved conditions and safety for sex workers, in terms of overall health; and
- Active support of HIV prevention environment by establishment owners and managers through, for example, on-site condom promotion, accessibility and encouragement of sex workers to talk about HIV prevention with clients and family members.

Peer Leaders Note:

According to this schedule, we suggest that you:

- Meet with each group once per week;
- Spend at least one hour up to an hour and half with them per week;
- If you follow this schedule, the group will complete all topics in 3 to 4 months time.
- Go faster or slower than the schedule shown here, depending on how many women are in your group and how involved they get in each topic.



General Notes to Peer Leaders

This Guide is called a Guide because you, and the women in your groups, will decide exactly how it works in your hands. There are a few learning tools that we use which are really important for the success of these sessions. Here are four of them, Self Assessment, Handouts and "Take–Away", Stories and Practice Activities:

- 1. Self Assessments At the opening session, and the final session before celebration, women should complete a self assessment.
- 2. Handouts and "Take-Away"- All of the sessions have materials which you will give out to each woman in the group. Don't wait until the end to give them out. Give them out when we suggest it so that the women can follow along and see the pictures, which help them understand and react to what you are saying.
- 3. Stories Throughout the Guide we give you ideas for stories that capture realistic experiences of workers in their journey from "unhealthy" practices to "more healthy" practices. You can change the stories a little to be most realistic for the women you are with.
- 4. Practice Activities In an effort to be as realistic and practical as possible, this Guide offers ideas for creating and practicing difficult situations. Do not cut this part out. Make sure everyone has time to practice, and to get feedback from the other women, including you.





Topic One:

COMING TOGETHER FOR A PURPOSE

Subtopics:

- 1.1 Getting to Know Each other
- 1.2 A Network of Women around the World
- 1.3 The Reality of HIV in Tanzania
- 1.4 A Better Way to Generating Income and Doing Business
- 1.5 An Opportunity for Ourselves and for Others

Objectives: At the end of this session, we will have:

- Discovered activities happening among sex workers around the world; Compared our interests and needs with those sex workers around the world;
- Described ways to do our work more safely;
- Suggested ways for clients and sex workers to support each other;
- Made a plan to get together and learn together.

Materials

Map of the world, particularly naming 5 countries; Fact sheet about HIV

Time

2 hours

1.1 Getting to Know Each Other

Step One

In pairs, think of two things that people might say when describing you that makes you happy. For example, she's funny, she is tall, etc. Then, share these two things with the woman standing beside you. For example, you may start by asking your partner to tell you what other people call her, her nickname. After few minutes of discussion, make sure you understand each other and move on to the next step.



Step Two

Think of two things that you would say about yourself which other people might not know. For example, you might say I like being a mother, or I believe in God, etc. Talk about these two things again with your partners.

Step Three

In full group, sit in a circle so everyone can see each other.

Tell participants:

One thing people might say about you; One thing you would say about yourself.

Explain to participants:

We don't need to go in any set order around the circle. This isn't like school! Whenever you are ready, introduce yourself to the whole group and share something about yourself with us.

Peer Leaders Note:

Although participant may know each other from before, it will make the session more interesting if they get introduced once again. Make sure everyone gets their turn to introduce themselves.

1.2 Network of Women around the World

Step One

Have everyone sit in a circle so they can see the mini map of the world showing Tanzania and a few other countries.

Step Two

Tell them that you are part of a new program by and for sex workers. We expect this program to grow throughout different parts of Tanzania. This program was built on the successes and life lessons of women around the world who share our profession.

Step Three

Together, read "Places Where Women have Come Together to Support Themselves."



IDEND

<u>**Peer Leaders Note:**</u> It is preferred that a woman volunteer, who is confident to read the story aloud in this section.

Places where Women have Come Together to Protect Themselves

Cameroon

Sex workers met in groups, once-a-week, at bars, brothels, and other places. The women and their clients agreed to use condoms consistently and correctly and could buy the condoms at very low cost. Some of the women also performed dramas to educate clients, and other sex workers, about ways to have "safer sex."

Dominican Republic

Establishment owners encourage sex workers to use condoms consistently and correctly with all clients. Sex workers go every month to a government clinic for a checkup. In some cities, the government charges people and establishments for not using condoms.

The women are able to protect themselves from harm. For example, they will not engage in "unsafe sex", they always use condoms with their clients, and they protect themselves from sexually transmitted diseases.

India

Sex workers have become very active for their human rights. They formed a cooperative to help them save money. They worked to get new clinics built. And now, women are more aware of ways to protect themselves from dangerous situations. For example, going to the clinic, and using a condom, etc. In addition, women actively participate in women's' clubs, learning among themselves, and meeting with government officials, etc.

United States of America (Washington DC)

In the capital city, a van travels around the city at night, stopping in places where sex workers meet clients. The van distributes condoms, and information to help women protect themselves from infections.



Sex workers get together to travel around town by a mini bus. They carry the slogan "Do your work! Do it Right!" and this entails to do it carefully. These women have succeeded in passing useful information to other women. For example, about household chores, violence against women and maternal care etc.

Step Four

Ask participants:

If you could visit any of these programs to see what they doing, which one would you visit? Why?

Peer Leaders Note:

Allow any participant to express their thoughts.

1.3 The Reality of HIV in Tanzania

Step One

Tell participants:

Sex workers around the world are not all the same. We are unique individuals – as women, mothers, daughters, and friends.

- One thing we have in common is that we face risky situations in our work.
- One risk faced by all sex workers around the world is: the risk of an infection called HIV.
- In this session we will take about HIV and many other risks of our work.

Peer Leaders Note:

Say each fact as simply as you can. Feel free to use your own words. Don't scare the women. Just explain the facts for women who might not be aware.



FIVE Facts on the Reality of HIV Infection

- 1. HIV can infect anybody men, women, young, old, rich, poor. Once you have it you can't get rid of it.
- 2. Right now, it is most common among women between the ages of 30-34. People of all ages can have HIV.
- 3. A lot of people still do not fully understand the infection and how it is spread. But the more people know, they are often more careful when having sex.
- Educated or uneducated people can get HIV. It doesn't matter how "educated" or "rich" you are.
- 5. Sex workers can protect themselves against HIV by consistently and correctly using condoms all the time with their clients and partners/boyfriends.

Step Two

Discuss with participants:

What do you think about these "facts" the current situation?

Step Three

Tell participants:

We have an opportunity to change this situation!

Like the women in all these countries around the world, we can lower the risk of any one of us getting infected with HIV, or passing it on to others.

Next, we will talk about the kinds of things that could be done to improve this situation here in Tanzania.

1.4 A Better way to Generating Income and Doing Business

Step One

Divide participants into 3 groups. Group 1: Establishment owners Group 2: Clients Group 3: Sex workers

Tell each group to think of TWO important things that can really help change the situation of HIV in Tanzania.

Peer Leaders Note:

The establishment owner/manager could join this activity to share his or her thoughts about safer sex at their establishment. Invite the establishment owner only if you feel that women will want him/her to express their support. If you are with a small number of participants, just have 1 or 2 women be a "group" in the following activity.



COMING TOGETHER FOR A PURPOSE

Step Two

Let each group talk and discuss about the two important things they think will make a change.

Step Three

A New Way of Doing Business: Ideas

- Establishment Owners Group;
- Supply male and female condoms for low cots;
- Encourage clients to always use condoms at their site;
- Support sex workers to use condoms consistently and correctly with their clients;
- Encourage sex workers to visit health clinics;
- Report any form of violence against the sex workers.

Clients Group

- Carry condoms whenever they come looking for services;
- Use condoms consistently and correctly every time they engage in sex;
- Come to establishments that are "safe" so that they don't take an infection home with them.

Sex workers Group

- Pay attention to signs of infections and go to the clinic for checkups;
- Negotiate different ways to have safe sex with different clients;
- Use condoms (male and female) consistently and correctly so that we don't get HIV or any other infections we can prevent.

Step Four

Explain that the new way of doing business will take all of us working together: owners/managers, clients and sex workers. Next, we will talk about the kinds of things that could be done to improve this situation.

1.5 An Opportunity for Ourselves and for Other

Step One

Tell participants:

It will be good to get together every week for some self-guidance sessions to make these changes happen.

It is best that we honestly discuss topics and be supportive of each other.



Together, we can:

- Hear each other's stories;
- Listen to each other's challenges;
- Celebrate each other's successes in life and work;
- Give each other some honest and loving feedback;
- Encourage each other to make changes, even if they're hard;
- Make sure we are always watching out for our own safety; and
- Come up with creative ideas to get establishment owners and clients to work with us not against us.

Step Two

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Ask participants:

How do you feel about the above suggestions?

Tell participants:

The suggested topics for the next session will take longer to complete. We can finish it in two weeks.

We can spend more or less time depending on participant's interest.

OUR TOPICS

Topic 1: Challenges and Opportunities of our Work
Topic 2: When Illness Hits: Sexually Transmitted Infections
Topic 3: HIV and AIDS
Topic 4: Using Condoms wisely and carefully
Topic 5: Negotiating Safer Sex
Topic 6: Telling our success stories
Topic 7: Recognition and Celebration Step Three

Ask participants:

Which of these Topics do you really like to discuss more? Why?

Step Three

Tell participants:

In about 12-14 weeks (approximately 3-4 months), we will have a small celebration. It is possible for us to become leaders in this powerful effort to do business in a safe manner.

Step Four

Ask participants:

When do you choose to meet for the next session?

How long can we meet to discuss next topic.

Tell participants:

We need about one hour each time to discuss the topics.



Step Five

Decide on the following before leaving:

- Day and time of next session;
- Length of next session.

Step Six

Key Messages: Coming Together for a Purpose

- We are starting something new in Tanzania, built on experiences of sex workers around the world.
- We face a reality of HIV and AIDS in our country which demands our attention.
- We have an opportunity to work together (with establishment owners, clients and other women) to make a big change.
- We can get together to learn, support each other, and become leaders in ways to protect the health of sex workers

Peer Leaders Note:

Review key messages again.

Step Seven

Finish the session with a song or poem or any activity that you all will enjoy; Hand out free condoms to everyone.





Topic Two:

CHALLENGES AND OPPORTUNITIES OF OUR WORK

Subtopics:

- 2.1 Quotes of Sex Workers
- 2.2 True Stories
- 2.3 Self Assessment
- 2.4 Protecting Ourselves and Others

Objectives: By the end of this session:

- Compared our needs and interests to those of female sex workers around the world;
- Describe in details ways in which we can personally protect ourselves;
- Completed a self assessment of personal risk;
- Figured out more things we could do now to start protecting ourselves better.

Materials

Cards with True Stories: Challenges and Opportunities Self assessment sheet: 1 per participant Low – Medium – High Protection Posters

Time

2 hours

Step One

Tell participants:

In the previous session, we introduced ourselves and discussed about the different activities sex workers around the world are engaged in.

By assessing the facts about HIV in Tanzania, we were able to come up with better ways to generating income and means of doing business for ourselves and others. We were also able to find support from others to live healthier lives.

Step Two

Review with participants; let us look back at some of the past activities and talk about some of the ones that we have practically implemented.



Step Three

Tell participants:

Our topic for today will be about the challenges and opportunities we face at work.

2.1 Quotes of Sex Workers

Step One

Tell participants:

Let us listen to two quotes from women here in Tanzania. *Our Quotes:*

- All kinds of men come here, to the bar...illiterates, intellectuals, rich people, poor men, married men, unmarried men, old men, youngsters, adolescents. All kinds of men visit us.
- There are several kinds of men in the bar. Men who have different kinds of behaviors. Men who refuse to pay after thy made sexual relations with us for money...men who refuse to use condom...men who deliberately tear condoms while they slept with us...men with various kinds of behaviors visit us.

Step Two

Ask participants: How do you describe the men that come to you for services?

2.2 True Stories

Step One

Tell participants:

Here are three true, recent, stories told by sex workers here in Tanzania

Peer Leaders Note:

Here are some true stories from sex workers who faced challenges related to their personal safety, consistent and correct condom use, or clinic visits. It is possible to change one of these stories for one of your own and make sure to keep it short and that it has to do directly with one of the three topics: personal safety, consistent and correct condom use, or clinic visits.



True Stories

Breaking In (A story about personal safety)

A guy at a hotel paid 20,000 Tshs. for one time sex and 30,000 Tshs. for the bed. After the first time, he wanted to have sex again. I said no. We started to argue loudly. The owner heard and came to the door but he could not open it. The client yelled and started to hit me. Finally, the owner broke the door and got the police.

New on the Job (A story about condom use)

I am new to the bar and to the business. I am not sure what to do when a client says he will not pay. He said he will pay me more if I did it without a condom. I said no. We started to argue. I screamed which got the attention of a few women in the place. These more experienced women came to the room and yelled at the man, in my defense. They told him that in this place we use condoms – if not, he can leave.

Working sick (A story about clinic visits)

I have been working a lot for many months now. I am tired but keep working because I need the money. I started to see signs that I was ill, but I kept on working because I need to. I tried to hide it from the clients but I couldn't hide it from the other women. They noticed that I was not well and insisted that I go to the clinic. I was not sure but they said I must and one of the women went with me.

Step Two

Confirm:

There are lots of challenges in our work. Here are three examples of things that women have done in other places to try to protect themselves better. Each of these ideas are things women do together to confront challenges of their work.

Step Three

Ideas to confront challenges:



Challenges	Ideas to confront the challenge
Some clients commit violence on sex workers	Women start to keep records of bad experiences. Whenever they encounter bad clients, the immediately start to keep a record of the clients' name and description to pass it on to other women.
Some clients won't use a condom	Women at small liquor stores will unite and agree that all men at the site must consistently and correctly use condoms. The men know that any woman at that work site will demand a condom.
Sex workers who have infections but have not got treatment	Sex workers will support one another to go to the clinic for a checkup as needed

Ask participants:

- What do you think about some of the ideas mentioned to confront these challenges?
- Do you have more ideas or suggestions?
- Is it possible to make them practical in our country?

Step Four

Explain to participants:

Some of us want to get out of sex work. And if need be, we can also talk about challenges and ideas for doing that. But for now, we're going to look at ways on how we can protect ourselves in the work we do now. Next is a personal self assessment.

2.3 Self Assessment

Step One

Explain to participants:

These statements can most likely describe us. The purpose of this activity is to help us see how well we are protecting ourselves now and what more we can do to protect ourselves. We will not show the sheets to anyone. We will do this again in some weeks to see how things change over time.



Peer Leaders Note:

Give each participant a self-assessment sheet and a pen. Read each sentence aloud, slowly, as they follow along Make sure to let them know that their responses are private.

Ask participants:

Do you have any questions?

Step Two

We will read each statement one at a time.

Listen carefully and mark (check) only the statement that you think describes you best. Be honest and put the correct answer accordingly. Ask if any of the statements are unclear.

Peer Leaders Note:

Support each participant to fill out the personal assessment sheet with issues relating to nature of their work and environment.

Tell each participant to set aside the personal risk assessment sheet.

Private Self Assessment Sheet

We will read each statement and mark (X) next to the statements that are true. Be honest. We will not show our answers to others, but we can choose to show it to our friends.

	Personal Safety	Is tl me?	his	true	for
1	I stay at the hotel/bar that I work at when I am with a client				
2	I don't drink if I am out with a client				
3	I don't have sex with clients who have drank too much				
4	I stay away from clients whom I think will endanger me				
	Condom Use				
1	I have talked about condoms with other female sex workers				
2	I sometimes use condoms with my boyfriend				
3	I sometimes use condoms with a client				
4	I always use condoms when I have sex with a client				



5	I always use condoms when I have sex with my	
	boyfriend and a client	
	Clinic visits	
1	I know clinics where I can get services	
2	I have gone to a clinic for sexually transmitted	
	illnesses and treatment	
3	If I get a treatment, I always finish it	
4	I have gone to a clinic for HIV test	
5	I go to the clinic for checkups even if I have no sign	
	of illness	
6	I encourage my lover and other female sex workers	
	to go to the clinic for checkups	

2.4 Protecting Ourselves and Others

Step One

Tell participants to look at the three signs:

1	NOT GOOD PROTECTION	
2	MODERATE PROTECTION	
3	VERY GOOD PROTECTION	

Peer Leaders Note:

Before starting this activity, post three signs at opposite ends of the room. If there is not enough room, put them on the floor or bed or anywhere visible.

Let us look back at our self-assessment sheet:

- Personal Safety
- Condom Use
- Clinic Visit

The more check marks we have on the sheet, the better protection that we have made.

Ask some questions while filling out the assessment sheet:

- How well do you think we can protect ourselves?
- Tell the participants that they can choose and stand anywhere between the three signs. This shows how well we can protect ourselves as a group.



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• Let us assess our views on "not such good protection", "moderate protection" and "very good protection."

Ask participants:

How well do you think we protect ourselves? Why?

Step Two

Explain to participants:

Let us sit again in a circle and find a partner. Tell your partner about how you wish to protect yourself better.

Step Three

Tell participants:

- One of the goals of this session to use the self-assessment sheet to see how we are doing regarding self protection.
- We will see how we can improve our self protection, the changes we see through time and the challenges that get in our way of making improvements.

Step Four

Summarize Key Messages: Challenges and Opportunities of our work

- We can support each other in ways that affect our whole lives not just our sex lives.
- There are things that we already do to protect ourselves from HIV and other risks in our jobs.
- We can all protect ourselves better by paying attention to our personal safety, by consistently and correctly using condoms (male and female) and by frequently visiting clinics.

Step Five

Before leaving, inform them of the topic for the next session. Decide on the day and time of the next session.

Step Six

Finish the session with a song, poem or any activity that you all will enjoy. Hand out free condoms to everyone.





Topic Three:

WHEN ILLNESS HITS: SEXUALLY TRANSMITTED INFECTIONS

Subtopics

- 3.1 Taking Action
- 3.2 Signs and Symptoms of Sexually Transmitted Infections
- 3.3 What to do
- 3.4 Getting Answers to our Questions and Getting Treatment

Objectives: By the end of this session, we will have:

- Dramatized realistic scenarios about women at risk of Sexually Transmitted Infection will be presented
- Decided when a woman should visit a clinic
- Described visible signs and symptoms of Sexually Transmitted Infections,
- Identified places to go for test and treatment
- Practiced giving support in terms of reducing the risk of exposing ourselves and others to STIs

Materials

A sheet of paper listing the signs and symptoms of common Sexually Transmitted Infections

A sheet of paper listing nearby clinics, hours of operation and costs

Visitors

Local clinic representatives are encouraged to come

Time

2 hours

Step One

Explain to participants:

In the last session we did a self assessment about our personal safety, our condom use, and our clinic visits. Now, think about your life since the last time we were together.

Tell participants:

Look at the following three statements.



Personal Safety
Consistent and Correct Condom Use
Clinic Visit

Ask each participant:

Name one thing you have done since we last met in any one of our three areas: Personal Safety, Consistent and Correct Condom Use, and Clinic Visit.

Review with participants:

Now, let us think back to last week's topic. Do we have questions or comments on the topic?

Tell participants:

Our topic for today is "When Illness Hits: Sexually Transmitted Infections."

3.1 Taking Action

Step One

Tell participants to pair up. Each pair must pick stories they can play. One woman in the pair will play the sex worker role and the other plays the friend. The drama should show precisely how one explains her problem and what the other tells her to do.

Five Stories to pick	What her friend should do or tell her
Upendo tells her friendLast week I spent a night with an awful client. I started to worry because I noticed an open sore on his penis. It didn't seem to bother him but I wasn't comfortable with it. I couldn't do anything – we had sex, with no condom.	
Pili tells her friendI've had unpleasant discharge for a while and this month I bled a little between periods. My sister told me to go to the clinic but really I haven't seen any problem. I don't want to spend the money or the time.	



Step Two

Tell each group:

We will watch each scenario and discuss on the following questions:

- What do you think about what the friend did or said?
- How realistic are the scenarios?

3.2 Signs and Symptoms of Sexually Transmitted Infections

Step One

Read to the participants:

All of the women in the stories should go to the clinic because they may have an infection that is quite dangerous. Here is a description of common signs of sexually transmitted infections in men and women.



	Some Common Danger Signs			
On Other Women and Us		On our Clients and Partners		
	Unusual amount or type of discharge from the female vagina	 Discharge from the penis - more yellowish than normal Pain or burning when urinating Skin rash which may not itch Sores with or without pain - around the penis and anus Blisters that come and go (may be infectious even when blisters do not show) Swelling in the groin 		
۶	Sores on and around the reproductive organs			
	reproductive organs			

If you have or see any of the above stated symptoms, it isn't necessarily an infection. You will need to have a checkup at the clinic to be completely certain.

An infection can occur without showing any symptoms either in a man or a woman.

Step Two

Ask participants:

Do you have questions?

Keep note of any questions that can't be answered by anyone in the group. Consult on them with a health expert and come back with the answers before starting the next session.

Step Three

Explain to participants:

There are different types of infections. Names you might hear are: syphilis, gonorrhea, chancroid, chlamydia, and genital herpes, among others.

We do not need to know the specific infections in order to protect ourselves and our family. But it is important to know the common signs and symptoms before seeking treatment. These infections can be quite dangerous if not treated immediately. They can make a body more vulnerable to getting HIV.



What should we do?

- > Pay attention even to mild symptoms
- Go to the clinic as soon as possible, even if symptoms came and went on their own
- > Not to forget to finish a treatment once we start it
- > Tell our partners so that we could all get treatment

Step Four

Review with participants:

Go back to each of the five stories. Each story tells about the common symptoms of infection in Tanzania.

What would you tell the friend now?

3.3 What to Do

Step One

Explain to participants:

In some countries, sex workers get monthly STI checkups at clinics. For example: In Thailand, sex workers are required by law to visit clinics monthly and if they have STIs, the establishment gets fined for not ensuring sex workers are consistently and correctly using condoms. In China, if a client has an STI, he is required to report which establishment he visited. In Gojam, until 1983, it was required by law to provide sex workers with registration cards so they can visit clinics monthly.

Ask participants:

What do you think about these laws that require regular checkups?

Step Two

Peer Leaders Note:

This debate is optional. The objective is:

- To give women a chance to explain their disagreements (for example, doing monthly checkups)
- To validate the different point of views
- Remember, there may be some good reasons for not wanting to do monthly checkups. So let's listen.
- If you do decide to do the debate, you can do it in two groups or, all women together, in pairs
- Tell participants to form two groups.



The first group will argue this point:

"We should all go to the clinic once a month for a checkup whether we don't feel sick or see any symptoms."

The second group with argue this point:

"We shouldn't waste our time or money on clinic visits unless we think we have a problem. This isn't a good experience and can lead to further problems."

Step Three

Ask participants:

What do you think about the costs of visiting a clinic for a checkup and visiting a clinic for treatment?

Step Four

Show and explain to participants:

- We are not thinking of such laws here in Tanzania. But, some sex worker think that yes, it is a good idea and they voluntarily go on a monthly clinic checkups for sexually transmitted infections.
- Now we will do a comparison and see the difference between going for a checkup or treatment before or after we've got symptoms.
- Our focus is not on the actual amount of money we will spend. Instead, we will focus on the time and money we will spend under such circumstances.
- Comparing thoughts: Before participants begin comparing, ask each of them to list out their costs. They may also look at the following table to include all costs necessary.



Costs to a woman who goes to the clinic once a month	Costs to a woman who goes to the clinic when she is ill		
 Costs for checkup (registration card, urine test, womb checkup, blood test) Time spent during checkup Cost for treatment she needs (low because she caught her infection at an earlier stage) Cost for transportation 	 Costs for checkup Cost for transportation Days spent out of work due to the pain/illness Cost for treatment and medication depends on the type and how far along the illness is Costs to the establishment due to missed working days Loss in room/bed rent Loss in alcohol sale 		

Step Five

Explain to participants:

Stop the debate after 5 minutes.

This isn't an easy debate – there are good reasons to go and not to go for monthly clinic checkups.

The best way to decide for yourself is to try it. If you go to the clinic and all is fine, you will feel good!

If you go to the clinic and find out that you have STI, you can get treatment and feel better.

3.4 Getting Answers to our Questions and Getting Treatment

Step One

Review with participants:

The list of services, clinic locations, types of services available, requirement to utilize services and costs.

Ask participants:

What do you think about the above information?

Peer Leaders Note:

If it is possible, try to get a representative from a clinic for this part of the session. If the women meet someone from the clinic they will most likely got there. There will be some questions that these women have and want answered by a health expert. Try not to lose this opportunity to get their questions answered on the spot.



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If the representative from the clinic couldn't come this week, see if they can come another week.

Even if you don't get a clinic representative, spend time reviewing the details about the clinics with all the women.

Step Two

Explain to participants:

Chose one clinic that you think you will be visiting sometime soon. In general, women find it easier to go to the clinic with someone.

Ask participants:

Do we have someone to accompany us to the clinic? When?

Explain to participants:

The purpose of the debate is to hear all the point of views that we and others might have on the topic.

Step Three

Summarize key messages.

Key Messages: When Illness Hits: Sexually Transmitted Infections

- We have jobs that carry high risks of getting sexually transmitted infections.
- Most of us may have sexually transmitted infections that we ignored or we don't know and so we must get treatment.
- Having any one of the sexually transmitted infections increases the chance of getting HIV infection.
- We can get tested and treated at a nearby clinic. The cost is not that much.
- We can support each other to go the clinics and to follow treatments.
- Using condoms consistently and correctly can help us protect ourselves from all sexually transmitted infections.
- We can educate other women about what we've learned.

Step Four

Make sure to decide on the following before leaving: Topic for the next session Day and time for the next session

Peer Leaders Note:

Refer to the follow-up sheet to give the appropriate answers to questions raised.



Step Five

Finish the session with a song, poem or any activity that you all will enjoy. Hand out free condoms to everyone.





Topic Four:

HIV AND AIDS

Subtopics

- 4.1 Negotiating with Clients
- 4.2 HIV: A Hidden Infection
- 4.3 The Difference between HIV and AIDS
- 4.4 A Courageous Person

Objectives: By the end of this session we will have:

- · Practiced negotiating with clients about cost of our services
- Described how HIV spreads within the community
- Distinguished between HIV virus and illnesses of AIDS
- Discovered more about living with the HIV virus or AIDS

Materials

Folded pieces of papers with nothing written inside Folded pieces of papers with message written inside: HIV Pieces of papers to represent money Packets of condoms A sheet of paper stating 7 facts about HIV A sheet of paper stating 7 facts about AIDS

Visitors

If possible, someone living with the virus, especially if she is an ex-sex worker and comfortable to share her story. If not, use the story included for the last activity.

Time

2 hours

Step One

Explain to participants:

Look at these three statements:

Personal Safety
Consistent and Correct Condom Use
Clinic Visits



Encourage all participants to share their successes.

Name one thing you have done since we last met in any one of the three areas: Personal Safety, Consistent and Correct Condom Use, and Clinic Visit.

Step Two

Review with participants:

Let us look back at last week's session. Do you have questions or comments on the topic?

Explain to participants:

Our topic today is "HIV and AIDS."

4.1 Negotiating with Clients

Step One

Ask participants to sit in the seat facing each other.

Peer Leaders Note:

Set up the chairs facing each other in equal-length rows. For example, if you have 10 women, there will be two rows of chairs each. If you have 4 women, there will be two rows of 2 chairs each.

Secretively, tape a condom under one seat in one of the rows.

Ask the participants to act as clients

Give each participant the empty folded pieces of papers. Give one participant a folded piece of paper with HIV written in it. For example, if there are 5 participants, there will be a total of 5 pieces of folded papers, one for each participant.

Explain the following:

One row will act as sex workers and the other row will act as clients. Participants acting as sex workers should be themselves. Others acting as clients should act like real, typical, clients they see in their work.

Step Two

Distribute fake money to all "clients."

Give each client several folded pieces of paper with nothing written inside. One client gets several folded pieces of paper with HIV written on the inside. Each time a client pays a sex worker, he must also give her the folded piece of paper he has.



Step Three

Tell participants:

Every woman will now start to negotiate selling their services to the clients facing them.

If you haven't negotiated prices before, try to think of a way how to this time. Stop the negotiations after 2 minutes.

Every sex worker has the "fake money" and piece of paper they have gotten from the clients. Tell all sex workers not to open the paper.

Step Four

Tell participants:

Every client will start to negotiate, but this time with a different sex worker. Repeat the process until all clients have negotiated and met with all sex workers. In other words, this means until the client who started at the head of the row is back in "his" seat.

Step Five

Discuss with participants:

How was it to negotiate for the cost of services?

Step Six

Ask participants who acted as sex workers to open their folded piece of paper. The paper with "HIV" written in it represents HIV infection. In this activity, you have had sex with someone with the infection but you don't know who. How do you feel about this?

Step Seven

Ask participants who acted as sex workers to look under their seats. The women with condoms under their seat can throw away the paper representing HIV infection because they protected themselves by using one.

Participants will go back to their seats and discuss on the following:

- 1. What did this activity show you about negotiating with clients?
- 2. How does this show the risk of getting HIV?
- 3. Remember, this activity helps participants to realize four important things in their life.



Four Things to Remember

- 1. We can protect ourselves from HIV infection if we consistently and correctly use condoms (male or female) with all clients always.
- 2. There is no way of knowing which client has HIV virus.
- 3. Sex workers living with the HIV are likely to transmit the virus to their clients.
- 4. A newly infected client is likely to transmit the virus to sex workers.

Step Eight

What do you think about these four points?

Step Nine

Conclude by explaining the following:

In the next sessions, we will share more ideas about how to negotiate with clients – not only about money, but also about condom use.

Next, we will look more at the risk of HIV infection in this city, and the way it spreads. You can raise questions before we move on to the next topic.

4.2 HIV: Hidden Infection

Step One

Tell participants:

Many of us already know a lot about HIV infection. We know many people are infected. HIV is a hidden infection. It is not something you can see or feel. As we were able to see from our earlier activity, you can't tell by looking at a client, or by just knowing him, whether or not he is infected with the HIV virus.

Now, we will discuss whether what we know about HIV is true or false. In addition, we will get answers to some of our questions. Tell participants to share with each other what they know about HIV.

Peer Leaders Note:

As each participant is sharing about what they know, read one of the cards that relates in some ways to what they are saying. Explain in your own words what each card contains. Use the cards to clarify or confirm what the participants know.



Seven Facts We Know about HIV

- 1. Anyone can get the virus any time blood or body fluids are exchanged. This means regardless of whether it is vaginal sex, anal sex or oral sex; you are at risk. The man doesn't need to ejaculate - infection can happen through little bits of blood or fluid we cannot see or feel.
- 2. HIV can be transferred from mother to child during pregnancy, at birth, or when breast feeding.
- 3. There is no vaccination for HIV. The only way to protect ourselves during sex is to consistently and correctly use a male or female condom.
- 4. HIV is not transmitted though eating together, sharing dishes, toilets and clothes, shaking hands or working with a person that has the virus.
- 5. HIV weakens the body slowly so a person may live with the virus and not show signs for a long time.
- 6. People can live for a long time without knowing that they are infected with HIV and they can feel extremely healthy too.
- 7. HIV positive people can live for years; they should practice safe sex to protect themselves from getting infected with another type of HIV and their partner from contracting the virus.

Step Two

Ask participants:

Ask each participant their views and thoughts about the above mentioned facts about HIV. Ask if anyone has questions.

Step Three

Tell participants:

Let us review the cards one more time.

Think of someone you know – a friend or a family member who you think should know about these facts about HIV. Pick one statement about HIV that we wish to tell them.

Ask participants:

Which statement did you choose to tell that someone? Tell other participants why you chose that statement.



4.3 The Difference between HIV and AIDS

Step One

Explain to participants:

So far, we've talked about HIV, which is an infection that might show no symptoms. Now, we'll talk about AIDS which is what happens if the HIV infection weakens the body.

We will see how this happens by doing an activity knowing as "birds."

Peer Leaders Note:

Follow the instructions. If the number of participants is small, you can still do this activity with four people (one baby bird, two big birds - "protectors" and one bird of prey to begin).

The big birds should stand very close to the nest to protect the baby bird. You might show how to be a bird of prey by trying to reach the baby bird.

Step Two

Ask participants:

- 1. Ask one volunteer to stand in front of the room. This person will represent the baby bird.
- 2. Ask a few others in the group to represent the bigger birds. Their job is to protect the baby in the nest and will therefore form a circle and join hands around the nest.
- 3. Ask for more volunteers to be the birds of prey. Their job will be to get to the baby bird by attacking the bigger birds protecting it.
- 4. When you hear the word 'Go' the birds of prey will try to reach the baby bird.

Peer Leaders Note:

Let this go on for about 15 minutes – until the baby bird has had at least one contact with a bird of prey.

Step Three

Repeat this activity again. And this time turn most of the bigger birds into birds of prey. It will be much harder to protect the baby bird.

Peer Leaders Note:

Let this go on for about 15 minutes – until the baby bird has had at least two to three contacts with the birds of prey.



Ask participants:

What did you observe from this activity?

Explain to participants:

We all represent the baby bird inside the nest. When our body is strong it will protect its self from all kinds of illnesses on its own. Even if we get ill we will recover easily.

When our body becomes weak from illnesses, it can't defend itself well. As a result it becomes weak.

Invite participants:

Tell participants to exchange information they know about AIDS with one another. And then, read "The Seven Facts We Know about AIDS" cards.

	Seven Facts We Know about AIDS
1.	AIDS is not an illness but AIDS makes our body become too weak to fight infections and it becomes difficult for our body to protect itself from the infections.
2.	Some of the most common illnesses that hit people with AIDS are sexually transmitted infections (STI), tuberculosis, and diarrhea.
3.	Many people can have STI, tuberculosis and diarrhea without having AIDS.
4.	People with AIDS can die from illnesses and people may die while still young.
5.	When a person with HIV develops AIDS, they may lose weight and develop skin rashes or blisters. But, even if you see these signs, you can't know if the person has AIDS as these could be caused by other illnesses.
6.	There is no cure for AIDS; but there are drugs called antiretroviral treatment (ART) that can strengthen an AIDS patient's immune system. ART is now available in cities throughout Tanzania.
7.	An AIDS patient must take ART for the rest of his/her life once they start taking the medicine. A person taking ART must be monitored by a medical professional.

Ask participants:

What surprises you?

What more do you want to know about?



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Step Five

Tell participants:

There are many things that a person with HIV can do to help keep healthy. S/ he can also do more to protect her/himself against the progression of AIDS. In the coming sessions, we will talk about whether or not to get an HIV test, and what to do if you are HIV positive.

Now, we're going to look at what it might be like to live with the virus.

4.4 Courageous person - People Living with HIV or AIDS

Step One

Explain to participants:

People living with the HIV virus often do not want other people to know that they have it. In fact, a lot of people do not know if they have the virus themselves since the only way to find out is by taking the test. However, some people make sure that others know that they're living with the HIV virus so that they can stay protected and also encourage them to take good care of themselves. These are truly HIV positive role models.

Peer Leaders Note:

For this activity, it is good to have a visitor who is living with the virus. Don't worry if you can't find any. Instead, tell a true story of someone living with the virus and invite participants to discuss on it.

Step Two

Invite the visitor (Option One):

Invite the visitor – who is living with HIV or AIDS, to come forth and share her life story. As you listen to her story, think of questions that you might have. For example, becoming infected with the virus, how to stay protected or how to stay as healthy as possible once infected.

The visitor's story includes:

- Ideas on HIV testing –advantages and disadvantages of knowing ones status
- Opinion on living with HIV how to take best care of oneself
- Opinion on antiretroviral pills (ART)
- Opinion on stigma and discrimination

A story about a girl living with HIV (Option Two):

The story we're about to tell you is about a sex worker who found out she is HIV positive. She lives in Arusha. As you listen to her story, think of questions that you might have. For example, how to protect oneself from the virus and how to stay as healthy as possible once infected.



Peer Leaders Note:

Read the story about the girl who is living with HIV or AIDS. Ask participants: What was more memorable thing we observed from this story? What will you share with others? What more would you like to know in this regard?

Step Three

Summarize key messages.

Key messages: HIV and AIDS

- We negotiate with clients all the time and we are good at it.
- HIV is an infection, like some other sexually transmitted infections, that can't be seen. A lot people don't even know that they have HIV. The only way to know is getting tested.
- If we use condoms correctly all the time, we can stay protected from HIV.
- HIV is an infection that can lead to AIDS when a person often gets very ill.
- People living with HIV or AIDS can do things to help themselves stay healthier.
- There is no cure for HIV or AIDS.

Step Four

Before leaving, make sure to decide for the next session: Day and time for the next session Length of the next session

Peer Leaders Note:

Refer to the follow-up sheet to give the appropriate answers to questions raised.

Step Five

Finish the session with a song, poem or any activity that you all will enjoy. Hand out free condoms to everyone.





Topic Five:

USING CONDOMS WISELY AND CAREFULLY

Subtopics:

- 5.1 Low Cost Condoms
- 5.2 Using a Condom Wisely and Safely
- 5.3 Using a Female Condom Wisely and Safely
- 5.4 Using Condoms with Different People
- 5.5 Making Decisions

Objectives: By the end of this session we will have:

- · Identified which condoms we're likely to use
- Practiced putting on and off male and female condoms
- Practiced putting on and off condoms creatively
- Decided who we want to start using condoms with consistently and correctly

Materials

Five full sets of different types of condoms, male and female Free male and female condoms

(Model) wooden penis and pelvic model

An instruction describing how to put a male condom on and off

An instruction describing how to put a female condom on and off

Time

2 hours

Step One

Explain to participants:

Look at these three statements

Personal Safety

Consistent / Correct Condom(male and female) Use

Clinic Visits

Ask all participants:

Name one thing you have done since we last met in any one of the three areas: Personal Safety, Consistent and Correct Condom) male and female) Use, and Clinic Visits.



Step Two

Review with participants:

Let's look back at last week's session. Do you have questions or comments? Today's topic is "Using Condoms Wisely and Correctly."



5.1 Low Cost Condoms

Step One

Review with participants:

Correct or add more information on the following. Mention other types of condom if you know any.

Peer Leaders Note:

To make this activity more fun, hide male and female condoms around the room before starting the activity. During the discussion, make sure all female participants have gotten five different set of condoms: Dume, Salama, Raha, Lifeguard, Kamasutra, Durex, Familia and RoughRider as well as Lady Pepeta female condoms.

Encourage two participants to say the following:

- Which condoms they are familiar with, they've used and what they know about them
- What sex workers and clients say about the condoms



Name of Condom	Cost and Where to Get It
Dume condoms	Tshs 100 Pharmacies, supermarkets, small shops, bars, guesthouses
Lady Pepeta Female condom	Tshs100 Pharmacies, supermarkets, small shops, bars, guesthouses
Salama	Tshs 100 Pharmacies, supermarkets, small shops, bars, guesthouses
Durex	Tshs 2,000 Pharmacies, supermarkets
Rough Rider	Tshs 1,000 Pharmacies, supermarkets
Familia	Tshs 300 Pharmacies, supermarkets, small shops,
Kamasutra	Tshs 1,000 Pharmacies, supermarkets

Before we move on to the next issue, there are two important things to note.

- All of these condoms have proven quality and standards. All are equally strong to protecting us against infection if used correctly.
- All of these condoms are lubricated and therefore are easy to use.

What more information do you have about any of these condoms?

5.2 Using a Condom Wisely and Safely

Step One

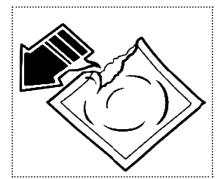
Slowly read all the instructions for putting on and off of a condom. One volunteer can demonstrate each step as you read: FIVE steps to putting a condom on and off.



Peer Leaders Note:

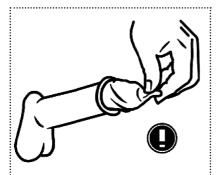
Make sure the women know they can take free condoms at the end of the session so they don't worry about wasting any condoms during the practice sessions.

If no one is willing to demonstrate at first, you can go ahead. Encourage all the women to practice even if they say they know how to do it. Do not tell them the 5steps to putting on and off of a condom. After listening to them talk, you might want to add your own thoughts – showing what they did that was safe and what they might have forgotten which is important.



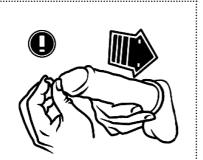
ONE

Look at the expiry date or make sure the package is air-tight before opening. Carefully tear the package open. Make sure the condom doesn't tear while opening the package.



TWO

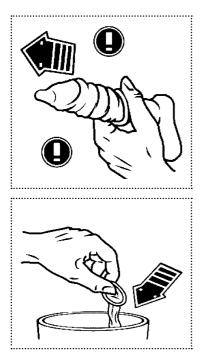
Put the condom on the erect penis. Hold on to the tip of the condom until finished rolling in the condom.



THREE

Pinch the tip of the condom and unroll it slowly over the erect penis down to the base. If the condom slips use another condom.





FOUR

After sexual intercourse, hold on to the base of the condom and roll out the condom while the penis is still erect. Make sure the penis and the used condom does not come in contact with the female's genitals or body.

FIVE

Knot the used condom and dispose it in a dustbin. Do not throw the condom in the toilet.

Ask participants:

In our earlier practices, which one of these steps did we do correctly? What did we forget?

Which one of these steps do you think doesn't apply to you? Why?

Step Two

We will form pairs to have a quick competition. Every pair takes an extra free condom.

Explain to participants:

Imagine you have to put this condom on a client who isn't sure he wants you to use it.

Think of a creative way to put on and take off the condom.

Any pair that feels ready can go first

All pairs must show creative ways to put on and take off the condom

The most creative pair will be awarded!

Ask participants:

What creative and easy ways of putting on and off of a condom did we observe





Step Three

Explain to participants:

Next we will talk about using condoms with different people and what to do to make it easier. But, before we do, lets us read some common questions and answers with regards to condoms.

Questions	Answers
What do I do if a condom breaks during sex?	Don't panic! Go into the bathroom and try to squeeze the semen out (if it is anal sex, squeeze like you are going to the bathroom). Don't try to douche – it can further push the semen up.
What can I do to stop a condom from breaking or from slipping off?	 Condoms can sometimes break or slip off. Some women say that some clients do it purposely. What you can do is: 1. Check the quality and type of condom and make sure its fine. 2. Take more condoms with you 3. Don't use Vaseline or any type of oil or petroleum-based products as a lubricant because they harbor bacteria and can cause the breakdown of the latex in condoms. Instead use water-based personal lubrication like K-Y Jelly, Astroglide, Aqualube, etc.
How can I perform a safe oral sex?	You can try using flavored condoms.

What do you think about the advices/answers given here? What more advice or answers do you have?

5.3 Using a Female Condom Wisely and Safely

Peer Leaders Note:

We will now focus on the female condom. Explain that the female condom is a thin sheath or pouch worn by a woman during sex. It entirely lines the vagina and helps to prevent pregnancy and sexually transmitted infections STI, including HIV. In Tanzania, a prominent one is Lady Pepeta Female condom. Have enough samples of Lady Pepeta female condom for all the women to familiarize themselves with Lady Pepeta. Tell them they will also get free female condoms at the end of the session.







Ask all participants:

Have you ever seen a Lady Pepeta Female condom ?

What do you know about it?

What do sex workers and clients say about using Lady Pepeta Female Condom?

Peer Leader Notes:

If no one is willing to demonstrate at first, you can go ahead. You should *fully* demonstrate how to use a Lady Pepeta Female Condom using the pelvic model, if it is available; and have everyone practice, to assure they feel confident in using a female condom. If you cannot find pelvic models, you can easily use your hand OR cut out the bottom of a plastic bottle so you can see the condom ring on the outside with the rest hanging down on the inside. If you don't have penis models, feel free to use a banana or other similar shaped object.

Step One

Watch this demonstration of how to use a female condom. Follow along with the instructions steps on your sheet (if you choose to give these out).



How to use a female condom How to start

Step 1: Open the female condom package carefully by tearing at the notch on the top of the package. Do not use scissors or a knife to open, as you may pierce the condom.
Step 2: The condom looks like a very large male condom with 2 rings in it: the outer ring covers the area around the opening



of the vagina, and the inner ring is used to place the condom in the vagina. It also holds the condom in place while you are having sex.

- Step 3: While holding the female condom at the closed end, grasp the flexible inner ring and squeeze it with your thumb and second finger so it becomes long and narrow.
- Step 4:Choose a position that is comfortable for inserting the condom
– squat, raise one leg, sit or lie down.
- Step 5: Gently insert the inner ring into the vagina. Feel the inner ring go up and move into place.
 - Step 6: Place the index finger on the inside of the condom and push the inner ring up as far as it will go. Be sure the sheath is <u>not</u> <u>twisted</u>. The outer ring should remain on the <u>outside</u> of the vagina.

Step 7: The female condom is now in place and you are ready for sex.
Step 8: When you are finished inserting your female condom, gently guide your partner's penis into the opening with your hand to make sure that it enters properly – be sure that the penis is not entering on the side, between the sheath and the vaginal wall.

How to finish

Step 9:	To remove the female condom, twist the outer ring and gently pull the condom out.
Step 10:	Wrap the condom in the package or in some tissue and throw it in the garbage. Do not put it into the toilet.

What questions or concerns do you have?



Step Two

With a partner, practice putting a female condom on a pelvic model. Each person should try it (at least) once.

What surprised you about using a female condom? What was most difficult for you?

Step Three

Explain to participants:

Now we will talk about using female condoms with clients but before doing that, let us read some common questions and answers with regards to the female condom.

Questions	Answers
How many hours before having sex can I insert a female condom?	The FC female condom can be inserted up to 8 hours before intercourse so as not to interfere with the moment.
Can I use the female condom for anal sex?	Some people use the female condom for anal sex. Although it can work effectively, it is difficult to use and can be painful. There is also the risk of rectal bleeding which increases the risk of contracting HIV. So it's better to use the male condom for anal sex with plenty of lubricant NOT containing Nonoxynol 9.
Can I reuse a female condom?	It is recommended that the female condom be used only once.

What are other challenges when using a female condom?

- The outer ring or frame is visible outside the vagina, which can make some women feel self-conscious
- The female condoms can make noises during intercourse (adding more lubricant can lessen this problem).
- Some women find the female condom hard to insert and to remove.
- It has a higher failure rate in preventing pregnancy than non-barrier methods such as the pill.
- It is relatively expensive and relatively limited in availability.



Step Four

We will form pairs to have a quick competition. Every pair takes an extra free Lady Pepeta female condom.

Explain to participants:

Imagine you want to use this condom with a client who isn't sure he wants you to use it.

How might you communicate with your clients, boyfriend or husband about the use of the female condom?

Think of a creative way to discuss the use of a female condom:

Whichever pair feels ready goes first

All pairs must show creative ways to talk about using a female condom

What ideas did you get after seeing the other participants discuss and use a female condom?

5.4 Using Condoms with Different People

Step One

Tell participants:

Now we will listen to a story about a woman who has protected herself from infections.

Tina has been working at a hotel and restaurant for a while. She had a baby to care for and a boyfriend who didn't give her any money. She started off on the early shift – as a waitress, cleaning and serving. After a while she started seeing some of the customers as clients, after work hours. After a while she got some infections that must have been from the sex, so she started to use condoms with new the clients. Eventually she left the daytime shift and just worked nights – she got no monthly pay but got a room and breakfast and made some good money from the clients. Her boyfriend probably knew what she was doing but they never talked about it. As long as she brought some money home, he didn't make her stop. She kept using condoms with the new clients but her old clients never wanted to. Sometimes a new client was not agreeable so she just had to do it without. She needed the money.

- Who do you think she should use the condom with? Why?
- What would you tell Siti about using a female condom?
- How well did she do in terms of protecting herself? Why?

Step Two

Ask participants:

Participants will form pairs and each pair will take cards describing a type of



client and partner. They will think about whether they should use condoms or female condoms with the type of client or partner mentioned.

Ask participants the following after describing the type of client and partner.

- How is it to use a condom (male or female) with this individual?
- Why wasn't it easy?

New Client:

This client is just passing through the city. He had a lot to drink and bought you drinks too. Now he wants to take a room with you.

Regular Client:

This is one of your regular clients. You've never used a condom with him. He has mentioned before that he didn't like using any.

Boyfriend/Husband:

This is your lover and partner. He knows that you are a sex worker. You've never mentioned using a condom with him. If you do he may become suspicious and doubtful of you.

Co-worker:

This guy works as the bouncer at the bar you're working at. You've been watching him too. And today, he's got his eyes on you. You're happy. You're certain that he doesn't use condoms.

Step Three

Invite participants:

Here's what one sex worker from another country said. Do we agree or disagree with what she is saying?

Do you think it's safe to have an unprotected oral sex without an ejaculation with a boyfriend? Does that protect you from HIV? This doesn't occur to us while we're at work. Just think of other diseases. And at work, never trust clients who promise about anything – especially when they say they will not ejaculate.

5.5 Making Decisions

Step One

Ask participants:

In your mind, think of men that you'll be having sex with in the near future.

- New clients
- Regular clients
- Boyfriend/Husband
- Co-worker



Decide on your own:

Identify who you never used a condom with and you'd like to try using now. How do you think they'll react?

Step Two

Invite participants:

Two volunteers will read and act out the story about using condoms with men who get "active".

Two Women Talking

Woman #1: He didn't hesitate to using a condom. But I swear, I thought the condom was going to break because he was thrusting too much and it took him too long to finish.

Woman #2: Oh, yeah, I know those types. I just hold on to the condom at the base along with his penis and it doesn't slip.

Woman #1: Really? I didn't think you could do that.

Woman #2: Yes, you can. And he'll be busy anyway. I check every now and then if the condom is still on. I am not going to all that trouble putting it on if he's going to knock it off before coming.

Woman #1: <Laughing> Okay, tell me about positions. Do you always use condoms in any position?

Woman #2: No, I don't for some of the positions, because there are some where I don't feel very much in control. It's harder to do with some men, that's for sure.

Ask participants:

- What is it like to use a condom with difficult men?
- What ideas do you have to using condoms in difficult situations?

Step Three

Review with participants:

In the next session we will practice on how to negotiate with clients who threaten and use hard words when it comes to using a condom.

Remember:

- Your Safety Comes First!
- Be careful -- if you think a man might hurt you for insisting on using a condom.

Step Four

In your own words, summarize the key messages.

Key Messages: Using condoms creatively

- There are different types of condoms some are free and some are cheap. Alternating and using different types of condoms with different clients can make it better or easier. Experiment using both male and female condoms.
- Be careful while putting on and off the condom so you know you are fully protected.
- There are creative and easier ways to put condoms on and off people who are reluctant to use any.
- It is best to consistently and correctly use a condom with all clients new or regular, as well as with our partners and co-workers.
- Our safety comes first. Be careful if you think a man might hurt you for insisting on using a condom.

Step Five

Make sure to decide on the following before leaving: Topic for the next session Day and time for the next session

Step Six

Finish the session with a song, poem or any activity that you all will enjoy. Hand out free condoms to everyone.





Topic Six:

NEGOTIATING SAFER SEX

Subtopics:

- 6.1 Avoiding Unsafe Situations
- 6.2 Negotiating with Clients, Partners, and Friends
- 6.3 Safe Sex Choices
- 6.4 Talking to Men about Safer Sex

Objectives: By the end of this session, we will have:

- Demonstrated how to avoid unsafe situations
- Described ways to negotiate with clients, partners and friends about sex
- Selected different kinds of sexual activities to our clients' preferences
- Practiced talking with men about safe sex

Materials

Information describing four risky situations Information indicating the types of sexual activities and different levels of risks

Time

2 hours

Step One

Explain to participants:

Look at these three statements:

Personal Safety

Consistent & Correct Condom (male and female)Use

Clinic Visits

Explain to each woman one by one:

Name one thing you have done since we last met in any one of the three areas: Personal Safety, Consistent and Correct Condom Use (male and female), and Clinic Visits.

Step Two

Review with participants:

Let us look back at the previous session. Do you've any questions or comments?

Our topic today is "Negotiating Safer Sex".



6.1 Avoiding Unsafe Situations

Peer Leaders Note:

Divide the group into pairs and give each group a story about sex workers to read and discuss. You could have each group present the stories in a role play or in another way.

Step One

Explain to participants:

We will begin by reading some true stories that reflect the different unsafe situations dealt by sex workers. We will have a discussion after each story.

Unsafe Situations

Scenario One

Amina is a 17 year old girl working in a hotel. She was invited by a client for a drink. He kept ordering drinks for her and she kept on drinking. Finally he took her to his room. Although she was drunk she asked him to put a condom on. The client seeing that Amina was too drunk to know if he put a condom on, lied and said that he was wearing one.

What could Amina have done to protect her own safety?

Scenario Two

Upendo is a 20 year old girl working at a bar. She is new to the business. She is listening to the radio and hears that female condoms prevent pregnancy, STIs and HIV. She got scared but later decides to ask the establishment owner if it's a good idea for her to start using female condoms. The owner explains she doesn't have time to discuss this and that condoms bring bad luck to business.

What could Upendo have done to protect her own safety?

Scenario Three

A client offer to pay Tunu 30,000 Tshs if they have sex without a condom. She tells him that it would be wise to use a condom for his personal health. But the client insists and tells her that he will give her 50,000 Tshs. Although she knows that having sex without a condoms puts her at risk, she got persuaded by the man's assurances that he is a family man. And besides, no one has offered her 50,000 Tshs before so she agrees to have sex with him without a condom.

What could Tunu have done to protect her own safety?

Scenario Four

Pili and a client are having a discussion about using condoms. The client doesn't want to use any but Pili insists that he does. He agrees to use one but later she realized that he wasn't wearing any. She suggests that he puts on another condom and the clients gets very angry and starts yelling at her.

What could Pili have done to protect her own safety?

6.2 Negotiating with Clients, Partners and Friends

Step One

Review the list of tips to negotiating safer sex.

Five Important Tips for Negotiating Safer Sex

- 1. Have male and female condoms in place in case a client doesn't have one with him.
- 2. Do not drink too much or use drugs so you can stay in control and so you are safe.
- 3. Take time to discuss using condoms before the client starts warming up to have sex.
- 4. Use creative ways to putting a condom on a client. Be completely immersed in to your emotions when you do.
- 5. Keep the condoms nearby so you can reach for them without breaking the clients mood.

Discuss with participants:

What do think about the above tips? What other important tips do you have in mind?

Step Two

Explain to participants:

These tips come in handy when negotiating with partners, friends, coworkers or anyone with whom you might have sex with. Different men have different preference to sex and so it will require having different convincing skills.

Explain to participants:

Form teams of two

In pairs, think of men that you've had sex with.



Each team will think of a man they might have sex with. They will exchange their view on what they will do to convince that man to use a condom. Here are some clients and some ideas to convincing them. After reading these ideas listen to what each group have to say.

Type of Man and What You Should Do	Things You Might Say or Do to Convince Him
If he is a regular customer, appeal to his kind side	 You're my number one choice and I want us both to be protected. Let's just give it a try, my love.
If it's a client who is looking for respect, make him feel powerful	 You have the power to keep us both healthy. You'll make it pleasurable for me if you use a condom. My happiness is yours.
If it's a client who is adventurous, use new and different ways	 I'll try any position you like if you use a condom. My love will pull us through with no worries
If the client is a family man, remember the family that he loves	• If we use a condom, it will help protect your wife and kids from any infections

Ask participants:

Do you have any other convincing thoughts?

Do you know of other people with different behaviors apart from the ones mentioned above?

Step Three

Tell participants:

In pairs, think of a client or a personal sex partner. One of you will be yourself and the other will be the partner/client. Create a drama showing how you'd get them to use a condom.

What will we say to the partner/client? Support each pair.



6.3 Safe Sex Choices

Step One

Explain to participants:

We've talked about using condoms correctly and consistently because:

- Too many women are becoming infected with HIV and other sexually transmitted infections;
- We must find a solution to this problem;
- Using condoms consistently and correctly is the only way to stay safe when doing most sexual activities.
- But there are some sexual activities men like that do run the risk of getting an infection.
- Classify some of the sexual activities that you know in to high, medium or low level of risk to infections.
- Compare your ideas with these examples of sexual activities.

Sex Activities at Three Levels of Risk

No Risk: No Condom Needed

- Erotic talk
- Caressing body
- Dressing up sexy and having sexual fantasies
- Stroking
- Touching each other's genitals
- Masturbating
- Watching pornographic films
- Phone sex

Possible Risk : Need Special Care

- Deep kissing
- Using sex toys or anything that goes up the female's genitals

High Risk: Need to use a Condom Consistently and Correctly

- Masturbating with each other's help
- Rubbing private parts against each other's bodies
- Rubbing the penis against the female's legs/thighs
- Having sex in the female's vagina
- Having sex in the female's anus
- Sucking on the penis and licking the female's genitals

Step Two

Explain to participants:



Some sexual activities become low risk if done carefully. Follow the guidelines:

Sex Act with Possible Risk	What to Do
Deep kissing	The chance of infection through saliva is low. But, if either of you have an open cut or sore, you should stop kissing.
Sexual intercourse done using sex toys into the female's genitals	HIV can spread through different things. It is wise to wash or not to share toys.

Remember! Sex always has risks – especially anal sex. Therefore, it is important to use a condom consistently and correctly, and carefully when putting it on and off as well.

Do you have questions?

Step Three

Tell participants to imagine the following thoughts.

- Three categories of risk involved activities which might excite and satisfy men enough to get them to consistently and correctly use a condom.
- Which activities do you think might help get men to use a condom?
- How will you encourage the use a condom in all of these different activities?

Participants may share their thoughts with everyone or keep it to themselves.

6.4 Talking about Safe Sex with Men

Step One

Explain to participants:

We are going to do something called "STOP ACTION" drama where we can all get involved in creating a realistic drama where a woman tries to talk a man into safe sex.

Invite participants:

We will read the story. Two volunteers will predict how the story will end.

- At any time, a participant can stop the drama and take the place of the woman in the story.
- After stopping and replacing the woman in the story, the ending will be as we predicted earlier in our minds.



• Keep going until the story has an ending where it's safe and realistic.

Do you have questions?

Next, we will see how the stories start. Let's try to do the first one and see what happens.

Scenario 1

Daudi has been Tunu's client for a while. He tells her how beautiful she is and how much he loves her. Tunu starts to have sex with him for free. Eventually she falls in love with him. She starts to have sex without a condom. Tunu's friend tells her that she has seen Daudi with another woman. Tunu wants to use a condom until she finds out for sure that he is cheating on her. One night she sees what Daudi was doing.

• What happens next?

Scenario 2

IPENDE

A rich man comes to the bar where Mwajuma works. During his stay at the bar he often talks with Mwajuma. Today he started to tell her about his sad life. He ordered her drinks and asked her to spend the night with him. They negotiate price and condom use. He takes her to his house and tells her more sad stories. She really feels sorry for him. Now that he sees how bad she is feeling for him he tells her that he wants to have sex without a condom.

• What happens next?

Scenario 3

Fatuma who is a sex worker happen to see a Lady Pepeta promotion in a bar in which she operates from. The peer educator has told her that she can put on the female condom up to 8 hours before intercourse. She is curious to use the condom. The following day, she prepares herself to go to work and puts on the condom. She meets her regular client Musa, who is in a good mood but is also intoxicated. They go to a guest house with Musa insisting that he wants to have sex without using a condom.

Discuss the following after finishing the three scenarios: What do you think about the women who did well in having protected sex?

Step Two

Key Messages: Negotiating Safer Sex

We are good negotiators since we always negotiate with our clients.

We need different persuasive methods with men to make sure we use condoms.



There are risk free sexual activities that we can use. We can build each other's skills and confidence to negotiate safe sex.

Step Three

Before leaving: Decide on the topic for the next session Decide on the date and time of the next session

Step Four

Finish the session with a song, or poem or any activity that you all will enjoy. Hand out free condoms to everyone.





Topic Seven:

TELLING OUR SUCCESS STORIES

Subtopics:

- 7.1 True Stories from Our Own Lives
- 7.2 Challenges, Opportunities and Ideas for the Future
- 7.3 Self Assessment: Personal Progress
- 7.4 Getting Support from Clients and Establishments Owners

Objectives: By the end of this session we will have:

- Celebrated our success stories
- Compared the current risk we're facing with the one we had at the beginning
- Described the type of support that we need and ideas to generating these support
- Decided on what we want to do as a group to build our own safety and to reach clients and establishment owners

Materials

Self Assessment Sheets Posters indicating High, Medium and Low Risks Cards with ideas on how to gain support of establishment owners Cards with ideas on how to gain support of clients

Time

1 hour

Peer Leaders Note:

This final session gives women a chance to reassess themselves on these three areas: Personal Safety, Consistent and Correct Condom Use, and Clinic Visits.

In this final session, make sure women feel comfortable to still tell honestly what they are and aren't doing for themselves. Take notes using the women's own words from their stories. These may be presented as quotes at the celebration.

What are some useful tips to performing safe sex?

What different methods do you have in mind to have different clients use a condom?

Our topic for today is "Talking About our Success Stories".



7.1 True Stories from Our Own Lives

Step One

Let us sit close and form a circle.

Tell participants:

Our topic today is on success stories.

Each of us will be given a chance to tell a story we are proud of. We will also be able to realize what we are struggling with ourselves.

We're all humans and cannot fully take care of our health. And therefore, we will all be honest in telling and giving advice to one another on what we didn't succeed in achieving as we had planned to.

Invite participants:

While seated in a circle, we will pass on a piece of paper and the person who finally gets it will begin telling her personal life story.

When it is our turn, we will tell our personal life story and what we will do to best protect our health.

Step Two

Ask participants:

Think of women who're not in this circle.

What women do you know who could protect themselves better?

Do you have some ways you would like to encourage them to use to better protect themselves?

Ways to Protect Ourselves:

Personal Safety

Consistent & Correct Condom (male or female) Use

Clinic Visits

7.2 Challenges, Opportunities and Ideas for the Future

Step One

Explain to participants:

So far, we have been discussing about how a female sex worker can protect herself. However, women all around the world, working as sex workers have come together to protect themselves.

And together, we will go over the different attempts that these women have made to overcome some of the challenges they've faced.



Peer Leaders Note:

List out some of the challenges and visions you've talked about from either one of the previous sessions. Make sure to post the list inside the room so everyone can see.

	Three Challenges	Ideas to Confront the Challenges
Challenge No.1 Personal Safety	Some clients are violent	Women should keep a record of 'bad clients'. Whenever a woman has trouble with a dangerous client, she should record his name description. And this can be a warning for other women.
Challenge No.2 Consistent and Correct Condom Use Male or Female	Some clients who refuse to use a condom	Women unite and agree that all men that come to the site must all use condoms consistently and correctly. And so all the men know that any woman they find there will demand a condom.
Challenge No. 3 Clinic Visits	Women who are infected but who will not get treated	Women support each other to go for checkups to the clinic.

Which of these ideas have you tried?

What more ideas do you have to overcome your challenges together?

7.3 Self Assessment: Personal Progress

Step One

Many of us have made some progress since we last did our personal self assessment.

Again, we will assess some of our challenges and the changes that we can make

Remember:



- The sheet contains statements that might describe you.
- We will read through each statement slowly and think about them.
- Mark (check) only the statement that you think describes you best.
- Be completely honest and ask if you have question.
- You may keep the sheet to yourself if you want.

Peer Leaders Note:

Read every statement on the sheet aloud. Make sure that they know that their answers are for themselves.

Personal Self Assessment Sheet

We will read each statement and mark (X) next to the statements that are true. Let us be honest. We will not show our answers to others. But we can choose to show it to our friends.

	Personal Safety	Is this me?	true	for
1	I stay at the hotel/bar that I work at when I am with a client			
2	I don't drink if I am out with a client			
3	I don't have sex with clients who have drank too much			
4	I stay away from clients whom I think will endanger me			
	Condom Use			
1	I have talked about condoms with other female sex workers			
2	I sometimes use condoms with my boyfriend			
3	I sometimes use condoms with a client			
4	I always use condoms when I have sex with a client			
5	I always use condoms when I have sex with my boyfriend and a client			
	Clinic visits			
1	I know clinics where I can get services			
2	I have gone to a clinic for sexually transmitted illnesses and treatment			
3	If I get a treatment, I always finish it			
4	I have gone to a clinic for an HIV Test			
5	I go to the clinic for checkups even if I have no signs of illnesses			
6	I encourage my lover and other female sex workers to go to the clinic			
MARC				

Step Two

Let us look at the signs on the wall: 'Very Poor Protection', 'Medium Protection', and 'Very Good Protection'.

For each part of the self assessment, go and stand where you think you are at now.

- Personal Safety
- Consistent and Correct Condom Use
- Clinic Visits

You can stand anywhere between these signs, meaning either under 'Very Poor Protection', 'Medium Protection' and/or 'Very Good Protection'. Let us look around the room.

How satisfying are our efforts in terms of protecting ourselves? Which ones do you think we should pay more attention to in the future?

Step Three

After this session, participants will sit together with their friends to discuss in private on issues they want to improve in terms of protecting themselves better.

If they can't come up with an idea, let them review the self assessment sheet and ask each other some questions. Assist them to exchange few ideas on how they can best protect themselves.

Remember: The goal of all the sessions we do together is to improve our self protection so that all of us have all "yes" on the assessment sheet.

Next, we will look at what kind of support we might need to reach our goals.

7.4 Getting Support from Other Peers

Step One

Review with participants:

In life, we can feel powerless. And we can gain that power back by coming together with people with the same interest as ours. We are gathered here today because we share the same interests. Coming together as a group will help us become more powerful! Another way of gaining power is to work together with powerful people. For example, clients who come to the bars have some form of power. Establishment owners, manager also have some form of power.

Form Three groups.

Each group will discuss how we can support each other on the following ideas:

- 1. Personal Safety
- 2. Consistent and Correct Condom Use



3. Clinic Visits

Examples:

- To have one person talk to another about using condoms. Then, that man talks to another man, and so on;
- To have one person talk to others about using the female condom;
- To talk about the benefits of using a condom at a function where both men and women are present;
- You can tall your friend that you will go with her to the clinic for STI testing.

Add more of your ideas.

Step Two

Ask both groups to share their ideas. Jot down their points in the following box.

What can sex workers do to get the support of clients?	What can sex workers do to get the support of establishment owners and managers?

Step Three

Give a summary in your own words.

Key Messages:

- Whether it's big or small, we always do good things for ourselves.
- We are all humans and do not take perfect care of ourselves.
- We can support each other for better: Personal Safety, Consistent and Correct Condom Use, and Clinic Visits.
- We will try to find ways to reach clients and establishment owners/ managers.
- In the next session, we will try to work on more ideas to reach clients. And we will get to them!

Step Four

Decide on the following before leaving. Day and time of the celebration

Share ideas on what other issues you want to be included in the future.



Peer Leaders Note:

Refer to the follow-up sheet to give the appropriate answers to questions raised.

Step Five

Finish the session with a song, poem or any activity that you all will enjoy. Hand out free male and female condoms.

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Topic Eight:

COMPLETION OF CORE SESSIONS

RECOGNITION AND CELEBRATION

Objectives: By the end of this session we will have:

- Assessed what we have learned on issues of STIs, HIV AIDS, and condom use.
- Given feedback to peer leaders about their learning experience and offer ideas for additional sessions that will interest them.
- Offered ideas and important issues they want to learn more about.
- Been recognized as role models to talk and share with other female sex workers what we've learned.
- Received a certificate acknowledging their attendance and completion of the core sessions.

Peer Leaders Note:

Thank the participants for their time and hard work. Try to find venues free of charge Find ways of getting support from other organizations Below is a table to help you plan your celebration event.

Topics for the Event	Notes	
What participants learnt	 About their personal safety To always use condoms MALE OR FEMALE The importance of visiting clinics 	
Changes they've made	You can invite as many guests as you like. You can post the quotes from the last sessions on success stories that the participants wrote. Take a group picture and give one for each for them to keep.	
Feedback on the learning experience	Ask participants two simple questions: which session did you like better? Which one was most useful to you?	



Ideas for the second core session	 Show them the list of ideas suggested for the second core session. Ask them the following: How likely is it that you'll participate in these ideas? Which ones do you want to do together? Who do you want to invite?
Recognition as a role model	Come up with something creative so that others will pay attention to their personal safety, consistent and correct condom use, and clinic visits.
Certificate or other forms of completion	Make sure all participants receive a certificate.

