



WOMEN
ON THE ROAD
TO HEALTH



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TO HEALTH



Multimedia Intervention

WOMEN ON THE ROAD TO HEALTH

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How to read this Manual:

This manual is designed to provide basic instruction on implementing the worth multimedia intervention. Be advised that the manual is designed for the purpose supporting you as you are a beginner in implementing this intervention in a live session. As you become more familiar with the delivery of this program it is recommended that the manual not be used as a primary source of implementation.

The first section provides basic instruction on how to navigate the multimedia intervention. Here you will find basic commands, link functions and visual aids to be aware of as you conduct your sessions.

Session Procedures

The second part of this manual provides detailed sessions by session procedures and scripts.

For each session there are over a dozen activities, with each activity having multiple screens and procedures.

Be advised that procedures are typically numbered and bolded text; The procedures must be strictly followed to ensure intervention fidelity. Under each procedure, there are scripts that are italicized. These are suggested scripts and reading word for word is not advised. Using your personality and personal style of communication will make you feel more comfortable with the material and enhance the engagement process you develop with the group.

“Facilitator Notes” are tips and advice you will also find throughout this manual. They are there for additional guidance concerning methods of dealing with typical scenarios that can occur in group (i.e., additional probes and suggested examples).

Multimedia commands are also found throughout the intervention and are italicized and bolded surrounded by doubled bordered text boxes.



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See below for the basic formatting guide.

SESSION TITLE

ACTIVITY #: TITLE

Screen #: title

#) Procedures

Script

Multimedia Commands

Although this intervention uses state of the art technology you must remain the focal point of reference for this group. This makes your role as a facilitator the most vital aspect of this intervention. Your feedback in the implementation phase of this intervention will be pertinent to its development. Thank you and good luck.

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NAVIGATING THE WORTH MULTIMEDIA TOOL

The following section provides basic instruction on the methods of navigating through the Worth Multimedia Intervention Interface. You may refer to this manual for any difficulties in navigating through the system. If there are problems that arise that are not covered in the intervention, alert your supervisor.

This Toolset was created to simplify keeping track of worth participants, scheduling, and completion of sessions. **This set of instructions will guide you through the Toolset and its use.**

Step 1 – Starting Worth

Open Firefox (if you don't have Firefox on your computer, see the information at the end of this document. Type the **Connect** Web site address in the address bar and click the Enter button on the keyboard:

<http://worth.ccnmtl.columbia.edu/accounts/login/?next=/welcome/>



Step 2 – Authentication

Enter your User Name and Password in the boxes provided. The password is automatically replaced with asterisks for security as it is typed. Click the Login button.

Authentication, using a User Name and Password, helps to secure the information you enter and the confidentiality of **worth** participants.

Your User Name and Password provide you with access to information that is appropriate to your role as a **worth** facilitator.



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Firefox

http://worth.ccnmtl.columbia.edu/accounts/login/?next=/welcome/

worth women on the road to health

Hello, Janet [Profile] Log Out | About WORTH Contact Help

Users Intervention Materials

Log In

Username:

Password:

Log In

Step 3 – Home

Once you have logged into **worth**, the first page that you will see your home page which contains user information a group list, a participant list and a listing of all facilitation staff. You can click on the “group names” to get detailed information on any worth group including number of participants and participant user names and passwords. You must select a group in order to begin a session.

WORTH | Mozilla Firefox

http://worth.ccnmtl.columbia.edu/agency/1/agency_admin_home/

WORTH | women on the road to health

Hello, Janet [Profile] Log Out | About WORTH Contact Help

Users Intervention Materials

Welcome, Jane!

Groups

Group Name	Sessions Completed	Time of Last Session
the_group	4	10/1/09
the_group_2	4	10/05/09
chia1	4	10/05/09
chia2	4	10/07/09
the_group_2	4	10/01/09
chia4	4	10/02/09
Mary's Test Group	3	10/1/09
monday_demo	4	10/05/09
wednesday_afternoon_test	1	10/1/09
chia11	4	10/1/09
chia10	3	10/07/09
tuesday_morning_meeting (less Rowe is facilitating session 3)	2	10/15/09
Start a practice session	N/A	N/A

About Me

http://worth.ccnmtl.columbia.edu/intervention_intro



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Step 4 – Add Group

Use the “Add group button” button to enter a new group of clients. You can enter a group name and password.

worth

women
on the road
to health

Hello, Janet (Practice Mode)

Log Out

About WORTH

Contact

Help

Users

Intervention

Materials

Add Participant Group

Group ID and Password

Group Name:

Password:

Retype password:

Notes:

Add New Participant Group

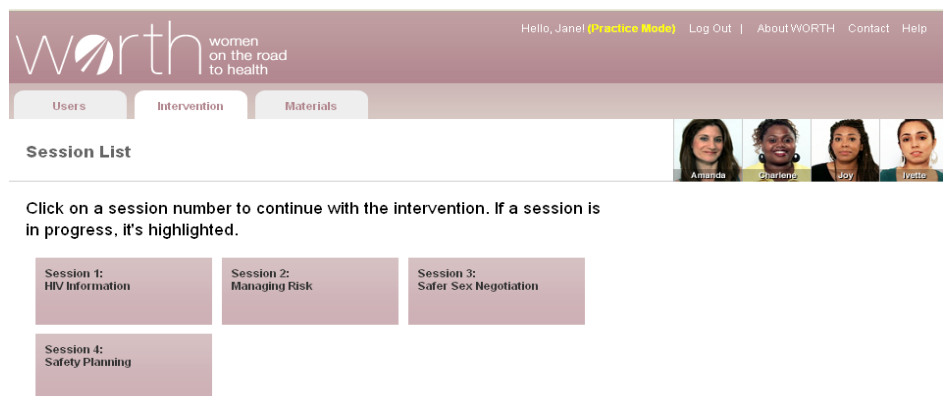
Back

Group Participants

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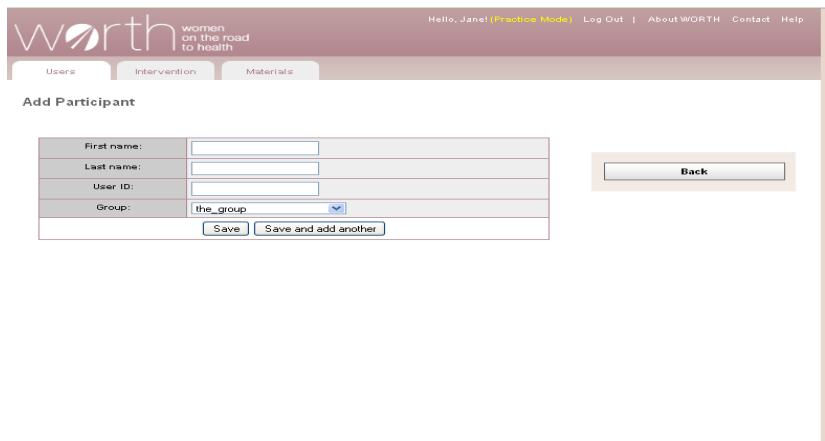
Step 5– Add participants

Use the “Add Participant” button to enter new participants in the group you have created. Here you can create a name and password for each participant.



The screenshot shows the WORTH web application interface. At the top, the logo "worth" is displayed with the tagline "women on the road to health". To the right of the logo, the text "Hello, Janel (Practice Mode)" is shown, followed by links for "Log Out", "About WORTH", "Contact", and "Help". Below the header, there are three tabs: "Users", "Intervention", and "Materials". The "Intervention" tab is selected. Under the "Session List" heading, there are four session cards: "Session 1: HIV Information", "Session 2: Managing Risk", "Session 3: Safer Sex Negotiation", and "Session 4: Safety Planning". To the right of the session list, there are four profile pictures of women, labeled "Amelia", "Charlene", "Joy", and "Iris".

Click on a session number to continue with the intervention. If a session is in progress, it's highlighted.



The screenshot shows the "Add Participant" page in the WORTH web application. The header and navigation tabs are the same as in the previous screenshot. Below the "Add Participant" heading, there is a form with the following fields: "First name:", "Last name:", "User ID:", and "Group:". The "Group:" field has a dropdown menu with "the_group" selected. To the right of the form is a "Back" button. Below the form are two buttons: "Save" and "Save and add another".

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Session list

The session list Provides access to every session of the intervention.

Agenda screen

As you click on sessions you will find each one has an “AGENDA” screen which provides a listing of all session activities. You will automatically be brought back to this screen as you complete activities

worth women on the road to health

Hello, Janel (Practice Mode) Log Out | About WORTH Contact Help

Session List

Users Intervention Materials

Session 1: HIV Information

Amanda Charlene Joy Ivette

AGENDA

Click on an activity to continue with this session. The suggested next activity is highlighted.

Activity 1: Welcome	Activity 2: Why WORTH?	Activity 3: Multimedia Introduction
Activity 4: Multimedia	Activity 5: Ground Rules	Activity 6: Amanda
Activity 7: Charlene	Activity 8: Myth/Fact	Activity 9: STIs And HIV
Activity 10: Joy	Activity 11: Protective Behaviors	Activity 12: Ivette
Activity 13: Social Support Map	Activity 14: Risk Network	Activity 15: Goal Setting 1



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SESSION 1: HIV INFORMATION



Ensure that all laptops for anticipated use are logged in with participant screen names and passwords.

log in with your facilitator screen name and password.

Access worth intervention by clicking on the 'intervention' tab

Click on "session 1: HIV Information"

You may click on the "crib notes" link located on the right side of the screen for additional guidance at any time if necessary.



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Activity 1. Welcome

Objective: To create a calm space in which the group can form and interact.

WELCOME TO WORTH

- 1) **After everyone has settled into a seat, briefly introduce yourself and the worth intervention.**

Welcome to Multimedia WORTH

This is a program designed to help women lead healthier, happier, safer lives.

My name is _____ and I am going to be leading today's session. I really enjoy being a part of WORTH because I believe that working with women is an important way to deal with issues that affect us and our relationships.

Are you ready to get started?

Navigate to the second page by left clicking the "next" button located on the lower left area of the page.

GROUNDING:

- 2) **Explain that you are going to play an audio that will lead the group through a grounding exercise using the text on the screen under "grounding" as a guide.**



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Right now I am going to play an audio that will demonstrate a grounding exercise. This is just a new way of doing things that I will explain a little more later.

3) Inform the group that they may close their eyes if they feel comfortable doing so.

So, just close your eyes if you feel comfortable do so. Relax and listen.

Play the audio recording by left - clicking on the play symbol on the media navigation tool bar.

**4) After the audio recording is complete process the experience with the group by asking
Probing questions about how they feel**

So now how does everyone feel?

Is it now easier to focus on the session for today?

This is something that we will be doing at the beginning of every session to ensure that we are able to put the days worries aside so that we can focus on the Worth program. Being able to focus on the information that is presented in Worth by me and your group members will make you better able to take in the information and incorporated it into your life. If you feel that I can help you with anything you are currently dealing with. Please feel free to talk to me about it at the end of the session today.

Does anyone have any questions before we move on?

5) Address all questions and concerns.



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Navigate to the second page by left clicking the “next” button located on the lower left area of the page.

Navigate to activity 2 by clicking on the link labeled “Activity2: Why Worth?”



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Activity 2. Why Worth?

Objective. To elicit each woman's biggest reason for wanting to take care of herself. This will serve as the first way that women in the group get to know each other. Also to preview the material in the session.

OUR REASONS TO BE HEALTHY:

Procedure

- 1) **Explain that deciding to take care of ourselves is the basis of taking care of everything else we want in life.**

Everything that we want in life starts with taking care of ourselves, and being healthy. Healthy in our bodies, healthy in our feelings, and healthy in our relationships. Think, for a minute about a time when you've felt healthy, strong, hopeful, alive, drug-free. When we feel healthy in these ways, we're more able to reach for the things we want in our life, for ourselves and the people we love.

- 2) **Define women's health (health as in women knowing their bodies, women having sex, women dealing with men, women keeping ourselves safe, women coping with feelings and urges, women solving problems, women connecting to other women).**

All of you have taken a HUGE, BRAVE step to HEALTH in coming here today. That step has brought us all together here – to take up other ways of keeping ourselves HEALTHY.



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What is a healthy woman to you?

A healthy woman is a woman who knows their bodies, a women who knows how to deal with their partners, a woman who keeps herself safe, who can solve their problems, cope with her feelings and urges, and understands how to connect with other women.

- 3) Explain that today we'll start by getting to know our bodies, the risks our bodies can get us into, and how to take care of them**

Today, we'll start by getting to know our bodies, the risks our bodies can get us into, and how to take care of them. At the same time, we'll start to get to know each other a little better and a little differently than we have before.

- 4) Provide an example of your reasons to be healthy and briefly mention it to the group**

What we are going to do now is talk about our reasons to be healthy. We all may have very different reasons so I will start by writing down my reason. My reason to be healthy is...

Record your reason in the text box under "my reason for wanting to take care of myself is"

- 5) Ask the participants why they might want to take care of themselves.**

Now let's hear from the rest of you. Think of some reasons why we should want to take care of ourselves and our health. Who can give me a reason?



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Record responses in the text box under “our reasons to be healthy”

Facilitator note: If there is little participation, give some examples, such as “I have goals I want to achieve,” “I want to live a long and happy life,” or “I want to be there for my family and friends.”

- 1) **After eliciting several responses, explain that WORTH is focused on helping women to be healthier by protecting themselves against HIV and other Sexually Transmitted Infections (STIs).**

Thank you for sharing your reasons to be healthy. The Worth program is about helping women improve their healthy providing tools to help you avoid HIV and STI infections.

- 2) **Address all questions or concerns before moving on to the next activity.**

Does anyone have any questions before we move on?

Navigate to the next page by left clicking the “next” button located on the lower left area of the page



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GOALS OF THE WORTH PROGRAM:

- 1) Describe the goals of the worth program using the text on screen as a guide.
- 2) Address any questions and concerns mentioned by the group.

Navigate to the next page by left clicking the “next” button located on the lower left area of the page

WHAT ARE WE GOING TO DO TODAY?

- 1) Provide a brief preview of the session one content using the text on the screen as a guide.
- 2) Address any questions and concerns mentioned by the group.

Navigate to the next page by left clicking the “next” button located on the lower left area of the page

On the Agenda page click on “Activity 3: Multimedia Intro”



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Multimedia Intro

Objective: To introduce participants to the computing technology used in the worth intervention

LAPTOP USE:

- 1) **Provide a brief description on the variety of tasks they will be asked to do on the laptop using the on screen text as a guide.**

Ok everyone, you may be wondering about the laptops you see in front of you. Your name appears on the screen, which means I've logged you in. I'll do that before the beginning of each session.

During the session you'll use the computer to enter information that will go into your personal journal or that you may choose to share with the group. You'll also use the computer to 'vote' or answer questions. We're going to practice doing all of those things right now so that you'll know what to do when we get into the session. Follow along with me.

- 2) **Introduce the next activity by informing the group members that they will be given the opportunity to practice the basic procedures related to laptop tasks.**

Navigate to the next page by left clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 4: Multimedia”



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Activity 3. Multimedia Orientation



Objective

To introduce participants to their computers and to give an example of the 'voting' mechanism that they will use throughout the intervention.

TYPING

- 1) **Describe that there will be points at which they will be asked to type. Be sure to mention that text they type will be placed in their journals and will not be shared with the group without their approval.**



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First, we're just going to make sure that typing and saving information is working for your account. Type something into the box on your screen. It will appear in your journal at the end of the session. If you can't decide what to type, just type your name.

- 2) **Ask the group to type anything they like in the text box on their screen.**

Model the task of typing by writing in the text box on the main page under “Typing”

Now you try typing something in the box on your screen. Everything you type will appear in your journal at the end of the session. The journal is a print out of information that we will be discussing during each session. If you can't decide what to type, just type your name.

- 3) **Inform the group that that the big screen will only indicate whether or not everyone has answered and will not reveal confidential content.**

Navigate to the next page by left clicking the “next” button located on the lower left area of the page

CLICKING

- 1) **Describe the next task as one that involves clicking. Explain that there will be times where they will be asked to select on different choices as you play games and answer questions related to the worth program.**



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Model the action of “clicking” by clicking in the four boxes and be sure to note the changing colors

Click the next button on your screen to move to the second part of the activity. Here we're just going to practice using the mouse (or touchpad) a little bit. When you click in the boxes they should turn a color. Clicking again will turn the color off, like this. Is this working for everyone?

- 2) **Explain that only one click is required for a selection. Explain that they will know they have clicked all the boxes as they go from white to color.**

Here we're just going to practice using the mouse (or touchpad) a little bit. When you click in the boxes they should turn a color. Clicking again will turn the color off, like this. Is this working for everyone?

- 3) **Ensure that all group members have completed this task and address any questions or concerns.**

Navigate to the next page by left clicking the “next” button located on the lower left area of the page

VOTING

- 1) **Describe the next task as one which involves selecting one of several choices or “voting”.**

Ok, great. Now let's move to the last screen of the activity. Here we're going to practice voting. Click on a color to 'vote' for it. Once all of you have voted, your votes will show up on my screen up here.



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2) Briefly describe some examples of activities in which they will be voting.

Voting will be done in several I activities in the program. You may be asked to select a response to a question that is asked to the group, or you might be asked to select an option based on your own preferences. Whatever the case it is important to vote when you are prompted. Your answers will remain anonymous and you will not be forced to share your vote.

Model the act of Voting by “Clicking” on one of the four colored boxes. Click on one color twice to show group members that they may change their selection before clicking on the “vote” button.

3) Explain that the big screen will tally the responses but will not reveal individual answers.

Great! You've all submitted your votes and I see them on my screen. But they are anonymous so don't worry, I won't be able to tell who voted for what unless you choose to share your choice with the group.

4) Instruct participants to use the mouse pad to click on their favorite color. Be sure to click it on and off to show group members that they can re-click if they wish to change their vote.

So now use the mouse to pick your favorite color out of the four options that are on screen. Use the mouse to bring the pointer onto the box that represents your favorite color. Then click on it



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to make your selection. Keep in mind you only have to click it once to make the selection. If you change your mind you can simply click on it again to turn it off.

- 5) **Inform participants that they will know they have selected a color when the color box gets slightly bigger.**

You will know that you have selected the color when the box gets slightly bigger.

- 6) **Provide time for participants to complete this task and provide help when necessary. Ensure that all participants have selected a color.**

Click on the button on the right side of the page marked “Check Participant Answers” to tally up score.

- 7) **Highlight the tallied votes as they appear on screen and ensure that participants understand what it means.**

It looks like everyone has selected their color. It looks like most of you liked _____. See here I can see that everyone has voted but I cannot see who voted for what. This allows for your responses to be anonymous, so you do not have to share your responses if you do not want to

- 8) **Summarize the activity and address any questions or concerns**

Those are the three things you'll be doing with your laptops while you are here. Did everyone's machine work as you thought it would? Does anyone have questions about using your computer before we move on?



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Navigate to the next page by left clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 5: Ground Rules”



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Activity 4. Ground Rules

Objective

To describe the rules and practical features of the program to the participants

SETTING SOME RULES:

Procedure

- 1) **Explain the importance of establishing group rules in a program like worth.**

So in order for this to be a safe place to talk about some important issues, let's develop some group ground rules for us to follow during the next four sessions. What would you suggest?

- 2) **Instruct the group to come up with a list of ground rules to follow to allow everyone to feel comfortable.**
- 3) **Let group members generate rules themselves, ensuring that key points are covered. If members do not address those listed below, you should introduce them and see if members agree. Use the reminders in the crib notes section to expand on group members' ideas.**

Don't miss group

Come to sessions on time



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Participate

Turn off your cell phone and please refrain from texting

Listen

Commit to work on the goals you set

Keep things private

Support and respect other group members

Do not interrupt or talk over each other

Do not come to sessions under the influence of alcohol or other drugs

Be honest and respectful

As participants share their suggested rules, type them in the text boxes under “Setting some rules”

- 4) **Once the rules have been entered onto the screen, go over them with the group. Then outline your role and each member's role in the group.**

So what's your role in the group?

- 5) **Pause to hear participant responses.**



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Your role in the group should be to, come to the group, to listen, to share with others as much as you can, to respect confidentiality, to do the work on goals, and to BELIEVE IN YOUR WORTH!

And what about your group leaders? For the next few weeks, we'll be your guides and coaches – to help you help yourselves live healthier lives. We'll bring you stories and skills to try out – that we think can help make you stronger, clearer, and healthier, and move you a little closer to the way you want to live your lives. We won't be your counselors. But, if you have something troubling you that you need to talk about immediately, you are always free to ask one of the leaders to speak to you alone. We can do that just before the group, after the group, or, if necessary, during the group.

Navigate to the next page by left clicking the “next” button located on the lower left area of the page

SESSION TIMES

1) Explain the importance of attendance and punctuality in attending worth sessions

One of the most important aspects of this program is attendance and punctuality. It is important that you try your absolute best not to miss group and come on time! If you need to miss a session, be late or leave early, you've got to tell the leaders beforehand. Use the bathroom before group starts. Nobody should leave during group, unless they absolutely must.



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- 2) **Explore with the group what would be an appropriate day and time for weekly worth sessions over the course of the next four weeks.**

So in order to ensure that everyone can make it on time, let's decided on a weekly schedule to follow. Which day and time will would be the best for everyone to attend a worth session.

- 3) **Ensure that everyone is in agreement on the time that is allotted to worth sessions.**

Pull up the calendar on the screen by clicking on the text box under "Session times".

Select the appropriate dates that have been agreed upon to attend worth.

- 4) **Inform the group that these days and times will be printed for them in their journals and suggest that they carry this page of the journal with them to help remember when to come back to group.**

I am glad that we were able to come up with a day and time that works for everyone. This information will be printed for you at the end of the session today so you have it to reference.

Navigate to the next page by clicking the "next" button located on the lower left area of the page

CONTRACT OF COMMITMENT AND CONFIDENTIALITY



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- 1) **Ask for a volunteer to read the privacy statement that appears on the big screen. (If the group is a non-reading group, read this statement to them).**

As you can see privacy is really important in this program. We will be discussing many important and personal health issues in this program and it is important that everyone here respect the confidentiality of their fellow group members. So we have a confidentiality agreement that we would like everyone to read and acknowledge. Would anyone like to read the privacy agreement for us?

- 2) **When you have finished address any concerns or problems in agreeing to this contract. Inform participants that they will get a print out of the contract with their journals.**

Can everyone agree to this contract? Good. This will also be printed out for you at the end of the sessions. Any questions?

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 6: Amanda”



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Activity 5. Amanda

Objective

To get acquainted with Amanda.

AMANDA AND HIV

Procedure

- 1) **Explain that HIV affects lives in different ways and that there will be four fictional women presented in worth that demonstrate different experiences with HIV.**

HIV effect people in many different ways. And throughout this program we are going see women discuss their experiences with HIV in some pre recorded videos. I will be presenting each video before playing it for you.

- 2) **Explain that you will be presenting videos designed to introduce them to the fictional characters today.**

People may have been exposed to risk and not even know. Events, feelings, and things around you that occur before you have sex can have a major influence on your actions. These may include people, places, moods, and substances that may lead you to make certain choices or perform certain actions. These influences can lead us to behave in ways that make it difficult to practice safer sex.

Now I would to introduce you to our first woman who is struggling with many different



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influences.

Let's listen to Amandas story.

Play the video of Amanda by clicking the link titled "Click here to see the video".

The video will pop up in a separate screen.

Before clicking on the "play" symbol on the media player, be sure to enlarge the screen by clicking on the "expand" symbol located on the right side of the media player navigation bar.

- 3) Debrief with the group about what they thought about the video by asking follow up questions.
- 4) Address any questions or concerns

Navigate to the next page by clicking the "next" button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 7: Charlene"

NOTE TO FACILITATOR: A lot of drug users have family members or loved ones who are HIV positive, who have died from AIDS related illness, and/or are themselves infected. It



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is important that the facilitator be sensitive to the feelings of the speaker, as well as those of any group members who may be HIV positive or have loved ones that are HIV positive. At the same time, the severity of HIV and its total consequences should be emphasized rather than minimized.

Do you have any questions or comments before we continue? Did you notice the situation, people, places or moods that may have put her at risk?



WOMEN ON THE ROAD TO HEALTH





WOMEN ON THE ROAD TO HEALTH

Activity 6. Charlene

Objective

To become acquainted with Charlene.

MEET CHARLENE

1) Introduce the Charlene video

Having an illness like HIV or AIDS can change a person's life. When we think about persons with, we sometimes don't consider ourselves as a high risk group, for example, gay men or drug users. All of us who are sexually active are at risk for HIV. It's our behavior that puts us at risk. Some of the hardest hit groups have been communities of color, including the African American and Latino communities.

Now I would to introduce you to another woman whose life has been affected by HIV. Let's listen to her story.



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Play the video of Amanda by clicking the link titled “Click here to see the video”.

The video will pop up in a separate screen.

Before clicking on the “play” symbol on the media player, be sure to enlarge the screen by clicking on the “expand” symbol located on the right side of the media player navigation bar.

- 2) **Debrief with the group about what they thought about the video by asking follow up questions.**

What you think about the story of Charlene? Do you know women like Charlene or Amanda?

What do they think about HIV?

- 3) **Summarize activity by suggesting that HIV touches the lives of many women we know and that it is important that we work together to protect ourselves from transmission of HIV or other STIs.**

HIV affects the lives of many women that we know. It is important that we work together as women to protect ourselves and each other from HIV and STI transmission.

- 4) **Address any questions or concerns**



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Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 8: HIV Myths And Facts”



WOMEN ON THE ROAD TO HEALTH

Activity 7. HIV Myths & Facts

Objective

To provide basic education about the most common sexually transmitted infections, their symptoms, testing, treatment and consequences if left untreated

Procedure

- 1) **Inform participants that the next part of the session are short questions and answers followed by brief video about common sexually transmitted infections, including the main symptoms, how to get tested and types of tests, treatment if you are positive, and the consequences of leaving these STIs untreated.**

Many women told us that not only did they worry about HIV, but also they worried about all the other sexually transmitted infections that are out there. We have a short video to tell you about other STIs, and also what you need to know in order to avoid these diseases. But before we show the video clips we have a few True and False questions and answers, to test your knowledge of STI's. Once all the video clips are finished we will try to answer any additional questions that you may have, ok?

- 2) **Instruct participants to click “Go” on their laptops**

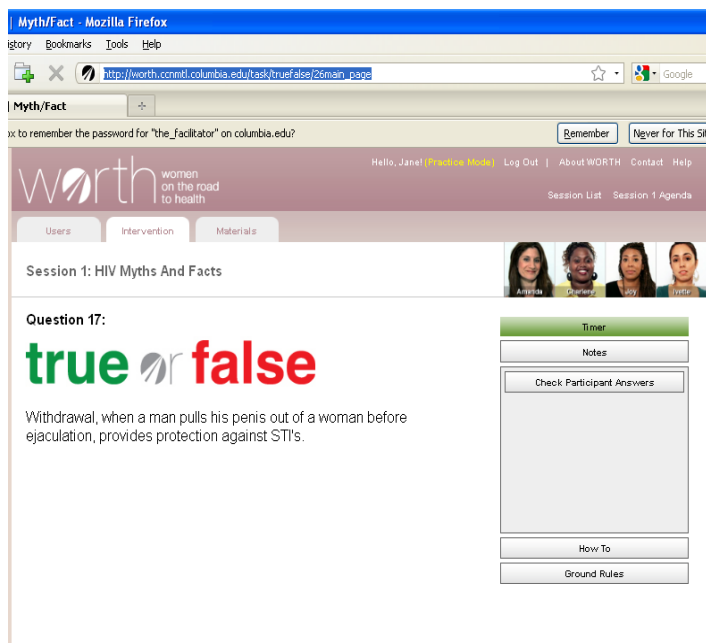
Here is the basic procedure for leading this activity:

- Read the question out loud



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- Remind the participants to select myth or fact using their laptops
- When all the votes are in play the video that follows the question
- Debrief with the women and elicit questions
- Move on to the next question



Instructions for HIV Myth & facts

Step 1: Read question on screen out loud

Step 2: Instruct participants to VOTE “true” or “false” using their mouse and laptops.

Step 3: Check participants responses by clicking “check participant Answers” link

Step 5: play the video clip

Step 4: Discuss the correct response with the group



WOMEN ON THE ROAD TO HEALTH

This first question is:

Women suffer more frequent and severe symptoms of STIs than men. Do you think this is true? Pick myth or fact on your laptop. Now let's see what the group thinks. Ok, most of you thought _____. Let's find out if that's true or not. The answer to this question is 'True: Some STIs are more likely to be asymptomatic in women than men. STIs in women can be associated with inflammatory disease, ectopic pregnancy, infertility, and cancer'

Now lets take a look at this clip. It will talk about why this is true.

(For question 2) Great the second question is about your risk of getting an STI or HIV.

(For questions 3-6) Some of us have probably heard of bacterias and viruses. So these next set of questions will focus a bit on that.

(for questions 7-8) Ok, I know that last video was pretty heavy but we just have a few more questions and video clips. These next questions are about Chlamydia.

(for questions 9-10) We've all seen the genital herpes ads on television so my next question for you is . . .

(for question 11) All right, here is one we don't hear too much about but it is very much still out there: Syphilis.

(for questions 12-14) Now we'll move on to some questions about HIV.



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(for question 15) Ok this brings us to our final video clip but before I play it, I have one last question for you . . .

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 9: STIs and HIV”

- 3) **After the group has completed the video and MYTH & FACT questions, debrief about what they thought of the video.**

Ok, so that was a lot of information and you did really well on answering those questions. Give yourselves a hand.



WOMEN ON THE ROAD TO HEALTH

Activity 8. STIs and HIV

Objective: to help participants understand that STIs can increase risk of HIV transmission.

STIs AND HIV INFECTIONS

- 1) **Introduce the STI video by explaining that you are going to share a video that demonstrates how STIs can increase risk for HIV transmission.**

Now we are going to watch another video that demonstrates how STIs that seem harmless and non life threatening can actually increase our risk for HIV transmission.

Play the STIs and HIV infections video by clicking the link titled “Click here to see the video”.

The video will pop up in a separate screen.

Before clicking on the “play” symbol on the media player, be sure to enlarge the screen by clicking on the “expand” symbol located on the right side of the media player navigation bar.

- 2) **Debrief with the group and elicit questions**

So that did everyone think of this video?

Was this information surprising?



WOMEN ON THE ROAD TO HEALTH

How has it changed your perception of your personal risk for HIV and STIs?

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 10: Joy”



WOMEN ON THE ROAD TO HEALTH

Activity 9. Joy

Objective

To become acquainted with Joy

JOY AND HIV

Procedure

1) Introduce the joy video

Some things that happen to us in life are unavoidable and cannot be changed. Fortunately, though, sometimes we are able to take control of many things in our life. Whether we realize it or not, we have a lot of control when it comes to making healthy choice and decisions. Especially when we are dealing with HIV and STI's.

Now I would to introduce you to Joy, a woman who is trying to stay safe. Let's listen to her story.

Play the video of Amanda by clicking the link titled "Click here to see the video".

The video will pop up in a separate screen.



WOMEN ON THE ROAD TO HEALTH

Before clicking on the “play” symbol on the media player, be sure to enlarge the screen by clicking on the “expand” symbol located on the right side of the media player navigation bar.

- 2) **Debrief with the group about what they thought about the video by asking follow up questions.**

So, what did you think about the story of Joy? Do you know women like Joy? What would you be thinking if they were in Joy’s situation? What do you think some challenges that Joy will face in protecting herself from HIV and other STDs are?

- 3) **Summarize the discussion and Address any questions or concerns**

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 11: Protective Behaviors”



WOMEN ON THE ROAD TO HEALTH

Activity 10. Protective Behaviors

Objective

To insure that participants understand how the AIDS virus is transmitted and received.

PROTECTIVE BEHAVIORS

Preparation

- 1) **Explain that we're going to spend the rest of this session discussing the specific behaviors that put us at risk for HIV and other STDs. Then we'll talk about, and learn some ways, we can protect ourselves.**

As we have been discussing today, we put ourselves at risk for HIV by our behaviors. It is the act of having unprotected sex with someone that could give us HIV or a STI. We are going to spend the rest of the session discussing the specific behaviors that put us at risk for STIs and HIV. These are unsafe sexual behaviors and unsafe drug (needle sharing) behaviors.

- 2) **Remind the group that in AIDS prevention we are not talking about risk groups--or groups of people that are in danger of contracting or getting infected with the HIV virus, but rather about risky or dangerous behaviors.**



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When we discuss AIDS or HIV prevention we are not talking about risk groups or groups of people that are in danger of giving you HIV or getting infected with HIV itself. If we are sexually active or injecting drugs we are all at risk for HIV infection. We want to bring attention to these behaviors and think about how they can be modified to reduce our risk of transmission.

- 3) **Reiterate that the main behavior we've discussed that puts them at risk is unprotected sex. Ask group members how they interpret sex.**

As you will see we will be focusing on sexual behaviors that place us at risk for infection. How would you define sex? What behaviors does it include?

ANSWER: SEX INCLUDES THE PENIS IN THE VAGINA; THE PENIS IN THE ANUS;(anal sex), MOUTH TO PENIS OR MOUTH TO VAGINA. SEX IS ALL THESE THINGS REGARDLESS OF WHETHER AN ORGASM OCCURS.

Facilitator note: Be sure to clarify the difference between vaginal, anal, and rear-entry vaginal intercourse.

- 4) **After the group understands the physical elements of sex, explain the Risk labels (Low risk, moderate risk, High risk).**

Now let me explain the different levels of risk.



WOMEN ON THE ROAD TO HEALTH

Facilitator note: As you clarify the on-screen content. Be sure to gesture to the appropriate areas of the screen to connect your statements to the visual aids on the screen. Some content may be difficult to see for participants.

The color green means “GO” - the behavior is of no danger and is okay to do; a yellow light means “CAUTION” - the behavior holds a small amount of danger and should only be done with caution; a red light means “STOP” - the behavior puts the person in high danger for contracting HIV/AIDS and should not be done.

- 5) **After you have explained the meaning of each level of risk, read the list of behaviors on the screen.**
- 6) **State each behavior and ask participants to identify risk category they go in.**

Drag and drop the behaviors into the risk level (‘LOW RISK, MODERATE RISK, OR HIGH RISK’) the group chooses by placing your index finger over the sexual behavior descriptions and sliding it over into the risk boxes defined by the participants.

If their answer is incorrect, the behavior will bounce back out of the box and the group will be prompted to try again.

- 7) **Use their answers (and any misconceptions) to clarify any misinformation or myths still prevalent in the group.**



WOMEN ON THE ROAD TO HEALTH

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 12: ”



WOMEN ON THE ROAD TO HEALTH

Activity 11. Ivette

Objective

To become acquainted with Ivette

IVETTE AND HIV

1) Introduce the Ivette video

Many women do not believe that they are at risk for STIs, including HIV infection, yet we one of the fastest growing groups of people becoming infected with STIs are people in what they believe to be monogamous relationships. A lot of the early information that reached the public was targeted at people practicing casual sex—people who are not in monogamous relationships.

Now I would to introduce you to another woman who is in a relationship. Let's listen to her story.

Play the video of Amanda by clicking the link titled “Click here to see the video”.

The video will pop up in a separate screen.



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Before clicking on the “play” symbol on the media player, be sure to enlarge the screen by clicking on the “expand” symbol located on the right side of the media player navigation bar.

- 2) **Debrief with the group about what they thought about the video by asking follow up questions.**

So what you think about the story of Ivette?

Do you know women who have been in similar situations?

What would they be thinking and feeling if they were in Ivette’s situation?

- 3) **Ask the participants if they are interested in making changes to reduce their risk behaviors for HIV and other STIs such as using condoms consistently and correctly. Elicit reasons for changing; use reflective listening to highlight reasons and to probe for more depth.**

What makes you want to stay healthy and protect yourselves from HIV/STIs?

Tell me why you think you might need to make a change?

So using condoms to protect yourself is really important to you?

Tell me about that?

- 4) **Elicit barriers to changing and write responses on flipchart --**



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What makes it difficult to change your behaviors to protect yourself from HIV/STI, like deciding to use condoms?

- 5) **Normalize Fear of Changing.** Attempt to develop awareness of discrepancy between where the participants are and where they want to be.

Change – any change – even change for the better can feel overwhelming. Does anyone feel anxious or intimidated by the possibility of changing their behaviors to protect themselves from HIV/STIs?

- 6) **Evoke self-motivational statements with respect to problem recognition, expression of concern, intention to change, and optimism for change.**
- 7) **Summarize participants' statements about changing -- Offer a summary reflection as succinctly as possible. Reflective listening should be used extensively and summarize as necessary. Acknowledge the challenges of changing, but emphasize the participants' statements about the need for change. Invite the participants to join you in summarizing their reasons for change.**

Did I capture your reasons for changing accurately?

Have I left out any other important reasons for change?



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8) Address any questions or concerns

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 13: Social Network Map”



WOMEN ON THE ROAD TO HEALTH

Activity 12. Social Support Map

Objective

The purpose of this exercise is to establish the usefulness of social support networks and to identify the participants' social support networks.

SOCIAL NETWORK MAP

Procedure

1) Introduce and describe the social network map.

Today we will talk about ways to increase and maintain our healthy and safe behavior. Many of us may think that we are the only ones dealing with staying safe and healthy, when actually we are not alone. In addition to this group, we can also get support from our friends and family. This exercise is a reminder of how important it is to have people in your life to support you - and your effort to stay safe. You may have other family or friends, usually one or two people with whom we may feel comfortable sharing our thoughts and feelings, and from whom we ask advice. Can you think of the people in your life who you do this with?

A social network is the collection of people in your life that you come into contact with - either every day, or maybe only on rare occasions. Friends, family members, neighbors, people at your job, people at your child's school are all examples of your social network. It can also include counselors or service providers with whom you have developed a working relationship.



WOMEN ON THE ROAD TO HEALTH

Today you are going to complete your own social network map, so you can see for yourself what your social network actually looks like.

2) Ask the participants to click 'go' on their screens to pull up their network maps.

This exercise is one way to begin to draw a map of the people in your life who can support you and help you achieve your goals for protecting yourself and having a healthier life.

3) Show how to add people to the Social Support Network Map.

This may look intimidating but it is pretty easy to create a social support map on this screen. The rectangles represent people in your life. As you can see the little stick figure in the corner represents you, which is at the center of the three shaded circles. Now you can click one of the rectangles and drag it to add a person to your network and place them one of the concentric circles. If you speak to this person or spend time with them often I may place them closer to the stick figure, you, on this map. If not, they would go farther away.

When you have placed that rectangle on the network you can just click the rectangle to type in that network members name like so.



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- *Show how to add people by clicking and holding on the green, yellow or red icon on the Lower left side of the screen under “behavior change support level”. Drag the box into one of the three concentric circles. And repeat this two more times.*
- *Demonstrate how to name social network members by clicking into the boxes in the area labeled “click to change name”. Type a names in the spaces provided.*

- 4) **Allow participants a chance to add their own network members. Be sure that all group members have completed this portion before moving onto the next exercise.**
- 5) **Briefly discuss with each participant who he/she put on his/her Social Support Network Map and how those people can assist him/her when he/she may need help or support.**
- 6) **Go back to the demonstration map to explain the second part of the activity. Show how the different types of needs can be used to label the people they've put on their maps. Give an example of each type of support on the table.**

Now that you have identified people who provide social support, let's talk about what types of help these people provide.

What do other people help you with? How are they “there for you?”



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- 7) **Point out that often people who are very good at figuring out problems are not the same people who are very sympathetic but may not know how to assist in solving problems or in offering practical advice. Remind participants that each of them may have different needs at different times, and that they may notice the same person on their maps offering different kinds of support.**

There are different kinds of support that people give to each other. They may provide companionship, they may provide practical support, they may advise you or help you to solve problems, or they may simply sympathize with you. Sometimes they have been through the same type of situation and they can understand and share your feelings.

Take a look at your Social Support Network Map and think about how these people support you.

- 8) **Give examples for all the different types of help. Use your own examples or those in the sample script below.**

People can give all different kinds of help to each other. For example, a friend may baby sit for you, go with you to the movies, or both.



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Practical:

Last week I had a doctor's appointment, and I could not find anyone to provide child care for my kids. My friend offered to help me out by watching them for two hours for me.

Sympathy/Empathy:

Last month my aunt died. I really miss her. My friend, John, listened to me talk about how much I missed my aunt. He couldn't fix it, but it really helped that he understood.

Problem Solving:

Six months ago I lost my job. I haven't been able to find anything else. My friend Tyrone told me about a community organization that teaches new skills and even pays a stipend while you learn and then helps to place you.

Social:

My friend Lydia is really into movies. I don't talk to her much on the phone because movies are all she talks about. When I want to see a movie, I call Lydia.

- ***Demonstrate how to indicate Support type of network members by clicking and dragging one of the lettered icons under "Types of support" into the social network member box you created.***

9) Ask the participants to add types of help to their maps.

Now adding social support types to your networks are pretty simple. Just move the pointer over to where it lists "S" for Social, "A" advice, "P" for practice and "U" for understanding. Click and hold one of the letters and drag it over to the rectangle or person that you believe offers you



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that support.

- 10) **Provide assistance when necessary and praise participants for completing this activity.**
- 11) **Review map strengths and weaknesses with the participants. Ask each participant to point out her network's strengths and weaknesses. Briefly discuss how he or she might go about strengthening their social network.**

This exercise is just a beginning. After we are finished here, you can continue to work on developing and strengthening your social network. We wanted to take the time to remind you that there may be many others in your life who can provide support and to whom you give support.

Navigate to the next page by clicking the "next" button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 14: Risk Networks"



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WOMEN ON THE ROAD TO HEALTH

Activity 13. Risk Networks



Objective:

The purpose of this exercise is to help participants identify network members that are associated with risk for HIV/STI transmission

RISK NETWORK



WOMEN ON THE ROAD TO HEALTH

1) Introduce and describe the risk network.

Now that we have identified our own individual networks, we are going to discuss something called the risk network. A risk network is the collection of people in your life that you may in one way or another place you at risk for abusing drugs, having unprotected sex, perpetrating violence or becoming a victim of violence. Now most people have some people in their networks that may increase the chances that we are placed in situations that put us at risk. For this reason it is important that we identify who these people are so that we identify a way to prevent them from increasing risk in our lives.

So let's get started.

2) Ask the participants to click 'go' on their screens to pull up their network maps.

Click the go button on your screens.

3) Show how to add people to the risk network according to level of risk.

4) **Facilitator note:** As you are demonstrating creating risk network members using the steps below, be sure to state what you are doing out loud step by step. This will make it easier for participants to complete this exercise on their own after you are done.



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Demonstrate how to add risky social network members by clicking and holding on the one of the three colored icons under “Step 1: Add person to your map”. Drag the box into one of the three concentric circles. And repeat this two more times ensuring that each of the three concentric circles includes a network member.

Demonstrate how to name social network members by clicking into the boxes in the area labeled “click to change name”. Type a names in the spaces provided.

- 5) Allow participants a chance to add their own network members. Be sure that all group members have completed this portion before moving onto the next exercise.**

So now that I have demonstrated how to create risk network members, why don't you all give it a shot? I and my co-facilitator will be coming around to help anyone who needs assistance.

Remember to place the names according to how close or intimate they are to you.

So the circle with the darkest shade of gray that is closest to your name should be full of people with whom you are the most intimate. These are people that you are in close contact with and that you tend to trust and rely on. These may include friends, partners and relatives you speak to on a frequent and consistent basis.

The second band should contain people with whom you have on-going contact, but might still not feel as close to these people. These people might include case managers, co-workers, counselors or parole officers. Most people might consider these impersonal relationships, where personal intimate information is rarely discussed.



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The outer most band is contains members who you are the least intimate with. This band contains people that you greet in a light and casual way (e.g. grocers, neighbors, etc.). People often express these people as on a “hi & bye” basis.

Ok any questions? You can now get started.

- 6) **After the group is done, go back to the demonstration map to explain the second part of the activity. Give an example of each type of risk including “drugs” “unsafe sex” and “violence”. Point out that often people who tend to encourage you to get high would get the drugs label, while people who encourage or pressure one to engage in sex without condoms would receive a “u” for unsafe sex. And finally, those who may place the participant at risk of getting physically hurt would receive a label “V” indicating risk for violence.**

So as you have different people in your risk network, each person may increase risk in different ways. For instance

Drugs

Imagine going to a party and your girlfriend offers you a joint even though you may have expressed to her that you’re trying to stay clean after getting out of jail. This is an example of how someone can place us at risk for drug use.

Unsafe sex

Imagine having a boyfriend whom, when he gets drunk or high and wants sex, he insist on doing



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it raw. This is an example of someone very close placing who might increase risk of unprotected sex

Violence

Imagine you are in a relationship with a partner who becomes violent or angry every time they get drunk. So in that example an intimate partner who is close may place us at risk of getting hurt.

Demonstrate how to indicate risk type of network members by clicking and dragging one of the lettered icons under “Add types of risk” into the social network member boxes you created.

- 7) Ask each participant to add types of risk to the people on their map. Take time to help each participant work on their map.**

Take a look at your Social Support Network Map and think about how these people might increase risk in your life.

- 8) After the group members are done debrief on their experiences in doing these activity.**

What do you notice about your networks?

Are you surprised by what you saw?



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What kinds of risks did you see coming up most often, violence, drugs or unprotected sex?

Where their some network members that put you at risk in more than one way?

If so, how?

What can you do about the people in your life that increase risk for you?

9) **Summarize the discussion and move on to the next activity.**

Thank you for sharing all that personal information. The social network and risk maps will be printed out for your future reference. We will be talking about ways to deal with triggers for unsafe behaviors throughout WORTH. Next week we are going to learn a way to address this using a problem solving technique that has proven effective with many people who have participated in programs like this.

Are there any questions before we close today's session?

Navigate to the next page by clicking the "next" button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 15: Goal Setting 1"



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Activity 14. Goal Setting 1

Objective

To introduce Goal setting and to set goal for the week following Session One.

RISK SCALE

Procedure

1) Introduce the risk scale

As you probably noticed, we've spent a lot of time today learning about STDs in a very general way. Under no risk is abstinence, or not having sex. For those of us who are sexually active, this is certainly a difficult goal to accomplish. Sex is a very important part of many people's life. So if abstinence isn't really an option for you, there are different things that you can do to minimize your risk. The first step in that process is recognizing where you fall on, what we call, the risk scale.

2) Briefly describe the risk scale on the main screen. Noting what the numbers roughly correspond to.

If you look at the scale with me you can see that the behaviors that are in green include no unprotected sex. The behaviors in the green have very little to know risk of HIV/STI transmission. However the sexual behaviors in yellow include other risk such as unprotected oral sex. These behaviors do place us at moderate risk for HIV/STIs. The behaviors in the red which include unprotected anal and vaginal intercourse place us at HIGH risk for HIV/STI transmission.



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- 3) **Ask the participants to hit the 'go' button on their screens. Ask each group member to rate her risk using the risk level graphic on the big screen as a guide.**

All of us have probably engaged in some risk over the course of our lives. Looking at this diagram can you find where you think you are on the scale? On a scale of 1 to 5 with 1 being no risk and 5 being the highest risk, how would you rate your personal risk? Where would you like to be on a scale of 5? Rate these things on your screen and then move to the next screen.

- 4) **Give the group a moment to rate themselves on the Scale**

Check to see that everyone has answered by clicking on the link labeled “check participant answers”

- 5) **Acknowledge the risk level of the group as a whole.**

Thank you for rating yourselves.

The last thing we'll do today is set a goal for between now and the next session. In order to protect ourselves, we need to plan to be healthy. WORTH is about protecting others and ourselves from becoming infected with new sexually transmitted infections, including HIV. Today we talked about a lot of things - about why we want to stay healthy, about what HIV/AIDS in our lives means. The next step however, is to set goals for you and make up a game plan for staying healthy.



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Navigate to the next page by clicking the “next” button located on the lower left area of the page

MY GOALS

- 1) **Ask participants to click their “go” buttons again to move the next screen. Introduce goal setting. Briefly explain more general goals. Draw a distinction between general and "HIV Focused" Goals.**

The last thing we'll do today is set a goal for between now and the next session.

We often set goals in everyday life. Goals involve plans to do something. For example, when you got up this morning, you set (or had previously set the goal) of coming to this session. Other examples are saving money for something important, or planning to get together with a friend or to celebrate a family occasion, or planning to go to the clinic to see a doctor for a check-up.

There are many pathways to being safe and it is important that people begin the path for themselves. At the end of each of our sessions together I will help you to set a goal that you can work on. These are small goals that should help you move in the direction of being safer and healthier: making sure that you protect each other from STIs, including HIV. WORTH is about decreasing our risk behavior as a way of making ourselves, our partners and our families healthier. (Yes, in other areas of life we have many goals, but the focus here is on making ourselves healthier by decreasing HIV risk). This is something we can plan for today, and it is an important part of a healthy, loving relationship.



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Short Term Goals are:

Realistic

Clear

Neither too easy nor too hard

Have a clear endpoint

- 2) **Help participants to set risk reduction goals for the next session. When possible, goals should relate to the content of the session just completed, but this depends on the participant's progress, understanding, and life situation. There should be an alternative goal unrelated to sexual activity in case the participant(s) do/does not have the opportunity for a sexual encounter between sessions.**

When you have thought about your goal, you can type it in the text box under “goal”. My co-facilitator and I will be coming around to provide assistance. Are there any questions? Ok you can all get started.

- 3) **If participants choose a sexual risk reduction related goal also have them choose a goal that she can work on if there is no sexual activity that week.**

4) **Facilitators note: If participants can't come up with goals suggest the following**

- Practice alternatives to unsafe sex techniques
- Not drinking/drugging or not drinking/drugging as much.
- Going to an AA or NA meeting



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- Go to a store, a clinic, or health program to obtain condoms, carrying some and keeping others in places where they will be handy;
- Talking about condom use with a sexual partner and suggesting condom use if risk circumstances warrant it;
- Talking about what you would like to explore sexually and how to make it safe
- Asking a partner what would please him/her sexually and exploring how to make it safe

5) Explore any potential barriers and help the participants briefly discuss any concerns.
Talk about why keeping goals may be hard.

Now that we have our goals, let's talk about the things that might get in the way of you accomplishing the goal. What are some barriers that might keep you from accomplishing your goal? Enter barriers you can think of in the 'barriers' box on your screens.

Great! Now, can you think of solutions to overcome each of those barriers? Write those down too.

When you reach your goal, take a few minutes to congratulate yourself. Really do that! Do something special to reward yourself for working to reach your goal. If you slip back into unhealthy behaviors, it will be easier to get back on track, if you can remember that you were able to reach a goal in the past. On the other hand, if, by the next session you have not been able to reach your goal, which doesn't mean you failed. It doesn't necessarily mean it was a bad goal. Please try not to get discouraged, and instead, let's try to talk about it at our next session,



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and maybe we could brainstorm a little more about either modifying the goal, or doing a better job anticipating the things that might get in the way. That is as important to learning to change as being successful: we will learn together, over time, how to avoid relapse.

Check to see whether all participants have entered a goal by clicking on the link labeled, “Check Participant Answers”.

Navigate to the next page by clicking the “next” button located on the lower left area of the screen

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 16:Print Journals”



WOMEN ON THE ROAD TO HEALTH

Activity 15. Print Journals

Objective: 1) To provide participants with material from session one for their reference. 2) To provide written record of goals and risk rating

PRINT JOURNALS

- 1) **Inform participants that they will receive their journal which includes a list of the main topics discussed in each session as well as the goals they set for themselves.**

- 2) **Inform the group that they will be receiving a journal at the end of every session.**

Print out participant journals by clicking on the link labeled “Print HIV information journals for ____’s group”

Navigate to the next page by clicking the “next” button located on the lower left area of the screen

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 16:Wrap Up 1”



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Activity 16. **Wrap Up 1**

Objective

1) To explain the homework assignment. 2) To build group motivation to stay healthy with inspirational quotes and a closing ritual.

HOMEWORK FOR NEXT SESSION

Procedure

- 1) **Explain that at the end of each session we'll close the session with a group ritual, kind of like a cheer or a prayer.**

At the end of each session we will do two things. First, get a little homework to keep the messages going that we've been discussing together. Second, close the session with a group ritual, kind of like a prayer or cheer.

- 2) **Have someone read the quotes one-by-one that appear on the big screen and elicit responses from the group after each quote is read. If no one volunteers, you should read it to the group.**

This is a [quote, lyric, poem, prayer] that some women find uplifting. What we would like you to do for the next session is write down or bring in a quote, song lyric, poem or prayer that means something to you or that you find particularly inspiring or uplifting. Will someone read it aloud to us?



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Okay! What do you think of that statement?

How does it make you feel?

- 3) **Explain the assignment for next week is to bring in an inspirational poem, prayer or quote**

Great, I am glad you liked the quotes. Now these quotes were gather by some of the staff who work on the worth program, but today we want to give you the opportunity to show us how creative you can be by bringing in your own quote, poem, prayer, or even a short song to the next session. To be specific we would like you to bring in an inspirational poem, quote or prayer to share with the group next week. You can create your own or create one on your own. But be sure not to make it any more than 2 minutes long since we want to make sure that everyone gets a chance to share.

Does anyone have any questions on this take home assignment?

Navigate to the next page by clicking the “next” button located on the lower left area of the page

CLOSING

- 1) **Explain the rationale behind the closing ritual.**



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At the end of each session, we will come together in a circle and make a series of positive statements together - this will enforce the idea that the group is a place for women to come together and support one another in staying heal.

Let's take turns reading the lines aloud and then we'll repeat the whole thing as a group. Your name is what goes in the space. So when I give you the signal we are all going to say these statements out loud. Ready?

I am _____ and I will stay healthy

I am _____ and I will protect myself

I am _____ and I will find support for my health

I am _____ and I am WORTH IT! WORTH IT! WORTH IT



WOMEN ON THE ROAD TO HEALTH

SESSION 2: MANAGING RISK



- ***Ensure that all laptops for anticipated use are logged in with participant screen names and passwords.***
- ***log in with your facilitator screen name and password.***
- ***Access worth intervention by clicking on the 'intervention' tab***
- ***Take attendance by clicking on the link on the top right side of the screen labeled "Attendance"***
- ***Click either "Absent" or "Present" beside each name according to which participants are in attendance.***
- ***Click on "session 2: Managing Risk"***
- ***On the agenda screen click on "Activity 1: Welcome" to begin the session.***



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- ***You may click on the “crib notes” link located on the right side of the screen for additional guidance at any time if necessary.***



WOMEN ON THE ROAD TO HEALTH

ACTIVITY 1: **WELCOME**

Objective: The purpose of this activity is to create a calm space in which the group can form and interact.

WELCOME TO SESSION 2

Procedure

- 1) **After everyone has settled into a seat, remind them of the grounding exercise they did last week. Introduce that they will do a similar activity now. Navigate to the second page of the activity and click the play symbol on the video window.**

Welcome back everyone. I hope you all had a great week. Today we have a lot of fun and interesting activities to get through that I think you will enjoy. But first, remember the grounding exercise we started with last week?

We're going to try something like that again. You can close your eyes if you feel comfortable doing so.

Navigate to the next page by clicking the "next" button located on the lower left area of the page

GROUNDING:



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Play the audio recording by clicking on the play symbol on the media navigation tool bar.

- 2) After the audio recording is complete process the experience with the group by asking Probing questions about how they feel**

So now how does everyone feel?

Is it now easier to focus on the session for today?

Great! So now lets review the goals from last week.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 2: Goal Review 2”



WOMEN ON THE ROAD TO HEALTH

Activity 2. Goal Review

Objective

To review risk reduction goals from last week 2) to help participants identify what made their goals successful 3) to identify strategies to overcoming barriers to risk reduction goals.

GOAL REVIEW

Procedure

- 1) **Review the common program goal of protecting ourselves from STI and HIV infection, then move to the personal goals the participants set the week before. Be advised that the suggested script is on the screen and may be used as a guide.**

Okay! So let's talk about how you did with your goal from last session. You see on the big screen some goals we suggested last week:

- *Trying out using different condoms with partners*
- *Trying different ways of putting on a condom to make it more fun*
- *Not drinking/drugging or as much before having sex.*
- *Talking about the need to get tested for HIV and other STDs*
- *Talking about what you would like from your partner sexually and exploring how to make it safer.*
- *Asking a partner what would please him/her sexually and exploring how to make it safe.*



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Maybe some of you chose to work on a goal like one of these. Let's talk about how it went.

Facilitator multimedia Note: The goal that they had set will appear on their computer screen

- 2) **Ask the participants to record their progress in the boxes that appear on their screens.**

Everyone hit the 'go' button on your screen. The goal you set for yourself last week should appear. Record your progress in the boxes that appear on your screen.

- 3) **Help them to identify any problems in reaching the goal and tell them that later on we will learn a new technique for solving problems and breaking through barriers.**

How did working toward your goal go? What was successful about your goal?

Did anything get in the way of your accomplishing your goal? Were you discouraged? What barriers came up?

- 4) **Remember to emphasize that if someone has failed to reach the goal it is okay, and that the situation presents a learning opportunity.**
- 5) **Praise progress.**

Facilitator note

Support the participant by:



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Providing input on identifying problems and obstacles in setting and reaching goals

Praising the participants for what they have achieved

If you did not accomplish your goal from last week, that is ok. Often people in programs like these do not achieve their goals every time. But even if we don't achieve our goals we can still take a lot from it. We should think of it as a learning opportunity that will help us plan for our next attempt.

When ever you do not accomplish a goal the best thing to 1) recognize what got in the way and 2) think about what you can do to address it next time.

6) Encouraging the participants to reward themselves when they achieve their goals

Now in the cases where you actually do achieve your goal it is important to find a way to find a healthy reward for yourselves. Would someone like to share either how they rewarded themselves or how they might reward themselves for accomplishing their goals?

Facilitator note:

If participants have trouble coming up with rewards you can suggest ideas as:

Having warm bubble bath with a candle

Getting their nails or hair done

Having their favorite meal



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Going out for a cup of coffee with their friends

Very good. Now that we have review the goals from last week let's move on to briefly review what we will be discussing today.

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On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 3: Review"



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Activity 3.	Review
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Objective:

To help reinforce participant knowledge around HIV and personal risks

SESSION ONE REVIEW

Procedure

- 1) **Elicit from the group what has been learned in the previous session.**

Ok now that we have reviewed the goals from last week, let's review some of the content we discussed in the last session.

Can any of you recall any of the topics we spoke about in the last session?

Who wants to share what they remember about the ways to protect ourselves from HIVs and STIs?

- 2) **Encourage responses and provide positive feed back for those who accurately recall the topics discussed last week.**

Very good, I see that you have remembered some of the general topics we have discussed.

- 3) **Emphasize the following topics excluding those already mentioned by the group.**



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We had a really productive session last week. During the last session we also

- *Introduced what worth is all about*
- *Identified the reasons to protect ourselves from STIs and HIV.*
- *Identified Myths and Facts about HIV/STIs*
- *Learned important information regarding the prevention of HIV and STI transmission.*
- *Identified ways we can protect ourselves from HIV/STI transmission*
- *Created a social network map to identify sources of support for ourselves*

- 4) **Address any questions or concerns about the topics from the last session before moving on to the next activity.**

Does anyone have any questions on the topics we discussed in the last session?

Great! Now let me tell you what we will be doing today.

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On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 4: Preview”



WOMEN ON THE ROAD TO HEALTH

Activity 4.

Preview

Objective

To preview key topics that will be discussed in today's session

WHAT ARE WE GOING TO TALK ABOUT TODAY?

Procedure

1) Briefly mention the list of topics for the day.

Now today we have several fun and interesting activities. For this session we will

Discover how self-talk can help prevent unsafe sex

Discuss how drugs and alcohol can place us in risky situations

Learn how to use a new technique to address people, place and things that can result in unsafe sex

Review the proper way to use male condoms

Learn about an exciting tool to make safe sex fun and erotic

2) Address all questions or concerns before moving on to the next activity.

Now does anyone have any questions before we begin?



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Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 5: POP”



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Activity 5. POP

Objective

To teach the group a three step problem solving technique to address barriers to HIV/STI risk reduction.

PROBLEM SOLVING THE POP WAY:

Procedure

- 1) **Introduce the steps of problem solving to the group.**

We are going to be spending some time in this session talking about different areas of your life or issues that you would like to improve or change and how different

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On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 7: Safer Sex Negotiation Review”

s or support might help you with these issues. It would be most helpful to think about issues or problems that affect your recovery or well-being. Before we move on to thinking about these issues, I would like to us to work on learning a creative and effective problem-solving approach



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that we think is very helpful in working through different issues and problems that you confront every day. We will also talk later about how this problem-solving approach may be used to avoid or reduce triggers. We have called the problem solving approach “POP” to help you remember the three main steps of problem solving.

POP stands for the three steps of problem solving: Problem, Options, Plan. The first step of problem solving is to identify what the problem really is. Once you've identified the problem, then brainstorm all the ways you can think to solve the problem. These are your options. Finally, pick the best sounding option and make a plan to carry it out.

2) Introduce the video model of POP.

We are going to look at a video of the POP technique or problem solving approach that we just learned. Remember POP stands for:

P = PROBLEM -- Define Problem and its consequences

O = OPTIONS - Brainstorm Options (weigh pros/cons) -

P = PLAN OF ACTION - Come up with a plan to act on best option. Look and See how the plan is working and revise plan if needed. Reward yourself for any progress you make.

In this video Ivette has a problem she presents to the group and together they help her come up with the solution, using POP. After the video is over we will discuss how they used the POP technique to resolve the issue and how you can use it to work through your own problems.



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Play the Pop video by clicking the play symbol in the center of the imbedded video at the bottom of the page. Be sure to enlarge the screen by clicking on the enlarge command symbol on the right side of the media tool bar. Adjust volume as necessary by clicking on the sound symbol on the far right side of the media tool bar.

3)

Navigate to the next page by clicking the “next” button located on the lower left area of the page



WOMEN ON THE ROAD TO HEALTH

IVETTE'S POP:



- 1) **Ask the group to identify the steps of problem solving that they saw in the video.**

Now that you've seen the video, let's talk about how POP worked in Ivette's situation. What was Ivette's problem?

What was Ivette's problem?



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What options were suggested?

What is her plan?

- 2) **Praise group for being able to identify the POP steps from the video and move on to the next activity**

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PRACTICING POP:

- 1) **Explain that there are many problems or triggers that make it more difficult for people to protect themselves.**

So we just saw one example of how problems can get in the way of people protecting themselves. In this example Ivette had the problem of her boyfriend coming out of prison. This led to risk because she still wanted to protect herself and stay clean, while he may not have been on the same page. But there are countless other problems that can get in the way of us protecting ourselves.

- 2) **Ask group members to come up with a problem that they or someone they know may have experienced in trying to stay clean or avoid unprotected sex.**

Can you think of a problem that either you or someone you know has experienced that made it difficult for them to protect themselves?



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Choose one of the responses and type it into the text box under the question “is someone willing to volunteer a problem?” on the big screen.

Facilitation note: If group members are having a difficult time coming up with options suggest some of the following.

My partner may think that I am cheating on him when I bring up using condoms.

When I am drunk I often get careless with condoms

I have never used condoms before, using them now seems awkward

Ok that was a good example of a problem that might come up when we try to protect ourselves. Now let's use the POP technique to address this situation to ensure that we are able to be safe from HIV and STI transmission.

- 3) **ASK Group Members to brainstorm with as many OPTIONS as possible without being critical. Encourage Group Members to Brainstorming some Options that result in a reduction of unsafe sexual or drug use behaviors.**



WOMEN ON THE ROAD TO HEALTH

Now let's brainstorm some options you think may work best to address the problem we are faced with in this example. As you state some solutions, I will just type them in the box for us to view on the big screen. Remember when we brainstorm we just express whatever ideas come to mind. We will evaluate which is the best option after we have all of the possibilities down. So just say the ideas out loud as they come. What can we do about this problem in a way that reduces our risk for HIV and STIs?

Type responses in the text box under "Let's think of some options:" on the big screen.

- 4) **After exhausting the list of options go back over each option and ask the participant to identify the pros and cons of each option.**

Good job coming up with all these options. So now let's see if we can identify which is the best one. We will do this by going over each one and just evaluating whether it is going to actually work in this situation. So let's start with the first one.

- 5) **Ask other group members for their feedback on the pros and cons of each option**
- 6) **Summarize pros and cons of the different options and ask participant what seems to be the best choice for them. The one who shared the problem should be the one who makes the final call on which is the best solution.**



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Alright now that we have identified the pos and cons with each strategy, which seems like the best choice. We may have different answers for this based on our own experience and that's ok

Type the chosen option into the text box under “let’s pick a solution and make a plan” on the big screen.

- 7) **Guide the group through the final step of the POP technique by having them come up with a PLAN to act on the best option they have chosen in the previous step.**

Ok now that we have identified the best solution from the list of options, it is time to come up with a plan to act on it. So what are we going to do to prepare to act on this solution?

Type responses in the text box under “let’s pick a solutions and make a plan:” on the big screen.

- 8) **Review all steps of the problem solving technique that were used and praise the group for their progress.**

Very good, I am glad to see that we were all able to work together and use POP to come up with this strategy.



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- 9) **Remind participants that they should take careful note on how the plan is working and feel free to revise plan as needed. Some problems may take more time to solve than others.**

Remember that as you put this plan in motion you should take careful note at how the plan is working and feel free to revise or change the plan as needed. you should also pay close attention to any progress you make and remember to praise and reward yourselves when you are successful at solving the problem. Some problems are tough and will require different approaches. It is important not to get discouraged in the process and acknowledge the positive steps you are making towards improving your life and supporting your recovery.

We will be practicing this technique at several points throughout the interventions so don't worry if you don't have it completely down yet.

Any questions before we move on?

Navigate to the next page by clicking the "next" button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 6: Risky Situations"



WOMEN ON THE ROAD TO HEALTH

Activity 6.

Risky Situations

Objective: To strengthen participants' ability to challenge their risk rationalizations

TRIGGERS

Procedure



1) Explain the concept of triggers.

Now, we're going to talk about how we get to the moments when we take risks.

It starts with our TRIGGERS as we talked about earlier. Like in a gun, a TRIGGER is the thing that gets the bullet going. TRIGGERS push our buttons which can lead to risky sex and drug use.

TRIGGERS can make us feel that we have no choices, and cannot change or control our behavior. TRIGGERS can be things that make us feel bad enough or good enough to do risky things. So, in order to keep ourselves safe from risky behavior, we need to become AWARE OF OUR TRIGGERS.

2) Cover all the categories of triggers: people, places, things, feelings.



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Unsafe sex and drug use are usually triggered by specific people, places, or things. Some examples may include

- *People – Having a partner who does not like using protection*
- *Places – being at a party where alcohol and drugs are being used, and there are no condoms available.*
- *Moods and feelings – Feelings of being aroused or depressed or in the mood to have fun*
- *Things—Alcohol or drugs that take away your inhibitions to have risky sex.*

Navigate to the next page by clicking the “next” button located on the lower right area of the page

IVETTE’S TRIGGERS

- 1) **Refer to the problem solving video they just watched and elicit Ivette's triggers from the group.**

Now let’s think back for a second at the situation that Ivette was explaining in the beauty shop video we just saw. What were some of the triggers we heard her mention?

- 2) **Ask the participants to push the 'go' buttons on their screen and select all of Ivette's triggers from the icons on the screen.**

Now think about those responses and click the go button on your screen. I would like everyone to click on all the triggers that apply to her situation. We will continue once everyone has made their selection.



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Tally up the responses by clicking on the facilitation tool labeled “check Participant Answers”

- 3) **Review the participant’s answers and discuss what they thought about Ivette's triggers.**

Ok it looks like everyone has selected what they thought Ivette’s triggers were. Would anyone like to share with the group what they selected?

Has anyone had any personal experiences with these triggers?

- 4) **Help the group use POP to overcome the triggers they have had personal experience with**

How can we use POP to overcome your personal triggers?

Thank you for sharing. Now we are going to give you a chance to identify some other triggers to unsafe sex that you have experience.

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On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 7: Self Talk”



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Activity 7. Self-Talk

Objective

To help participants understand how self-talk sets feelings in motion and to help participants become aware of how to use self talk.

WHAT IS SELF TALK?

Procedure

- 1) **Explain that feelings can be triggers and one way to manage them is through your self-talk. Then define self-talk.**

Feelings are deep and often we can't necessarily understand easily why things make us feel as they do... this is because we just keep accumulating feelings throughout our lives and even as kids we might have an experience that triggers a feeling, which can stay with us for life.

One way to counter feelings that are triggers is to try to change the way you think about something. The way to do this is through self-talk.

What is self talk? It's your internal voice; the one that you keep a running conversation with during the day as you go about your business. This internal voice is a constant reflection of how you are feeling... it tells you that you will be late if you don't leave enough time to get somewhere, it tells you that something you said was stupid, if you suddenly feel that you said something stupid.



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2) **Model identifying self-talk by giving an example of how you have used self talk.**

So for example lets say I was trying to quit caffeine and I was tired at work today. Being tired is a trigger to drink caffeine in this scenario so my self talk in this case could be "I cannot maintain energy without caffeine, I can never quit".

Just as the voice tells you negative things, you can TRAIN it to say positive things.

Navigate to the next page by clicking the "next" button located on the lower right area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 8: Arguing against Negative self talk"



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Activity 8. Arguing Against Negative Self-Talk

Objective: to help participants develop the skill of countering negative self talk statements with positive statements as a way to reduce the impact of triggers to unsafe sex.

ARGUING WITH THOUGHTS THAT DEFEAT OUR GOALS:

Procedure

1) Define negative thought patterns.

Sometimes our self talk can be very negative, for example some statements might be ,when I go past the bar I used to drink at, instead of saying, "I'm such a loser... I can't even control myself when I drink," Or "I told myself that I would use condoms all the time, and I messed up and went raw with my friend down the street, I have no sense at all, I might as well inject myself with the virus!"

2) Explain how negative self talk act as a barrier in reaching goals to protect oneself and be healthy.

Often this kind of talk can make it even harder for us to maintain our goals of staying healthy. We can become our own worst enemy when our self talk is always so self damaging.

3) Explain that it is important to train ones self into saying positive statements instead of negative ones and provide an example.



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It is this reason why we must reframe the language we use in our self talk to make it more positive for example!" Instead of saying, "I'm such a loser... I can't even control myself when I drink," I can say, I am going to steer clear of places that trigger me to be unsafe. I will take care of myself and protect myself."

- 4) **Make sure that the concept of arguing against negative thoughts and move on to the next screen.**

Navigate to the next page by clicking the "next" button located on the lower right area of the page

TRIGGERS FOR NEGATIVE THOUGHTS: PEOPLE

- 1) **Explain that there are different situations that can trigger negative self talk that fall in the categories of PEOPLE, PLACES, & THINGS'**

There are different situations that can trigger negative self talk. They can come in the form of people, places, moods, feelings and things.

- 2) **Elicit examples of self talk statements that can be triggered by people.**

What negative self talk can be triggered by people (sexual partners, friends etc)?

- 3) **Model the skill of arguing against negative self talk statements mentioned by the group.**



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- 4) Have the group practice arguing against negative self talk with one other example mentioned in letter c.

Navigate to the next page by clicking the “next” button located on the lower right area of the page

TRIGGERS FOR NEGATIVE THOUGHTS: PLACES

- 1) Elicit examples of self talk statements that can be triggered by places.
- 2) Model the skill of arguing against negative self talk statements mentioned by the group.
- 3) Have the group practice arguing against negative self talk with one other example mentioned in letter a.

Navigate to the next page by clicking the “next” button located on the lower right area of the page

TRIGGERS FOR NEGATIVE THOUGHTS: THINGS

- 1) Elicit examples of self talk statements that can be triggered by drugs.
- 2) Model the skill of arguing against negative self talk statements mentioned by the group.
- 3) Have the group practice arguing against negative self talk with one other example mentioned in letter a.



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Navigate to the next page by clicking the “next” button located on the lower right area of the page

TRIGGERS FOR NEGATIVE THOUGHTS: THINGS

- 1) Elicit additional examples of self talk statements that can be triggered by thoughts.
- 2) Model the skill of arguing against negative self talk statements that are mentioned by the group or presented on the main screen.
- 3) Have the group practice arguing against negative self talk with one other example mentioned by the group or presented on screen.

Navigate to the next page by clicking the “next” button located on the lower right area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 9:Practicing self talk”



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Activity 9.

Practicing Self-Talk

Objective

To improve participants' positive self-talk and reframing skills.

IVETTE'S SELF TALK

Procedure

- 1) Tell the group that they are going to practice what they just learned, first by listening to Ivette and identifying her self talk statements and then by helping her reframe them.

Okay everyone. We're going to spend some time practicing what we just learned about self-talk. Learning to be more positive with your own self-talk takes a lot of practice. We'll start by watching a video that shows Ivette struggling with her own self-talk and helping her to reframe.

Play the video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the medial toolbar. Adjust volume if necessary.



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Navigate to the next page by clicking the “next” button located on the lower right area of the page

- 2) **Ask the participants to follow up questions about Ivette's self-talk statements using the questions on the screen.**

What did everyone hear there?

What kind of trigger was Ivette experiencing and how did she talk to herself about it? Can anyone think of how she could change those statements to be more positive?

Fill in the groups' suggestions by typing their responses in the text boxes provided.

- 3) **When you've filled in several suggestions, praise the group for their work.**

Good job! Everyone contributed really thoughtfully there. Now that you've seen how that works, does anyone want to share an example of a trigger and the self-talk that surrounds it for you?



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Navigate to the next page by clicking the “next” button located on the lower right area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 10: Male Anatomy”



WOMEN ON THE ROAD TO HEALTH

Activity 10. Male Anatomy

Objective: To help familiarize participants with the male anatomy.

MALE ANATOMY:

Procedure

- 1) **Display the onscreen image of the male anatomy and identify the various parts.**

This may be a review for all of you, but a lot of people have told us that before we get into talking about condoms and using condoms, it would be helpful to quickly review the different parts of male and female sexual anatomy. So this is a chance to review and for me to answer any questions you might have before we go on to how to use a male condom.

- 2) **Point out the sex organs inside the body as you describe them.**

The two most visible parts of the male genital area are the penis and the scrotum. Some men have circumcised penises, meaning that the foreskin of the penis has been removed, while some men have uncircumcised penises.

The internal sex organs are made up of the testicles, which are in the scrotum, and are where sperm are created.



WOMEN ON THE ROAD TO HEALTH

Sexual stimulation makes blood flow into erectile tissue inside the penis, causing it to become stiff, hard, and erect. From the testicles, the sperm move to a large tube called the epididymus and through the vas deferens up to the seminal vesicle.

The Cowper's gland is where that tiny bit of pre-cum comes from when the penis gets hard. These drops contain sperm, and this is why it is important not to simply use the withdrawal method of contraception. Sperm in pre-cum is also the reason that a condom should be put on as soon as the man's penis is hard. This pre-cum can cause pregnancy or transmit HIV or other STIs.

As sexual stimulation continues, the man will or may have an orgasm. During orgasm, the sperm travel up the sperm ducts over the bladder (where urine is held) through the prostate gland (where sperm mix with seminal fluid) into the urethra (the same tube used for urination). The sperm and seminal fluid are then propelled out of the penis by rhythmic contractions, called ejaculation.

The anus is here at the end of the rectum.

What questions do you have?

- 3) **Be sure to engage the group effectively in this education process, dispelling myths or asking for their input, for example, what they remember learning in school related to sex and sexuality, family planning, and birth control.**



WOMEN ON THE ROAD TO HEALTH

Facilitator Note: Try to avoid sounding too technical or scientific. Using humor can help put participants at ease.

- 4) **Address any questions so that participants are clear about anatomy before proceeding to the condom demonstration.**

Any questions on the male anatomy before I move we move on to the condom demonstration.

Navigate to the next page by clicking the “next” button located on the lower right area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 11: Male Condoms”



WOMEN ON THE ROAD TO HEALTH

Activity 11. Male Condoms

Objective

To demonstrate, reinforce, and practice correct male condom use.

STEPS FOR USING A MALE CONDOM:

Procedure

1) Introduce Condom use activity.

Okay, now that we have reviewed the male sexual anatomy, let us talk about using male condoms. It is really important that you know how to correctly use latex condoms help keep yourself safe.

2) Pass around condoms so that the women can get familiar with handling them.

Here are some condoms for you to look at and practice with. Here some penis models that we can use to practice using condoms correctly. I will do this first, then I'll give you the opportunity to practice.

3) Put one over your fist to show they don't break and to introduce humor.



WOMEN ON THE ROAD TO HEALTH

Some men may claim to be too big for condoms but if this is true, then they must be bigger than your for arm, and if that's the case, you may have more to worry about than STI infection.

- 4) **Talk about all the different names people use for a condom to increase comfort. Ask the group if they can think of any other creative names.**

Many people have different names for condoms like (eg Jimmy hat, jacket, and rubbers). What sorts of names for condoms have you heard?

- 5) **Show the group where they can read that the condom is latex and where to find the expiration date.**

There are some things we need to keep in mind. First, always use latex condoms. Lambskin or natural condoms should not be used, because they have holes that allow the virus through. A condom should never be used after the expiration date on the package; always check the expiration date on the condom wrapper. Let's look on these wrappers and try to find the date.

- 6) **Use the penis model to demonstrate correct condom use.**

So now I will demonstrate how to use a male condom. Again many of you may already have experience with this so please bare with me.

First choose a latex condom rather than a lambskin one. Make sure you check the expiration date on the package, and check that the package is puffy and has air in it.

Next, open the package being careful not to tear the condom.



WOMEN ON THE ROAD TO HEALTH

Place the condom on the head of the penis, making sure that you leave space at the tip. Putting a drop of lubricant inside the tip of the condom may give the man extra feeling and avoid breakage due to friction.

Pinch the tip to let the air out.

Slowly unroll the condom all the way down to the base of the penis. Be careful to keep his hair out of the way.

If you want lubrication on the outside remember to choose a water-based (e.g., KY jelly® or spermicidal jelly) rather than an oil-based (e.g., Vaseline®) lubricant.

Immediately after ejaculation hold the condom at the base of the penis and carefully pull out before the penis becomes soft.

Roll the condom down and remove it from the penis, making sure that the contents of the tip do not spill.

Dispose of the condom in a trash can.

7) Provide group with penis models and latex condoms.

OK so now that I have given you the demonstration, you will now be given the opportunity to practice on the penis models.

8) Have the participants correctly put on and take off a condom.

9) Assist any members who are having difficulty.



WOMEN ON THE ROAD TO HEALTH

- 10) **At the end of the practice time each member must demonstrate for the group how to put on a condom correctly.**
- 11) **Have the group assist in giving feedback if there is a mistake made, or if the participant forgot anything.**

Praise group for their efforts and address any questions or concerns.

Navigate to the next page by clicking the “next” button located on the lower right area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 12:Eroticizing Safer Sex”



WOMEN ON THE ROAD TO HEALTH

Activity 12. Eroticizing Safer Sex



Objective

To eroticize safer sexual activities and to give participants practice discussing and requesting safer sex activities

THE FANTASY MENU:

Procedure

- 1) **Introduce the Fantasy menu explain the idea of using menu items to communicate about sex.**



WOMEN ON THE ROAD TO HEALTH

Now that we have reviewed different ways to protect yourself, I wanted to share with you our “menu” of safer sex activities. We have created this “Fantasy Menu” to use to help you feel more comfortable talking to your partner about the kinds of things that please you and them sexually. The menu can help you negotiate ways to “explore” sex with your partners.

Participants told us again and again that they wanted to learn ways to make sex more fun. We also heard that it is often difficult to bring up the topic of sex with their partners. Sometimes people feel they might hurt their partner’s feelings, or they feel like they just do not know the words to say, or they do not feel comfortable even saying the words.

Some people told us that they tended to get into a sexual “routine” with their partners—they did the same things and had sex at the same times. They said sex had lost the feeling of “excitement,” the way it did when the couple was first getting to know each other. And they missed that about their relationship.

They also told us, if they did have sex outside their main relationship that they felt the sex “outside” was better. They felt that their outside partners paid more attention to them sexually. Usually, people wished their main partners could give them the attention their outside partners were giving them.

- 2) **Show participants the menu and give them copies to keep and take home.**



WOMEN ON THE ROAD TO HEALTH

- 3) **Review pieces of the menu with the group to give them a general idea of what it contains. Remember to review the concepts of safety and levels of HIV risk involved in each activity.**
- 4) **Explain “condom-ments”: participants should put together a bowl of things they will need for safer sex (condoms, lubricant, any sex toys, etc.) to have on hand before they use the menu. The bowl can be kept in a cupboard, on the night table, or even under the bed, and be refilled from time to time.**

So you can see that the menu tells you to prepare a bowl of 'condiments'. These are all the things you need for safer sex such as condoms, lubricant, sex toys, etc. You'll want them one hand before you use the menu.

- 5) **Explain that before getting to “order,” they may need to think about four things:**
 - **timing of sex**
 - **setting of your conversation about sex**
 - **your readiness to discuss sex**
 - **your own comfort with the topic**
- 6) **Ask the participants to role play and model using the Fantasy Menu. Have the group split up in pairs. Ask one person to play themselves (the one presenting the menu), and the other their partner.**

So what we are going to do now is split you up into pairs. And have you role play presenting this menu to your partner.



WOMEN ON THE ROAD TO HEALTH

So now in this role play I am going to ask one of you to play yourself, that is the one that is presenting the menu, and the other to play their partner.

7) Briefly have them present and model making a request from the menu.

So now that everyone is in their pairs let me tell you the scenario. Let's say that your partner is coming to your place for the night. How might you present this menu to them as a way of getting intimate? So the presenter you are going to present this menu to get your partner interested, and then you are going to present what you want from the menu and get your partner to do the same. I will ask you to switch roles if time permits. Is everyone ready?

OK let's get busy.

8) Give each participant 3 minutes to convince their partners and order, and then switch roles. Be sure to monitor and provide corrective feed back if necessary.

Alright. Good job everyone! Can some of you share what it was like presenting and ordering from the menus?

How was it having someone else present it to you?

What do you think worked well when you were presenting the menus?

9) Encourage the participants to use the menu as a starting point, and encourage them to ask their partner for ideas about customizing the menu to fit their own tastes.



WOMEN ON THE ROAD TO HEALTH

Sex is fun, but since everybody is so different, we need to listen and learn about our partner's bodies, their likes and dislikes, what makes them comfortable or uncomfortable, and so forth, to really get the most out of it. "Can you think of a time when sex was really fun for you?"

Can you imagine a particular time when it might be appropriate to talk about sex and to use the menu? Can you imagine what the setting might be like, when and where do you usually have sex?

- 10) Give feedback and praise them for their efforts. If you feel that the participant needed to use more negotiation skills (SAFE), give examples.

Navigate to the next page by clicking the "next" button located on the lower right area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 13:Introduction to Service check in"



WOMEN ON THE ROAD TO HEALTH

Activity 13. Introduction to services check-in

Objective

To increase motivation to access social services to address participant needs.

CHARLENE'S NEEDS

Procedure

- 1) **Introduce the service check in activity by describing the importance of Support services.**

Many individuals who people often require support in order to get some of their needs met. For example some people often need help getting a job, finding a good drug treatment, or help getting medical insurance and health care. The truth is that there are many services in the community that are available for the purposes of ensuring that you have the support and help that you are looking for.

- 2) **Emphasize the importance of using multiple methods including web searches to access services**

There are many different ways of accessing services including through the phone, walk in or through the web.



WOMEN ON THE ROAD TO HEALTH

- 3) Introduce the video of Charlene talking about service use to get her life back on track

We are now going to view a video that demonstrates how services can help people to address the issues occurring in their lives.

Play the Charlene video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the medial toolbar. Adjust volume if necessary.

- 4) Tell the participants that for this activity they will be working on their own computers to research services that might be of help to them.

What did you think of the video?

What was realistic about Charlene's situation, have you had similar experience? Please explain

Navigate to the next page by clicking the "next" button located on the lower right area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 14:Service Check in"



WOMEN ON THE ROAD TO HEALTH

Activity 14. Introduction to Services Check-in

Objective

To help participants become comfortable with accessing social services systems over the web

SERVICE CHECK IN DEMONSTRATION

1) Briefly demonstrate how to click through the activity.

This is how you click through the support services to find what you need. Keep in mind that you want to copy the name of the service and consider jotting down what you want from that service so you will know what to say when you finally call in.

2) Then ask the participants to click the 'go' buttons on their screens.

Click the “go” button on your screens to begin the process of accessing web based services. When you get to these screens you will be asked to choose between many different needs to get to the appropriate services.

3) Tell them that right now they are just going to focus on one issue, and that the group will return to this activity during the last session as well.

Although we may have many different needs, for the purposes of this activity and time we are going to focus on one main need. Don't worry we will have another opportunity to use this tool in another session.



WOMEN ON THE ROAD TO HEALTH

- 4) **Emphasize that they can take notes or make a plan in the text field provided and that those notes will go into their journal**

As you are searching the internet according to your needs, be sure to type out the numbers and names of the services you wish to seek. There are text boxes provided on your screens for this purpose.

Facilitator note

Be aware that participants may have mandates that require them to attend certain services. Ensure that what the services that they choose here have nothing to do with their court mandates if any.

- 5) **Be available to answer any questions that might come up with participant's individually.**
- 6) **Give group members 10 minutes to search the interface on their own.**
- 7) **Be sure to go around the room and check on each group member and provide assistance when necessary**
- 8) **Provide praise to group members for identifying the social supports that they needed**

Good! I am glad everyone was able to find the appropriate social supports. Most of the service providers included in the guide have 1-800 numbers that can be dialed in any pay phone without requiring a change. Now that we have found services that are important to us, let's move onto to our closing activity.



WOMEN ON THE ROAD TO HEALTH

Navigate to the next page by clicking the “next” button located on the lower right area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 15:goal setting 2”



WOMEN ON THE ROAD TO HEALTH

Activity 15. Goal Setting 2



Objective

To introduce Goal setting and to set goal for the week following Session Two.

MY GOALS



WOMEN ON THE ROAD TO HEALTH

- 1) **Ask participants to click their “go” buttons again to move the next screen. Introduce goal setting. Briefly explain more general goals. Draw a distinction between general and "HIV Focused" Goals.**

Ok let's begin with everyone clicking their “go” buttons.

The last thing we'll do today is set a goal for between now and the next session.

We often set goals in everyday life. Goals involve plans to do something. For example, when you got up this morning, you set (or had previously set the goal) of coming to this session. Other examples are saving money for something important, or planning to get together with a friend or to celebrate a family occasion, or planning to go to the clinic to see a doctor for a check-up.

There are many pathways to being safe and it is important that people begin the path for themselves. At the end of each of our sessions together I will help you to set a goal that you can work on. These are small goals that should help you move in the direction of being safer and healthier: making sure that you protect each other from STIs, including HIV. WORTH is about decreasing our risk behavior as a way of making ourselves, our partners and our families healthier. (Yes, in other areas of life we have many goals, but the focus here is on making ourselves healthier by decreasing HIV risk). This is something we can plan for today, and it is an important part of a healthy, loving relationship.

Short Term Goals are:

Realistic

Clear



WOMEN ON THE ROAD TO HEALTH

Neither too easy nor too hard

Have a clear endpoint

- 2) **Help participants to set risk reduction goals for the next session. When possible, goals should relate to the content of the session just completed, but this depends on the participant's progress, understanding, and life situation. There should be an alternative goal unrelated to sexual activity in case the participant(s) do/does not have the opportunity for a sexual encounter between sessions.**

When you have thought about your goal, you can type it in the text box under “goal”. My co-facilitator and I will be coming around to provide assistance. Are there any questions? Ok you can all get started.

- 3) **If participants choose a sexual risk reduction related goal also have them choose a goal that she can work on if there is no sexual activity that week.**

4) Facilitators note: If participants can't come up with goals suggest the following

- Practice alternatives to unsafe sex techniques
- Not drinking/drugging or not drinking/drugging as much.
- Going to an AA or NA meeting
- Go to a store, a clinic, or health program to obtain condoms, carrying some and keeping others in places where they will be handy;
- Talking about condom use with a sexual partner and suggesting condom use if risk circumstances warrant it;



WOMEN ON THE ROAD TO HEALTH

- Talking about what you would like to explore sexually and how to make it safe
- Asking a partner what would please him/her sexually and exploring how to make it safe

5) Explore any potential barriers and help the participants briefly discuss any concerns.

Talk about why keeping goals may be hard.

Now that we have our goals, let's talk about the things that might get in the way of you accomplishing the goal. What are some barriers that might keep you from accomplishing your goal? Enter barriers you can think of in the 'barriers' box on your screens.

Great! Now, can you think of solutions to overcome each of those barriers? Write those down too.

When you reach your goal, take a few minutes to congratulate yourself. Really do that! Do something special to reward yourself for working to reach your goal. If you slip back into unhealthy behaviors, it will be easier to get back on track, if you can remember that you were able to reach a goal in the past. On the other hand, if, by the next session you have not been able to reach your goal, which doesn't mean you failed. It doesn't necessarily mean it was a bad goal. Please try not to get discouraged, and instead, let's try to talk about it at our next session, and maybe we could brainstorm a little more about either modifying the goal, or doing a better job anticipating the things that might get in the way. That is as important to learning to change as being successful: we will learn together, over time, how to avoid relapse.



WOMEN ON THE ROAD TO HEALTH

Check to see whether all participants have entered a goal by clicking on the link labeled, "Check Participant Answers".

Navigate to the next page by clicking the "next" button located on the lower left area of the screen

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 16:Print Journals"



WOMEN ON THE ROAD TO HEALTH

Activity 16. Print Journals

Objective: 1) To provide participants with material from session one for their reference. 2) To provide written record of goals and risk rating

PRINT JOURNALS

- 1) Inform participants that they will receive their journal which includes a list of the main topics discussed in each session as well as the goals they set for themselves.

Print out participant journals by clicking on the link labeled "Print journals for ____'s group"

Navigate to the next page by clicking the "next" button located on the lower left area of the screen

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 17:Wrap Up 2"



WOMEN ON THE ROAD TO HEALTH

Activity 17. Wrap Up 2

Objective

1) To explain the homework assignment. 2) To build group motivation to stay healthy with inspirational quotes and a closing ritual.

HOMework FOR NEXT SESSION

Procedure

- 1) Remind participants to work on one of their goals

Navigate to the next page by clicking the “next” button located on the lower left area of the page

CLOSING

- 2) Explain the rationale behind the closing ritual.

Let's take turns reading the lines aloud and then we'll repeat the whole thing as a group. Your name is what goes in the space. So when I give you the signal we are all going to say these statements out loud. Ready?



WOMEN ON THE ROAD TO HEALTH

I am _____ and I will stay healthy

I am _____ and I will protect myself

I am _____ and I will find support for my health

I am _____ and I am WORTH IT! WORTH IT! WORTH IT



WOMEN ON THE ROAD TO HEALTH

SESSION 3: SAFER SEX NEGOTIATION



Ensure that all laptops for anticipated use are logged in with participant screen names and passwords.

log in with your facilitator screen name and password.

Access worth intervention by clicking on the 'intervention' tab

Take attendance by clicking on the link on the top right side of the screen labeled "Attendance"

Click either "Absent" or "Present" beside each name according to which participants are in attendance.

Click on "session 3:Safer Sex Negotiation"

On the agenda screen click on "Activity 1: Welcome" to begin the session.



WOMEN ON THE ROAD TO HEALTH

You may click on the “crib notes” link located on the right side of the screen for additional guidance at any time if necessary.



Activity 1. Welcome

Objective:

The purpose of this activity is to create a calm space in which the group can form and interact.

WELCOME TO SESSION 3:



WOMEN ON THE ROAD TO HEALTH

Procedure

- 1) **After everyone has settled into a seat, remind them of the grounding exercise they did last week. Introduce that they will do a similar activity now. Navigate to the second page of the activity and click the play symbol on the video window.**

Welcome back everyone. I hope you all had a great week. Today we have a lot of fun and interesting activities to get through that I think you will enjoy. But first, remember the grounding exercise we started with last week?

We're going to try something like that again. You can close your eyes if you feel comfortable doing so.

Navigate to the next page by clicking the "next" button located on the lower left area of the page

GROUNDING:

Play the audio recording by clicking on the play symbol on the media navigation tool bar.

- 2) **After the audio recording is complete process the experience with the group by asking Probing questions about how they feel**

So now how does everyone feel?

Is it now easier to focus on the session for today?



WOMEN ON THE ROAD TO HEALTH

Great! So now let's review the goals from last week.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 2: Goal Review 3”



WOMEN ON THE ROAD TO HEALTH

Activity 2. Goal Review

Objective

1) To review risk reduction goals from last week 2) to help participants identify what made their goals successful 3) to identify strategies to overcoming barriers to risk reduction goals.

GOAL REVIEW

Procedure

- 1) **Review the common program goal of protecting ourselves from STI and HIV infection, then move to the personal goals the participants set the week before. Be advised that the suggested script is on the screen and may be used as a guide.**

Okay! So let's talk about how you did with your goal from last session. You see on the big screen some goals we suggested last week:

- *Trying out using different condoms with partners*
- *Trying different ways of putting on a condom to make it more fun*
- *Not drinking/drugging or as much before having sex.*
- *Talking about the need to get tested for HIV and other STDs*
- *Talking about what you would like from your partner sexually and exploring how to make it safer.*
- *Asking a partner what would please him/her sexually and exploring how to make it safe.*



WOMEN ON THE ROAD TO HEALTH

Maybe some of you chose to work on a goal like one of these. Let's talk about how it went.

Facilitator multimedia Note: The goal that they had set will appear on their computer screen

- 2) **Ask the participants to record their progress in the boxes that appear on their screens.**

Everyone hit the 'go' button on your screen. The goal you set for yourself last week should appear. Record your progress in the boxes that appear on your screen.

- 3) **Help them to identify any problems in reaching the goal and tell them that later on we will learn a new technique for solving problems and breaking through barriers.**

How did working toward your goal go? What was successful about your goal?

Did anything get in the way of your accomplishing your goal? Were you discouraged? What barriers came up?

- 4) **Remember to emphasize that if someone has failed to reach the goal it is okay, and that the situation presents a learning opportunity.**

Praise progress.

Facilitator note Support the participant by:



WOMEN ON THE ROAD TO HEALTH

- Providing input on identifying problems and obstacles in setting and reaching goals
- Praising the participants for what they have achieved

If you did not accomplish your goal from last week, that is ok. Often people in programs like these do not achieve their goals every time. But even if we don't achieve our goals we can still take a lot from it. We should think of it as a learning opportunity that will help us plan for our next attempt.

When ever you do not accomplish a goal the best thing to 1) recognize what got in the way and 2) think about what you can do to address it next time.

5) Encouraging the participants to reward themselves when they achieve their goals

Now in the cases where you actually do achieve your goal it is important to find a way to find a healthy reward for yourselves. Would someone like to share either how they rewarded themselves or how they might reward themselves for accomplishing their goals?

Facilitator note: If participants have trouble coming up with rewards you can suggest ideas as:

- Having warm bubble bath with a candle
- Getting their nails or hair done
- Having their favorite meal
- Going out for a cup of coffee with their friends



WOMEN ON THE ROAD TO HEALTH

Very good. Now that we have review the goals from last week let's move on to briefly review what we will be discussing today.

Navigate to the next page by clicking the "next" button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 3: Review"

Activity 3. Review

Objective

Help participants reinforce the information that has been reviewed in session 2

SESSION ONE REVIEW

Procedure



WOMEN ON THE ROAD TO HEALTH

1) Elicit from the group what has been learned in the previous session.

Ok now that we have reviewed the goals from last week, let's review some of the content we discussed in the last session.

Can any of you recall any of the topics we spoke about in the last session?

Who wants to share what they remember about the the problem solving technique we talked about last week?

2) Encourage responses and provide positive feed back for those who accurately recall the topics discussed last week.

Very good, I see that you have remembered some of the general topics we have discussed.

3) Emphasize the following topics excluding those already mentioned by the group.

*We had a really productive session last week. During the last session we also
Learned how to use the POP problem solving technique*

Identified drug and alcohol triggers that result in unsafe sex.

Discussed how to overcome triggers using counter strategies

Reviewed how to properly use a male condom

Learned how to use the Fantasy Menu to make sex fun and safe



WOMEN ON THE ROAD TO HEALTH

- 4) **Address any questions or concerns about the topics from the last session before moving on to the next activity.**

Does anyone have any questions on the topics we discussed in the last session?

Great! Now let me tell you what we will be doing today.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 4: Preview”



WOMEN ON THE ROAD TO HEALTH

Activity 4. Preview

Objective

To preview key topics that will be discussed in today's session

WHAT ARE WE GOING TO TALK ABOUT TODAY?

Procedure

1) **Briefly mention the list of topics for the day.**

Now today we have several fun and interesting activities. For this session we will

- *Learn about alternatives to risky sex*
- *Review the proper way to use the female condom*
- *Learn how to overcome situations that make it difficult to have safer sex*
- *Revisit social support network map*

Does anyone have any questions before we begin?

2) **Address all questions or concerns before moving on to the next activity.**



WOMEN ON THE ROAD TO HEALTH

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 5: Female Anatomy”



WOMEN ON THE ROAD TO HEALTH

Activity 5. Female Anatomy

Objective

The purpose of this activity is to review female anatomy prior to female condom demonstration, to answer any questions/clear up misconceptions about female anatomy, and to review information about keeping the vagina healthy

REVIEW OF THE FEMALE ANATOMY

Procedure

- 1) **Display the onscreen images of the female anatomy and identify the various parts.**

Okay, just like we did with the male anatomy, we will review the female anatomy.

It seems like many people know about the male anatomy because it is in plain sight. Fewer people know about the female anatomy because most of it is out of sight, inside a woman's body. So this is a chance to review and for me to answer any questions you might have before we go on to female condom use.

- 2) **Point out each body part on the diagram as you discuss it.**

The female genital area is called the vulva; vulva means opening. The only way for a woman to see her vulva is with a mirror.



WOMEN ON THE ROAD TO HEALTH

The vulva is made up of a number of parts:

Outer labia: *The outer labia are two thick folds of skin, sometimes called the lips of the vagina.*

The outer labia are made of fat and have hair growing on them (pubic hair).

Vaginal opening: *This is the opening to the vagina. It is a tube leading to the internal sex organs. This is where the penis fits during sexual intercourse. It is also where babies leave the mother's body when they are born. The opening is small and it is able to stretch painlessly.*

Clitoris: *The clitoris is not directly involved in reproduction, but it is one of the most important parts of a woman's body for sexual arousal. The clitoris is a highly sensitive area of skin that, when stimulated, is very arousing for women. It is important that sex partners know that the clitoris is as sensitive to women as the tip of the penis is to a man. Caressing the clitoris in a gentle way is very sexually exciting.*

Navigate to the next page by clicking the “next” button located on the lower left area of the page

REVIEW OF THE FEMALE ANATOMY CONT..



WOMEN ON THE ROAD TO HEALTH

- 3) **Display the onscreen images of the female anatomy and identify the various parts.**
Point out each body part on the diagram as you discuss it.

The following are the female sex organs inside the body. (Be sure to point out on the diagram as you describe):

Ovaries: Women have two ovaries. They are low in the abdomen on each side. Ovaries are the sacks that produce eggs, which are released once a month and lead to a woman's period (menstruation). Ovaries are attached to the uterus by fibers. Full sized ovaries are about the size of almonds.

Fallopian tubes: The fallopian tubes are muscle-like tubes. They are about four inches long (9 centimeters) and as thick as a pencil. Extending outward from the upper end of the uterus, their finger-like ends sweep the surface of the ovaries and wave the egg into the fallopian tube. Inside are microscopic hairs that move the egg towards the uterus and the sperm towards the egg.

Uterus: The uterus is the size of a pear turned upside down. This is the womb where fertilized eggs develop into fetuses, and the baby grows. It has a muscular wall and many veins.

Cervix: The cervix is known as the neck of the womb. A narrow canal runs through the cervix, connecting the uterus and the vagina. When a woman gives birth, the canal gets much wider to let the baby pass. If you are comfortable with doing it, you can actually use your fingers to feel your cervix. Also, during intercourse sometimes you can feel the penis bump up against the cervix.

Vagina: This is a tube about five inches (12 centimeters) long that connects the uterus with the outside of the body. Normally the walls of the vagina are quite close together; it is arranged in



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folds like a large accordion. This means that it can be stretched enough for the birth of a baby. There are glands in the vagina that produce a cleansing and lubricating fluid.

This leads to the next point, which is very important for women.

4) Normalize the idea that many women were misinformed about sexual health while growing up.

Many women have explained to us that they were given misinformation growing up about their sexual health, particularly about issues such as douching. Many women told us that no one explained to them how to keep themselves clean and to avoid getting yeast infections or other vaginal infections. Some of the things girls may learn as children, like the idea that douching is healthy, are false. We want men and women to know about how to keep your vagina healthy so women can stay healthy and men can help the women in their lives stay healthy.

5) End the discussion with the vagina to lead into a discussion of douching.

Many women have told us that they are concerned about the cleanliness of their vagina and this has led them to practice douching, or using a liquid to flush out the vagina, on a regular basis, as part of their personal hygiene. You may have seen advertisements or commercials for douches.

Medical professionals are now explaining that douching can have negative health effects:

Frequent douching can destroy beneficial bacteria in the vagina, which sometimes leads to an overgrowth of disease-causing organisms that produce vaginal infections.



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Frequent douching reduces the acidity of the vagina, which can make a woman more susceptible to infections.

Frequent douching is a risk factor for pelvic inflammatory disease, which is a serious infection involving the inner reproductive organs in women.

Douching should never be used to treat vaginal burning, itching, discharge, or odor, because it might cover up serious symptoms of an infection or an STI, and would delay medication which might help.

Douching will not protect you from HIV or other sexually transmitted infections!!!

So there are probably no major health risks associated with infrequent douching (once or twice a month or less), but many medical professionals are telling women that it is best not to douche unless recommended by a physician or other medical specialist.

6) Finally, discuss yeast infections.

Another important part of having a healthy vagina is trying to reduce your risk of getting a yeast infection. Yeast infections can be brought on by stress, douching, pregnancy, antibiotics, or eating foods that create an imbalance in the natural bacteria in the vagina. Many women get yeast infections. There are many new over the counter medications you can use to treat yeast infections.

If a woman experiences itching, burning, odor, or a heavy discharge it is best to see a doctor. In rare cases, yeast infections can be passed sexually. Yeast infections may be another reason to use a male or female condom or avoid intercourse, but they do not mean that your partner has



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been with anyone else. We think it is important for women and men to know about yeast infections because two out of every three women who think they have a yeast infection do not have one.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 6: Female Condoms”



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Activity 6. Female Condoms

Objective

The purpose of this activity is to learn to use female condoms correctly.

USING FEMALE CONDOMS:

Procedure

1) Introduce the female condom video.

Now I have a question for you. What transmits warmth, makes a man's penis feel good, doesn't smell like latex, looks funny and can squeak?

Collect answers from the group and then provide the answer if they didn't come up with it on their own.

A female condom!

2) Encourage sharing of preconceived feelings and ideas about the female condom.

What ideas did you already have about female condoms? Like: What would they look like? What would they feel? How would you use them?



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Let's see the real thing.

Play the female condom video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the medial toolbar. Adjust volume if necessary.

- 3) **Pass out sample female condom so that the participants can see, touch, and hold it.**

Okay, so go ahead and take it out of the package. Look at it; get the feel of it; see if you can stick your hand inside of it.

- 4) **Demonstrate correct use of the female condom, using the female anatomy model.**

I will talk us through the steps to using the female condom. Remember that the female condom can be put in up to eight hours ahead of time and not in front of your partner if you wish. On the other hand you could teach your partner how to insert it and make it part of your lovemaking.

- 5) **Exaggerate each step, demonstrate slowly, and talk about what you are about to do before you do it.**

Check the expiration date and carefully pull the two sides apart from the center.



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Take out and examine.

Rub the outside of the condom to make sure lubricant is evenly spread.

Add more lubricant if needed – one quick squeeze.

One nice thing about the female condom is that you can use any kind of lubricant you want – water or oil-based. This is different from the male condom, like we learned a few minutes ago, where we should only use water-based lubricants. The female condom is made out of polyurethane and is very durable.

To insert:

Find a comfortable position – one foot up on chair, sit with knees apart, and lie down.

Make sure the inner ring is at the bottom, closed-end of the condom.

If you wish, add a drop of extra lubricant to the closed-end outside tip or to the outside ring before you insert.

Hold the condom with the open end hanging down.

While holding the outside of the condom, squeeze the inner ring with thumb and middle finger.

Place your index finger between the thumb and middle finger and keep squeezing the inner ring.

Still squeezing with your three fingers, with your other hand, spread the lips of your vagina.

Insert the squeezed closed-end of the condom.



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Take your time. If the condom is slippery to insert, let it go and start over.

Now push the inner ring and the condom the rest of the way up into the vagina with your index finger. Check to be sure the inner ring is up just past the pubic bone, against the cervix, so that it is completely covered.

You feel your pubic bone by curving your index finger when it is a couple of inches inside the vagina.

Make sure the condom is inserted straight and not twisted.

Make sure that the outside ring lies against the outer lips, covering the outside of the vagina.

To remove it:

Squeeze and twist the outer ring to keep the semen inside the condom.

Pull out gently.

Throw away in a wastebasket – not down the toilet.

- 6) **Move onto participant practice.**
- 7) **Have each participant practice placing and removing a condom, with facilitator guidance and feedback, until the skill is mastered.**

Now, let's practice inserting and removing female condoms from the models. You might want to hold the pelvic model between your legs to get a better feel for the steps you need to follow to use a female condom.



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- 8) **Encourage those who find insertion easy to practice with their eyes closed (as if in the dark).**
- 9) **Point out the pros of the female condom.**

There are some very positive things about the female condom. It can give you more control over a situation. It can be put in up to 8 hours before sex, so you don't have to stop in the "heat of the moment." Or it can be worked into love-making with your partner.

In terms of sensation, polyurethane conducts heat better than latex, so couples say they like the feeling better than male condoms. It is also loose enough that it does not squeeze the penis.

Fewer people have allergies to polyurethane than to latex. Women can go to the bathroom while the female condom is in place.

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On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 7: Female Condoms"



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Activity 7. Barriers

Objective

To help participants identify barriers to their safer sex behaviors, and begin to develop problem solving skills to address these barriers.

BARRIERS TO CONDOM USE:

Procedure

- 1) **Introduce the concept of barriers using the barriers categories on the screen as a guide.**

Now that we have talked about the importance of using condoms and demonstrated how to properly use them, we are going to talk about reasons that we might not practice safer sex behaviors. As you can see, there are several categories that these reasons may fall under display the newsprint with the categories on the Easel pad.

- 2) **Elicit barriers to condom use from the group**

What are some reasons that we or our partners do not use condoms?

Record elicited response from group members in on screen text box.

- 3) **When you are done listing barriers, ask the group to choose one common barrier.**



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USING POP TO OVERCOME BARRIERS

- 4) **Ask the group to create a plan using pop to overcome the barrier they have chosen.**

You’ve come up with a very good list of condom use barriers. Now I’d like us to apply the POP problem solving method that we learned in our last session to one or two of these barriers.

Record the chosen problem by typing it into the text box under “problem”.

- 5) **Ask the group to brain storm a list of different options to overcome the barrier.**

Now that we have identified a problem, lets brainstorm some strategies to protect ourselves.

Record the elicited responses by typing them into the text box under “options”.

- 6) **Ask the group to choose the best solution and come up with a plan.**

Now let’s evaluate these strategies and choose the best solution, then come up with a plan.



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Record the elicited responses by typing them into the text box under “plan”.

7) **Praise the group for the efforts and address any questions or concerns**

Excellent work. We were able to brainstorm a list of solutions and come up with a plan to reduce our risk of injection. Now we are going to talk about another skill that is important to keeping ourselves healthy.

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On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 8: Introduction to Negotiation”



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Intro to Negotiation

Objective

Participants will learn the importance of safer sex negotiation and will acquire skills for safer sex negotiation

HOW DO YOU GET SOMEONE TO DO SOMETHING?

Procedure

- 1) **Ask the groups they think are the different methods to getting people to do something that they want.**

So now we are going to talk about negotiation, what are some ways to get someone to do something that you want?

Record the elicited responses by typing them into the text box on the screen.

- 2) **After the group has generated a list make sure all the following tactics are mentioned:**
 - request/ask
 - demand/order
 - persuade/give reasons
 - threaten with physical harm
 - use humor or a trick



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Facilitator note:

- Some things on the list should not be considered at all, like threatening someone
- Of the other things on the list, some are better than others, depending on the situation.
- Be sure to provide corrective feedback on methods that are unsafe or threatening. You may do this gently by helping the group to identify the cons of the methods in question.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

3) Introduce the concept of negotiation.

Take responses and then clarify by saying: negotiation means to arrive at some sort of solution or agreement to a problem by talking to and listening carefully to another person.

- 4) Define negotiation for the group as : arriving at some sort of solution or agreement to a problem by talking to and listening carefully to another person.**
- 5) Introduce Negotiation of Safer Sex Skills:**



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In today's session we are going to practice how to talk to your partner to persuade him to use condoms or get tested with you. We have been talking about how difficult or risky this can be. I am going to teach you some skills - but I want to stress - that each of you is the expert in your own life, in your own situation. We can teach you the basics but it is ultimately up to you to use these techniques and skills safely. We will cover two different approaches to negotiating condom use or HIV testing with your partners. "Direct Negotiation Skills or SAFE Talk" and "Alternative Safe Refusal Skills. Direct Negotiation Skills using SAFE talk can be used with to convince partners who you feel are not threatening with to use condoms. Alternative Safe Refusal Skills can be used with in cases where you feel that your partner might become violent or threatening if you ask him to use a condom or get tested. The goal here is to use a strategy that will keep you safe from HIV/STIs and keep you safe in your relationship. You need to decide what would and wouldn't work with your partner. You are the best judge of that.

When it comes to negotiation and refusal always remember to be "SAFE."

- *Say what you want.*
- *Actively listen to your partner*
- *Find something positive.*
- *Explore safer sex alternatives with partner*

Step one is to say what you want clearly using "I" statements. Explain briefly why you want it, without accusing the other person or using blaming language or bringing up the past. Example: I really value our relationship and want to use condoms to make sure we protect each other from HIV or other STIs that we may have been exposed to in our previous relationships. There are over 27 STIs some of them like herpes and genital warts are viruses that cannot be treated.



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Step two is to actively listen carefully to your partner and really try to understand where the other person is "coming from." Make sure to let your partner know that you have heard him by repeating what he said in your own words even if you disagree with him. Example: I hear that you don't like the feel of condoms and you don't like rubber coming between us because it makes you think of our relationship as a one-night stand.

Step three is to find something positive in what your partner is saying, and turn their negative objection into a positive thing. Then say "I hear (the positive) you." If you cannot think of a way to turn around your partner's specific statement, say something else complimentary. Once things are more positive, use assertive communication. Acknowledge and praise partner's progress toward coming around. Example: I really appreciate that you value our relationship and don't want condoms to get in the way. For me condoms are sign of love and protection and I know I can make using them fun and sexy so they won't get in the way.

Step four is to explore safer alternatives using POP to brainstorm options with your partner to protecting each other. Try to reach a solution to the problem together, without sacrificing your bottom line. (which is using a condom or other safer sex alternative/safer sex option).

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On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 9: Negotiation"



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Activity 8. Negotiation

Objective

To allow the participants time to practice hearing and understanding the steps of negotiation.

NEGOTIATION VIDEO

Procedure

- 1) **Tell the participants they are going to watch a video where Joy uses the SAFE technique successfully.**

Now let's watch Joy putting these steps into action.

Play the safer sex negotiation video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the medial toolbar. Adjust volume if necessary.

Ok what did everyone think of this video?

- 2) **Tell the participants to click the 'go' button on their screens.**

OK now click "go" on your screens.



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- 3) Say that the group will look at parts of the video again and vote on which step Joy uses during each clip. After each vote, elicit discussion around what they saw in the clip.

Now we are going to look at parts of the video and identify the steps that she took to negotiate safer sex.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

FIRST VIDEO

- 1) Introduce the first part, and remind participants that they will be asked to vote on the step they see on the video

Play the safer sex negotiation video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the medial toolbar. Adjust volume if necessary.

- 2) Ask the group to vote on which negotiation step they heard
- 3) Check answers and have a discussion about how they saw their chosen step used in the video.



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SECOND VIDEO

- 1) Introduce the first part, and remind participants that they will be asked to vote on the step they see on the video

Play the safer sex negotiation video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the media toolbar. Adjust volume if necessary.

- 2) Ask the group to vote on which negotiation step they heard

Check participant responses by clicking on the “Check participant Answers link on the right side of the screen.

- 3) Check answers and have a discussion about how they saw their chosen step used in the video.

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THIRD VIDEO



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- 1) Introduce the first part, and remind participants that they will be ask to vote on the step they see on the video

Play the safer sex negotiation video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the medial toolbar. Adjust volume if necessary.

- 2) Ask the group to vote on which negotiation step they heard

Check participant responses by clicking on the “Check participant Answers link on the right side of the screen.

- 3) Check answers and have a discussion about how they saw their chosen step used in the video.

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FOURTH VIDEO

- 1) Introduce the first part, and remind participants that they will be ask to vote on the step they see on the video



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Play the safer sex negotiation video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the medial toolbar. Adjust volume if necessary.

- 2) Ask the group to vote on which negotiation step they heard

Check participant responses by clicking on the “Check participant Answers link on the right side of the screen.

- 3) Check answers and have a discussion about how they saw their chosen step used in the video.

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NEGOTIATION PRACTICE

- 1) Ask participants to role-play possible responses to partner. Co-facilitators should coach participants on using reflective listening and assertive communication using I statements and give feedback to participants. For the following responses ask for a participant volunteer to role-play following partner responses below.

Partner: Condoms will ruin sex! I hate them!

- *Volunteer role-play response*



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Partner: You've had sex with somebody else!

- *Volunteer role-play response*

Partner: _Condoms are for one night stands that is _

- *Volunteer role-play response*

Partner: We don't have to use condoms because you know I'll always take care of you.

- 2) **At the end of this role-play exercise, facilitators should summarize range of possible responses that may be used in turning around their partners' resistance and review the key points of assertive communication techniques (i.e., use I statements, listen and acknowledge partner's concerns about using condoms, reframe using condoms as a way a partner can show his caring and concern for you, avoid blaming statements, acknowledging partners responses)**
- 3) **Praise participants for their efforts and address any questions or concerns.**

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On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 10: Alternatives To Negotiation”



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Activity 9. Alternatives to Negotiation

Objective

This activity introduces the concept of safe refusal, gives participants a chance to develop a strategy for negotiating with their specific partners(s) and lets them anticipate when and where safe refusal may be necessary.

SAFE REFUSAL SKILLS

Procedure

1) Introduce Alternative Safe Refusal Skills.

Whenever possible it is better to use straight talk to negotiate your needs with your partner - it will help build communication and strengthen your relationship with your partner. As I said earlier, however, you may not always feel safe using straight talk with your partner.

2) Ask group members to identify situations that they or their friends have encountered that may have called for alternative safe refusal skills.

So what are some examples of situations where negotiation may not work?



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SAFE REFUSAL SKILLS CONTINUED...

- 1) **Summarize range of situations in which alternative safe refusal may be a better option than safe talk.**

Alternative safe refusal involves coming up with a way of refusing unsafe sex that will not set off your partner when you feel you can't use straight talk.

Review strategies that women have successfully used to refuse sex without condom when their afraid their partners will become violent or threatening or them their partner is drunk or high and unreasonable.

If you don't feel safe negotiating with your partner, what else can you do? Here are some alternative strategies:

Tell him you really does not feel well

Tell him you has her period and is in too much pain

Rollover and pretend you are asleep

Tell him that your doctor recommended using a condom because it will help prevent getting a yeast infection a non-STI.

Recommend an alternative to penetrative sex - a hand job



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These strategies are not for everyone, only for people who decide that being direct will not work for them in the particular relationship that they are in.

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AN EXAMPLE OF AN UNSAFE SITUATION

- 1) **Introduce the video of Amanda discussion a situation where she had to use an alternative negotiation strategy.**

In the video we're going to watch, we are going to see Amanda in a situation where Negotiation is not an option. Pay close attention because we are going to be discussing this after.

Play the alternative to safer sex negotiation video by clicking the play symbol in the center of the imbedded media player screen. Be sure to enlarge the imbedded screen by clicking on the enlarge symbol on the right side of the medial toolbar. Adjust volume if necessary.

REVIEW AMANDA’S SITUATION

- 1) **Have a discussion with the group using the on screen questions as a guide.**

Ok, let's talk about what we just saw. What was Amanda's problem in this video? What was her goal? What were her options?



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NEGOTIATION STRATEGIES FOR YOU

- 2) **Ask group members to pair up and work on negotiation plan.**

Now lets break up into groups of two and think of some alternative negotiation strategies.

- 3) **Ask one member of the pair to go first in coming up with a negotiation approach and the other member should help by asking the questions listed on the screen.**

Everyone get into pairs and use the questions you see on the screen to come up with negotiation strategies that can work for you.

- 4) **Give the group adequate time to complete this activity being mindful of the on screen timer.**

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- 5) **Reconvene the group and ask pairs to share their alternatives to safe talk strategies**

Ok, so what were some situations that you discussed? What strategies did you think of?



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Record the elicited responses by typing them into the text box under “strategies”

- 6) Ask pairs to share their responses and counter responses with the group

Record the elicited responses by typing them into the text box under “responses and counter responses”.

- 7) Select a challenging negotiation situation from the exercise above that involves a straight talk approach.

Great, now that we have a list of possible situations that may come up, let's choose one to role play.

- 8) Ask for two members to volunteer playing the partner and the woman using straight talk to negotiate condom use or testing.
- 9) Prompt the woman to go through the 4 steps of straight talk.
- 10) Ask other members to give feedback and help out the participant playing the woman if she gets stuck

Good job remembering the SAFE technique to negotiate safer sex. Now although this technique may work in many instances, there are other situations in which refusing to have unsafe sex may put us in danger. For example some intimate partners may become violent as a result of



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you refusing to have unsafe sex with them. In such cases it is important that we have a plan to ensure that our health and safety remain intact in our attempts to refuse unsafe sex.

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On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 11: Social Support Map Review”



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Activity 10. Social Support Map

Objective

The purpose of this exercise is to establish the usefulness of social support networks and to identify the participants' social support networks.

SOCIAL NETWORK MAP

Procedure

1) Introduce and describe the social network map.

Today we are going to revisit the social network. Remember a Social Network is the collection of people in your life that you come into contact with - either every day, or maybe only on rare occasions. Friends, family members, neighbors, people at your job, people at your child's school are all examples of your social network. It can also include counselors or service providers with whom you have developed a working relationship.

Today you are going to complete your own social network map, so you can see for yourself what your social network actually looks like.

2) Ask the participants to click 'go' on their screens to pull up their network maps.

This exercise is one way to begin to draw a map of the people in your life who can support you and help you achieve your goals for protecting yourself and having a healthier life.



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3) Show how to add people to the Social Support Network Map.

This may look intimidating but it is pretty easy to create a social support map on this screen. The rectangles represent people in your life. As you can see the little stick figure in the corner represents you, which is at the center of the three shaded circles. Now you can click one of the rectangles and drag it to add a person to your network and place them one of the concentric circles. If you speak to this person or spend time with them often I may place them closer to the stick figure, you, on this map. If not, they would go farther away.

When you have placed that rectangle on the network you can just click the rectangle to type in that network members name like so.

- ***Show how to add people by clicking and holding on the green, yellow or red icon on the Lower left side of the screen under “behavior change support level”. Drag the box into one of the three concentric circles. And repeat this two more times.***
- ***Demonstrate how to name social network members by clicking into the boxes in the area labeled “click to change name”. Type a names in the spaces provided.***

- 4) **Allow participants a chance to add their own network members. Be sure that all group members have completed this portion before moving onto the next exercise.**
- 5) **Briefly discuss with each participant who he/she put on his/her Social Support Network Map and how those people can assist him/her when he/she may need help or support.**



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- 6) **Go back to the demonstration map to explain the second part of the activity. Point out that often people who are very good at figuring out problems are not the same people who are very sympathetic but may not know how to assist in solving problems or in offering practical advice. Remind participants that each of them may have different needs at different times, and that they may notice the same person on their maps offering different kinds of support.**

Now that you have identified people who provide social support, let's talk about what types of help these people provide. What do other people help you with? How are they "there for you?"

- 7) **Give examples for all the different types of help. Use your own examples or those in the sample script below.**

There are different kinds of support that people give to each other. They may provide companionship, they may provide practical support, they may advise you or help you to solve problems, or they may simply sympathize with you. Sometimes they have been through the same type of situation and they can understand and share your feelings.

Take a look at your Social Support Network Map and think about how these people support you.



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People can give all different kinds of help to each other. For example, a friend may baby sit for you, go with you to the movies, or both.

Practical:

Last week I had a doctor's appointment, and I could not find anyone to provide child care for my kids. My friend offered to help me out by watching them for two hours for me.

Sympathy/Empathy:

Last month my aunt died. I really miss her. My friend, John, listened to me talk about how much I missed my aunt. He couldn't fix it, but it really helped that he understood.

Problem Solving:

Six months ago I lost my job. I haven't been able to find anything else. My friend Tyrone told me about a community organization that teaches new skills and even pays a stipend while you learn and then helps to place you.

Social:

My friend Lydia is really into movies. I don't talk to her much on the phone because movies are all she talks about. When I want to see a movie, I call Lydia

- ***Demonstrate how to indicate Support type of network members by clicking and dragging one of the lettered icons under "Types of support" into the social network member box you created.***



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- 8) **Ask each participant to add types of support to the people on their map. Take time to help each participant work on their map.**

Now adding social support types to your networks are pretty simple. Just move the pointer over to where it lists “S” for Social, “A” advice, “P” for practice and “U” for understanding. Click and hold one of the letters and drag it over to the rectangle or person that you believe offers you that support.

- 9) **Model pointing out strengths and weaknesses in their social network. Review map strengths and weaknesses with the participants. Ask each participant to point out her network’s strengths and weaknesses. Briefly discuss how he or she might go about strengthening their social network.**

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 12: Risk Networks”



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Activity 12. Risk Networks

Objective:

The purpose of this exercise is to help participants identify network members that are associated with risk for HIV/STI transmission

RISK NETWORK

1) Introduce and describe the risk network.

Now that we have identified our own individual networks, we are going to discuss something called the risk network. A risk network is the collection of people in your life that you may in one way or another place you at risk for abusing drugs, having unprotected sex, perpetrating violence or becoming a victim of violence. Now most people have some people in their networks that may increase the chances that we are placed in situations that put us at risk. For this reason it is important that we identify who these people are so that we identify a way to prevent them from increasing risk in our lives.

So let's get started.

2) Ask the participants to click 'go' on their screens to pull up their network maps.



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3) Show how to add people to the risk network according to level of risk.

4) **Facilitator note:** As you are demonstrating creating risk network members using the steps below, be sure to state what you are doing out loud step by step. This will make it easier for participants to complete this exercise on their own after you are done.

Demonstrate how to add risky social network members by clicking and holding on the one of the three colored icons under “Step 1: Add person to your map”. Drag the box into one of the three concentric circles. And repeat this two more times ensuring that each of the three concentric circles includes a network member.

Demonstrate how to name social network members by clicking into the boxes in the area labeled “click to change name”. Type a names in the spaces provided.

5) **Allow participants a chance to add their own network members. Be sure that all group members have completed this portion before moving onto the next exercise.**

So now that I have demonstrated how to create risk network members, why don't you all give it a shot? I and my co-facilitator will be coming around to help anyone who needs assistance. Remember to place the names according to how close or intimate they are to you.



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So the circle with the darkest shade of gray that is closest to your name should be full of people with whom you are the most intimate. These are people that you are in close contact with and that you tend to trust and rely on. These may include friends, partners and relatives you speak to on a frequent and consistent basis.

The second band should contain people with whom you have on-going contact, but might still not feel as close to these people. These people might include case managers, co-workers, counselors or parole officers. Most people might consider these impersonal relationships, where personal intimate information is rarely discussed.

The outer most band is contains members who you are the least intimate with. This band contains people that you greet in a light and casual way (e.g. grocers, neighbors, etc.). People often express these people as on a “hi & bye” basis.

Ok any questions? You can now get started.

- 6) **After the group is done, go back to the demonstration map to explain the second part of the activity. Give an example of each type of risk including “drugs” “unsafe sex” and “violence”. Point out that often people who tend to encourage you to get high would get the drugs label, while people who encourage or pressure one to engage in sex without condoms would receive a “u” for unsafe sex. And finally, those who may place the participant at risk of getting physically hurt would receive a label “V” indicating risk for violence.**



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So as you have different people in your risk network, each person may increase risk in different ways. For instance

Drugs

Imagine going to a party and your girlfriend offers you a joint even though you may have expressed to her that you're trying to stay clean after getting out of jail. This is an example of how someone can place us at risk for drug use.

Unsafe sex

Imagine having a boyfriend whom, when he gets drunk or high and wants sex, he insist on doing it raw. This is an example of someone very close placing who might increase risk of unprotected sex

Violence

Imagine you are in a relationship with a partner who becomes violent or angry every time they get drunk. So in that example an intimate partner who is close may place us at risk of getting hurt.

Demonstrate how to indicate risk type of network members by clicking and dragging one of the lettered icons under “Add types of risk” into the social network member boxes you created.



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- 7) **Ask each participant to add types of risk to the people on their map. Take time to help each participant work on their map.**

Take a look at your Social Support Network Map and think about how these people might increase risk in your life.

- 8) **After the group members are done debrief on their experiences in doing these activity.**

What do you notice about your networks?

Are you surprised by what you saw?

What kinds of risks did you see coming up most often, violence, drugs or unprotected sex?

Where there some network members that put you at risk in more than one way?

If so, how?

What can you do about the people in your life that increase risk for you?

- 9) **Summarize the discussion and move on to the next activity.**

Thank you for sharing all that personal information. The social network and risk maps will be printed out for your future reference. We will be talking about ways to deal with triggers for unsafe behaviors throughout WORTH. Next week we are going to learn a way to address this



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using a problem solving technique that has proven effective with many people who have participated in programs like this.

Are there any questions before we close today's session?

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 13: Injection Drug Use”



WOMEN ON THE ROAD TO HEALTH

Activity 13. Injection Drug Use

Objective:

Review the factors that can increase one's risk for contracting an STI through using unclean needles.

USING CLEAN NEEDLES

1) Introduce Injection drug use as a risk factor for HIV and Hepatitis C

Now, we are also going to talk about injection drug use. Some people who use drugs may inject using dirty needles. Using dirty needles is one way that someone can contract HIV or Hepatitis C. So, we will talk about ways to minimize the risk of infection and usage.

2) Introduce Skill: Review the reasons for using clean needles

While we have been learning different ways to practice healthy behaviors and stay safe, we all know that sometimes we slip or that sometimes we see our friends slip. So while some of us will never slip, until we all get to that point when we never pick up a needle again, it is important to protect ourselves by always using a clean needle. Unclean needles are dangerous because they contain blood, and blood carries the virus.



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Many injecting drug users are already infected with HIV. The purpose of cleaning the syringe and the cooker is to get out the blood and kill the virus.

There are two ways to protect ourselves if we are injecting drug equipment. The best way is to always use new syringes and not to share cookers, cotton or rinse water with others. You may obtain new syringes from syringe exchange programs. We have information on syringe exchange programs in different boroughs of New York City in our referral resource handbook, if you are interested for yourself or for your family members or friends. If you are unable to obtain a new syringe and you want to inject, we will teach you the most effective way of cleaning a syringe. We will also teach you how to clean your cooker. I know some of you may not be injecting drugs but you may learn about how to best protect yourself when injecting drugs so that you can teach others. Please be clear that we are not encouraging you to get high. We are trying to get the point across that we must protect ourselves if we shoot up.

Remember to use a new, sterile syringe and needle each time you inject. This is the most important step in protecting yourself. However, if a new syringe is not available, here are the steps to cleaning needles, syringes and cookers.

- 3) Check in with the participants to make sure that all steps shown in the handout were clear. Ask the participants if they feel that they could follow the steps just discussed and/or if they could teach them to a friend.**

I want to call your attention to these steps described and the importance of them. You have



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known for a long time that dirty needles can transmit HIV. However, we want you to know exactly how HIV can be spread by sharing drugs. You know that when you share you put the drug mixture in a cooker. When a person takes the drug from the cooker into her syringe, her needle may contaminate the drug mixture with HIV or Hepatitis C. When this happens, blood from the syringe can go back into the mixture and that can be passed on to the next person.

- 4) **Explain that they may find needle exchange programs on the internet or a referral can be made if they need one.**

It is even better to use a new needle every time. One way to accomplish this is to identify needle-exchange programs that are available to you. If you buy a “new” needle on the streets, you should still clean it. It may be repackaged and still carry the virus.

- 5) **Stress that no needle use or new needles are both safer options but that cleaning needles is the next best way to reduce risk.**

Facilitation notes: Be careful that this section does not become a lecture. Ask participants what they already know about cleaning needles and needle exchange programs and probe when there is misinformation. Your enthusiasm about this activity may really help keep someone clean. Hand out list to participants who may need it after the session ends. We don't want anyone to feel uncomfortable or



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embarrassed.

- 6) Review the needle cleaning steps. And remind participants that the information will be printed out with their journals.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 14: Goal Setting 3”



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Activity 14. Goal Setting 3

Objective

To introduce Goal setting and to set goal for the week following Session three

MY GOALS

- 1) **Ask participants to click their “go” buttons again to move the next screen. Introduce goal setting. Briefly explain more general goals. Draw a distinction between general and "HIV Focused" Goals.**

The last thing we'll do today is set a goal for between now and the next session.

We often set goals in everyday life. Goals involve plans to do something. For example, when you got up this morning, you set (or had previously set the goal) of coming to this session. Other examples are saving money for something important, or planning to get together with a friend or to celebrate a family occasion, or planning to go to the clinic to see a doctor for a check-up.

There are many pathways to being safe and it is important that people begin the path for themselves. At the end of each of our sessions together I will help you to set a goal that you can work on. These are small goals that should help you move in the direction of being safer and healthier: making sure that you protect each other from STIs, including HIV. WORTH is about decreasing our risk behavior as a way of making ourselves, our partners and our families healthier. (Yes, in other areas of life we have many goals, but the focus here is on making ourselves healthier by decreasing HIV risk). This is something we can plan for today, and it is an important part of a healthy, loving relationship.



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Short Term Goals are:

Realistic

Clear

Neither too easy nor too hard

Have a clear endpoint

- 2) **Help participants to set risk reduction goals for the next session. When possible, goals should relate to the content of the session just completed, but this depends on the participant's progress, understanding, and life situation. There should be an alternative goal unrelated to sexual activity in case the participant(s) do/does not have the opportunity for a sexual encounter between sessions.**

When you have thought about your goal, you can type it in the text box under “goal”. My co-facilitator and I will be coming around to provide assistance. Are there any questions? Ok you can all get started.

- 3) **If participants choose a sexual risk reduction related goal also have them choose a goal that she can work on if there is no sexual activity that week.**

4) **Facilitators note: If participants can't come up with goals suggest the following**

- Practice alternatives to unsafe sex techniques
- Not drinking/drugging or not drinking/drugging as much.
- Going to an AA or NA meeting



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- Go to a store, a clinic, or health program to obtain condoms, carrying some and keeping others in places where they will be handy;
- Talking about condom use with a sexual partner and suggesting condom use if risk circumstances warrant it;
- Talking about what you would like to explore sexually and how to make it safe
- Asking a partner what would please him/her sexually and exploring how to make it safe

5) **Explore any potential barriers and help the participants briefly discuss any concerns.**

Talk about why keeping goals may be hard.

Now that we have our goals, let's talk about the things that might get in the way of you accomplishing the goal. What are some barriers that might keep you from accomplishing your goal? Enter barriers you can think of in the 'barriers' box on your screens.

Great! Now, can you think of solutions to overcome each of those barriers? Write those down too.

When you reach your goal, take a few minutes to congratulate yourself. Really do that! Do something special to reward yourself for working to reach your goal. If you slip back into unhealthy behaviors, it will be easier to get back on track, if you can remember that you were able to reach a goal in the past. On the other hand, if, by the next session you have not been able to reach your goal, which doesn't mean you failed. It doesn't necessarily mean it was a bad goal. Please try not to get discouraged, and instead, let's try to talk about it at our next session, and maybe we could brainstorm a little more about either modifying the goal, or doing a better



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job anticipating the things that might get in the way. That is as important to learning to change as being successful: we will learn together, over time, how to avoid relapse.

Check to see whether all participants have entered a goal by clicking on the link labeled, "Check Participant Answers".

Navigate to the next page by clicking the "next" button located on the lower left area of the screen

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 15:Print Journals"



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Activity 15. **Print Journals**

Objective: 1) To provide participants with material from session one for their reference.

PRINT JOURNALS

- 1) **Inform participants that they will receive their journal which includes a list of the main topics discussed in each session as well as the goals they set for themselves.**
- 2) **Inform the group that they will be receiving a journal at the end of every session.**

Print out participant journals by clicking on the link labeled “Print journals for ____’s group”

Navigate to the next page by clicking the “next” button located on the lower left area of the screen

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 16:Wrap Up 3”



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Activity 16. **Wrap Up 1**

Objective

1) To explain the homework assignment. 2) To build group motivation to stay healthy with inspirational quotes and a closing ritual.

CLOSING

1) **Explain the rationale behind the closing ritual.**

Let's take turns reading the lines aloud and then we'll repeat the whole thing as a group. Your name is what goes in the space. So when I give you the signal we are all going to say these statements out loud. Ready?

I am _____ and I will stay healthy

I am _____ and I will protect myself

I am _____ and I will find support for my health

I am _____ and I am WORTH IT! WORTH IT! WORTH IT



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SESSION 4: SAFETY PLANNING



Ensure that all laptops for anticipated use are logged in with participant screen names and passwords.

log in with your facilitator screen name and password.

Access worth intervention by clicking on the 'intervention' tab

Take attendance by clicking on the link on the top right side of the screen labeled "Attendance"

Click either "Absent" or "Present" beside each name according to which participants are in attendance.

Click on "session 4:Safer Sex Negotiation"

On the agenda screen click on "Activity 1: Welcome" to begin the session.



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You may click on the “crib notes” link located on the right side of the screen for additional guidance at any time if necessary.



Activity 1. Welcome

Objective

The purpose of this activity is to create a calm space in which the group can form and interact.

WELCOME TO SESSION 4:



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Procedure

- 1) **After everyone has settled into a seat, remind them of the grounding exercise they did last week. Introduce that they will do a similar activity now. Navigate to the second page of the activity and click the play symbol on the video window.**

Welcome back everyone. I hope you all had a great week. Today we have a lot of fun and interesting activities to get through that I think you will enjoy. But first, remember the grounding exercise we started with last week?

We're going to try something like that again. You can close your eyes if you feel comfortable doing so.

Navigate to the next page by clicking the "next" button located on the lower left area of the page

GROUNDING:

Play the audio recording by clicking on the play symbol on the media navigation tool bar.

- 2) **After the audio recording is complete process the experience with the group by asking Probing questions about how they feel**

So now how does everyone feel?

Is it now easier to focus on the session for today?



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Great! So now lets review the goals from last week.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 2: Goal Review 4”



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Activity 2. Goal Review

Objective

1) To review risk reduction goals from last week 2) to help participants identify what made their goals successful 3) to identify strategies to overcoming barriers to risk reduction goals.

GOAL REVIEW

Procedure

- 3) **Review the common program goal of protecting ourselves from STI and HIV infection, then move to the personal goals the participants set the week before. Be advised that the suggested script is on the screen and may be used as a guide.**

Okay! So let's talk about how you did with your goal from last session. You see on the big screen some goals we suggested last week:

- *Trying out using different condoms with partners*
- *Trying different ways of putting on a condom to make it more fun*
- *Not drinking/drugging or as much before having sex.*
- *Talking about the need to get tested for HIV and other STDs*
- *Talking about what you would like from your partner sexually and exploring how to make it safer.*
- *Asking a partner what would please him/her sexually and exploring how to make it safe.*



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Maybe some of you chose to work on a goal like one of these. Let's talk about how it went.

Facilitator multimedia Note: The goal that they had set will appear on their computer screen

- 4) **Ask the participants to record their progress in the boxes that appear on their screens.**

Everyone hit the 'go' button on your screen. The goal you set for yourself last week should appear. Record your progress in the boxes that appear on your screen.

- 5) **Help them to identify any problems in reaching the goal and tell them that later on we will learn a new technique for solving problems and breaking through barriers.**

How did working toward your goal go? What was successful about your goal?

Did anything get in the way of your accomplishing your goal? Were you discouraged? What barriers came up?

- 6) **Remember to emphasize that if someone has failed to reach the goal it is okay, and that the situation presents a learning opportunity.**

Praise progress.

Facilitator note Support the participant by:



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- Providing input on identifying problems and obstacles in setting and reaching goals
- Praising the participants for what they have achieved

If you did not accomplish your goal from last week, that is ok. Often people in programs like these do not achieve their goals every time. But even if we don't achieve our goals we can still take a lot from it. We should think of it as a learning opportunity that will help us plan for our next attempt.

When ever you do not accomplish a goal the best thing to 1) recognize what got in the way and 2) think about what you can do to address it next time.

7) Encouraging the participants to reward themselves when they achieve their goals

Now in the cases where you actually do achieve your goal it is important to find a way to find a healthy reward for yourselves. Would someone like to share either how they rewarded themselves or how they might reward themselves for accomplishing their goals?

Facilitator note: If participants have trouble coming up with rewards you can suggest ideas as:

- Having warm bubble bath with a candle
- Getting their nails or hair done
- Having their favorite meal



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- Going out for a cup of coffee with their friends

Very good. Now that we have review the goals from last week let's move on to briefly review what we will be discussing today.

Navigate to the next page by clicking the "next" button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 3: Review"

Activity 3. Review

Objective

Help participants reinforce the information that has been reviewed in session 2



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SESSION THREE REVIEW

Procedure

- 1) **Elicit from the group what has been learned in the previous session.**

Ok now that we have reviewed the goals from last week, let's review some of the content we discussed in the last session.

Can any of you recall any of the topics we spoke about in the last session?

- 2) **Encourage responses and provide positive feed back for those who accurately recall the topics discussed last week.**

Very good, I see that you have remembered some of the general topics we have discussed.

- 3) **Emphasize the following topics excluding those already mentioned by the group.**

*We had a really productive session last week. During the last session we also
Discussed how to use the female condom*

Learned skills to address barriers to safer sex

Reviewed the social network map.

Address any questions or concerns about the topics from the last session before moving on to the next activity.

Does anyone have any questions on the topics we discussed in the last session?



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Great! Now let me tell you what we will be doing today.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 4: Preview”



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Activity 4. Preview

Objective

To preview key topics that will be discussed in today's session

WHAT ARE WE GOING TO TALK ABOUT TODAY?

Procedure

- 1) **Briefly mention the list of topics for the day.**

Today we have a lot of fun and interesting activities to do. We will;

Play a fun game to test your knowledge

Assess and make plans for dealing with relationship conflict

Review skills to overcome barriers to unsafe sex

Learn how to deal with slips in maintaining safer sex practices

- 2) **Address all questions or concerns before moving on to the next activity.**



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Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 5: Introduction to assessing and planning relationships”



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Activity 5. Introduction to Assessing and Planning Relationships

Objective

To help participants to assess their risk for partner abuse and to make safety plans for their protection.

WHAT IS INTIMATE PARTNER VIOLENCE?

- 1) **Introduce the concept of Intimate partner violence and assess what the group knows about it.**

As we talked about, when you ask your partner to use a condom, or refuse risky sex, you may make your partner angry. When he's angry, he could get abusive, verbally or physically; he could force you to have sex. We have to be prepared for this risk. We have to know how to recognize it. And we have to have a plan for protecting ourselves, and getting help to keep ourselves safe.

We'll be talking about recognizing abuse and making safety plans now. What we talk about might be upsetting to you, especially if it touches on something that's going on, or has gone on, in your life. Please remember that we're here to help you. Remember that you can speak to us at the end of this session privately.

- Knowing what abuse is

- Identifying your risk for abuse



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- Making a safety plan

- 2) Introduce the audio clip that describes Intimate partner violence.

I am going to play you a clip that explains IPV a little further to get us started.

Play the IPV audio description by clicking the  Adjust volume if necessary.

- 3) Take questions from the group.

Does anyone have any question about IPV before we move on? Does this definition surprise you?

Navigate to the next page by clicking the “next” button located on the lower left area of the page

AMANDA AND IPV:

- 4) Explain to the group that they will be watching a video that shows Amanda describing her experience with IPV with her boyfriend.

Play the video of Amanda by clicking  in the center of the imbedded media screen.



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Navigate to the next page by clicking the “next” button located on the lower left area of the page

USING POP TO HELP AMANDA REDUCE HER RISK



- 5) **Ask the group to help think of ways Amanda could make a plan to be safer and write their suggestions in the text box on the screen.**



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- 6) After the list of options has been exhausted be ask group members to choose the best solution.
- 7) Praise group for the efforts and make note of how skillful they have become in using the POP technique.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 6: Assessing and Planning Relationships”



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Activity 6. Assessing and Planning Relationships

Objective: Increase participant awareness of their risk of IPV victimization.

Procedure

ABOUT THIS SECTION

- 1) Tell them they will be evaluating their own relationships and making safety plans. Ask them to use the headphones attached to their laptops and press the go button to get started.
- 2) Be sure to give assistance to group members when necessary.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 7: Safer Sex Negotiation Review”



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Activity 7. Safer Sex Negotiation Review

Objective

To review refusal as a safe option and to brainstorm safe ways to refuse.

NEGOTIATION:

Procedure

1) Review the steps of SAFE negotiation.

So, let's talk first about negotiation. Can anyone tell me what were the steps involved in Negotiating safer sex? What were the SAFE steps?

STEP 1: Say what you want clearly using "I" statements. Explain briefly why you want it, without accusing the other person or using blaming language or bringing up the past.

Example: I really value our relationship and want to use condoms to make sure we protect each other from HIV or other STIs that we may have been exposed to in our previous relationships. There are over 27 STIs some of them like herpes and genital warts are viruses that cannot be treated.

STEP 2: Active listen to your partner and really try to understand where the other person is



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"coming from". Make sure to let your partner know that you have heard him by repeating what he said in your own words even if you disagree with him.

Example: I hear that you don't like the feel of condoms and you don't like rubber coming between us because it makes you think of our relationship as a one-night stand.

STEP 3: Find something positive in what your partner is saying, and turn their negative objection into a positive thing. Then say "I hear (the positive) you." If you cannot think of a way to turn around your partner's specific statement, say something else complimentary. Once things are more positive, use assertive communication. Acknowledge and praise partner's progress toward coming around.

Example: I really appreciate that you value our relationship and don't want condoms to get in the way. For me condoms are sign of love and protection and I know I can make using them fun and sexy so they won't get in the way.

STEP 4: Explore options by using POP to brainstorm options with your partner and find best solution to protecting each other. Try to reach a solution to the problem together, without sacrificing your bottom line. (which is using a condom or other safer sex alternative/safer sex option).

2) Praise group for remembering the proper steps

Good job remembering the SAFE technique to negotiate safer sex. Now although this technique may work in many instances, there are other situations in which refusing to have unsafe sex



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may put us in danger. For example some intimate partners may become violent as a result of you refusing to have unsafe sex with them. In such cases it is important that we have a plan to ensure that our health and safety remain intact in our attempts to refuse unsafe sex.


REFUSAL

- 3) **Facilitate a discussion about situations when SAFE will not work and refusal is necessary.**

Do you recall some situations where SAFE on its own, may not work? When is refusal necessary? What are some safe methods of refusal that you can remember?

- 4) **Ask the group if they wish to review some options for refusal using the video on screen.**

Last week we saw a video where Amanda was in a situation where her partner has could become violent as a result of her refusing unsafe sex. Do you remember what her solution to this problem was?

Play the video of Amanda by clicking  in the center of the imbedded media screen.

What happens when "stating our needs" is just not going to work?



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What do we do when we think our partner may get violent or angry?

What can we do when the man we really love threatens to walk out on us?

Good job everyone. Knowing the strategies stay safe while reducing our risk for partner violence is a vital step in protecting our health.

Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 8: Safer Sex Negotiation Review”



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Activity 8.

Services Check-in 2



Objective

To help participants become comfortable with accessing social services systems over the web



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SERVICE CHECK IN DEMONSTRATION

1) Briefly demonstrate how to click through the activity.

This is how you click through the support services to find what you need. Keep in mind that you want to copy the name of the service and consider jotting down what you want from that service so you will know what to say when you finally call in.

2) Then ask the participants to click the 'go' buttons on their screens.

Click the “go” button on your screens to begin the process of accessing web based services. When you get to these screens you will be asked to choose between many different needs to get to the appropriate services.

3) Emphasize that they can take notes or make a plan in the text field provided and that those notes will go into their journal.

As you are searching the internet according to your needs, be sure to type out the numbers and names of the services you wish to seek. There are text boxes provided on your screens for this purpose.



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Facilitator note

Be aware that participants may have mandates that require them to attend certain services. Ensure that what the services that they choose here have nothing to do with their court mandates if any.

- 4) **Be available to answer any questions that might come up with participant's individually.**
- 5) **Give group members 10 minutes to search the interface on their own.**
- 6) **Be sure to go around the room and check on each group member and provide assistance when necessary**
- 7) **Provide praise to group members for identifying the social supports that they needed**

Good! I am glad everyone was able to find the appropriate social supports. Most of the service providers included in the guide have 1-800 numbers that can be dialed in any pay phone without requiring a change. Now that we have found services that are important to us, let's move onto to our closing activity.

Navigate to the next page by clicking the "next" button located on the lower left area of the page



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On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 9: Risk reduction plan”



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Activity 9. Risk Reduction Plan

Objective

To help participants come up with a plan to address slips back into unsafe behaviors.

SLIPS

- 1) Review the concept of a slip
- 2) Help the group brainstorm a list of slip situations

Record responses in the text box provided on screen.

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AFTER A SLIP

- 1) Help the group brainstorm strategies to deal with slips

Navigate to the next page by clicking the “next” button located on the lower left area of the page

STEPS TO TAKE AFTER A SLIP



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1) Present the suggested plans below

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On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 10: Worth Quiz Game”



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Activity 10. Jeopardy

Objective

To review the content from all the sessions with the participants

WORTH QUIZ

Procedure

1) Introduce the WORTH Jeopardy game activity.

Now we are going to play a fun game to test your knowledge about HIV/AIDS, safer sex, and all the skills we learned in WORTH. This game is called WORTH Jeopardy and it provides a great opportunity to show how far you have come in the 4 weeks we have been together.

2) Divide the group into two teams

We are going to divide into two teams.

3) Direct everyone's attention to the screen that should have the jeopardy game presented and explain the rules.

Each team will have a chance to pick a category and a point value, and who chooses will rotate between team members. I will click on the box that corresponds to your question. You will have 30 seconds to quietly discuss the answer with your teammates. If you get the answer correct your team will get points. If you get it wrong, or fail to answer on time, the other team will get



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to answer and then go again. We will play until all questions are answered and the winning team will get a prize. We will flip a coin to determine which team goes first.

- 4) **Ask for one team to choose heads or tails then flip the coin and begin the game.**
- 5) **Be sure that both teams have identified themselves as either the red team or the blue team.**
- 6) **Be sure to read out all the categories.**
- 7) **As the game progresses be sure to provide corrective feedback in areas where group members provide incorrect responses.**



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WORTH Quiz Game - Mozilla Firefox

http://worth.ccmtl.columbia.edu/task/jeopardy/12jeopardy

WORTH Quiz Game

Hello, Janel! [Practice Mode](#) | [Log Out](#) | [About WORTH](#) | [Contact](#) | [Help](#)

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Session 4, Activity 10: WORTH Quiz Game

HIV/STD FACTS	RUBBERS AND COVERS	STYLIN' AND MAINTAININ'	TECHNIQUES OF GREAT WORTH
100	100	100	100
200	200	200	200
300	300	300	300
400	400	400	400

Timer

Notes

How To

Ground Rules

Red Team: 0 Points

Blue Team: 0 Points

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As groups select Categories and point values click on the appropriate boxes to pull up the questions

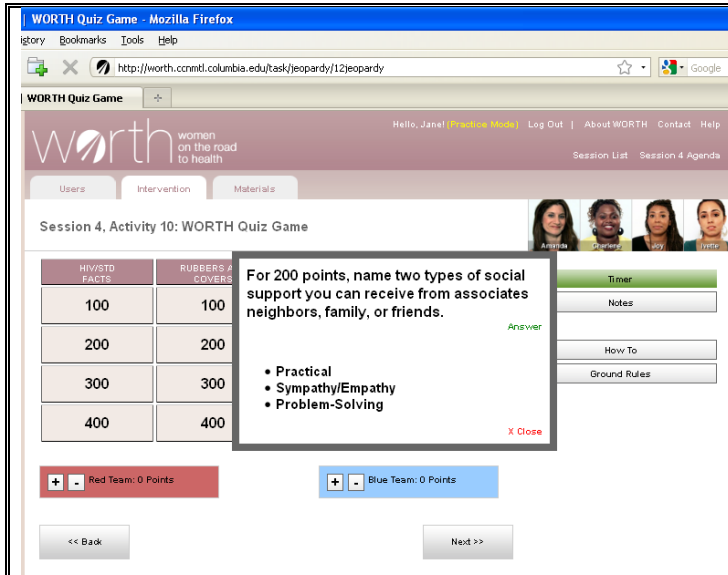
Provide groups with 30 seconds before asking them to respond to you.

If they do not provide the question in time give the other team a chance to answer.

If the answer is presented by the group click on the link titled "answer" to pull up the answer and present it to the group.



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Click the “x close” link to remove the window with the question and answer presented.

Add point to the appropriate team by clicking on the “+” symbol at the bottom of the jeopardy game board on screen.

You can always use the “-” button to correct for errors

- 8) **After the game is over, have the group view the team scores on the main screen and announce the winner.**

Facilitator Note: for some questions, participants may come up with answers not listed but that may be acceptable. For example, "name one way you can you can increase positive or safe social support" may be answered with anything that demonstrates a strategy to build healthy relationships.



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Navigate to the next page by clicking the “next” button located on the lower left area of the page

On the Agenda screen Navigate to the next activity by clicking on the box labeled “Activity 11: Goal setting 4”



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Activity 11. Goal Setting 4

Objective

To introduce Goal setting and to set goal for the week following Session Four.

Procedure

MY GOALS

- 1) Each participant enters her goals for the week and prints it at the end of the session as part of her journal.
- 2) Ask the participants to hit the 'go' button on their screens.
- 3) Tell them that they are looking a risk rating slider.
- 4) Ask them to how risky they feel using the slider.
- 5) Then ask then to rate how risky they would like to be.

Ensure that all participants have answered by clicking on the ling “check participant answers”

- 6) Ask if anyone in the group would like to share their risk rating
- 7) Tell the participants to move to the next screen.
- 8) Instruct participant to think about how they can get to their desired risk rating
- 9) Have participants generate a long term goal that can get them there, now that the program is over.



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10) Help participants to set risk reduction goals.

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Check if all participants have generated a goal by clicking the “check participant answers” button



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Activity 12. Print Journals

Objective: 1) To provide participants with material from session one for their reference.

PRINT JOURNALS

- 1) Inform participants that they will receive their journal which includes a list of the main topics discussed in each session as well as the goals they set for themselves.
- 2) Inform the group that they will be receiving a journal at the end of every session.

Print out participant journals by clicking on the link labeled "Print journals for ____'s group"

Navigate to the next page by clicking the "next" button located on the lower left area of the screen

On the Agenda screen Navigate to the next activity by clicking on the box labeled "Activity 13: Graduation"



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Activity 13. Graduation

Objective 1) To provide participants with positive reinforcement for their commitment and work on behavior change in WORTH.

GRADUATION

1) Praise participants for completing worth

You are all to be congratulated for completing the program. Now it is time for graduation from Project Worth. Don't forget that this group is just the first step. Remember you are on the road to health, and we have to keep on walking. But you have all done a great job. You came to group, even when you weren't feeling like it.

2) Instruct participants to reflect on what they have learned as a group

So let's all share one thing we learned in project worth and share how that will change your life.

For example: What I learned in Project Worth is _____ and it will change my life because _____

Who wants to start?



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3) Summarize responses and prepare certificates.

Great! I am glad you were all comfortable sharing the valuable lessons you have learned. So let's give ourselves some "self-praise" and hand out your certificates.

4) The certificates should be awarded in a formal manner. Ensure that all participants are sitting and quiet. It is suggested that you play ceremonial music. Call out each individual by name and hand her a diploma.

End group with the inspirational worth Health statements

I am _____ and I will stay healthy



I am _____ and I will protect myself

I am _____ and I will find support for m y health

I am _____ and I am WORTH IT! WORTH IT! WORTH IT!

Navigate to the next page by clicking the "next" button located on the lower left area of the screen



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Log Out using the "Log Out" link on the top of the page.



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