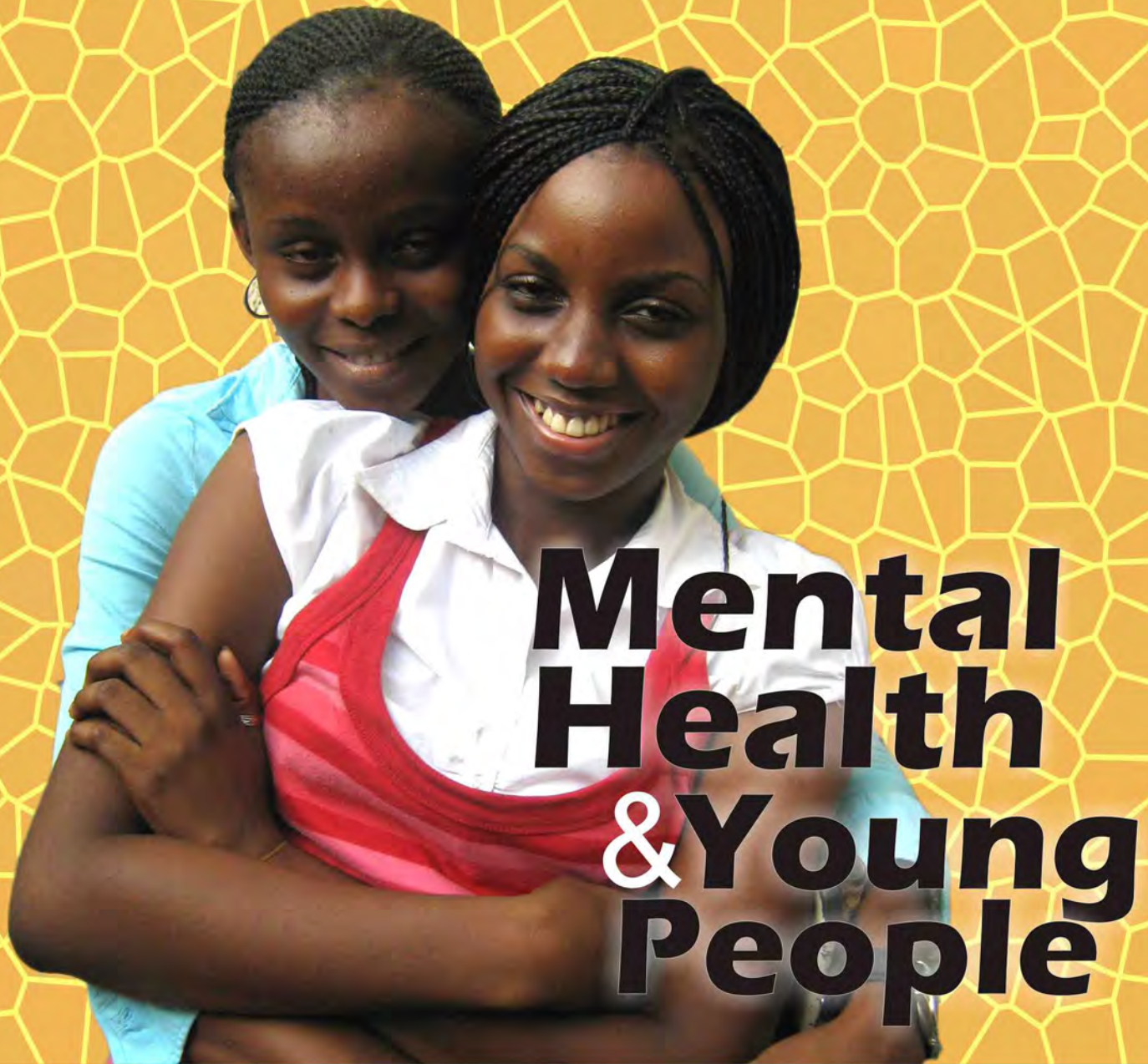


Growing Up

A NEWSLETTER FOR YOUNG PEOPLE



Mental Health & Young People

Inside this edition



FLHE Training of Teachers page 11

My Question-3 in 1 Service Go ask your Questions - Page 23



Visit of Ford Foundation Team Page 15

Contents

Growing Up

Growing Up is published quarterly in Lagos by Action Health Incorporated (AHI). AHI is a non-profit, non-governmental organization dedicated to the promotion of adolescent health and development. We serve as an advocate and a catalyst for change in the present poor status of adolescents' well-being by increasing public awareness and implementing innovative education, health and youth development programmes.

TRUSTEES

Dr. Adebunmi Odiakosa
Rev. (Dr.) Chris Omeben
Dr. Adebola Okoisor
Dr Uwem U. Esiet
Mr Yemi Ogunbiyi
Mr Olu Lutherking
Mrs 'Nike O. Esiet

Contributing Writers

Mervis Emelife
Enoh Francis
Sifon Ediomu-Abasi
Hephzibah Ehinmero
Francess Chukwura
Lawrence Chukwuma

PAGE DESIGN

Action Health Incorporated

COVER PHOTO

Francess Chukwura
Enoh Francis

Article may be quoted or reprinted from **Growing Up**, provided credit is given to AHI. Unless otherwise stated, the views expressed in this issue are those of the authors and do not necessarily reflect those of AHI or any of its donor organisations.

AHI's Youth Centre is located at
17, Lawal Street,
Off Oweh Street,
Jibowu,
Lagos, Nigeria.

All correspondence should be addressed to:
The Editor, Growing Up
Action Health Incorporated
P.O. Box 803, Yaba
Lagos.
Tel: 01-7743745
E-mail: info@actionhealthinc.org
Website: <http://www.actionhealthinc.org>

This edition of growing up is produced with support from:

The Mac Arthur Foundation,
Population Programme,
Chicago, Illinois

Printed by:
FINE PRINT LIMITED
Tel: 01-4979275

3. Mental Health and Young People
7. Poems
8. Dear Diary
9. Cartoon
10. News Reel:
 - ARHE Orientation Programme For Medical Students
 - FLHE Training of Teachers
 - Covenant University Students Visit AHI
 - World Health Day
 - 'ABSTINENCE' Seminar Organized By De-Best International
 - International Day Of Action On Women's Health
 - AIDS Candlelight Memorial
 - Children Celebrated Their Day In Style
 - World No Tobacco Day
15. Special Report:
 - Ford Foundation team understudies the implementation Of Family Life And HIV Education (FLHE) In Lagos State, Nigeria.
17. Body Awareness
18. True Life Story
19. TFL 2008 Poster
20. YSDP Advert
21. Watch Your Manners
22. Young Achiever
23. e-FLHE Advert
23. Brain Teasers
24. Resources:
 - Family Life and HIV Education for Junior Secondary Schools (Students' Handbook)
 - Family Life and HIV Education for Junior Secondary Schools (Teachers' Guide)
 - Comprehensive Sexuality Education (Trainers' Resource Manual)



Mental Health & Young People

By Frances Chukwura

Mayugida, 18 years old and a 100 level Architecture student of one of Nigeria's universities was diagnosed as having manic-depressive disorder. According to the parent, "My son started showing signs of restlessness and behaving abnormally as far back as 2005. His situation improved after being placed on medication by a Psychiatrist at the Kaduna Psychiatric Hospital. This enabled him to sit for the General Certificate Examination (GCE) and he came out in flying colours. However, in January 2008, he had a relapse and he has been undergoing counseling and treatment at the 'Harvey Road Child and Adolescent Centre', Yaba.

Okasika (20) is an SS3 student. He is the last of five children and lives at Ajegunle with his mother and brothers having lost his father some years back. According to his elder brother who accompanied him to see a mental health specialist, "In 2003, we noticed that he was talking and behaving abnormally. He was always complaining of itching in his brain and later high fever. In the afternoons, he would become restless and my mother had to bring him to see a specialist. After series of tests and examinations, he was confirmed to be schizophrenic, a condition that had affected at one time or the other three members of the extended family.

Many young people in Nigeria have poor mental health. According to Dr. Oluwayemi Ogun, Chief Consultant Psychiatrist at the Harvey Road Child and Adolescent Centre, Federal Psychiatric Hospital, Yaba, "in Nigeria, 15-20% of adolescents come down with one form of mental disorder or the other which is a fifth of the population of children and adolescents in the country. Young people are at risk of experiencing mental health problems as a result of extreme poverty, substance abuse, lack of care and guidance, exposure to violence and excessive pressure to excel".

Young people often experience a range of physical, social and psychological events that are new and unexpected. They may find some of these events distressing and struggle to cope with the impact. Moreover, the duration and severity of these events and the distress caused could mildly, moderately, significantly or acutely affect their mental health, and give rise to a mental health difficulty, or illness.

Mental health difficulties and illnesses can often have a disabling impact on those who struggle to cope with them. They can often cause a person a great deal of stress, anguish and even absolute fear.

Although it is common for young people to experience mental health difficulties that require professional help, it is quite rare for adolescents to be affected by a serious mental illness. However the stigma of having a mental health difficulty, or illness can often leave a person frightened to talk about their problem and reluctant to access support.

Encouraging young people to talk about their worries, showing them that there is someone there who cares about them and wants to support them, can often make a lot of difference. After all, it is important that young people know that experiencing and coping with difficult feelings and experiences is common, and that they do not necessarily have to manage these issues alone.

Stigma and Mental Health

Stigma is what keeps many people from seeking the help they need. Research has discovered that the negativity and misunderstanding that often surrounds mental illnesses can create fear and cause shame, which in turn causes unnecessary pain and confusion.

Stigma goes far beyond the misuse of words and information, it is about disrespect. Stigma is commonly defined as the use of stereotypes and labels when describing someone. Stereotypes are often attached to people who are suffering from a mental illness. The simple fact is that no one fully understands how the brain works and why, at times, it works differently in different people. Our society tends to not give the same acceptance to brain disorders as we do to other organ disorders, say, heart trouble. The stigma surrounding these misunderstandings can limit opportunities, it can stand in the way of a new job, it can increase feelings of loneliness, and it can cause many other unfortunate outcomes. Stigma must, and can, be exposed and overcome. Everyone must know that it is not their fault and that it is OK to ask for help.

“Young people are at risk of experiencing mental health problems as a result of extreme poverty, substance abuse, lack of care and guidance, exposure to violence and excessive pressure to excel”.

What can you do?

If you know someone that seems extremely upset, maybe someone who displays extreme mood changes, or maybe you feel emotionally out of place at times ... the time is now to act, help, assist, notify, inform and get better. You just might be surprised on how much you can accomplish through understanding, giving hope, and extending a hand of friendship.

Understanding the mental health system, the function of counsellors, therapists, psychotherapists, psychologists and psychiatrists, and the different treatment approaches,

is therefore important if people are to look after their mental health. There are four tiers of services which young people experiencing mental health problems can assess:

Level 1 Services

All professionals working within the community, be they teachers, youth workers, form part of the mental health system, as they work with people who have very good mental health, through to those who have very poor mental health.

Although Tier 1 professionals are not necessarily trained in mental health, they play a key role both in promoting mental health and referring people with whom they work, to services available within the mental health system for support with any mental health difficulty they may be experiencing.

Level 2 Services

Counsellors, therapists and mental health specialists work individually in the Tier 2 level of the mental health system. These professionals are usually based within a community setting, such as a school, and often provide an early intervention service to prevent general emotional and behavioural difficulties from becoming worse.

Level 3 Services

Specialist clinics comprising multi-disciplinary teams of counsellors, therapists, social workers, nurses, psychologists and psychiatrists work within the Tier 3 level of the mental health system. These clinics often provide a service for those who may be causing harm or risk to themselves or others; they may have substance misuse difficulties, offending behaviour, phobias or emotional and behavioural disorders.

Level 4 Services

Community psychiatric nurses, social workers, psychiatrists, psychologists and therapists all work within specialist teams or clinics within Tier 4 services. These services are often hospital-based, and involve seeing people as outpatients or admitting them for treatment. These specialist teams work with people who have mental disorders that affect them in such a way as to risk putting themselves or others at serious risk of harm.

It is important to stress that, children and young people are very rarely admitted to in-patient hospital based units, although if this is required they are often placed within units which are specifically designed for them.

Professional Help

There are many different types of mental health professionals; they all aim to create a safe, private and confidential setting for the people they work with. By listening attentively and patiently, they endeavour to understand the problem of the person who has sought their support. By asking the person questions, they can also gain a clear and detailed picture of what is going on for them. Detailed below is a very brief outline of the role of different mental health professionals.

Counsellors/Therapists/Mental Health Specialists

These professionals work across all tiers of the mental health system. They work with a wide range of emotional and behavioural difficulties, use a wide variety of different techniques and treatments, and often specialize in working with different age groups, or with particular issues, e.g. substance misuse, eating disorders, self-harming behaviour or child abuse. Depending on the person's age, the issues presented or difficulties experienced, the counsellor, therapist or mental health

specialist may work with them for a few weeks or months. They may explore the person's difficulties and problems through talking, drawing, play and drama. These professionals aim to enable people to find different and more manageable ways of coping with their presenting issue.

Psychologists

Psychologists often work with people who have behavioural and emotional difficulties that may be caused by a mental disorder or brain injury, limiting a person's ability or development. The psychologist will assess how much a person's development or ability to manage their behaviour and emotions may be limited, using a variety of different techniques including tests, talking and play - it all depends on the person's age and the difficulties they are thought to be experiencing.

Psychiatrists

Psychiatrists are medically trained professionals who assess and diagnose people who are believed to have a mental disorder. They make their diagnosis according to the symptoms the person experiences and the indicators they display. Psychiatrists are able to prescribe medication to help limit the more debilitating symptoms of certain mental disorders, and have the power to detain a person under the Mental Health Act for assessment and treatment - but only in very exceptional circumstances.

Mental Health Social Worker

These social workers are specially trained to support people with mental health difficulties. They can be found working both within the community and in hospital, supporting people with social and practical issues. Some of these social workers have the ability, alongside psychiatrists, to recommend that a person be sectioned for a Mental Health Assessment or treatment at a psychiatric hospital.

Treatment

There are a variety of ways in which a person with a mental health illness can be treated. Some interventions work better for certain illnesses, however when a particular treatment is offered, it is important that the young person or family is involved in the decision. It can be helpful to ask the following questions:

- Why has this treatment been offered?
- What is the evidence to show that this treatment works?
- What other treatments might also be helpful?
- How long will the treatment last?
- Are there any problems or side-effects with the treatment?

Any treatment should be a partnership between the worker, young person and their family. The effectiveness of all types of therapy largely depends on the relationship formed between the therapist and person that has sought their support.

Warning Signs

Changes in feelings such as fear and anger are a normal part of life. Personal situations, such as strained relationships with family or friends can cause emotional stress, thus making a person feel sad. These are not unusual reactions. However symptoms that last longer than 2-3 weeks require attention.

Certain thoughts and feelings associated with some experiences, however, may be warnings of more serious problems and the need for mental health intervention. It is not always easy to spot these warning signs, or figure out what they mean. Qualified mental health professionals should be consulted in order to make an accurate diagnosis.

The following feelings and experiences may be warning signs:

- finding little or no pleasure in life
- feeling worthless or extremely guilty
- crying a lot for no particular reason
- withdrawing from other people
- experiencing severe anxiety, panic or fear
- having very low energy
- losing interest in hobbies and pleasurable activities
- feeling easily irritated or angry
- experiencing racing thoughts or agitation
- hearing voices or seeing images that other people do not experience
- believing that others are plotting against you
- wanting to harm yourself or someone else

How to promote mental health

Just as we are all responsible for our physical health, we are equally as responsible for our emotional health. It is up to us when we access support and what type of support we access, to enable us to manage our feelings and behaviour. Parents and professionals can play a major role in promoting positive mental health amongst young people. Such promotion starts with the basics of maintaining boundaries and follows by knowing how to communicate effectively.

(a) The Power of Communication

Parents and professionals can help to promote positive mental health in young people simply by communicating the limits of appropriate rules and boundaries and the risks of breaking them. If a young person knows what risks they could be taking by breaking a boundary or rule, it is far easier for them to recognise that they are ultimately responsible for their actions, decisions and choices. This is a crucial learning tool for young people who are making their way into the 'adult world'.

Without speaking or telling someone how we feel, we can all communicate how we are feeling through our behaviour and body language. In fact 54% of all communication is non-verbal, only 7% is verbal. How we say something can also communicate what we may be feeling; the tone of voice we use when we speak can relay how we may feel. Even though we may not actually be telling someone 'I feel angry', 'I feel excited' the anger and excitement can often be heard from the way we speak.

Body language, behaviour, tone of voice and what someone actually says and doesn't say are primarily what mental health professionals, such as therapists and counsellors, listen and look out for. They use total communication.

(b) Emotional Literacy

Understanding why we feel the way we do can help us to

learn how to manage our everyday life. Often, young people know how they may be feeling, but they may not always fully understand what has made them feel this way. This is often what causes young people to struggle with managing certain situations, and cope with difficulties when they arise.

For example, all the following responses can be made to a young person as a direct result of either observing their body language or listening to their tone of voice:

Body Language & Tone of Voice: "You seem really"... [excited and happy]"

Body Language: "It looks as if....[you are really upset]"

Tone of Voice: "You sound.....[really angry and frustrated]"

It is important for parents and professionals to be aware that not only do young people often let us know if we get something wrong, they will also only disclose information about themselves that feels safe enough to share.

(c) Asking Questions

Once we have gained an accurate impression of what a young person may be feeling, we can go one step further and try to establish what has left them feeling this way by asking questions. However, there is also an art to doing this. Asking 'closed' questions, which can be answered with either a 'yes' or 'no', are far less useful than asking 'open' questions, which can encourage a person to give a more detailed response.

How a young person responds to questions, the tone of voice they use, their body language and what they say and don't say, can give parents and professionals a clearer picture of how the young person may be feeling and what may be going on for them. If parents and professionals communicate back to a young person what *they* have heard them say and how *they* understand the way that young person may be feeling, this can help young people to *feel* understood. Equally, communicating such empathy can also help young people gain a greater understanding of how and why they feel the way they do. The more empathy a person can have and share with young people, the easier it can be to 'walk in their shoes' and be beside them as they attempt to resolve conflict in their life.

(d) Exploring Options v Giving Advice

There may be times when young people ask others for advice on a certain matter, because they are stuck with what to do in a given situation. Young people often assume that adults are 'experts' on life issues, that they have all the 'right' answers. How else are young people able to gain information about or find ways to manage difficulties they experience?

When young people have a problem, it can be so easy for adults to give them the advice they think the young person needs, based on what they would individually do in that particular situation. Although there is nothing particularly wrong with advice giving, care should always be taken not to assume that, just because a person resolved a problem in a way that worked for them, it will also work for others. If an adult were to give advice to a young person and it did not resolve their issues, it is likely that the young person would not seek support from them again.

Instead, try asking the young person what it is they think they could do to resolve the situation they are in. Talk through all the options that may be available to them including the potential benefits and risks of each option, then allow the young person to make the final decision. Exploring options can be a useful strategy, as young

people may not be aware of the range of choices available to them to resolve or manage a particular situation.

Stigma goes far beyond the misuse of words and information, it is about disrespect. Stigma is commonly defined as the use of stereotypes and labels when describing someone.

(e) Challenging

There may be occasions when young people do or say something that lets people know that they have a fixed or limited view of themselves, others or a particular situation, which could either be counterproductive or restrict them in managing a particular situation. By challenging a young person on their views or beliefs, using empathy and open questions, can enable them to have a clearer picture of a particular situation.

An example of challenging a young person is as follows:

"You say you are stupid, which sounds as though you are being hard on yourself. What are the reasons for you thinking you are stupid?"

(f) Giving Constructive Criticism

Young people that are criticised and rarely praised can often have low self-esteem and little self-confidence. Giving constructive criticism is therefore important to help young people maintain an awareness of what they do well and what they don't do so well. Constructive criticism involves letting a person know what they do or say that is 'good', followed by that which they do or say that is 'bad'. For example,

"It was great speaking with you yesterday, but I feel quite angry with the way you are talking to me today"

The key to giving constructive criticism is remembering to 'own' how we feel and to compare previous positive experiences with current negative ones.

(g) Knowing Your Limitations

Parents and professionals can promote mental health in young people, simply by remaining aware and communicating the limitations of the support they can give.

Some people may find it easier than others to recognise signs of emotional distress, just as some people may find it easier than others to promote or safeguard their own mental health - everyone has limitations. Knowing when to access support and training is therefore crucial if parents and professionals are to safeguard and promote the mental health of young people with whom they live and work.

References:

- **National Policy on the Health and Development of Adolescents and Young People in Nigeria (Federal Ministry of Health, Nigeria 2007)**
- **National Training Manual on Adolescent Reproductive Health, July 2001**
- www.mentalhealth.samhsa.gov/publications (accessed 1/07/2008)
- <http://nostigma.org/index.php>(accessed 1/07/2008)
- <http://www.mentalhealthcare.org.uk/>(accessed 1/07/2008)

POEMS



Mental Dairy

This is a story on my life's tour
I was born into a family of four
Brought up in a home of violence
Thus putting me into utter dependence

Male-child-preference was the name of the game

I was nothing but a mere name
I grew up with inferiority complex
Always finding myself perplexed

When asking a question, it was with stuttering

If asked a question, I explained by stammering
I could have sworn I was totally worthless
Never for once thinking I could be priceless

Probably if I had gotten an education
My life would have a good foundation
If my home was filled with love and care
To succeed in life, that I would have dared

Young people are like seedlings
In need of adequate care and love
Let's give them a good foundation
For them to have good mental health.

Mervis Emelife (17 years old)

Why Me?

My parents feel staying at home is best
We are beaten daily and starved
Doing house chores is our reward
I cry everyday and my health deteriorates.

My mates are in school
But nobody cares about my education
Oh! How I crave to go to school
To be useful to the society

I feel depressed everyday witnessing domestic violence
Dad beating up Mum at every opportunity
My younger ones are scared and hurt
God, when will this stop?

My neighbours make jest of me
What is my future when my mental health is poor?
All I need is love and care to have good mental health
I MUST go to school to develop myself.

Sifon Ediomu- Abasi (16 years old)

Mental Issues

They say my behavior is unusual,
That I am bipolar in nature,
Physically and psychologically changing,
Some say I can change only if am happy,
Many think expressing myself will help me out.

Am getting out of my crust for a change
Give way! I will express my self only if I would be heard,
And given attention to,
Encourage me and give me a way of life,
Then, my health will improve and change for the better.

I need to be understood and appreciated,
For me to change and adhere to it,
Am rather relieved as patience and courage are my guard,
Mental issues worsen without care and support,
Give us clean environment to grow.

Don't play with our future
Without us there is no tomorrow
Eradicate extreme poverty and violence
Address poor mental health challenges
Give us love and guidance.

Ehinmero Hephzibah (17 Years old)

Oh! My Life

It all started like a dream
Only to see myself in a stream
My parents fight all the time
Going to school was my desire
They thought differently

Consigned I was to household chores
My hawking and farm work, their choice
Reasoning with them was forbidden
Depression and restlessness have set in
Oh! Life has been cruel to me

If only they sent me to school
The sky would have been my limit
Parents should educate their children
And pay attention to their needs
As leaders of tomorrow,
Sound education is a MUST.

Lawrence Chukwuma (19 years old)

Dear Diary



Monday

Its Monday again! I woke up at 7.00am when Dad and Mum were ready for work. The past week was indeed filled with events. I woke up a little tired but happy that I won't be home alone as Success is still with us. Just as I remembered that Success will be home with me, I rushed downstairs to check him in the guest room so we could tidy up the house together. Mum was already calling for me to say good bye when I got downstairs. I bid her and dad farewell and went to the guest room to wake Success. On getting to his room, he was not there. I searched through the house but did not find him. I thought he was probably outside and as I passed through the kitchen to the back door to check for him outside, I heard some movement behind the refrigerator and behold, I found Success hiding there. He was looking very scared so I tried to calm him down as well as assured him that everything will be fine and that very soon he will overcome the situation. If only his mother knows her son's state of health, I'm sure she will regret her actions.

Tuesday

I woke up today, 6.00am to be precise. The power supply just went off when I was thinking of rushing to the kitchen to get breakfast ready so Mum won't have to do that today. I got the rechargeable lamp in my room and found my way to the kitchen. As I got to the kitchen and opened the refrigerator to bring out the bread and butter so I could make some toast, I remembered I did not tell Mum and Dad the incident of Success hiding behind the refrigerator yesterday when they came back from work. I decided I was going to tell them at breakfast this morning. Mum came into the kitchen and I quickly narrated yesterday's incident with Success to her. Mum assisted me to set the table for breakfast. Dad came to join us at the table and asked after Success and I narrated what happened yesterday. So he said I should go and wake him up. On getting to his room, he was not there. I was wondering where on earth he could be when Dad called from the dining table that he just received a call from the office and he had to rush off and mum too rushed off with him. I miss school so much!

Wednesday

Dad took Success with him today to see a counselor as it seems the torture he was subjected to while staying with his guardian had affected him so much. Yesterday, I later found him hiding in the wardrobe. He told me that when he heard my movement in the Kitchen yesterday morning, he thought it was mum and he was afraid of coming to the kitchen because his guardian used to beat him each time she got to the kitchen before him so he hid in the wardrobe when he heard me coming towards his room. His situation was pathetic, so I had to assure him that nobody was going to harm him and he should stop hiding in odd places. I was bored staying at home alone, so I called Olivia and Stephanie to come over so we could fill our JAMB forms together. Dad bought mine yesterday.

Thursday

I was already asleep when Dad came back yesterday. I woke up this morning and went in search of Success but did not find him. I was about checking his usual hiding places when I heard dad's voice calling me. I went back to the living room to say good morning and was about to tell Dad that Success had gone into hiding again when he told me that Success is not home. Dad said that the counselor said the violence

Success had been exposed to, has affected his mental health which explains why he has been hiding in odd places.

He said something like a personality disorder. Dad said the counselor recommended that he go back to his mum and be in familiar surroundings with familiar people.

So Dad took Success back to his mum but not without warning her not to send him to somewhere else again. I only pray he will be okay soon. I did not know that domestic violence could have such drastic effects on young people's mental health. I am glad my parents did not expose my siblings and I to such.

Friday

Thank God it's Friday! I am so glad today is Friday. Stephanie, Olivia and I went to submit our JAMB forms. We all want to be doctors, so we filled Medicine and Surgery as first and second choices. University has no choice but to take us in, this year. I will however, like to do something in Medicine that has to do with the mind, maybe psychiatry. Success' travail has got me interested in knowing more about mental health and things that affect the mind. I also read an article today about some causes of mental illness. Some are due to drugs, emotional trauma, and depression.

Saturday

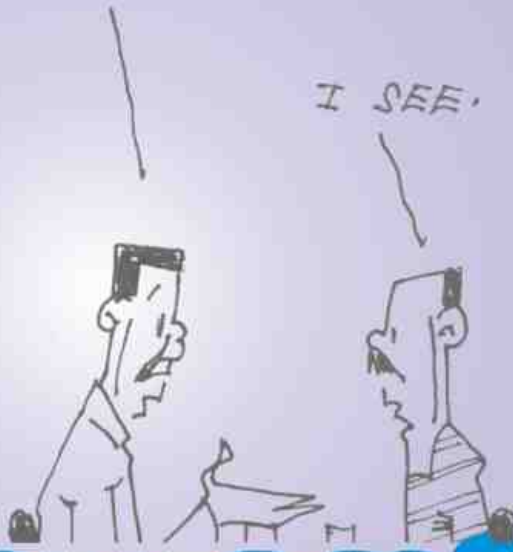
Kaine will be home at noon. I am waiting for her so we can go to the market together. Since I am home now till I gain admission into the university, I have assumed the role of the house keeper. Kaine came in at 1.00pm and we went to the market together. Mum already gave me a list of all the things we should buy. It was not easy bargaining with the market women but we survived. On our way home, we saw a crowd by the roadside surrounding something or someone. We could not see it well. We got to know from a passer-by that it was a boy who was being surrounded. We got a closer look and what we saw was horrific! A boy who was stark naked! Some people were trying to chain him. It seems he escaped from the home where he was being taken care of. Some of the onlookers were shouting that they should take him to the Psychiatric Hospital at Yaba for treatment and counseling. We heard some people saying, the boy had become a drug addict and was experiencing withdrawal syndrome. As far as I was concerned, the boy needed care and support.

Sunday

We went to church today. We will be taking Kaine back to school after lunch. On our way to drop Kaine, Dad mentioned that Success is getting better and that his mum said he did not hide at any unusual place yesterday. I pray he gets over the trauma fast and not deteriorate into a mental illness. I remembered the boy we saw yesterday and wondered what could have led him to drugs in the first place. I decided that when we get back home, I will go to the cyber café to browse and read more about mental disorders. I saw some of my juniors back at school and had a little chat with them encouraging them to read so they can pass their WASSCE like I did or even better. Mum, Dad and I got back home around 4.00pm. I told Mum, I was going to the cyber café. On opening the door to go out, I heard people screaming outside the gate. I rushed to the gate to peep through and what I saw was..... I will tell you in the next edition!

Cartoon

THE TEACHER SAYS JOHN, MY SON IS NOW A TERROR. HE BEATS UP OTHER STUDENTS.



I'LL DEAL WITH HIM. I'LL BEAT HIM MERCILESSLY!



NO, I'LL DEAL WITH HIM. I WONDER WHERE HE LEARNT THAT BAD BEHAVIOUR.



I BEG YOUR PARDON!





NEWSREEL

ARHE ORIENTATION PROGRAMME FOR MEDICAL STUDENTS

In line with the overall goal of Action Health Incorporated to promote learning in the field of adolescent health and increase access to a youth friendly facility that responds to the needs of adolescents in Nigeria, an orientation programme was organised for the final year medical students of College of Medicine, University of Lagos/ Lagos University Teaching Hospital between April 21 and May 13, 2008 at the AHI Youth Friendly Centre.

The workshop aimed at helping the students acquire skills on how to communicate with young people; broaden their knowledge on adolescent reproductive and sexual health concerns of young people and to know the processes involved in providing health services for adolescents.

The curriculum consisted of topics such as:

- Understanding human sexuality - they had the opportunity of breaking the culture of silence on issues relating to sexuality.
- Principles of adolescents' friendly health services - in preparing the students for the challenges of providing services for adolescents, they had a formal training on attributes of service providers and facility that will attract young people to such services.
- In addressing their values and biases, sessions on value and value clarification were also included in the curriculum.

COVENANT UNIVERSITY STUDENTS VISIT AHI

On April 30, 2008, a team from Covenant University, Ota, Ogun State, Nigeria paid a one-day learning visit to AHI. The team, comprising students and lecturers from the School's Department of Demography & Social Statistics, was welcomed by a team of Programme staff after which they were taken on a facility tour.

The visit aimed at exploring prospects in the field of Demography especially as it relates to Sexual and

(cont. on page13)

At the end of the training, participants had the opportunity of increasing their knowledge on human sexuality and principles of adolescent friendly health services as well as opportunity of clarifying their values on some controversial issues usually not discussed in the open.

The training was competency based and it involved a combination of training methodologies. It was very interactive and participatory. Presentations, brainstorming; experience sharing, group activities, and value clarification exercises were incorporated in the training.

A total of 157 final year medical students (56 females and 101 males) made up of 8 batches participated in the programme.



A batch of Medical Students with AHI facilitators



Students and lecturers of Covenant University with some AHI staff

FLHE TRAINING OF TEACHERS

The Federal Ministry of Education (HIV/AIDS Unit) and National Agency for the Control of AIDS (NACA) organized a 10-day training workshop on Family Life HIV and AIDS Education (FLHE) Curriculum Implementation for teachers of Federal Government Colleges as well as Inspectors from the Federal Inspectorate Services in the country. The training was held in five zones of Lagos, Zaria, Uyo, Jos and Maiduguri from April 7 to April 17, 2008.

The objectives of the training were to scale up the implementation of FLHE in schools across the country and to train Master Trainers who will in turn step down the training in their various states. Specific objectives aimed at providing individuals with information and skills necessary for rational decision making about their sexual health as well as increasing the knowledge and skills of relevant FLHE carrier subject teachers in the key concepts and methodology for classroom delivery of the FLHE curriculum in Federal Government Colleges in Nigeria.

Furthermore, the training aimed at building the capacity of Education Inspectors responsible for monitoring the FLHE curriculum intervention as well as an avenue to disseminate the FLHE Training Manuals and Teachers' Guides.

In the South Western region of the country, a total of 29 teachers and 10 Inspectors drawn from the states of Lagos, Oyo, Ogun, Ondo, Osun and Ekiti states were trained in Lagos. The North Central region had a total of 42 teachers and 10 Inspectors drawn from Benue, Kwara, Kogi, Plateau, Nassarawa, Niger and the Federal Capital Territory were trained in Jos. In the North West and the North East regions of the country, the training was held at the Maiduguri International Hotel, Maiduguri, Borno state with a total of 39 teachers and 9 Inspectors drawn from Kebbi, Katsina, Zamfara, Kaduna, Bauchi, Sokoto, Kano, Yobe and Borno. Also, 44 teachers drawn from Rivers, Anambra, Bayelsa, Ebonyi, Abia and Akwa Ibom were trained in Uyo while Adamawa, Gombe, Jigawa, Taraba teachers were trained in Zaria.

2008 WORLD HEALTH DAY

The World Health Day was commemorated on April 4, 2008 at the AHI Youth Friendly Centre with the theme, **"protecting health against climate change"**. The World Health Organisation (WHO) selected this theme in recognition of the growing threat of climate change to global public health security.

Activities carried out at the event included lectures, quiz competition, impromptu speeches, among others. In one of the lectures, young people were taken through factors that promote good health such as good nutrition, personal hygiene and environmental hygiene. They were informed of the need to protect themselves against the adverse effects of climate change by ensuring healthy lifestyles. Common illnesses that could be contracted through water and air were highlighted. These included typhoid, cholera and tuberculosis. According to the facilitator, these could be prevented through healthy lifestyles. Emphasis was also laid on emotional health as feeling good about oneself and having a positive attitude to life are some of the ways of having good emotional health. It was participatory as young people asked questions which were duly answered.

Participatory training methodologies were employed to facilitate affective, behavioural and cognitive learning domains. Participants were opportune to share their thoughts and other relevant experiences during the sessions. The workshop was divided into two parts; training and practicum sessions. Methodologies such as role play, group work and presentation, songs, drama, demonstrations, brainstorming, and experience sharing were used to facilitate the sessions. Facilitators also employed ice breakers and energizers, thus creating an enabling environment for participants to interact and get to know each other.

The training was structured with topics covering the following key thematic areas:

Human Development; Personal Skills;

HIV Infection; Relationships and Society /Culture.

At the end of the programme, certificates were awarded to participants.



Teachers of FGC and Inspectors from the Federal Inspectorate Services during the FLHE training in Lagos

The quiz competition and the impromptu speeches also brought out the best in the participants as they competed for honours in various categories. It was a consensus that without good health, wealth could not be enjoyed and for a country to grow and develop economically, the citizens would have to be healthy.

The programme attracted 298 young people comprising 142 boys and 156 girls and curtains were drawn after various dance presentations by troupes from the Mainland Senior High School; Ifako Comprehensive Senior High School; Angus Memorial Senior High School and Morocco Comprehensive Basic School.



“ABSTINENCE” SEMINAR ORGANIZED BY DE-BEST INTERNATIONAL, ISOTO

As part of an effort to equip young people with factual and age appropriate information on their sexual and reproductive health and development, a seminar on “Abstinence” was organized by De-Best International on May 22, 2008. The programme which was facilitated by a staff of AHI centred on the definition of Adolescence; physical changes that occur at puberty; and the social and emotional developments that occur at this stage. The facilitator defined “Abstinence” as refraining or not engaging in any form of sexual activity or intercourse and this according to her, requires a conscious decision and effort. The facilitator explained that adolescents who engage in sexual intercourse face consequences like; teenage pregnancy, STIs, HIV, emotional problems, delay in academics and limited educational opportunities. The facilitator therefore counseled young people to avoid behaviours that could disrupt their future goals.

Some of the reasons why some young people engage in sexual intercourse were enumerated to include:

- Peer pressure from friends or dating partners
- To satisfy curiosity
- To satisfy sexual urges and for sexual pleasure
- Lack of parental guidance
- Lack of knowledge and information on abstinence
- Lack of knowledge about the negative consequences of engaging in sexual intercourse

Furthermore, the facilitator called on young people to seek accurate information on their health and development to be able to abstain from sexual intercourse. She explained why Abstinence is the best method of protection against unwanted pregnancy, STIs and HIV as it enables young people to concentrate on their academics and future goals. Participatory methods such as role play and songs were used to assist participants' understanding.

Also enumerated and explained were behaviours and skills that enhance abstinence such as Decision Making; Communication; Negotiation; Self control; Knowledge and Information; Ability to identify goals.

In order to equip participants with skills on abstinence, the “**SWAT**” **TECHNIQUE**, was explained. It is one of the ways of learning how to negotiate abstinence with a partner. The technique requires four steps, which are-

“**S**” ---- “Say no effectively”

“**W**” ---- “Why i.e. give a clear reason for not engaging in a sexual behaviour”

“**A**” ---- “Alternative i.e. suggest an alternative action or something else you might think is safe”

“**T**” ---- “Talk it out Discuss your feelings about the behaviour”.

INTERNATIONAL DAY OF ACTION ON WOMEN'S HEALTH

International Day of Action on Women's Health (IDAWH) was held on May 28, 2008 at the AHI Youth Centre. The theme, “**Gender Equality**” addressed gender issues affecting the girl child, the effects and ways of putting an end to the problem, starting from home to community level and the nation at large.

The programme aimed at sensitizing young people more on gender issues as they relate to the girl child; promoting male's responsibility in sexual and reproductive health and helping them grow into responsible and happy adults.

Highlight of the programme was a presentation on 'Gender Inequality' by a programme staff of AHI who defined “Gender” as the sum of cultural values, attitudes, roles, practices and characteristics based on one's biological sex. i.e. being Male or Female and Gender Roles as behaviors that are considered to be appropriate for males or females in a society. The facilitator explained that they are socially defined expectations that people of one gender are expected to

fulfill. Gender roles are therefore; influenced by tradition, families, school academic and co-curricula activities, friends and the media.

The participatory and interactive session involved young people mentioning their specific roles in their families. This was used to explain further the meaning of Gender Roles. Participants were made to understand that gender inequality affects both men and women but women and girls are mostly affected. Examples of inequality based on gender are: male-child preference, forced or early marriage, men are expected to be bread winners in the home. Gender Inequality means that girls and women do not have the same opportunities as boys and men for education, meaningful careers, political influence, and economic advancement.

The facilitator explained how religion and cultural beliefs influence gender equality eg, a male child is desirable and favored in our society and in families and is given more privileges than his female counterpart; males are often given an education, important jobs, inherit property and for females,

(cont. on page 13)



A dance presentation by some participants to mark the occasion

they often have the responsibility of raising children, since they carry and deliver the children.

Harmful effects of gender inequality such as encouraging violence against women and girls as well as encouraging the exploitation of women and girls were also explained to participants.

The International Day of Action on Women's Health was created to take a fresh look at women's unique health needs. It is a day to take action on women's health and address factors affecting them negatively. Important issues in women's health include family planning, contraception, HIV/AIDS, safe motherhood, Female Genital Cutting (FGM), abortion etc.

These practices have negative consequences on health and women's economic opportunity. They denote violation of the fundamental rights of women.

AIDS CANDLELIGHT MEMORIAL

Action Health Incorporated (AHI) on May 19, 2008 joined the International Community in marking the AIDS Candlelight Memorial by organizing a centre-based activity attended by over two hundred and twenty (220) students from Kosofe, Mainland and Shomolu Local Education Districts.

The purpose of the event was to honour all those affected by the AIDS pandemic, as well as to educate young people about HIV and AIDS prevention, care and support, positive living, stigmatization/discrimination and treatment. The global theme for the year's celebration **"Never give up, Never forget"**, aimed at bringing into remembrance those who died of AIDS and stirring up stakeholders to continue the fight until a lasting solution that will provide complete cure and immunity is found.

The event also aimed at facilitating behavioural change through adequate knowledge of HIV/AIDS as well as assessing young people's understanding of what they have learnt over the years on HIV and AIDS and helping young people develop necessary skills to combat HIV

Reproductive Health.

Discussions centred on the overview of AHI's and ARSRC's (a project of AHI) activities; the prospects in the field of Demography.

At the end of the learning visit, the team commended the management of AHI for their versatility and relevance to the overall development of young people, and also thanked the staff for the warm reception accorded them.

(cont'd from page10)

and AIDS.

The Coordinator, 'Citadel of Hope', a support group of People Living with HIV and AIDS, who is also the Lagos State coordinator of APYIN (Association of Positive Youths in Nigeria, Lagos State Chapter), Miss Ajiboye Monisola, made a presentation on HIV/AIDS issues and shared her experiences as a positively living person. Issues of Stigmatization/Discrimination against PLWH/As, Care and Support for PLWH/As, Positive Living, and Treatment of HIV and AIDS were also addressed.

A quiz competition aimed at testing young people's knowledge on HIV and AIDS was incorporated into the programme. The lighting of memorial candles in honour of the precious souls lost to AIDS were not left out as participants all observed a minute silence in honour of the deceased.



The symbolic lighting of Memorial Candles during the event

CHILDREN CELEBRATE THEIR DAY IN STYLE

"A day set aside for parents to share their joy with their children"; a day parents should reflect on how best to raise their children to become true future leaders of the nation". These were the views of a cross-section of young people interviewed during the "Children's Day" celebration held at the premises of AHI on May 27, 2008.

The event, tagged, "**We are the World, We can make a Change**" aimed at helping young people understand and adopt responsible behaviours as leaders as well as their roles in their growth and development.

Young people representing various secondary schools in Lagos State had fun during the celebration which featured poem recitation, choreography and essay writing.

Highlight of the event was the "**Hot Seat**" segment anchored by AHI Youth Assistant. The Interview segment aimed at helping participants learn from the experiences of a young Achiever who has impacted



Young people having fun during the event

positively on the lives of young people.

Children's day is celebrated annually in many countries of the world. The day is a reminder to parents and other adults on how they should value and treasure children, reflect on how best to raise children to become happy, healthy adults, the need for government to address the effects of poverty on children and the need to involve young people in the decision-making processes of issues that affect them.

2008 'WORLD NO TOBACCO DAY'

Action Health Incorporated (AHI) on June 2, 2008 joined others around the globe to commemorate the 2008 "World No Tobacco Day".

The event, tagged, "Tobacco Free Youth" aimed at educating young people on the health implications of using tobacco; empowering them to become change agents in their communities and the nation as well as motivating the government, policy makers and key stakeholders to take necessary action against the manufacturers of tobacco.

The event featured riddles and jokes, comedy and a presentation which aimed at bringing out the effects of smoking on young people's health and its implication to the economy.

The effects of tobacco on health such as cataracts; wrinkles; hearing loss; hair loss; skin cancer; tooth decay; heart diseases; stomach ulcers; discoloured fingers; uterine cancer and miscarriage; deformed sperm; psoriasis; buerger's disease and lung cancer



A young person advocating for a Tobacco - Free Environment

were highlighted during the programme that attracted young people from various schools around Lagos.

The participatory approach adopted during the programme gave an insight into why young people smoke. Some of the reasons include peer pressure, for acceptance, to act like a 'big boy' and to feel high and good.

At the end of the event, young people were unanimous in their call for government to among others:

- Ban all forms of tobacco advertising and promotion to achieve a Tobacco Free Environment
- Understand that tobacco smoking eventually leads to disability and death.
- Totally ban the manufacture and importation of tobacco into the country.

Tobacco is the leading preventable cause of death in the world. According to WHO, it is the second major cause of death in the world, currently responsible for the death of one in ten adults worldwide (about 5 million deaths each year). If current smoking patterns continue, it will cause some 10 million deaths each year by 2020. Approximately 1.8 billion young people (aged 10-24) live in our world today with more than 85% found in developing countries. Having survived the vulnerable childhood period, these young people are generally healthy. However, as the tobacco industry intensifies its efforts to hook new, young and potentially life-long tobacco users, their deadly products seriously threaten the health of a significant percentage of the world's youth.

Special Report

FORD FOUNDATION TEAM UNDERSTUDIES THE IMPLEMENTATION OF FAMILY LIFE AND HIV EDUCATION (FLHE) IN LAGOS STATE, NIGERIA

Action Health Incorporated (AHI), between June 2-3, 2008 played host to a team from the Ford Foundation. The visit of the team comprising Dr. Babatunde Ahonsi, Ford Foundation, West Africa; Dorinda Welle, Ford Foundation, New York, U.S.A and Ms. Oluyemise Akin-Adeniyi, Ford Foundation, West Africa not only provided an opportunity for the delegation to familiarize themselves with the organization's work, it also was an avenue to interact with key persons involved in the management of the curriculum implementation process, as well as to appraise the successes and challenges being faced in the implementation of Family Life and HIV Education (FLHE) in Lagos State, Nigeria.

A round- table discussion was organized which had in attendance Lagos State Ministry of Education (LSMOE)

officials including a State Universal Basic Education Board (SUBEB) representative; School Principal, Master Trainers, AHI programme staff led by the Executive Director, Mrs. Nike Esiet and other young people.

Various presentations bordering on AHI's work, programming strategies, advocacy initiatives towards integrating and implementing FLHE curriculum at both the state and national levels, background information on implementation of the National FLHE Curriculum in Lagos State including core activities like planning, human resources development, FLHE classroom delivery, e-FLHE as an on-going pilot project, FLHE evaluation and findings, lessons learnt and challenges, pre service training on FLHE as well as opportunities for the future were made.

The event featured experience sharing by Master Trainers on



The Lagos State Ministry of Education officials and The Ford Foundation team, (5th from left) is Dr. Uwem Esiet, leader of the delegation



The Executive Director, AHI, Mrs. Nike Esiet giving background information on the implementation of the National FLHE Curriculum in Lagos State.



Ms. Dorinda Welle thanking the Lagos State Ministry of Education and AHI for the opportunity to learn from the Lagos State Model



The team also visited The Africa Regional Sexuality Resource Centre (ARSRC), a Project of Action Health Incorporated (AHI)

some of the challenges faced in the course of the implementation of the Curriculum, question and answer sessions as well as suggestions on how to overcome some of the challenges.

The team also visited Morocco Comprehensive Junior High School, Igbobi, Yaba where it was received by the School Principal, Mr. Tunji Adeyiola, who led the group to the one of the classes to observe a carrier subject teacher facilitate a session on "Family". Different facilitation styles such as songs, brainstorming and group exercises were adopted during the session. The team later expressed their gratitude to students; teachers and the Principal of the school for the warm reception accorded them.

Highpoint of the visit was the meeting with the officials of the Lagos State Ministry of Education held at the Conference Room of the Deputy Governor's Complex, Secretariat, Alausa, Ikeja, Lagos. In attendance was a representative of the Deputy Governor, Her Excellency, Mrs. Sara Sosan; others were Director, Basic Education Services, Mrs Olaogun; HIV/AIDS Programme Coordinator, Mrs. Adejuwon; Director, Inspectorate, Mrs. Osuntuyi; Director. Co-Curricula, Mrs. Akinyeye; Director. PESP, Mrs. Amosu; Acting PS/Director,

Finance and Admin, Mrs. Ogundimu as well as Deputy Governor's media crew.

The Ford Foundation team thanked the Ministry of Education and AHI for giving them the opportunity to learn from the Lagos State model. Emphasis were made on the need to start FLHE early so as to impact positively on the adolescents and health of the community as a whole. The need for more capacity building programmes for teachers on the new teaching methodologies was also stated.

Responding, the Special Adviser to the Commissioner, Mrs. Azeez listed the need to improve the economy, to make the society a better place and job creation for the unemployed youths as key drivers for the implementation of FLHE in the state. She called for the strengthening of partnership among stakeholders in order to scale-up the implementation of the curriculum in other tiers of the school system and promised on behalf of the Ministry to address areas where the model is yet to yield positive results.

Finally, Dr. Esiet, in his vote of thanks, used the medium to remind the Ministry of the lessons learnt in the implementation process; the need for the Ministry to keep the programme in their heart and to consider scaling-up into senior secondary schools as well as the upper primary schools in the state.



A cross-section of participants during the round-table discussions



AHI Youth Assistant explaining some points during the tour



The Ford Foundation team with other participants



The team at the IEC Unit



Body Awareness

Water: A Vital Nutrient

Water is the most abundant compound in the human body and is necessary for the digestion of food, for the transport of food to the tissues, for the elimination of body wastes, and the circulation of body fluids.

The human body can last weeks without food, but only days without water. The body is made up of 5575% water. Water forms the basis of blood, digestive juices, urine and perspiration and it is contained in lean muscles, fat and bones.

As the body can't store water, we need fresh supplies every day to make up for losses from lungs, skin, urine and faeces. The amount we need depends on our metabolism, the weather, the food we eat and our activity levels.

Facts about water in our bodies

Some facts about our internal water supply:

Body water is higher in men than in women and falls in both with age.

Most mature adults lose about 2.53 liters of water per day. Water loss may be more in hot weather and with prolonged exercise.

Elderly people lose about two liters per day.

An air traveler can lose approximately 1.5 liters of water during a three-hour flight.

Water loss needs to be replaced.

Foods provide about one liter of fluid and the remainder must be obtained from drinks.

Water is needed for most body functions

Helps eliminate the by products of the body's metabolism, excess electrolytes, for example sodium and potassium, and urea which is a waste product formed through the processing of dietary protein.

Regulates body temperature through sweating.

Aids digestion and prevents constipation.

Maintains the health and integrity of every cell in the body.

Carries nutrients and oxygen to cells.

Water contents in food.

Most foods, even those that look hard and dry, contain water. The body can get about half of its water needs from food alone. The digestion process also produces water as a by-product and can provide around 10 per cent of the body's water requirements. The rest must come from liquids.

Dehydration

Dehydration occurs when the water content of the

body is too low. This is easily fixed by increasing fluid intake. Symptoms of dehydration include headaches, lethargy, mood change and slow responses, dry nasal passages, dry or cracked lips, dark-colored urine, weakness, tiredness, confusion and hallucination. Eventually urination stops, the kidneys fail and the body can't remove toxic waste products. In extreme cases, this may result in death.

Causes of dehydration include:

Increased sweating due to hot weather, humidity, exercise or fever.

Not drinking enough water.

Insufficient signaling mechanisms in the elderly; sometimes they do not feel thirsty even though they may be dehydrated.

Increased output of urine due to a hormone deficiency, diabetes, kidney disease or medications.

Diarrhea or vomiting.

Recovering from burns.

When to increase your fluid intake.

If you regularly don't drink enough water there is some increased risk of kidney stones and, in women, urinary tract infections. There is also limited evidence to suggest an increased risk for some cancers including bladder cancer and colon cancer. It can also lower your physical and mental performance and salivary gland function.

Fluid retention

Many people believe that drinking water causes fluid retention. In fact, the opposite is true. Drinking water helps the body rid itself of excess sodium, which results in less fluid retention. The body will retain fluid if there is too little water in the cells. If the body receives enough water on a regular basis, there will be no need for it to conserve water and this will reduce fluid retention.

Recommended daily fluids.

Approximately six to eight glasses (at least 150ml each) of a variety of fluids can be consumed each day. More than eight glasses may be needed for physically active people, children, and people in hot or humid environments, and breastfeeding women (who need an extra 7501,000ml per day). Less water may be needed for sedentary people, older people, people in a cold environment or people who eat a lot of high water content foods.

References:

www.betterhealth.vic.gov (accessed 4/06/2008)

www.internethealthlibrary.com (accessed 4/06/2008)

www.betterhealthchannel.com (accessed 4/06/2008)



True Life Story



"Violence at home ...what a shame"

"Will you shut up! The next time I return from the office and my dinner is not ready, everyone in this house will be in soup". Those were my father's favorite words whenever he had a bad day at work and dinner was a little late. My two siblings and I grew up in a home that was devoid of love, peace and happiness. Usually, a little argument would lead to a big fight and my siblings and I would lock ourselves in our room and pray that the house didn't fall over our heads. We never interfered in our parents' fights because nobody wanted to get injured, moreover dad would flog the daylight out of us saying we weren't there when they started so, we should give them privacy to finish it alone.

One rainy night, mum and dad had a serious fight as usual and mum hit her head on the iron hanger and collapsed in the bedroom. She was rushed to the hospital but before any help could come, she had given up the ghost after losing so much blood. Then I was just 15 years old, Naomi was 12 while Marcel was 13. I never forgot the fights, mum's screams, the blood oozing out of her forehead that night and her final words to me "Never get married to a man like your father, take care of your siblings".

However, she remained a faithful friend and when I told her about what happened in my family, she advised me to visit a counselor during the holidays.

I began to have nightmares; I was always hearing screams and seeing dead people in my dreams. There was no one to talk to, how could I tell anyone that my father had killed my mother? At school, I became a recluse, my grades dropped and I felt alone in the world. At first, my teachers and classmates felt I was affected by my mother's death. But it was far more than that, I was affected by what led to her death; a violent home. I grew up hating men and the only male I ever cared for was my brother, Marcel.

When I entered SS2, dad decided to marry a new wife. He made us all go into the boarding school because his new wife couldn't cope with step-children who were grieving still from the loss of their mum. I became a recluse; never talking and replying questions in monosyllables, Naomi was wild, never spending time at home, while Marcel had taken to drinking and doing drugs.

In my new school, I met a girl called Evioghene.

On a good day, I would have been her friend but fate has its way of doing things. One evening, I was on my way to the dining room, thinking about my mum and how dad's new wife would likely end up in an early grave as well. Unfortunately, I never saw the ditch ahead of me and in the middle of my reverie; I fell into the ditch that had dirty water with greenish algae and fungi in it. I couldn't get out and passers-by were laughing at me instead of giving me a helping hand. Suddenly, Evi came and helped me out; she took me back to her dormitory and gave me a new house-uniform to put on as my hostel was far. That was how we became friends and after about two months, I told Evi of my mental challenge. I didn't just decide to tell her, it was a necessity. I was labeled 'the weird girl' in my dormitory because I was always screaming hysterically at night, I was fond of speaking to myself and hearing sounds others couldn't hear. This made people keep away from me and Evi was even advised to stay away from me. However, she remained a faithful friend and when I told her about what happened in my family, she advised me to visit a counselor during the holidays.

When school closed, I went home reluctantly, only to hear that my dear brother Marcel was in an asylum. Out of depression, Marcel had begun taking marijuana at the age of 13, dropped out of school when he was fourteen and he ended up in an asylum at age 17.

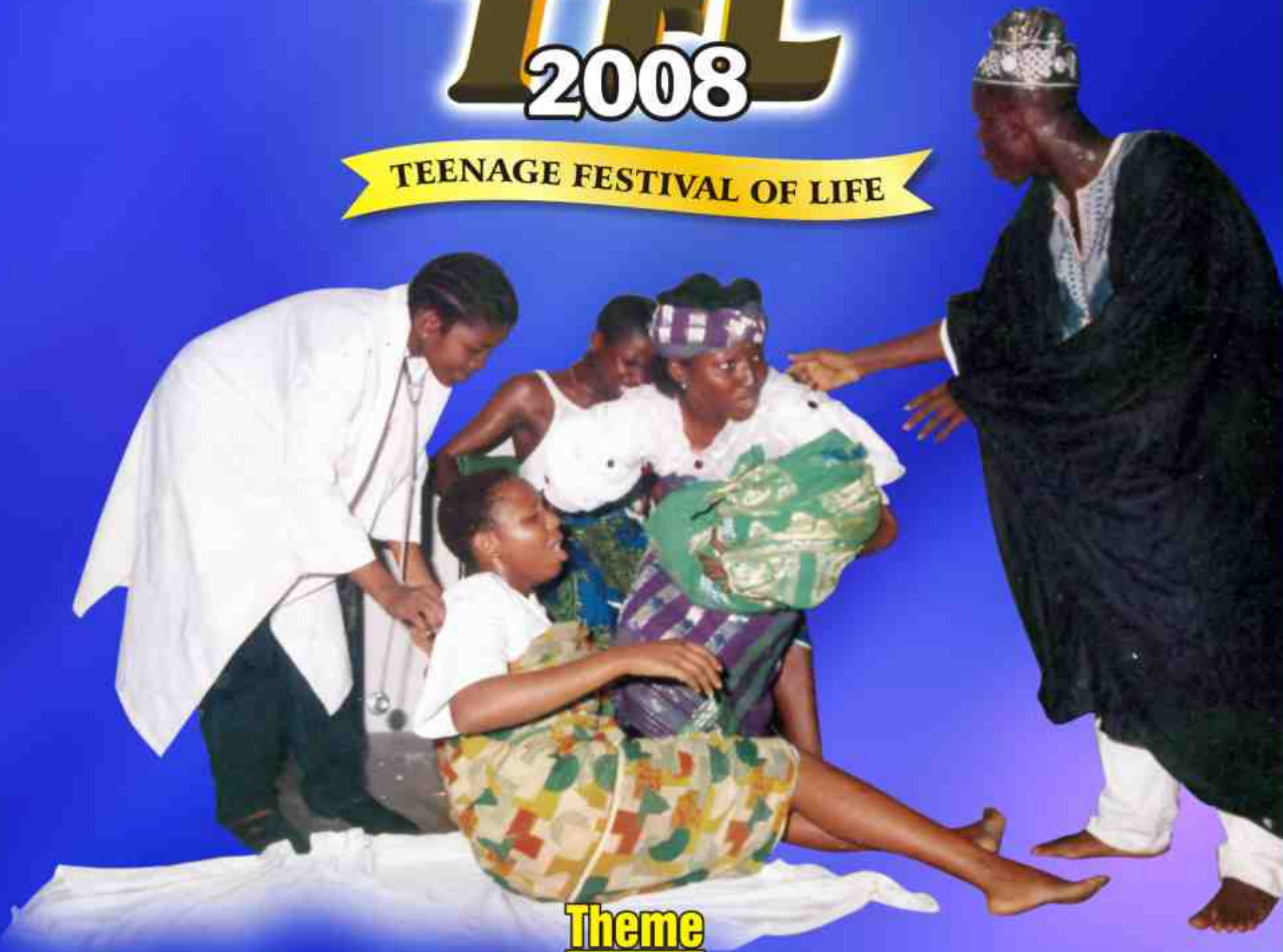
Daddy's new wife had given birth to a set of twins, but she ran away when dad nearly strangled her to death for visiting her mother without his permission. For days, I couldn't bring myself to visit Marcel, I cried until it was as if my tear glands had stopped functioning. Naomi wasn't any better her self, just sixteen years old and yet had started sleeping with men all around the neighborhood.

I sat back and began to relay the days of my life. When my siblings and I were still very vulnerable, we were exposed to domestic violence; we were not loved and taken care of. These led to depression and consequently our poor mental health. If only we were brought up in a home where peace and love reigned, we would probably have grown up just like other adolescents. I have booked an appointment with a counselor for Naomi and myself, I only hope it's not too late to begin life afresh. Moreover I learnt that Marcel would spend six months in the rehabilitation home, and then he will be well again. Oh! 'How I hope that all will be well with us'.

When I think of what my siblings and I went through, I can only hope that young people are appreciated and given every encouragement to grow into successful and responsible adults.

TFL 2008

TEENAGE FESTIVAL OF LIFE



Theme

Ensuring Our Rights: Addressing Harmful Sexual Health Practices

Venue

Main Auditorium
University of Lagos
Akoka, Lagos

Date

Thursday,
November 6, 2008

Categories

Songs | Poems | Drama

Rules

¹Each school can only submit one entry per category and each entry must be typewritten. The School Principal must certify all entries.

²The song, poem and drama entries must be original and reflect the theme of the event.

³All participating schools must attend a one-day training workshop. This is a prerequisite for participating in the competition.

⁴The competition is open to all secondary schools in Lagos State.

⁵Submission of entries closes on 29th August, 2008.

⁶A panel of judges will select winners in each category.

For further information, please contact: TFL 2008 Planning Committee, AHI Youth Centre
17, Lawal Street, off Oweh Street, Jibowu, Lagos. Telephone: 01 774 3745; Email: info@actionhealthinc.org

ACTION HEALTH INCORPORATED

2009 Youth Skills Development Programme

As one of the strategies geared towards ensuring total youth development, Action Health Incorporated (AHI) initiated the Youth Skills Development Programme, a one-year internship programme that engages young secondary school leavers aged 16 – 19 years to serve as Youth Programme Assistants within the organization. The programme is designed to provide youths the opportunity to develop several core competencies and skills required for transition from adolescence to a healthy and productive young adulthood. Specifically participation on the programme will enable the young people to develop core competencies in areas that include:

Self-Management
Interpersonal Communication
Career-readiness
Personal Health Management



Participants on the programme will have an opportunity to work at AHI from November 2008 - November 2009. Monthly enumeration will be given to participants and Certificates will be issued to successful participants at the end of the programme.

REQUIREMENTS

Applicants should be between 16 - 19 years

SSCE result should include a minimum of five (5) credits including Mathematics and English Language

Must demonstrate creativity and ability to use initiative

Must be committed to working full-time from November 2008 - November 2009

Proximity to youth center (for interested candidates outside Somolu, Mainland and Kosofe LGAs)

To apply, write “**Youth Assistant**” on the top left corner of the envelope and attach photocopies of your credentials, a letter of reference from your school principal and submit your application on or before **9th November, 2008**

SEND YOUR APPLICATION TO:

The Executive Director
Action Health Incorporated
17 Lawal Street Off Oweh Street
Jibowu, Lagos.
P. O. Box 803, Yaba, Lagos.
Email: info@actionhealthinc.org

**...Do not miss
this one in a million
opportunity!**

WATCH YOUR MANNERS

“Building And Maintaining Positive Relationships”

Oh no! I should have known; I don't think I can get along with this any longer. Usually, these are statements when appropriate measures are not taken at the right time when building relationships.

Positive relationship refers to interactions that bring about apparent affirmative attitudes between the persons involved. It is a kind of relationship that is rich in certain resources that take time and absolute commitment to achieve. This could be in form of family, friendship, dating love etc. In this edition, we will be looking at “friendship” as a form of relationship.

Friendship is a state of being emotionally attached to another person, resulting from feelings of affection. It provides a basic source of happiness, pleasure and companionship. It is very important to adolescents as it helps to ease their transition from childhood to adulthood. Through common interests, age, background, gender, similarity of values and attitudes, and the ability to keep confidences, one can develop a relationship.

The importance of friendship cannot be over-emphasized. Apart from promoting self-esteem; it provides opportunity for young people to share experiences and insights. Also, appropriate inter-personal skills are developed as well as learning social skills. Most importantly, it provides companionship since it involves fun, sharing and caring.

Friendship can be improved upon and certain behaviours can also act as detriments. Young people can improve their friendship by solving assignments together; visiting each other's family and friends; sharing goals and aspirations; having group activities; exchanging gifts and making positive comments about one another.

Furthermore, certain unethical behaviours can destroy friendship. Betrayal of trust; negative peer pressure; dishonesty; gossiping; selfishness and disclosing confidential information can adversely affect friendship.

How Then Do We Build And Maintain Positive Relationships?

We are special beings with ability to relate with different people from different backgrounds and different values. Building positive relationships involves:

Having confidence and good personality:

Having confidence in your ability attracts admiration. Accepting who you are and believing that you are unique in your own way, with the ability to stand for yourself just as everyone else, is one way of appreciating your personality. Just as the stars receive rays from the sun to shine, people will also see the beauty of that personality in you and this will help you create and sustain a

relationship anywhere, anyhow, anytime with anybody.

Effective communication:

The ability to express your self in whatsoever situation and figure out solutions when controversial issues come up by being assertive or negotiating is another important aspect of retaining a positive relationship. There are certain communication skills like the use of 'I' statement, direct eye contact and simple languages that can serve as guides to effective communication with the persons involved in a relationship.

Bringing out the best in others:

Whenever you get to meet people or have an opportunity to spend reasonable time with them, always try to make them feel they are wonderful and specifically gifted. This could come in the form of complementing them when they look good or do things that are good. This doesn't mean you cannot correct them when they err because this also constitutes keeping good relationships.

Respect for oneself and others:

Having a high self esteem is one way of respecting yourself while admiring other people irrespective of their values. This is another way of showing respect to others. Don't try to force your likes and dislikes on people.

References:

“How To Say NO and Keep Your Friends”
By Sharon Scott.

“And I Thought I Knew How To Communicate Exploring fresh choices in relating”
By Josiah Dilley.

“Comprehensive Sexuality Education (Trainers’ Resource Manual)”
By Action Health Incorporated (AHI).



YOUNG ACHIEVER



Chinedu Demian Ogueri: (Inspiring Youth Through Creativity)

"I define myself as a young person and dream of the day youths will take their rightful place in the society. I celebrate life by learning and appreciating something new everyday so that I can inspire and motivate them to live their dreams. I blend and channel all my energy into writing and other creative acts that I dabble in", Chinedu, an activist, elaborated on his vision for youth development.

Chinedu Demian Ogueri is the author of a new book on youth development, titled, "**Youths To The Rescue Of A Nation**". The book identifies the non involvement of youths in the socio-economic and political decision-making processes as the main factor that has hindered the capability of Nigeria to confront abject poverty, ignorance, drug trafficking and abuse. It discusses the means through which youths can be involved in decision making and a way of tapping the idealism, energy, enterprise and commitment of youths so as to achieve unprecedented national development.

Born twenty-one (21) years ago, Chinedu hails from Ehime Mbano Local Government Area of Imo state, Nigeria. He attended the Agbaja Central School, Ehime Mbano from 1996-1997. He later moved to Ibeme High School, Isiala Mbano where he obtained the Senior Secondary School Certificate (SSC) in 2003. He is presently a University of Ibadan, 200 level student of Botany and Microbiology. Indeed, the hard working young man who has made youth development his pre-occupation through his numerous write-ups on the way forward for young people has endeared himself to like minds and others. In January 2007, he organized the students of the University of Ibadan to a round table conference to discuss some of the challenges young people face and to proffer solutions to them.

A rising star, Chinedu is also a motivational speaker. He is regarded as the voice of youth by his peers. He is a member of "The World Youth Movement for Democracy and the Voice of Youths, UNICEF. VOY is an organization with the objective of promoting youth development, Human Rights and Democracy. He has severally been invited to talk on key issues of youth

development in meetings of the Nigeria Chapter of Toastmasters International (a public speaking and leadership development club). He has also been elected the Publicity Secretary and Idea Development Officer of SPREZZATURA Network International (*'Idea' in Spanish*), a forum that regularly discusses National issues as they affect young people.

In 2007, he was given a Certificate of Honour by the World Bank for participating in the International Essay Competition. His essay on "**How Corruption Affects one's Life and What Can Be Done To Reduce It**" earned him great reviews at home and abroad.

Icons like Donald Duke, Prof. Charles Soludo, Leo Stan Ekeh and Philip Emeagwali have played great roles in his life. According to him, "I appreciate and admire these great men because they have contributed to the development of Africa in particular and the world in general but I want to make a difference in the lives of young people by channeling all my energy into lifting them to the next level", he emphasized.

Chinedu who likes swimming and reading novels at his leisure time advises fellow youths to be focused, hard working and to inspire themselves both as individuals and as groups with innovative ideas. This way, nobody can afford to ignore them. Who says this young man is not marked for greatness?



Chinedu Ogueri with the former Governor of Cross River State, Mr. Donald Duke and other dignitaries during the launch of his book, titled, 'Youths To The Rescue of A Nation'

My Question-3 in 1 Service
Go ask your Questions



MyQ a 3 in 1 service that provides accurate and non-judgmental answers about Reproductive Health and HIV/AIDS issues for young people:

To get answers to your questions:

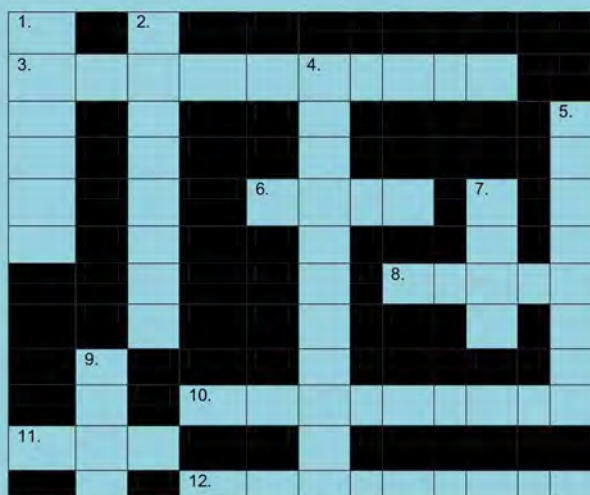
- Send a text message to **38120 on MTN** mobile free of charge
- Call **08027192781** on Celtel mobile
- Email your questions to MyQ@learningaboutliving.com or go to www.learningaboutliving.com/MyQ.

MyA is a monthly competition for young people to win prizes by answering a monthly question. Each month, 10 winners will be picked from the qualified entries and given airtime sponsored by NACA.

BRAIN TEASERS

By Frances Chukwura

Let's see how far you can go with this. Note that the numbers beside each word indicate the number of letters that would be fixed in each of the boxes. Have fun guys!!!!



Across

- 3. Pain killer (10)
- 6. Moody (4)
- 8. Body part mostly affected (5)
- 10. A patient is said to be (9)
- 11. Furtive (3)
- 12. Wobbly (9)

Down

- 1. One factor that causes the illness (6)
- 2. Narcotic (8)
- 4. Have delusions (11)
- 5. To be unhinged (8)
- 7. Apprehension (4)
- 9. Crafty (4)

Answers

- 1. ylimaf
- 2. evitades
- 3. citehtsena
- 4. etanicullah
- 5. degnared
- 6. mulg
- 7. raef
- 8. niarb
- 9. yliw
- 10. desongaid
- 11. yls
- 12. Gnllbmert

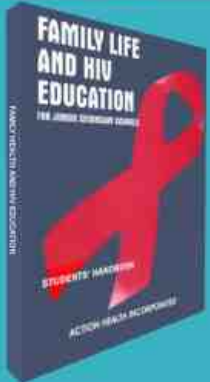


RESOURCES



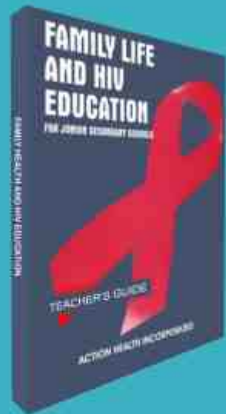
The materials listed here are resources on adolescent development. These materials are available for use in the reference library at the AHI Youth Centre at 17 Lawal Street, Jibowu, Yaba, Lagos

Books



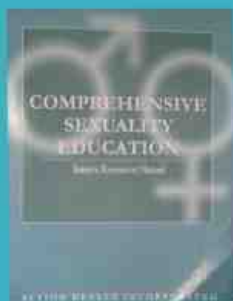
Family Life and HIV Education for Junior Secondary Schools Students' Handbook by Action Health Incorporated

Family Life and HIV Education Students' Handbook is developed for use by student at the Junior secondary School level as a supplementary text with factual information on the Family Life and HIV Education (FLHE) Curriculum. It is organized around the five key concept in the approved FLHE curriculum to help young people learn about their bodies, physical and emotional changes that occur during adolescence; presenting how young people can acquire skills including steps to take in setting sexual limit and ways of refusing unwanted sexual advances; exposing young people to issues around HIV infection and prevention and encouraging young people to discuss relationships with family and friends, as well as addressing the social and cultural environments that influence the way they learn about and express their sexuality. Where appropriate, the handbook contains stories, illustrations, pictures and cartoon that will help the students understand the topics better.



Family Life and HIV Education for Junior Secondary Schools Teachers' Guide by Action Health Incorporated

Family Life and HIV Education Teachers' Guide is a comprehensive, easy-to-understand guide for use by teachers in junior Secondary Schools who have the responsibility for classroom delivery of the Family Life and HIV Education (FLHE) Curriculum. This publication is not a textbook but rather a "how to do" guide for teachers. The guide encourages teachers to be creative, reflective and observant of the reaction and general demeanor of young people during classroom interaction, as well as creating an enabling environment for learning. Each chapter in the guide is divided into the following sections for effective delivery of the FLHE curriculum: lesson objectives, teaching aids, activities and evaluation questions. Teachers are encouraged to supplement with appropriate content-based textbooks, the FLHE curriculum and the Family Life and HIV Education Students' Handbook.



Comprehensive Sexuality Education: Trainers' Resource Manual" By Action Health Incorporated (AHI)

This manual provides a step-by-step guide to teaching Family Life and HIV/AIDS Education (FLHE). It provides instructional material for teaching topics under the six key concepts of comprehensive sexuality education (i.e. relationships, human development, personal skills, sexual behaviour, sexual health and sexuality, society and culture). Educators and other sexuality professionals will find this manual a complete resource in teaching young people about sexuality.

