



## Milestone 1 – PLH Teens Adapted

### Milestone Data

<b>Milestone No.</b>	M1	<b>Due Date</b>	31 Dec 2024
<b>Work Package No.</b>	WP1	<b>Work Package Title</b>	Adaptation and co-production
<b>Version</b>	1.1	<b>Status</b>	Public
<b>Description</b>	PLH Manual and training materials from Phase 1 published on FLOURISH website; pre-final (work in-process).		

### Key Data

<b>Keywords</b>	adolescents, family, communication, Parenting for Lifelong Health
<b>Lead Beneficiary</b>	Prof. Dr. Nina Heinrichs (UNIBI)
<b>Contact Persons for M1</b>	Prof. Dr. Nina Heinrichs (UNIBI) Lara Sophie Barg (UNIBI)
<b>Authors</b>	The FLOURISH Consortium

The sole responsibility for the content of this document lies with the authors and do not necessarily reflect those of the European Union or UK Research and Innovation (UKRI). Neither the European Union nor the granting authorities can be held responsible for them.



## FLOURISH Consortium



### **UNIVERSITAET KLAGENFURT (AAU-KLU)**

UNIVERSITAETSSTRASSE 65-67, 9020, KLAGENFURT, AUSTRIA

Prof. Dr. Heather Foran, Janina Mueller, Franziska Waller, Dr. Antonio Piolanti



### **INSTITUT ZA BILAKJ SEMEJSTVO I SISTEMSKA PRAKSA - ALTERNATIVA – INSTITUTE FOR MARRIAGE, FAMILY AND SYSTEMIC PRACTICE - ALTERNATIVA (IA)**

BULD JANE SANDANSKI 65, 1000, SKOPJE, REPUBLIC OF NORTH MACEDONIA

Prof Dr. Marija Raleva, Dr. Slavica Gajdadzis-Knezevik



### **ASOCIATIA OBSTEASCA SANATATE PENTRU TINERI - HEALTH FOR YOUTH ASSOCIATION (HYA)**

STRADA SOCOLENI 19, 2020, CHISINAU, REPUBLIC OF MOLDOVA

Dr. Galina Lesco, Viorel Babii



### **CARDIFF UNIVERSITY (CU)**

NEWPORT ROAD 30 36, CF24 0DE, CARDIFF, UNITED KINGDOM

Dr. Yulia Shenderovich, Prof. Graham Moore, Dr. Rhiannon Evans



### **UNIVERSITAET BIELEFELD (UNIBI)**

UNIVERSITAETSSTRASSE 25, 33615, BIELEFELD, GERMANY

Prof. Dr. Nina Heinrichs, Lara Sophie Barg



### **MEDIZINISCHE UNIVERSITAET WIEN (MUW)**

SPITALGASSE 23, 1090, WIEN, AUSTRIA

Prof. Dr. Judit Simon, Dennis Wienand



### **AST-CENTRE FOR EDUCATION LTD BELGRADE VOZDOVAC - AST-EDUCATION CENTRE LLC (AST)**

DJORDJA KRATOVCA 67, 11000, BELGRADE, SERBIA

Prof. Dr. Nevena Calovska, Prof. Anita Burgund Isakov



### **UNIVERSITAT JAUME I DE CASTELLON (UJI)**

AVENIDA VICENT SOS BAYNAT S/N, 12006, CASTELLON DE LA PLANA, SPAIN

Prof. Dr. Bojan Shimbov



## History

Date	Version	Change	Author/Reviewer
12.22/2023	1.1.		Nina, Heinrichs, Lara Sophie Barg

## Statement of Originality

This milestone contains original unpublished work except where clearly indicated otherwise. Acknowledgments of previously published material and of the work of others has been made through appropriate citation, quotation or both.

## **Parenting for Lifelong Health Programme for parents and teens**

### **Adapted manual for the FLOURISH project**

**Version 1.3 (not yet empirically tested)**

This variant of the PLH suite of programs was developed on the basis of available variants of PLH manuals. The ownership of this core material is with those who originally developed the core and the other variants. We adapted PLH teens for FLOURISH based on the South African Teens Manual<sup>1</sup> to the challenges in Moldova and N. Macedonia and integrated this material while maintaining the primary PLH model.

The responsibility for this milestone was with work package 1 lead (Lara Barg, Nina Heinrichs) and with input from work package 2 (Marija Raleva, Slavica Gajdadzis-Knezevik). Other FLOURISH consortium members provided input on the adaptations (Galina Lesco, Viorel Babii, Nevena Calovska, Anita Burgund Isakov, Yulia Shenderovich, and Heather Foran). Jenny Doubt (PLH) provided feedback on the adapted version, as well.

<sup>1</sup>The FLOURISH variant is an adaptation of the South African Teens manual by Jenny Doubt, Sibongile Tsoanyane, Jamie M. Lachman, Catherine Ward, and Lucie Cluver.

## Table of Contents

INTRODUCTION TO THE PARENTING FOR LIFELONG HEALTH PROGRAMME FOR PARENTS AND TEENS	p. 6
SESSION 1: DEVELOPMENTAL STAGES	p. 41
SESSION 2: BUILDING A POSITIVE RELATIONSHIP THROUGH SPENDING TIME TOGETHER	p. 72
SESSION 3: TALKING ABOUT EMOTIONS AND SENSITIVE TOPICS	p. 88
SESSION 4: WHAT DO WE DO WHEN WE ARE ANGRY	p. 107
SESSION 5: PROBLEM SOLVING & TALKING ABOUT SENSITIVE TOPICS WITHOUT CONFLICT	p. 123
SESSION 6: ESTABLISHING RULES & ROUTINES	p. 139

## INTRODUCTION TO THE PARENTING FOR LIFELONG HEALTH PROGRAMME FOR PARENTS AND TEENS

- adapted version for FLOURISH -

### TABLE OF CONTENT

PART 1: INTRODUCTION .....	7
KEY PROGRAMME COMPONENTS .....	7
FACILITATING THE PROGRAMME .....	8
PART 2: THE PRACTICALITIES OF DELIVERING THE PROGRAMME .....	8
COMPONENT 1: PRE-GROUP SESSION HOME VISITS .....	8
1.1 OVERVIEW .....	8
1.2 SUGGESTED STRUCTURE FOR HOME VISITS.....	12
COMPONENT 2: WEEKLY GROUP SESSIONS.....	12
2.1 WHAT HAPPENS IN THE PROGRAMME? .....	12
2.2 SESSION BREAKDOWN .....	13
2.3 DAILY SESSION STRUCTURE .....	14
2.4 DAILY ROUTINE & TIME KEEPING .....	14
2.5 PREPARATION.....	15
2.6 SETTING UP THE VENUE .....	15
GUIDE TO FACILITATING SESSION ACTIVITIES .....	15
WELCOME.....	15
PHYSICAL EXERCISES.....	15
CIRCLE SHARE (EMOTIONAL CHECK-IN AND CHECK-OUT .....	22
HOME ACTIVITY & HOME ACTIVITY DISCUSSION .....	22
HOME ACTIVITY DISCUSSION .....	22
BOX OF IDEAS .....	24
FRAMING THE DAY .....	24
CORE LESSON.....	24
INTRODUCING THE CORE LESSON .....	24
ROLE-PLAYS .....	24
INTRODUCING THE MAIN CHARACTERS OF THE ROLE-PLAY .....	25
TYPES OF ROLE-PLAY .....	25
FACILITATING A ROLE-PLAY DISCUSSION .....	25
GAMES.....	26
ILLUSTRATIONS.....	26
SESSION CLOSE .....	26
FACILITATOR REFLECTIONS AFTER EACH SESSION .....	27
REVIEWING FAMILY PROGRESS.....	27

COMPONENT 3: PLH (HOME) CATCH-UP .....	27
HANDLING DISCLOSURES OF ABUSE .....	28
HANDOUT: EMERGENCY INFORMATION .....	31
PART 3: OVERVIEW OF PLH TEENS - FACILITATOR CORE PRINCIPLES .....	32
NOTES TO THE FACILITATOR .....	32
PRINCIPLE 1: USE A COLLABORATIVE APPROACH OF LEARNING .....	32
PRINCIPLE 2: MODEL THE BEHAVIOUR YOU WANT TO SEE .....	32
PRINCIPLE 3: GO AT YOUR PARTICIPANT’ PACE .....	33
PRINCIPLE 4: PRACTICE A-E-C-P: Accept, Explore, Connect, and Practice .....	33
PRINCIPLE 5: ATTEND TO SPECIAL NEEDS IN COMMUNICATION WITH CHILDREN AND TEENS ...	36
PRINCIPLE 6: UNDERSTANDING CHILD DEVELOPMENT NEEDS .....	37
PRINCIPLE 7: MAKE PLH GROUP MEETINGS A HAPPY PLACE TO LEARN.....	39
PRINCIPLE 8: COME PREPARED FOR EACH SESSION .....	40
LASTLY, HAVE FUN! .....	40

## PART 1: INTRODUCTION

### KEY PROGRAMME COMPONENTS

The Parenting for Lifelong Health Programme for Parents and Teens has the following components:

- Component 1: Before the beginning of the group sessions, facilitators conduct **pre-group session home visits** with each participating family to learn more about the family and their home environment and undertake any assessments that may be required before the programme starts.
- Component 2: **Six (6) weekly group sessions** on parenting and relationship building skills for groups of caregivers and teens. The programme uses role-plays and illustrations that have been specially developed to deliver the core lessons of each session.



○A very important guiding principle for the implementation of the training: always prioritize practicing and exercising when time is tight! **Practicing and repeating are more important** than teaching information. During the sessions, look out for the following symbol as a reminder that practical exercise takes priority!

- Component 3: At the end of each session, participants are given home activities. These activities help participants to remember and strengthen the skills they learned during that session. Individualized in-home (or phone or face-to-face somewhere else than at home) sessions for families that might have missed a group session or those requesting or needing additional support session in order to deliver the content are called ‘PLH Home Catch-ups’. At each session, you will find a page called “PLH Home Catch-ups” that is facilitating this catch-up meetings with families.
- The Parenting for Lifelong Health Programme for Parents and Teens ends with a discussion about what participants have learned and how to continue to work together in the future to maintain healthy relationships in the family.

- Towards the end of the programme, participants are given the opportunity to organize their own celebration of the learning process which can be in the form of a *PLH Teens graduation ceremony* where they receive a certificate of completion. This celebration should involve typical sharing experiences as characteristic and significant for the contextual country.
- If participants want to, they can continue meeting in groups in order to keep supporting each other. These support groups are also chances to address other issues facing the community including health care, school support and involvement, and government support.

### FACILITATING THE PROGRAMME

The groups meet weekly with two facilitators to work together on positive caregiver-teen interactions, managing stress and conflict, and building good, strong relationships.

Facilitators support one another to facilitate group session activities and also help with taking notes during the programme. It also helps share the client load when you are facilitating more than one group.

The facilitators should also encourage participants who have missed a session, to catch up the content and material (with the help of the PLH Home Catch-Up). You can provide additional support if necessary, but this does not have to take place through home visits. The participants can ask before, during and after the sessions they attend.

Remind the participants that they can not only participate as a Caregiver-Teen-Dyad, but also individually if one of them is unable to attend.

## PART 2: THE PRACTICALITIES OF DELIVERING THE PROGRAMME

### COMPONENT 1: PRE-GROUP SESSION HOME VISITS

#### 1.1 OVERVIEW

It is important that trained facilitators meet with each participating family before beginning the programme. If possible, both the caregiver and the child should attend the visit, if given even the second caregiver.

Pre-group session visits give caregivers and teens the opportunity to learn more about the programme and ask any questions about their involvement. They also give you the chance to learn more about each caregiver and teen who will be participating in the group. You may want to meet with the entire family, or at least the other adults in the household, to explain the programme to everyone. When a caregiver and teen begin to change the way that they interact together in the household, it will also affect everyone else. Facilitators should bring a flyer of the House of Support to help explain the programme to everyone involved. You can also invite other members of the household to participate in the programme if they are interested.

If participants do not want to meet in their homes than just meet in an individual session prior to the group session somewhere. It's important to get to know the family a bit better before they join the PLH group.

During the pre-group session home visits, facilitators should also ask as many questions as possible about the family circumstances and challenges:

- How many children are in the household?
- Who else provides care for the children?
- How does a typical day for this family look like?
- What are some of the difficulties that the caregiver and teen are facing in their relationship or communication?



### *Setting family goals*

During the pre-group session home visits, facilitators ask the participants to describe their expectations about the programme. Facilitators should help the caregivers and teens to identify ONE positive, specific, and realistic goal for their relationship with each other.

*Positive* means that the goal should describe something they want to happen instead of something that they do not want. For example, instead of saying, “I want my child to stop swearing at me,” a caregiver should be helped to state the behaviour that she or he wants to see: “I want my child to talk in a polite and friendly way to me” or “I want my child to communicate in a calm way when s/he is angry.”

*Specific* means that the goal should describe something that is detailed enough that someone understands exactly what it means. For example, “to be good in school,” or “to understand me” are too vague or general for someone to understand what “good” or “understand” means. A more specific goal would be “to do homework every day when you come home from school” or “to listen and accept me when I share something about my life” would be more specific.

*Realistic* means that it needs to be possible that the families can achieve the goal during the course of the programme. Often caregivers or teens will choose goals that are long-term or not even likely to be achieved. It is up to YOU to help them make their goals more practical and realistic so that they can succeed!

Parents and teens should be able to accomplish goals!

- For instance, “I would like my teen to be ready to leave for school at 7am every morning” is a specific goal.
- “I would like my teen to do well at school” is not [what does “well” mean?].
- But it is a good goal if you have an example of a specific behaviour that will work towards this goal – like being ready to leave for school on time at 7am!
- “My teen is always late in the mornings when she needs to go to school” is also not a helpful goal – it doesn’t focus on the future or tell us exactly what is wanted.
- For teens, it’s helpful to be able to say “I would like my parent to thank me when I do the dishes”, but it’s not as helpful to say “I would like my parent to be nice to me” because that is not specific.
- Listen to the challenges that the participants are facing.
- All the goals should be recorded on a flipchart and then reviewed after the group finishes. It is okay if caregivers and teens have similar goals.

Facilitators should manage responses. It is okay to interrupt a caregiver or teen to clarify what they are talking about and to guide them towards the Core Principles of the programme. Talking about challenges at home might cause some tension between some caregivers and teens. If you are not confident you can manage and resolve this tension using the positive facilitation approaches you learned, you can discuss goals separately with the caregiver and with the teen, and help them identify positive goals.

### *Family profiles*

After each pre-group session home visit, you should create a family profile for each family. You can use the proposed structure on the next page. These profiles will help you remember the individual circumstances that each family participating in the programme is experiencing. You can also update the profiles as the family progresses through the programme. Make a note if there are any particular challenges or situations at home that might be important to remember when delivering the programme.

Finally, pre-group session home visits are opportunities to discuss any logistical matters with the caregivers and teens about the time and place for the sessions, any transportation or childcare needs, or specific food requirements for the meals offered during the programme (if provided for).

You can structure the family profile according to the guidelines valid in your institution. The next page is just a blank page as an example for your notes from the pre-group session meeting with the family. In the next section you will find the points to be covered in this pre-group session home visit with the individual family.

FAMILY PROFILE Of \_\_\_\_\_

Session Number: \_\_\_\_\_

Date: \_\_\_\_\_

## 1.2 SUGGESTED STRUCTURE FOR HOME VISITS

Introduce yourselves to the caregiver, teen and the whole family if possible.

- A) Provide an overview of programme using the House of Support as an example.  
(This can just be the basics like the programme will help you strengthen your relationship with your teen/caregiver and the caregiver's ability to guide and support teens as they make life decisions)
- B) Discuss with the caregiver and teen about life at home:
  - a. What is life like at home with your caregiver/teen?
  - b. What is your feeling about your relationship with your caregiver/teen?
  - c. What are some difficulties that you are facing?
  - d. What are some of your caregiver/teen's strengths?
- C) Family background:
  - a. What is happening at home?
  - b. Who else lives there? Husband? Wife? Partner?
  - c. Who else cares for the teen?
  - d. Does that person want to participate in the programme, too?
  - e. What kind of support network does the participant already have?
- D) Goals for the programme:
  - a. What are your goals, expectations, or hopes that you would like to achieve during the programme?
  - b. How do you want your relationship with your teen/caregiver to be different? What would make life at home easier?  
Please note: Help both the caregiver and the teen to each identify ONE positive, specific, and realistic goal for the programme.
  - c. Write the goals down and explain that all participants will share their goals in Session 1.
- E) Practicalities
  - a. Time and place of session
  - b. Transport, food and childcare needs (can they arrange someone to look after their child(ren) during the session?) - this is important to pre-discuss to reduce barriers for continuous participation
- F) Any other questions?

## COMPONENT 2: WEEKLY GROUP SESSIONS

### 2.1 WHAT HAPPENS IN THE PROGRAMME?

There are 6 sessions in the programme. They all follow the same basic pattern. These sessions build on each other (i.e. the order of sessions is important), which means the participants can develop and practice new skills around communication, supporting each other and problem-solving better if they follow the order. We call this significance of sequence (meaning that learning the next skill is easier or even sometimes only possible when the previous one has already been discussed and practiced) **“building blocks”** because the session content is linked. You find more information on this in section 2.2 below.

Every week we start the sessions together. Parents and teens meet together at the same time in the same room. In sessions 1, 3, 4 and 6 there are activities where teens and caregivers separate into teen-only and caregiver-only groups. Only the second and fifth sessions are carried out jointly for the entire time. The separate activities should be held in different spaces for these core

lessons although each group session starts and ends together. This means you need two rooms<sup>1</sup> at the same time on the same day in the location where you conduct the program.

If you are facilitating a separate session at the same time, the manual will tell you when to separate the group into teen-only and caregiver-only groups (just before the core lesson). It will also tell you when to bring the group back together. Each session has a goal that is expressed in more detail in the core principles. These core principles are the main focus of each session and all activities have the purpose of helping participants to understand them. Illustrations accompany each session. These are based on a role-play or activity that is central to the goal of the session.

Illustrations are important to the delivery of Home Catch-ups at home for those who have missed sessions. While leading a game, a role-play, or a discussion, facilitators should be aware of how these activities link up with the main goal of the session.

## 2.2 SESSION BREAKDOWN

The following is a brief overview of the six (6) sessions in the programme. A more detailed description is provided in each subsequent chapter.

Session 1: Introducing the programme & Developmental stages

Session 2: Building a positive relationship through spending time together & praising each other

Session 3: Talking about emotions

Session 4: What do we do when we are angry?

Session 5: Problem solving: Putting out the fire & dealing with problems without conflict

Session 6: Establishing rules and routines

The session breakdown provides you with an overview of core lessons for each session and how they are connected. It is important to reinforce these links between sessions in the discussion in every session so families also recognize the connections between sessions. For example, we start in Session 1 with discussing developmental stages and developmental tasks usually encountered during adolescence. This knowledge is important to be able to align and set one's own expectations for behaviors. And this is true for teens themselves (e.g. expectations regarding their emotions or how they expect themselves to behave or to appear) as well as for parents (e.g. expectations for their child will be linked to what they demand from them and are usually also reflected in their parental goals). And you may – based on the experiences from the individual pre-group session meeting (or the family profile) – already know a lot about each individual family, which helps in facilitating this first session with the entire group of families. The knowledge about development and (to be expected) changes during adolescence are then important for what is the core lesson in the next session, building a positive relationship through spending time together and praise. This is more successful if parents and teens know what to expect, and what the other family member wishes for and why this is an important goal for them. Learning the new skill in Session 2 is therefore building upon what is facilitated in the core lesson of Session 1. It is a building block! And there are many of these, between sessions and also throughout sessions. Learning the new skills for building positive relationships in the family from Session 2 will then help in Session 3 in which families will be talking about emotions and sensitive topics under your guidance. Everyone discloses more comfortably sensitive issues or emotions if they feel they are paid attention to and have a positive and comforting bond to the person they speak to. This building up on each other is going on across all sessions with Session 4 then focusing on how to talk about strong negative emotions (anger), which requires that everyone knows how to share and communicate about emotions - a skill introduced in the previous Session 3. And in Session 5 you will facilitate problem-solving and support families in resolving conflicts peacefully which demands skills surrounding dealing with strong emotions, something learned in Session 4! Do you recognize the building blocks principle? With every session, new skills

<sup>1</sup> Depending on resources, climate and location, the two spaces don't need to be 'rooms'.

are learned but the previous ones also need to be maintained! It is very important to link the sessions in this way during sessions for parents and teens. This is why we included a reminder for you as facilitators to make these links when you are moderating the discussion.

**2.3 DAILY SESSION STRUCTURE**

Each session has a similar structure in which programme facilitators guide caregivers and teens through a series of activities along a core central theme. While the content might vary from week to week, the core group facilitation activities remain the same. We always start with welcoming activities, then move on to discussion on home activities followed by introducing the core lesson. Each session ends with a new home activities assignment.

At the beginning of each chapter, this manual provides an overview of the session to help facilitators remember these activities.

Facilitators should complete all of the activities. However, if time is tight, the core lesson (usually 60 mins) is to prioritize. That might mean that the programme takes a little longer than 100 or 120 minutes per session! The most important thing is to make sure that the caregivers understand and can apply the core lesson of each session. If time gets tight, do not skip core lessons but rather from the part before or after the core lesson and make sure that practicing is prioritized.

**2.4 DAILY ROUTINE & TIME KEEPING**

During the PLH Teens Programme, it is very important to establish a regular routine for each session. Participants then have an idea of how each session will unfold and feel comfortable with the programme.

Routines are meant to be a guideline for facilitators. However, the sessions never happen exactly as we plan them to happen. As a result, you will need to be flexible with the timing of the programme. Each session has a routine with about 6 or 7 sections. These sections are numbered for you in the boxed overview that starts each session. The more detailed notes about what to do in each section uses the same numbering pattern, so it will be easy to find instructions when you need them.

Facilitators are responsible for time keeping so it might be helpful to have a watch or clock or timer nearby. Facilitators will make decisions about how time is spent during the session, but will need to make sure that enough time is spent on the core programme activities, which are home activity discussion, role-play and core lesson discussion.

The overview for the day (‘Framing the Day’) and home activity for that week should also be clearly explained. We make suggestions about how much time to spend on each section in the boxed overview, which looks like this:

Suggestion for Daily routine:

Session Breakdown	Time (about 2 hours)
1. Welcome	15 minutes
2. Overview (including home activity discussion)	20 minutes
3. Physical Exercise	5 minutes
4. Game/Activity	10-15 minutes
5. Core Lesson (including discussion)	60 minutes
6. Home activity	5-10 minutes
7. Closing	5-10 minutes

More details about each section of the programme start on the next page. At the end of each session, facilitators make sure that they leave the room in order. If they have any facilitator checklists, they fill this in. They also help participants to fill in any questionnaires.

### 2.5 PREPARATION

It is very important for the facilitators to be well prepared. This shows respect for the participants and will make them feel welcome. For every session the facilitators should prepare as follows:

Before the session:

- Re-read the session you will be giving and make sure you are absolutely clear on your goals for that session.
- Go through your family profiles and reports from the last sessions. This will help remind you of what happened last session and prepare you for the next session.
- Spend your time according to the needs of the group. Remember that you will have about 2 hours total and that you will need to spend enough time on home activity discussion (about 30 minutes<sup>2</sup>) and core lesson and discussion (about 60 minutes).

### 2.6 SETTING UP THE VENUE

Arrive early! Make sure you have plenty of time to set up the room and prepare yourself for each session. Facilitators should set up the room in a way that makes a comfortable environment to learn together as a group. Chairs should be placed in a circle. Make sure there are enough chairs for everyone. A participant can feel rejected if she or he arrives and there isn't a chair for her or him.

For every session the facilitators need to bring/organize the following materials:

- Flip chart, paper, and pens or markers, name tags
- Notes from flipchart paper from previous sessions (put these on the wall)
- Handouts for the session for each participant
- Any other materials such as transportation vouchers, attendance registers, etc.

Make sure you have all your materials necessary. Be sure to check the manual each week to see if any extra materials are needed for the session!

## GUIDE TO FACILITATING SESSION ACTIVITIES

### WELCOME

Facilitators should welcome participants as they arrive and praise them for making the effort to make a commitment to their child by attending the session.

The warmth and kindness that you show as a caregiver can make a huge difference on how he or she feels during the session. It also encourages caregivers to attend more frequently. If possible, it is also nice to provide some tea and a small snack (biscuits or simple sandwich) for those who arrive early to the session. In winter, this can also boost attendance and participation!

At the beginning of the session, facilitators should also greet and welcome the entire group. Praise them for making the effort to come to the programme.

### PHYSICAL EXERCISES

We also begin each session with a short physical exercise or exercises to help caregivers and teens connect to their body and relieve stress or tension in the body and mind. For the caregivers, exercises help circulate blood, ease pains, release stress, and become aware of breath. For the teenagers, it relieves stress and tension but also energizes the group, and warms up the imagination while playing together. Have a sense of play and creativity with the exercises. It's also very important

<sup>2</sup> An internal note that often this does not last 30 minutes.

that participants only do the exercises that are comfortable for them. Everybody is different and can do different exercises – we don't want anybody to hurt themselves!

When teaching the physical exercises with caregivers for the first time, we need to be patient and explain each movement clearly. Facilitators instruct participants in a series of movements moving through the body from head to toe. It is okay to pause and gently correct postures and movements if necessary. Many of the caregivers are not used to moving their bodies and may need encouragement and more guidance than you expect.

If someone needs to sit down, you should encourage him or her to participate as best as they can from a sitting position. It is also very important to make sure the movements are smooth and the breath is relaxed. As you lead the physical exercises each session, the caregivers will gradually become more comfortable with the movements. Facilitators can also introduce letting caregivers – and especially teens! – lead these sessions (but the facilitator should lead the first one or two).

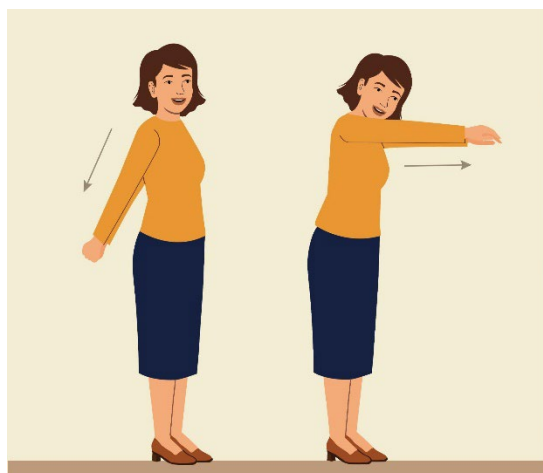
Facilitators should encourage caregivers to do the physical exercises at home on an ongoing basis. You can suggest that caregivers do it first thing in the morning.



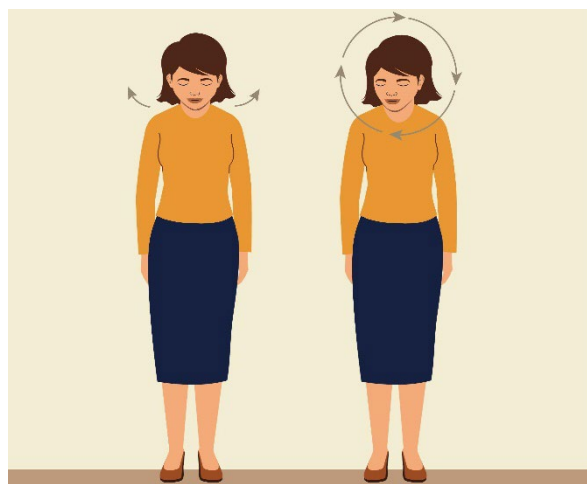
**GUIDELINES: Leading the physical exercise**



Stretch arms straight up as if you want to touch the sky (4 deep breaths).  
Stretch up into your left and right sides (4 deep breaths).



Stretch to the back (4 deep breaths). Stretch to the front (4 deep breaths).



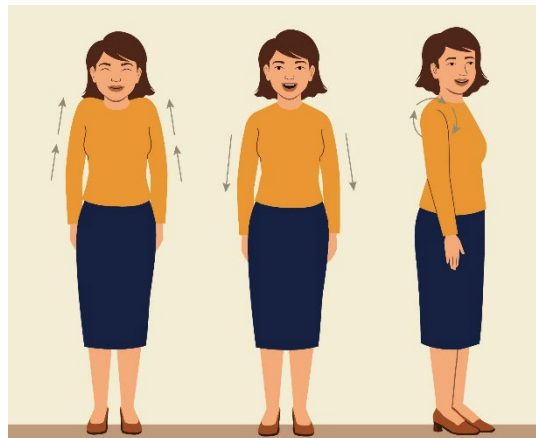
Place your chin on your chest and then move your head to the left so that your ear is near your shoulder. Then move the head to the right (4 times).  
Move your head around in full circles slowly (4 times).



Stretch your right arm up and put your head on your right shoulder, then put your hand on your ear (4 deep breaths).

Stretch your left arm up and put your head on your left shoulder, then put your hand on your ear (4 deep breaths).

Link your hands and use the weight of your arms to hold the back of your head down (4 deep breaths).



Scrunch your face, squeeze your hands, and bring your shoulders up to your ears. Hold your body tight with your breath.

Release everything and breathe out loudly (4 times).

Rotate your shoulders in circles to the front (4 times).

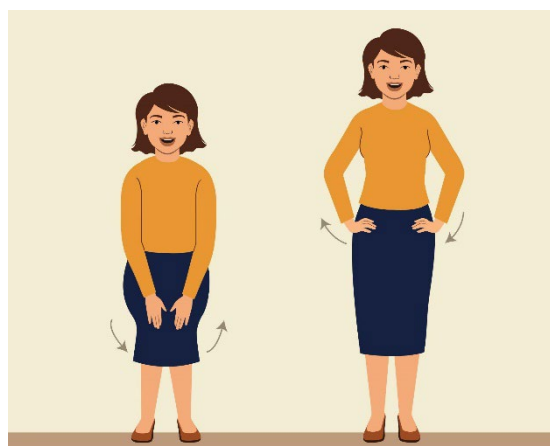
Rotate your shoulders in circles to the back (4 times).



Relax your arms and let them swing from your shoulders forward and backward with your knees bent slightly (10 times).



Slightly bend your knees and relax your arms. Turn from side to side leading with your hips and letting the rest of your body follow, including your arms, neck, and head. Allow your arms to swing from side to side (10 times).



Bend your knees a little, hold them with both hands, and make small circles in both directions (10 circles each direction).

Hold your waist and make small circles in both directions (10 circles in each direction).



Place one foot on the ground in front of you. Rotate your ankle outward and inward. After 10 circles in each direction, switch feet.



Rotate your wrists in circles as if you are painting. Make sure you go in both directions. Shake your whole body in all directions.



Raise your arms above your head breathing in. Slowly allow your hands to float down by your side as you breathe out.



Stand with your eyes closed and notice how your body feels now.

### CIRCLE SHARE (EMOTIONAL CHECK-IN AND CHECK-OUT)

During circle share facilitators lead the participants in an emotional check-in by inviting the participants to share how they feel emotionally. This allows participants to simply share how they are feeling at the beginning of the session. Facilitators should model (meaning show the participants by doing it first ourselves) describing their emotion, where they feel it in their body, and what thoughts are connected to that feeling.

Facilitators should model how to check-in or out by demonstrating before going around a circle:

1. Describe how you are feeling emotionally.
2. Describe where this feeling resonates in your body.
3. Describe the quality of that feeling or physical sensation in your body.
4. Describe the thought that is connected to that feeling

Example: “I am stressed. I feel it in my shoulders, which are heavy. I am worried about the bills I have to pay this month,” or “I am happy. I feel it in my heart. My son passed his exams!”

By connecting emotional feelings to physical sensations in the body, we help participants to avoid getting caught up in the story about how or why they feel in a certain way. This helps them stay in the present moment. Bringing awareness to one’s present experience can deepen one’s appreciation of the positive aspects in life and a sense of compassion towards one’s own challenges. At the end of each session, the participants will also have an opportunity to check-out as a way of transitioning back into the rest of their daily lives. Remember that the programme is delivered in a group but with an individualized approach!

### HOME ACTIVITY & HOME ACTIVITY DISCUSSION

Each week, participants are given activities to practice at home and strengthen what they have learned during the session. These activities are related to the Core Principles for each session. This is an essential part of the programme!!!

Participants will only change their behaviour and attitudes when they practice changing them in the own lives. Sometimes participants may have difficulty doing the home activities. They may face challenges or resistance from their children or other family members. They may also misunderstand a building block or use the relationship building of parenting skills incorrectly. The job of the facilitators is to help guide the participants through group problem-solving to find solutions to the different challenges they may have faced during the week. Facilitators should also use home activities to make sure everyone in the group understands a particular relationship building principle or skill before moving on to the next one.

You might find it necessary to spend an entire session problem-solving and doing group practices instead of introducing a new principle. For example, if caregivers and teens are struggling with how to establish rules and routines, you may want to repeat this session and redo all the role plays.

It is important to go at your participants’ pace!

### HOME ACTIVITY DISCUSSION

At the beginning of each session, we discuss the home activity assignment from the previous session and the experiences of the participants during the week. Discussion on home activities are also opportunities for participants to share successes and positive experiences during the previous week. They can also share changes that they have seen in their own lives or in their children’s behaviour. You may also use this discussion very well to remind participants to practice each home activity every week, so that the skills are reinforced in a cascading way for them. This

links homework and homework discussions to the building block principle.

**GUIDELINE: Take notes!**

One facilitator should lead the discussion on home activities while another takes notes as to what each caregiver did during the week. This will allow you to reflect after the session about whether a caregiver or teen needs extra help or maybe even a home visit to support his or her learning. The note-taker should also be ready to write down any new Core Principles that come up during the discussion on home activities so that the facilitators can make appropriate, reinforcing, links.

It is very important that each participant gets a chance to share her experience at home. Ask the participants to focus on the core activity from the previous week. They should share one activity that they did and one thing that worked well for them. Participants should be encouraged to describe one key idea from the last session that they used. This can provide an opportunity for participants to show what they did that worked well. Facilitators must help participants to explore the challenges and difficulties that they encountered with the home activities. It is also an opportunity for caregivers and teens to share success stories with each other.

Facilitators explore solutions with participants to difficulties in doing the home activities. Ensure that you do not omit the teens. Whilst the culture of ‘reporting on the home’ needs to be respected, teens should be given the chance to participate.

Encourage participants to offer their own solutions as a group to overcome challenges. In joint sessions, the group might be too big to have a good discussion. If this is the case, facilitators can split the group into two smaller groups. One facilitator can lead each of the groups. Make sure there is a mixture of teens and caregivers in each group.

Be careful, caregivers may not approve of the idea of their children reporting about home in a space that they are not also present in. Talking about home activity is important to help participants remember new skills from one session to another. It will also help participants to remember new information. It is important that participants feel comfortable to express themselves freely, but it is also important for them to know that they only share what they are comfortable with, and that they understand that what is said in the group, stays in the group!

Everyone will have different experiences. The facilitator’s role is to accept each participant’s experience without judgment and to think about that experience fully with the participant. Sometimes this may involve asking challenging questions.

**GUIDELINES: Ask discussion questions**

- Keep on exploring experiences with open-ended questions. Instead of, ‘did you do the exercise?’ ‘Yes, I did the exercise’, try to draw them into more questions: ‘how did it work?’.
- It is okay to ask follow-up questions! It will help everyone have a clearer picture of what happened at home and how the participant felt about the experience.

Feel free to ask follow-up questions!  
 Ask targeted questions with the goal of drawing out building blocks!  
 Building blocks are the core learning points from each activity and session.

It is okay if it is difficult at first. It is a hard skill to master. Even a discussion about why it was difficult to do the Home activities can be very helpful. If participants were not able to complete

their home activity or even do the activities once, ask them what were some of the challenges with doing their home activity so that the group can then trouble-shoot these together.

You can also explore other experiences at home during the previous week.

**Facilitator should then redirect what the participant says to topics related to the programme.** Did anything come up from the home activity discussion that they would like to problem-solve with the group?

Finally, facilitators should actively praise participants for trying and encourage and support those who have difficulties in finding realistic achievable solutions. Every participant will have both positive and negative experiences. Through praising the participants, you show them how to praise and appreciate each other – praise them often!

It's our job to promote the positive while helping caregivers overcome their challenges!

#### BOX OF IDEAS

Sometimes participants bring up issues that are important to them but do not fit with the topic of discussion for the session. If it is a discussion topic that would be relevant for the entire group and fits well with the programme, then put it in the Box and save it for later! Facilitators can write it down on a piece of paper from the flip chart under "Box of Ideas" to be discussed later. Only put in the "Box of Ideas" things that are going to be discussed in the programme. If there is something that is important to a participant but doesn't fit in the programme, let them know that you will find a time to discuss this with them after the session. Be aware that you may need to refer them to another support service.

#### FRAMING THE DAY

It's important to give participants a quick – but clear – idea of what they can expect from each session.

Now that we've looked back at last week's home activity, it's time to look forward to the session ahead. If possible, make links between last week's content and the current week's content.

#### CORE LESSON

Every session of the PLH Teens Programme contains a Core Lesson that follows the theme of the session. The Core Lesson focuses on a specific parenting principle or set of Core Principles that contribute to the House of Support.

The Core Lesson includes the following activities: Framing the Day, Introducing the Core Lesson, Role-Plays, Illustrations, and Group Discussions.

#### INTRODUCING THE CORE LESSON

The core lesson focuses on the main goal for each session. It might help to have a clock or watch to check the time. The core lesson allows the participants to explore that session's goal through role-plays and discussions. These are also strengthened through the home activity. It usually starts with a negative role-play and then a short discussion following the role-play. It then goes on to a positive version of the role-play and a longer discussion. Use the discussion questions in this manual as guidance – if you don't get through all of them, that's fine!

Not all core lessons are alike! Some involve drawing, others involve small group work and yet others involve story-telling – but all involve discussion. **Facilitators should prioritize time for the Core Lesson.**

#### ROLE-PLAYS

The PLH Teens Programme uses role-plays also known as dramatization to introduce the central theme in the core lesson.

Role playing is an educational technique in which people act out different situations to convey



specific information, skills or knowledge. It allows participants to engage in the acted out situations and relate to some of the situations with what is taking place in their lives. Except for some chairs, none of these role-plays need special props or great acting skills. It is enough if people read the lines and mime – or pretend or invent – the actions. **Problematic parenting behaviour should always be acted out by the facilitator, never by a participant. Facilitators and participants can get creative with the role-plays!** If the participants come up with their own solutions to the problems shown they should try them out in a role-play! **Participants should only ever act out positive role-plays.** This is because acting out a negative one may make them remember the bad things instead of the good things to do! **Role-plays are meant to start a discussion.** This is an important part of the programme.

#### INTRODUCING THE MAIN CHARACTERS OF THE ROLE-PLAY

PLH Teens follows the lives of two fictional families. These families have caregivers who sometimes struggle to manage their teens' behaviour, much like all caregivers - including those in the group. The first family consists of mama, tata, and their children, Catalina (17-year-old girl), Radu (15-year-old boy) and Axenia (10-year-old girl).

There is another family consisting of grandmother Doina, the mother of tata, who takes care of two children, Stela (16-year-old girl) and Ion (12-year-old boy) who are cousins of Catalina and her siblings.

Participants will enjoy getting to know this family!

#### TYPES OF ROLE-PLAY

There are three types of role-plays: 'negative', 'positive' and 'open'.

- Negative: These are role-plays that show a negative scenario, where a problem or situation or discussion does not end well.
- Positive: These are role-plays that show a positive scenario, where a problem or situation or discussion ends well. Most negative scenarios have positive versions that can be acted out as one example of how a negative role-play is resolved.

All types of role plays can be acted out with the support of the participants. It is desirable that the caregivers do not portray undesirable parenting behaviour, but rather play supporting roles or portray the desired parenting behaviour.

There are different ways to use role-plays:

The only difference is whether a single role-play is discussed or two are played in succession and then discussed comparatively.

Formally, there is a distinction between positive and negative role-plays for the facilitators. In most cases, the first role-play models negative parenting behaviour and the second positive parenting behaviour. However, this designation of negative and positive should be abstained from in front of the participants.

#### FACILITATING A ROLE-PLAY DISCUSSION

Facilitators play the role-play together with participants and then participants can talk about what they have felt and seen. Discussion is an important part of role-plays. We use discussion in every session.

The discussion can then involve practicing problem-solving in situations that participants can use in their daily lives. It can be helpful to ask participants: "Can you think of a time when this, or something like this, happened to you?"

Facilitators need to remember to guide the discussion so that participants can link the role-play with the core lesson.

The PLH Teens Programme uses 3 key steps in facilitating a discussion with the participants: **Acceptance, Exploration, and Connection.**

**STEP 1: Acceptance**

- Participants feel empowered to share when facilitators accept whatever is said during a discussion. There is no wrong answer.
- Facilitators can show that they have really heard the participant by repeating what the participant says to the entire group.
- This also makes sure that the facilitators understand what is being said.

**STEP 2: Exploration**

- Sometimes we need to ask questions that explore the details about something to understand it properly.
- When participants share an experience, facilitators can ask questions like: Where? What? Who? and How?
- Often participants have difficulty exploring – or asking themselves more questions about – an experience.
- Example follow-up questions (from previous discussion): “Where else do you think you could spend quality time together? Why do you think this worked well?”

**STEP 3: Connection**

- Facilitators connect experiences that participants share to the session’s core principles.
- In discussion with participants, the group may also make their own connections on how a certain experience might relate to the session.

Remember that most participants will expect the facilitators to have all the answers. But that’s not the way PLH works. We know that participants have already solved many problems and that they can solve their own problems. We are all going to work together to continue doing this no matter what the content of the session!

## GAMES

Games and lesson activities give us a sense of play and creativity. We use this opportunity to let caregivers and teens pretend to be children again – to have fun and play together. At the same time, activities and games are connected to the key goals of the session and are usually a way to lead us into the core lesson.

Sometimes it makes more sense to show the game or activity and explain the rules at the same time. Other times it is easier to explain the rules first and then show participants how the game or activity is done. It is up to the facilitator to decide.

Try to allow the participants to explore the activity themselves, unless they do not understand.

Facilitators should ask themselves WHY they are facilitating a certain game or activity and encourage participants to explore this question in discussion after they have played the game.

## ILLUSTRATIONS

During the programme illustrated stories are distributed to participants as handouts on specific relationship or situational challenge raised during the session. Facilitators can use the illustrations to review the topics covered in a particular session with participants. This is a good way for them to be involved in remembering what we covered in the session.

Participants can also take illustrations home with them.

Illustrations are also helpful in PLH Home Catch-ups, as they often show the role-plays performed or issues discussed during the session.

## SESSION CLOSE

Each session ends with a closing activity. Facilitators should allow participants to decide how they would like to end the session.

Closing is also an opportunity to remind participants of what they have covered during the session and of their home activity for that week. Remember to involve participants in trying to remember the goals for that session.

No matter how your group decides to close the session, before this happens facilitators should make sure the following happen.

- Remind caregivers and teens of the home activities.
- Ask caregivers and teens to commit to a specific goal related to the home activity (“I will try to spend five minutes each day with my teen, without the distraction of my phone”).
- Distribute the illustrated handouts or inform them of the Family Guidebook chapter they will be focusing on for the week.
- Thank caregivers and teens for coming and for giving their best effort.
- Check out.

We should also thank them for the hard work they have done towards improving their relationships!

#### FACILITATOR REFLECTIONS AFTER EACH SESSION

It is important that facilitators make time to reflect on the session as soon as it is over.

It is best to do this while your memory is still fresh. You can even do this while the caregivers are enjoying the refreshments (though it is nice to share the refreshments with the caregivers!).

Reflections are useful discussion points you can use in your weekly supervision sessions.

In the manual, there are some suggested questions that will help guide you in your reflection.

Core questions to think about include:

- Did you manage to complete all the core activities? If not, why?
- What went well during the session?
- What could be improved upon? How will you improve on it?
- Are there any participants that need extra support with the content, the logistics or other unrelated challenges? If so, in what way?
- Do any participants require referral to support services?

When filling out reports or reflecting about the session, discuss why things went well or did not go well, not just what went well and did not. If you can remember a particular part of the programme where you had difficulty, write it down so that it can be discussed during your weekly supervision with your manager or trainer. It is important to name at least one good thing that you did and that your partner did during the session.

#### REVIEWING FAMILY PROGRESS

We recommend that you have a conversation about each participant directly after each session.

Make notes in your family profile folder about each family’s progress in the programme. These notes are useful for deciding whether a particular caregiver or teen needs more support. This could be in the form of a home visit or an individual conversation before or after a session.

You can also use this time to call any caregivers who missed the session to arrange a home visit.

When you review each caregiver’s or teen’s experiences, goals, and challenges, it will help you give him or her that individual attention that is so important for group-based programs!

#### COMPONENT 3: PLH (HOME) CATCH-UP

##### OVERVIEW

Participants sometimes find it difficult to attend sessions. This happens for a lot of different reasons, but doesn’t mean that they have to miss out on the PLH Teens programme!

Visiting participants in their homes to review what they have missed each week is a great way to make sure that nobody falls behind and to encourage participants to come back to group sessions when they can. If it is not possible or desirable to visit participants at home, think about other ways in which you can be inclusive and invite those who have been unable to attend, such as online or phone consultation to catch-up.

Each of the 6 sessions in this manual includes a 'PLH Catch up' (or home visit) page.

This is a shorter version of the session that has been adapted for facilitators to deliver in the homes of the participants. This can also be delivered by phone (supported with sending along the catch-up page via an appropriate channel).

Use these one-page forms to keep track of who you have visited and which sessions participants have missed, as well as to remind you what to cover during the catch-up and how you might have to change your approach from the group session. For example, use the illustrations instead of role-plays.

#### HANDLING DISCLOSURES OF ABUSE

During all stages of the programme, it is important that facilitators know what to do if a caregiver or a teen discloses any form of abuse.

Before implementation and disclosure takes place:

- **Understand abuse, neglect and exploitation. Know about the different kinds of abuse:** physical, emotional, sexual and neglect. This should be part of the training you received as a facilitator of this programme.
- **Know your organization's child safeguarding policies and procedures.** All FLOURISH-involved organizations should have or develop child safeguarding policies and procedures, including details on how to respond appropriately when a child discloses abuse (for more details how this is handled in FLOURISH see FLOURISH ethic application). You should have accurate knowledge of all protocols and response plans. These will tell you what to do within your organization if a child reports abuse (e.g. who to report to, internal resources for supporting the child), as well as how to engage outside resources (e.g. local referral pathways, when to engage with authorities). It is your responsibility to act regardless of whether you are responding to disclosures of past and/or present abuse. However, you are not responsible for resolving the situation on your own. It is important that you discuss the situation with your supervisor to agree on what steps to take next.
- **Ensure children know that you are someone who can help.** Children participating in your sessions need to know that they can come to you for help, regardless of when abuse occurred. You should make sure that they know that they can trust you and that you will listen and support them without judgement or any further harm.

During disclosure:

- **Provide a safe environment.** Make sure the setting is confidential and comfortable. Speak slowly, stay calm, and allow the child to explain what happened in his or her own words. Do not ask the child a lot of questions. Do not rush them. Do not stop them in the middle of the story to go get someone or do something else.
- **Listen carefully to the child.** Avoid expressing your own views or asking leading questions. A reaction of shock or disbelief could cause the child to shut down and stop talking. Avoid asking leading questions (like 'did he/she touch you here?') or for details. This may confuse the child or make it difficult for them to tell you what happened. Leading questions might also interfere with any future legal processes. Limit your questions to those provided below if the child has not already provided this information. Make sure you document the child's story using notes that include the date, time and location of the disclosure as well as who was present. Avoid writing opinions in the notes and focus on what you observed. For example, instead of writing 'the child seemed scared', state what you saw, such as 'the child

was crying and staring at the ground.’ Ask the following: What happened? When did it happen? Where did it happen? Who was there? How do you know them?

- **Determine if there is immediate danger:** There should be a tool or questionnaire included in your organization’s standard operating procedures that you can use to determine if the child is in immediate danger. This should include what protocols and resources are available to keep the child safe and will likely involve engaging formal authorities (e.g. child protection, law enforcement, and /or traditional structures). For additional information, see the resources list at the end of this document.
- **Avoid denial:** A common reaction to a child’s disclosure is denial. Respect the child by listening to what he or she has to say and taking what the child says seriously. A child may keep abuse secret in fear that they will not be believed. They have told you because they want help and trust you will be the person who will listen and support them.
- **Let them know they have done the right thing:** Reassurance can make a big impact for the child who may have been keeping the abuse a secret.
- **Be supportive and free of judgement:** Abuse is never the child’s fault and they need to know this. Remain supportive and not judgmental. Avoid talking negatively to the child. Even though the child may be disclosing terrible things that may have happened at the hands of a family member or friend, the child may still love that person and is just beginning to recognize that he or she was and/or is being abused. Avoid asking questions like: Why didn’t you tell me before? What were you doing there? Why didn’t you stop it? What did you do to make this happen/encourage it? Are you telling the truth? What were you wearing?
- **Let the child know that you will share what he/she told you with your supervisor to find a way to support and protect him/her:** Do not tell the child that you will not tell anyone what they tell you. The child will have fears about what will happen next. You should be mindful of those fears while also explaining that it is your duty to provide support and protection to ensure his or her safety and well-being.
- **Explain what you will do next:** If it is age appropriate, explain to the child that you will need to report the abuse to someone who will be able to help. Tell the child what you are going to do, what is going to happen next, and who else they may need to talk to about the abuse. This will help the child feel some sense of control over the events surrounding his or her disclosure.

After disclosure:

- **Do not talk to the alleged abuser:** Confronting the alleged abuser about what the child has told you could make the situation a lot worse for the child. It could also jeopardize future legal proceedings.
- **You are not alone:** Remember you are not in this alone. Even though it is your responsibility to act regardless of whether addressing past and/or present abuse, do not try to resolve the issue by yourself. Get help from your supervisor and discuss with him/her how to involve social services.

Reporting the abuse:

- **Follow your organization’s reporting protocol:** You should report the abuse to your supervisor immediately, even if you are unsure of whether the child is at risk. Remember, it is the responsibility of adults to take action and keep children safe.
- **What happens next?** If it is determined that the child is at risk of further harm, your supervisor or child protection colleague will share the information with the appropriate local authorities. In instances of physical and/or sexual violence, it is critical that clinical and auxiliary services are accessed and administered in a timely manner.

**To help you identify any unhealthy and unsafe situations, it is important that you know what the laws of your country and the policies of your organization say about:**

- Child protection
- The legal age for sexual consent
- Power- and age-differences between sexual partners

➤ Gender-based violence

It is also important to know what services are available to families in need of assistance. You can familiarize yourself with these services by completing and/or reviewing the “Emergency information” handout (next page) together with your team. Make sure to include contact details for police, medical services, counselling services, and legal support if available in your area.

**The respective country which are implementation sites and use this program during FLOURISH will insert the country-specific regulations for dealing with abuse in the local language here in their local language manuals.**

**HANDOUT: EMERGENCY INFORMATION**

**What can I do in the case of rape?**

After a rape happens, it is important that the rape survivor receives medical attention as soon as possible. At the hospital or clinic, staff can help the survivor by:

- Treating injuries and giving information on possible medical consequences of the rape.
- Documenting injuries and collecting evidence of the rape (essential if the case will be reported to the police).
- Giving medication to reduce the risk of sexually transmitted infections (STIs).  
This medication e.g. for HIV is called “post-exposure prophylaxis” or PEP. It needs to be taken as soon as possible – at least within 3 days of the rape – and the survivor needs to complete the full treatment for it to be effective.
- Giving medication to reduce the risk of STDs.
- Giving medication to reduce the risk of unintended pregnancy.  
This medication is called “emergency contraceptive pills” or ECP, and needs to be taken as soon as possible – at least within 3-5 days of the rape.
- Providing counselling to help the survivor process her/his emotions and traumatic experience, and to help him/her understand how to take the prescribed medication to keep him/her healthy.

**HELPFUL NUMBERS:**

Who can I contact?	Contact number	Services provided	Details on services & instructions for contact (opening times, referral system, fees, etc.)
Police		Police respond to and investigate crimes/accidents	
Ambulance		Ambulances transport patients to hospital in case of medical emergencies	
<b>Other local services:</b>			
1.			
2.			
3.			

This should be completed during facilitator training.

### PART 3: OVERVIEW OF PLH TEENS - FACILITATOR CORE PRINCIPLES NOTES TO THE FACILITATOR

This manual will guide you on what to do each week. It describes the activities in detail. It provides possible questions that you can ask for discussions and illustrated stories. It gives you a background on the Core Principles that are important for caregivers and teens to learn. However, the content of the programme is only a small part of what it takes to deliver the Parenting for Lifelong Health Programme for Parents and Teens.

Much of the benefit that your caregivers will receive is in the delivery.

In other words, how you facilitate the programme is just as important as the content you deliver.

There are 7 core Principles to facilitating PLH Teens in the best possible way:

1. Use a collaborative approach of learning.
2. Model the behaviour you want to see in the way that you behave towards participants.
3. Go at your participants' pace.
4. Practice A-E-C-P: Accept, Explore, Connect, and Practice.
5. Attend to special needs in communication with children and teens.
6. Understand child development needs during adolescence.
7. Make PLH group meetings a happy place to learn.
8. Come prepared to each session.

#### PRINCIPLE 1: USE A COLLABORATIVE APPROACH OF LEARNING

In some programs, facilitators tell participants what to do and why it is important. Participants are used to this because our education system is delivered in a didactic, teacher-knows-best manner. In the PLH Teens Programme, we do things differently. We like to think of this as a collaborative approach to learning. As facilitators, we are collaborators or partners working with caregivers to identify plans and practice solutions that will help them to improve life at home.

It is helpful to think of the participants as the experts.

Many of the caregivers will already be practicing lots of positive ways of parenting with their children and adolescents. Other caregivers and teens will be able to identify ways of improving their relationship on their own with guidance. **Our job is to help participants learn for themselves how to achieve their goals.**

This sometimes means we have to work harder to ask the right sort of open-ended questions that will help caregivers and teens work out the benefits of positive parenting and relationship building. When caregivers and teens are able to teach themselves how to relate and behave, they learn a skill that will help them for a long time after the programme ends.

#### PRINCIPLE 2: MODEL THE BEHAVIOUR YOU WANT TO SEE

The modelling principle is at the foundation of how we deliver the PLH Teens programme.

If we lead sessions in a collaborative approach, praise caregivers often, practice active listening, and use positive instructions, caregivers will do the same with their children, and teens may do the same with their caregivers (and with each other)! Likewise, if we tell caregivers what to do, criticize or laugh at them, ignore their needs or concerns, or only say what we do not want them to do, they will do the same.



It is like the old saying, “practice what you preach.”

Facilitators need to model all the different Core Principles in this programme.

For example, “Praise and Go,” means exactly that. Praise your participants and then stop there. No buts, ifs, or any other criticisms! Use transition warnings to help prepare participants for next activities or at the end of teatime. Give positive, specific instructions that say the behaviour you want to see in the participants. You may be able to ignore negative behaviour, such as snide or obnoxious comments, but praise the same participant for the next positive behaviour. However, some behaviours may need to be addressed such as a caregiver coming drunk to the group and one facilitator may need to ask the caregiver to leave the room with them and discuss the situation. Use simple rewards to encourage caregivers and teens to arrive on time for sessions, to complete their home activities, and when they accomplish something very challenging. Practice the relaxation activities to help reduce your own stress. The participants will learn from your example and begin to mirror your behaviour, too.

**It really works!**

#### PRINCIPLE 3: GO AT YOUR PARTICIPANT’ PACE

The PLH Teens Programme provides a space for participants to practice concepts and skills that may be new. Sometimes, caregivers will initially resist trying a new approach with their children. Other times, they may need additional time to understand a complex practice like distinguishing between punishment and discipline. Facilitators should always go at the participants’ pace when delivering the programme.

Make sure that the participants in your group have learned a specific parenting or relationship building skill before moving on to the next one.

Remember that building a House of Support is a step-by-step process.

#### PRINCIPLE 4: PRACTICE A-E-C-P: Accept, Explore, Connect, and Practice

A-E-C-P is a core building block in the collaborative approach to facilitating the PLH Teens parenting programme.

We like to think of 4 key steps facilitating a discussion with the participants:

Acceptance, Exploration, Connection, and Practice.

##### *1. Acceptance*

Participants feel empowered to share when Facilitators accept whatever is said during a reflection. There is no wrong answer. Facilitators can show that they have really heard the participant by reflecting back or rewording what she/he says to the entire group.

This also clarifies that the Facilitators understand what is being shared.

##### *2. Exploration*

Take time to explore the experience fully with the participant. Sometimes we need to ask questions and really hear the details about something to understand it properly. Facilitators can bring a sense of curiosity to this part of discussion to explore where, what, who, and how of the emotional/physical/mental experience. Do not be afraid to go deeply into the experience!

##### *3. Connection*

Facilitators connect the experience to the programme Core Principles that help build our House of Support. In discussion with participants, the group may make their own connections on how a certain experience might inform other parts of their lives.

##### *4. Practice*

A core building block in PLH Teens is that it is what you do at home that makes a difference. Scientific evidence tells us that participants are more likely to use new skills at home if they practice them during the session. This means that you have to give participants as many opportunities as possible to practice key skills.

Practice may also happen during Home Activity Discussion, such as when a participant shares a challenging situation. This allows the participant to practice a possible solution to her challenging situation before trying it at home.

**Active listening is important and can also be physical.**

It is also important to model Active Listening so that caregivers begin to do the same with their own children. Isn't it wonderful how all of these Core Principles fit together!

The way you behave physically also shows that you are actively listening to someone. Facilitators should sit upright and lean slightly forward to indicate that you are paying attention to the speaker. You can also make eye contact from time to time if appropriate given the cultural context.

Nodding your head and smiling also is very helpful.

**Stay focused on the person who is speaking.**

There may be other distractions in the room like a clock, or your facilitating partner, or someone else fidgeting, or even noises outside the room. As long as you keep your focus on the person speaking, he or she will feel heard.

**Be patient.**

When people pause while talking, allow them time to come up with their own thoughts before asking if others have any ideas to contribute.

**GUIDELINES What to do when you have a participant who talks too much?**

Sometimes we have participants who want to share their thoughts or experiences too much. While it is important to be open to everyone, facilitators must also make sure everyone has a chance to talk. Here are some tips to use if someone is taking all the time during a group discussion:

- Thank the participant for sharing
- Explain that it is important for others to have a chance
- Tell the participant that we all appreciate how much we can learn from her
- Offer to talk more during tea time or after the session
- Refer back to what the participant said so that she or he feels heard and respected

**A-E-C-P with Sensitive Issues**

Talking about issues relating to strong emotions, family conflicts, peer relationships, intimate relationships and sexuality, dating violence or suicidality can be uncomfortable and difficult. As a facilitator you should be aware of the difficulties of leading discussions around potentially sensitive material. This may include discussion about preventing sexual violence and responding when it occurs, sexual health, or planning for the future.

**Accept, Explore, Connect, and Practice** can be helpful while leading discussions relating to difficult issues. When talking about stigmatized or taboo subjects, such as substance abuse, STIs or sexual behaviour, A-E-C-P can be helpful in the following ways:

- **Accept** by showing that you are listening and acknowledging how brave it can be to speak about sensitive issues (like the ones relating to HIV/AIDS and sexual violence) that may be affecting families in the homes and communities they live in.
- **Accept** by showing that you understand and respect whatever feelings participants express. Remember to praise participants for being brave when they share feelings.
- **Accept** by reminding participants that it is important that they know they are in charge of telling or talking about their experience. The workshop is a safe space for exploring

different ways of talking about sensitive issues, including experiences with HIV/AIDS and sex.

- **Accept** by reminding participants that they can say as little or as much as they want. They don't have to answer questions that may be seemingly sensitive if they don't want to.
- **Explore** by reminding participants that there is no right or wrong response when they share in the group, whether it's about the way they respond to issues such as substance abuse, sexual behaviour, or HIV (around disclosing one's HIV status, or relaying an experience on how HIV/AIDS or pressure/force around sex has affected them).

There are as many different opinions, experiences and ways as there are people. It is important that as a facilitator you ensure that the group foster mutual respect when listening and sharing.

- **Connection** to sessions in which participants discuss sharing emotions, collaborative problem solving and making long-term goals are particularly helpful in talking about HIV material.
- **Connect** to "Taking a Pause" when discussions feel stressful or difficult.

During the programme you will speak about sensitive issues, including strong emotions such as anger or shame, about peer relationships and maybe bullying or difficulties at school or for the older teens also about intimate relationship and sexuality. It is important to note that it is okay if you do not have all the answers or solutions for these difficulties. You offer ways that help them finding a solution together for their individual family.

Remember: Your role as a facilitator is to help caregivers and teens identify their own solutions to problems that they are experiencing.

Remember to draw on the collective experience of the group and the knowledge that exists outside the group. During the programme you will be able to share on some of the referral services available to the group which include:

- Counselling and Testing (e.g. for STIs)
- Psychosocial / spiritual support/ Support groups (PLHIV groups & teen clubs)
- Educational support
- Social services
- Income generation/economic strengthening

Make sure you discuss with your supervisors where caregivers and teens can access facilities that provide professional advice about dealing with sexuality making decisions about sex, and other additional support services to families. Note any details so that you have this information ready if you need to pass it on to a participant.

Remind participants and yourselves of these sources of support.

As a facilitator, you should be aware that sensitive issues, depression, substance abuse, and sexual behaviour can have stigma attached to them.

Stigma can lead to lots of different feelings, including of being alone; of being cut off from opportunities at school or work; of feeling depressed or down; of feeling increased stress; of isolation from communities, friends and family.

During discussions about sex, facilitators should remind participants that they will not be judged for what they do or do not say.

Remind the group how important it is to appreciate the support and listening skills of others if they are quiet.

**PRINCIPLE 5: ATTEND TO SPECIAL NEEDS IN COMMUNICATION WITH CHILDREN AND TEENS**

A “silent” (taciturn) adolescent in individual counseling or even in family conversations is not uncommon. Teens in particular may be reluctant to talk about personal and sensitive issues or problems, and they usually prefer to talk to peers. Topics that may make them feel ashamed are often avoided and may cause reluctance to talk about it (Fryszler & Eggemann-Dann, 2022, pp. 56-57). There are a couple of things you can attend to as facilitator in addition to the A-E-C-P which may help run these discussions more smoothly.

The following tips are intended to help you prepare for talking with a young person:

- The conversation should have a clear structure
- Working with symbols is helpful, especially for younger adolescents. They are the central form in which children up to the age of 10 or 12 deal with their reality.
- For the more “teeny” group (from approx. 11 on), it is still often convenient to choose methods that contain symbols and thus support the conversation but may be less central compared to younger adolescents.
- From the very beginning, the adolescent person should be seen as equal
- The conversation should always acknowledge and support the teen’s (developmentally appropriate) pursuit of autonomy.
- Create a setting in which the teens and adult do not sit directly opposite each other for longer time, but talk in motion and play.
- Communicating with children and adolescents is a lot about your attitude as a facilitator, and how you introduce topics and themes
  - Avoid focusing on problems.
  - Don't signal your own shame and disappointment when discussing sensitive topics or problems.
  - Be patient in enduring setbacks, radiate optimism about development.<sup>3</sup>

When implementing these recommendations, the following details may be helpful:

1. In general, adults should try to create a friendly and positive start that contributes to the success of conversations with children and adolescents.
2. Children often have the impression that adults know everything. When talking to teens, make sure that the child gets the feeling of reciprocity and a conversation “at eye level”.
3. Playing and talking can be combined. Through a game, children and teens get to tell stories and problems more quickly, as if they were only sitting in a circle or in a 1:1 situation.<sup>4</sup>
4. Helpful conversational techniques with teens (mainly based on the Socratic method) are grounded on the following four assumptions:
  - Be convinced of the other's expertise in relation to himself (the young person is an expert in himself, his feelings and his knowledge).
  - Elicit the expertise of the other.
  - Ask rather than tell.
  - Let them discover (the conversation as a joint discovery tour).

The Socratic method recommends that a child's conversation partner should try to create trusting conditions through the following behaviors:

- Clarify the goal of the conversation.
- Inform the child/adolescent about their own intentions.
- Show the child/adolescent that feedback is needed.
- Let the child/adolescent know that they are allowed to remain silent.

As cited in:

<sup>3</sup> (Fryszler & Eggemann-Dann, 2022, p. 57)

<sup>4</sup> (Delfos et al., 2011, p.91)

- Try to name what you feel.
- Invite the child/adolescent to express their opinion about the conversation.<sup>5</sup>

The table shows a short summary of the mentioned communication frame and techniques. A distinction is made between general communication conditions, which apply to most conversations with a counseling nature, and communication conditions for children and adolescent.

Children and early adolescents	Teens
<p>General Conditions of Communication</p> <p>Treating the teen with respect                      Take the teen seriously                      Make the teen feels comfortable                      Listen to the teen                      Give the teen the opportunity to relax after a hard conversation (opportunities to play and/or move, opportunities for physical activity, e.g. with the exercises during the program)</p>	
<p>Be the same (eye) height as the child or teen when addressing them (accommodate the potential difference in height)</p> <p>Look at the child or teen while speaking to pick up non-verbal signals</p> <p>Alternate making and breaking eye contact while speaking to the child or teen</p> <p>Show with examples that what the child or teen says has an effect</p> <p>Encourage the child or teen to tell about what they need and want, otherwise it cannot be known</p> <p>Combine playing and talking as much as possible</p> <p>Point out that if you notice that the child or teen is not paying attention, you will interrupt the conversation and will continue later</p>	<p>brain "turn on"                      (accompany the young person in thinking and let him discover things him- or herself)</p> <p>Encourage storytelling</p> <p>Targeted further questions</p> <p>Expressing appreciation for the thought process (especially the beliefs, perspectives and knowledge)</p> <p>Show willingness to learn (also that the adult can and wants to learn from the young person)</p> <p>Use the Socratic method</p>

Even if an attempt has been made to comply with all the conditions of communication that we have mentioned, it may well happen that a child does not want to speak.<sup>6</sup>

**PRINCIPLE 6: UNDERSTANDING CHILD DEVELOPMENT NEEDS DURING ADOLESCENCE**

Adolescents (ages 10-18) are going through different experiences and have different needs than younger children. It can be a period of life that is very positive and fun – a time of growth and potential – but it is also a time that can be very challenging and stressful. Do you remember? We were all adolescents once!

As cited in

<sup>5</sup> (Melzer & Methner, 2012, pp. 69-70)

<sup>6</sup> (Melzer & Methner, 2012, pp. 67-68)

The adolescent body is changing dramatically: in height, in shape, inside (the reproductive organs mature) and outside (skin, facial hair, voice). This means that teenagers can feel more self-conscious and may feel good or bad about their looks.

The teenage brain also continues to grow and change through their 20s! Studies have shown that parts of the brain that regulate emotions mature earlier (around 13-16) than parts of the brain that control decision-making, impulse control, and thinking about consequences of actions. This means that teenagers may be more likely to engage in high risk and impulsive behaviours, especially if these are pleasurable or fun, because they are still learning how to consider consequences and control impulses. This also means that adults must help to guide their thinking and their behaviours.

Teenagers are on the road to become adults in society. Part of helping them become a productive and well-adjusted adult is to balance the setting of rules and limitations with independence. You can think of this process as “scaffolding”, like the guideposts surrounding a house that is being constructed.

While the child is less mature, adults may provide more rules, monitoring, and direct instructions. But when the child is older and is showing more responsibility, the adults can gradually step back and adjust their family rules and routines to allow their child to behave more independently and take responsibility for their actions. The ways adults and teenagers communicate with each other will change too to become more collaborative.

Finally, teenagers are concerned about understanding and forming their identities. They can develop a positive identity when adults recognize and praise their good qualities and behaviours. They may experiment and explore what they like and who they are, and this is part of figuring out their identities.

Overview of essential changes that can be observed between the ages of 11 and 19 (Fryszler & Eggemann-Dann, 2022, pp. 53-56)

<p>Early adolescence/puberty: 11 to 14 years of age</p> <p>Physical changes:</p> <ul style="list-style-type: none"> <li>– Girls are at the peak of their growth.</li> <li>– Girls gain more fat than muscle mass.</li> <li>– Girls start menstruating.</li> <li>– Boys experience a growth spurt</li> <li>– Both sexes are becoming aware of their sexual orientation.</li> <li>– Both sexes show stronger stress reactions and at the same time an increased interest in new things.</li> </ul> <p>Emotional and social changes of both genders:</p> <ul style="list-style-type: none"> <li>– Gender identity is strong, but is oriented even more towards gender stereotypical attitudes and behavior.</li> <li>– Due to the desire for autonomy, less time is spent with caregivers and siblings and more time with peers.</li> <li>– The number of friendships decreases. The existing ones are more intensive and are based on familiarity, mutual understanding and loyalty.</li> <li>– Same-sex cliques dominate.</li> <li>– Cliques with similar values get together.</li> <li>– Conformity with peer pressure increases</li> </ul>
<p>Middle adolescence: 14 to 16 years of age</p> <p>Physical changes:</p> <ul style="list-style-type: none"> <li>– In girls, the growth spurt ends.</li> <li>– Boys are now experiencing the peak of their growth spurt.</li> <li>– In boys, the voice begins to break.</li> </ul>

<ul style="list-style-type: none"> <li>– Boys gain a lot of muscle mass while fat tissue decreases.</li> <li>– First experiences with intimate relationships occur in both sexes and some teens may also decide to engage in sexual activity.</li> </ul>
<p>Cognitive changes of both sexes:</p> <ul style="list-style-type: none"> <li>– Young people are now more concerned about the opinions of others.</li> <li>– They are significantly more competent to make day-to-day decisions on their own.</li> </ul>
<p>Emotional and social changes of both genders:</p> <ul style="list-style-type: none"> <li>– Individual characteristics of the self can now be more fully integrated into an organized self-concept.</li> <li>– Self-assessment and self-worth become more differentiated and increase.</li> <li>– Problems can now be understood and judged from a societal perspective.</li> <li>– Conflicts between moral arguments, social conventions and personal freedom of choice can be reflected on in a more differentiated way.</li> <li>– Gender identity is becoming more individual and is less based on stereotypes.</li> <li>– Mixed-sex cliques are becoming more common.</li> <li>– First dates with sexually attractive partners take place.</li> <li>– Conformity through peer pressure can decrease and allow for individual development.</li> </ul>
<p>Late adolescence: 16 to 18 years of age</p>
<p>Physical changes:</p> <ul style="list-style-type: none"> <li>– In boys, the growth spurt ends.</li> </ul>
<p>Cognitive changes:</p> <ul style="list-style-type: none"> <li>– The ability to make your own decisions continues to increase.</li> </ul>
<p>Emotional and social changes:</p> <ul style="list-style-type: none"> <li>– The self-concept now has individual moral principles.</li> <li>– Finding identity takes place more intensively.</li> <li>– Cliques and groups become less important.</li> <li>– Emotional closeness and intimacy in love relationships are now increasingly being sought. These love affairs now last longer.</li> </ul>

**PRINCIPLE 7: MAKE PLH GROUP MEETINGS A HAPPY PLACE TO LEARN**

Parents and Teens will want to come to the sessions and participate in the activities if you create an environment that is welcoming, open, and respectful. Everyone likes a place that is warm and inviting. It can be helpful to think of the PLH Teens Programme as a family itself.

Ways in which facilitators can make PLH Group Meetings a happy place to learn:

- Respect whatever a participant talks about. Facilitators should be aware and respectful of different ages, genders, values, and circumstances.
- Model the behaviour you want from the participants. The workshop space should be a judgement-free space in which participants feel comfortable sharing sensitive material.
- Notice and talk about the ways that participants talk, help each other and participate in the sessions.
- Invite caregivers and teens to participate: Notice when someone is holding back and ask if he or she wishes to share an opinion or experience.
- Make sure that everyone in the room can hear you (and each other). Sit when you are talking: Be on the same level as the participants and sit among them.
- Create a comfortable and welcoming place to meet. Make sure there are enough chairs, the room is clean, use a fan in summer and a heater in the winter, etc. Even decorate the room if you want!
- Establish the language needs of the participants.
- Notice if participants have physical challenges or disabilities that may require adjusting the way they participate in activities.

- There will be lots of laughter in the group but try not to laugh at a caregiver even if what they say sounds ridiculous. Everything is an opportunity to learn a new building block.
- Praise participants for their effort and dedication.
- Model the behaviour you want from the caregivers in the way that you treat them.
- Praise, respect, and reflect on participants' contributions.
- Encourage participants to play and enjoy the session!

#### PRINCIPLE 8: COME PREPARED FOR EACH SESSION

The more you prepare for each session, the easier time you will have in delivering the material. You will feel more relaxed and be more receptive to how caregivers are feeling and to their experiences. Read through the manual the night before each session. Write down any notes or reminders that might be helpful for particular activities. Sometimes, the participants will not initially understand what you are asking them if you say the exact words in the manual. It can be helpful to write different ways of asking the discussion questions. We like to think about this as “redialing a question.”

If you don't understand something or forget how to do an activity, ask your facilitating partner. You can also talk to your supervisor prior to the session. Practice the songs, activities and relaxation exercises. You can even try them out with your friends or families. They are fun and helpful for everyone! Look through your family profiles to review each caregiver's progress in the programme and to remember any special needs or concerns. This is particularly important for the goals that caregivers set themselves at the end of the session and the discussion on home activities. Arrive early so that you can prepare the space. You want to be relaxed, smiling, and ready to go when the caregivers arrive so it is important to give yourself plenty of time.

Decide who is going to be leading which specific activity and who is going to be giving support. Make sure you share responsibilities with each other and support each other collaboratively. Use a watch or clock to keep on time and within the amount of time that you have for each session activity. Remember that this manual is just a guide. While it is very important that you deliver the programme content as it was designed, it is also important that you find ways to make it your own PLH Teens Programme.

#### LASTLY, HAVE FUN!

Thank you... for being a Parenting for Lifelong Health Parent and Teen Programme Facilitator. We know that you will put a lot of time and energy into learning this programme, and finding new ways to work with families.

We know that you are doing this because you want to help people who are struggling. You are the heroes of helping families in our communities!



## SESSION 1: DEVELOPMENTAL STAGES

### Table of content

PART 1 INTRODUCTION FOR FACILITATORS .....	42
1. WELCOME & SESSION PREPARATIONS.....	44
1.1 FACILITATORS TAKE ATTENDANCE .....	44
1.2 PARTICIPANTS SETTLE DOWN AND DO THEIR NAME TAGS .....	44
1.3 WELCOME AND THANK EVERYONE FOR COMING AND PRAISE FOR TIMEKEEPING .....	45
1.4 ACTIVITY: DO THE “NAME GAME” .....	45
2. SESSION OVERVIEW FOR THE DAY .....	45
2.1 FRAMING THE DAY: INTRODUCING THE PROGRAMME & SESSION .....	45
2.2 BUILDING A HOUSE OF SUPPORT FOR CAREGIVERS AND TEENS .....	46
2.3 PHYSICAL EXERCISE.....	48
PART 2 .....	52
3. CORE LESSON.....	52
3.1 ESTABLISHING GROUND RULES: THINGS THAT WILL HELP US WORK TOGETHER .....	52
3.2 CONTENT WORK.....	54
3.2.1 STAGES OF CHILD DEVELOPMENT .....	54
GROUP DISCUSSION ABOUT STAGES OF CHILD DEVELOPMENT .....	55
3.2.2 CAREGIVERS PART (SEPARATE) .....	55
3.2.2.1 DEVELOPMENTAL STAGES AND TASKS DURING ADOLESCENCE .....	55
GROUP ACTIVITY: EXPLORING DEVELOPMENTAL TASKS .....	56
GROUP DISCUSSION: DISCUSSION ABOUT DEVELOPMENTAL TASKS .....	56
3.2.2.2 CHALLENGES ASSOCIATED WITH CHANGES DURING THE DEVELOPMENTAL STAGE OF ADOLESCENCE .....	58
3.2.2.3 FACILITATOR’S SUMMARY: PARENTING CONSIDERING THE DEVELOPMENTAL CHALLENGES OF ADOLESCENTS .....	59
3.2.3 TEENS PART (SEPARATE) .....	60
3.2.3.1 DEVELOPMENTAL STAGES AND TASKS DURING ADOLESCENCE .....	60
GROUP ACTIVITY: EXPLORING DEVELOPMENTAL TASKS .....	60
GROUP DISCUSSION: DISCUSSION ABOUT DEVELOPMENTAL TASKS .....	60
3.2.3.2 CHALLENGES ASSOCIATED WITH CHANGES DURING THE DEVELOPMENTAL STAGE OF ADOLESCENCE .....	62
3.2.3.3 FACILITATOR’S SUMMARY: PARENTING CONSIDERING THE DEVELOPMENTAL CHALLENGES OF ADOLESCENTS .....	63
4. SESSION CLOSE .....	64
4.1 PREPARING FOR HOME ACTIVITY.....	64
4.2 REVIEW TOPICS COVERED .....	65

4.3 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY.....	65
4.4 THANK AND PRAISE PARTICIPANTS & CLOSE .....	65
ILLUSTRATION – STRETCHING YOUR BODY .....	67
HANDOUT – STAGES OF CHILD DEVELOPMENT (EARLY & LATE ADOLESCENCE).....	68
HANDOUT – DEVELOPMENT OF SEXUAL CHARACTERISTICS .....	69
ILLUSTRATION – HOUSE OF SUPPORT .....	70
PLH – FLOURISH PROGRAMME .....	71

## LEGEND

- **GUIDELINE**-Boxes indicate important information that should definitely be considered and possibly communicated to participants (“key messages”).
- Sentences marked in black always refer to separate group work
- *Green cursive font marks passages of text are examples of text passages to illustrate how key messages can be delivered. They only serve as demonstration; your own wording is preferred.*
- Normal upright writing marks content that can be conveyed in a general sense

## PART 1 INTRODUCTION FOR FACILITATORS

In this session, your main goals as a facilitator will be to:

- Introduce the programme to participants
- Make common ground rules and discuss what makes a healthy relationship
- Support participants in their understanding of developmental changes that come along physically, emotionally, socially and sexually when transitioning from childhood to adolescence

### **GUIDELINES: Session One**

In Session 1 it is important to create a space that is welcoming and safe. Start as we want to continue! We begin this session with simple but fun “getting to know you” activities that help build trust in the facilitators and within the group.

We will all now talk about establishing some ground rules for the programme and then work together to define our individual goals we seek to achieve during the programme. We will take some time at the end of the programme to check and see if we have managed to meet our goals and celebrate our achievements.

In the first part of Session One, Facilitators do 4 things:

1. Welcome the participants to the programme
2. Introduce the programme
3. Establish common ground rules and discuss behaviours in healthy relationships
4. Help participants to think about and share goals.

**Table 1 - SESSION 1 PREPARATIONS & OUTLINE**

Goal of the session	<ul style="list-style-type: none"> <li>➤ To introduce the programme to participants and to help them reflect on relationship strengthening and behaviour change goals that they would like to achieve by the end of the programme.</li> <li>➤ Get a better understanding of the diverse changes occurring during child development, in particular when transitioning into adolescence.</li> </ul>
Core Principles	<ul style="list-style-type: none"> <li>➤ Ground rules are useful for helping us to run the sessions.</li> <li>➤ Rules should be positive, specific, and realistic.</li> <li>➤ Thinking about common ground rules helps to focus on a social interaction.</li> <li>➤ Setting ground rules can lead to healthy relationships and long-term achievements in life.</li>   <li>➤ To understand child and adolescence development to learn about developmental task teens are facing and how you can best support them in successfully meeting the challenges associated with their development.</li> </ul>
Training materials & resources	<ul style="list-style-type: none"> <li>➤ Flip chart, paper, pens, markers</li> <li>➤ Attendance register</li> <li>➤ Name tag materials</li> <li>➤ Printed copies of the physical exercises for all participants</li> <li>➤ Printed copies of the tables 2b for all participants</li> <li>➤ Printed copies of the description of the development of sexual characteristics and table 3 for all participants</li> <li>➤ Poster of the 'House of Support' (in order to use it in the session)</li> </ul>
Venue Preparations:	<ul style="list-style-type: none"> <li>➤ Make sure the workshop venue has the opportunity for using two different rooms to separate the large group into adolescents only and caregivers only.</li> <li>➤ Make sure that the workshop venue is clean.</li> <li>➤ Set up chairs where the participants will sit in a circle.</li> <li>➤ Prepare all the materials that you will use during the group session.</li> </ul>

COMPONENT	TIME <sup>1</sup>	ACTIVITIES
Welcome & Session Preparation	20 mins	<ul style="list-style-type: none"> <li>➤ Facilitators take attendance.</li> <li>➤ Participants settle down &amp; do their name tags.</li> <li>➤ Welcome, thank everyone for coming and praise time keeping.</li> <li>➤ Do the "Name Game".</li> </ul>
Session overview for the day	20 mins	<ul style="list-style-type: none"> <li>➤ Framing the day: Introducing the programme &amp; session.</li> <li>➤ Building a house of support for caregivers and teens.</li> <li>➤ Programme activities.</li> <li>➤ Do physical exercise.</li> </ul>
Core Lesson	60 mins	<ul style="list-style-type: none"> <li>➤ Establishing ground rules: Things that help us work together.</li> <li>➤ Content work: Stages of child development.</li> </ul>
		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">CAREGIVERS PART</td> <td style="width: 50%; text-align: center;">TEENS PART</td> </tr> </table>
CAREGIVERS PART	TEENS PART	

<sup>1</sup> Suggestions may be adjusted by facilitator on demand.

		<ul style="list-style-type: none"> <li>➤ Developmental stages and tasks during adolescence.</li> <li>➤ Group activity: Exploring developmental tasks.</li> <li>➤ Group discussion: Discussion about developmental tasks.</li> <li>➤ Challenges associated with changes during the developmental stages of adolescence.</li> <li>➤ Facilitator’s summary: Parenting considering the developmental challenges of adolescents.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Developmental stages and tasks during adolescence.</li> <li>➤ Group activity: Exploring developmental tasks.</li> <li>➤ Group discussion: Discussion about developmental tasks.</li> <li>➤ Challenges associated with changes during the developmental stages of adolescence.</li> <li>➤ Facilitator’s summary: Parenting considering the developmental challenges of adolescents.</li> </ul>
Session Close	20 mins	<ul style="list-style-type: none"> <li>➤ Home activity for the week                             <ul style="list-style-type: none"> <li>• Complete a physical exercise once a day.</li> <li>• Praise your teen/caregiver once a day.</li> </ul> </li> <li>➤ Today’s session review.</li> <li>➤ Reminder of next session date.</li> <li>➤ Thank &amp; close.</li> <li>➤ Thank and praise participants and close.</li>   <li>➤ Make sure you leave the room in order.</li> <li>➤ Share your observations in facilitator report.</li> </ul>	
Total sum of minutes		120 mins	

## 1. WELCOME & SESSION PREPARATIONS

### 1.1 FACILITATORS TAKE ATTENDANCE

As participants arrive, invite them to sit down. Remember to take attendance as each new person arrives.

### 1.2 PARTICIPANTS SETTLE DOWN AND DO THEIR NAME TAGS

As participants settle down, they can start making name tags that they will use each week. Name tags are a way for us to begin to get to know each other. They are handed out at the beginning of each session and collected at the end of each session.

**GUIDELINES: Making Name-Tags**

1. Hand out blank name tags and markers.
2. Each participant writes his/her name on the name tag using whatever colors they want to use.
3. Ask the participants to add a picture or word or mark that will help them to identify their name tag on their own. Maybe they want to draw yellow stars all over their name tag?
4. Make sure they use markers so that we can all see their name tags properly!

**1.3 WELCOME AND THANK EVERYONE FOR COMING AND PRAISE FOR TIMEKEEPING**

Formally welcome participants to their first session! At the beginning of the session, invite the participants to share how they are feeling today.



**Remember: You want to show what positive behaviour looks like.  
So give participants lots of praise for sharing!**

**1.4 ACTIVITY: DO THE “NAME GAME”**

This game should help everybody get to know each other. Participants introduce themselves to the group before playing the “Name Game”. Ask the participants to show their name tags and explain what they drew or wrote on it. You can go around the circle to do this. A variation could be that you ask the participants to choose a shape or a gesture describing their symbol.

**GUIDELINES: Leading the Name Game**

- The participants start by sitting in a circle.
- One person says their name and makes a shape.
- The entire circle then repeats that person’s name and makes the same shape.
- The person sitting next to them says their name and makes a shape.
- Repeat for everyone in the circle!

**2. SESSION OVERVIEW FOR THE DAY**

**2.1 FRAMING THE DAY: INTRODUCING THE PROGRAMME & SESSION**

The introduction provides an overall picture of the programme. It is important to outline what will happen over the next 6 sessions. It is like giving a map of the journey that the caregivers and the teens must travel on together as a group. Facilitators provide an overall picture of what we’re doing in the PLH – FLOURISH programme. It is also important to outline what will happen each day.

*Many programs have lots of sitting and listening. This programme is different. The PLH – FLOURISH programme is a very exciting programme where we come and learn and also play! Instead of only sitting, there will also be lots of doing. We want your ideas! In this programme we will be doing a lot of sharing, singing, dancing, laughing and practicing skills for the first time. We will have dramas which we call role plays. We will watch and refine role-plays, talk about different solutions together, practice different skills together, and also have time to practice at home. Role-playing is an important part of each session. In our programme we use them to act out different scenarios that have different fictional characters showing experiences that we all have sometimes. We often encourage everyone to step in and do some of the acting and directing themselves! We also sometimes hand out illustrated stories that show some of the things we talk about during sessions.*

*Sometimes these show the role-play story and sometimes they show things that might be helpful to remember what we talked about, like the physical exercise illustration we will hand-out today! These are for you to keep, take home with you, and show to your families.*

*Caregivers: None of us were born with the full understanding of parenting skills. It is challenging to be caregiver. Caregivers had to learn most of them through their own personal experiences and in other cases from others. It is important to remember that the way caregivers interact with children has a lasting effect on their wellbeing. It is important that caregivers are satisfied with the way they behave towards their children and be willing to change if their behaviours negatively impact them. Raising teenagers can be challenging. Sometimes the way they behave may affect how caregivers behave.*

*Teens: Being a teenager can be both one's best or worst experience. Teens face so many pressures around. Their bodies are changing. They have new responsibilities and people have high expectations of them. Sometimes, they are not sure about how to deal with some of these changes.*

*In most programs, participants might expect that the person leading or facilitating the programme like me, has all the answers. But that's not the way PLH - FLOURISH works. We know that you have already solved many problems and that you can solve your own problems.*

## 2.2 BUILDING A HOUSE OF SUPPORT FOR CAREGIVERS AND TEENS

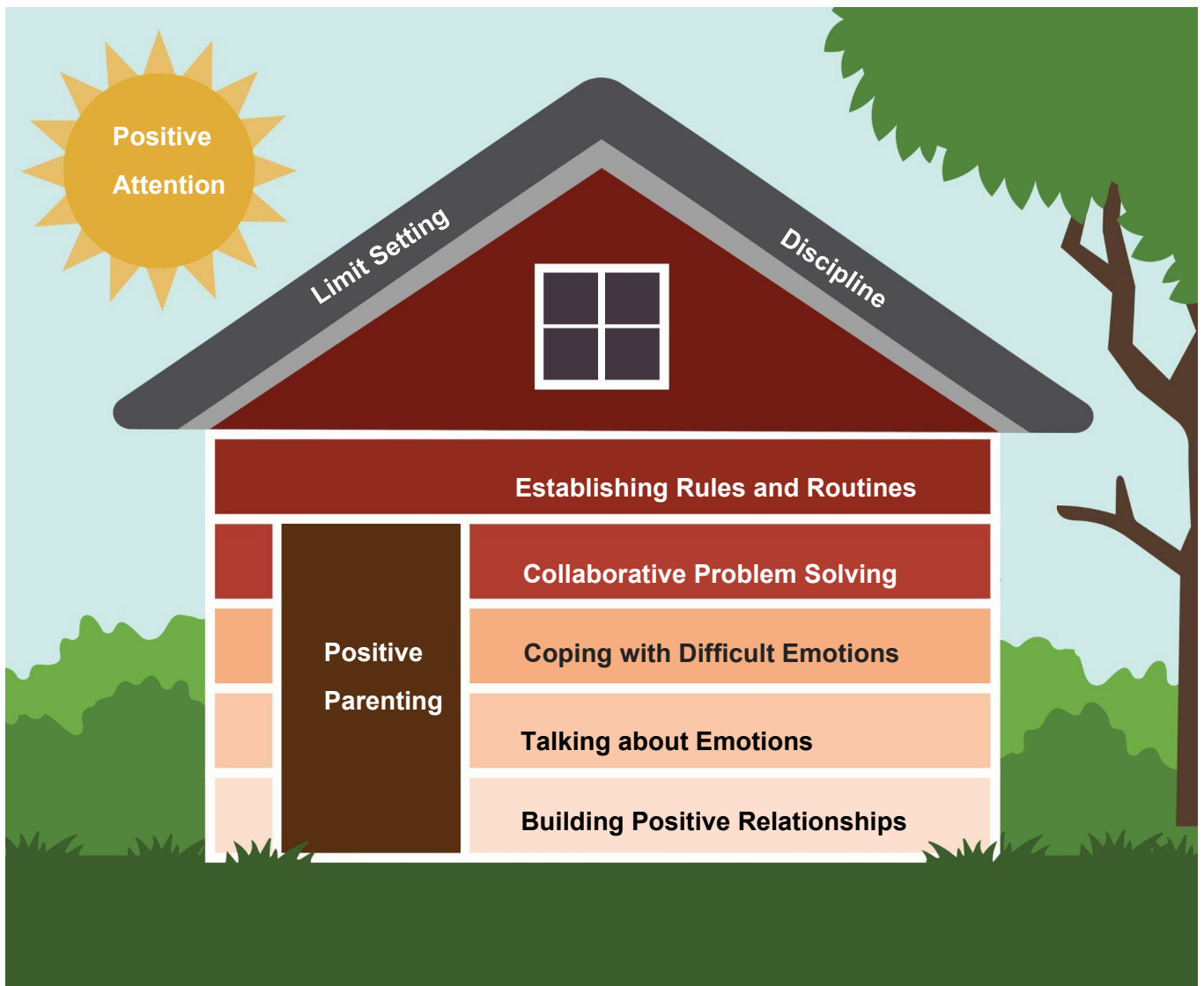
### **GUIDELINES**

The House of Support should have been explained during the pre-group session home visit so this discussion is a recap to allow caregivers to ask questions as a group.

Facilitators display the poster for the House of Support during the introduction of the programme. The introduction provides an overall picture of the programme. It is important to outline what will happen over the next 6 sessions.

*The programme uses the House of Support to demonstrate why it is important to build a strong, positive relationship with their teenagers. Like building a strong House of Support with walls to support the roof that keeps everybody sheltered, in the PLH – FLOURISH programme, we will be working together to make plans and practice solutions that will help each other improve life at home. Think of the PLH – FLOURISH programme as a team of experts who know how to build a strong house with walls that stand and roofs that don't leak, who can advise and support you while you build your own House of Support just the way you like it. We will focus in this 6 session programme on the house itself.*

**Illustration 1 – House of Support**



**GUIDELINES: Explaining the House of Support**

The programme uses the House of Support filled with warmth and love to demonstrate why it is important to build a strong, positive relationship with children and adolescents.

The goal is a home founded on strong relationships that are built from trust and positive relations.

The **walls** make the foundation for good parenting. They are most important part of the programme. The walls symbolize positive and healthy caregiver-child interaction – One-on-One time with children and adolescents, praising each other, talking about feelings, and supporting good behaviour.

As we move to the **roof**, we focus on dealing with problem behavior, setting limits and establishing house rules.

The more time that caregivers spend time with and praising their teenager, the more comfortable their teenagers will feel about communicating openly to their caregivers and behaving in a positive way. When caregivers spend more time building positive relationships with their children, they often need to do less disciplining. Caregivers and children/adolescents feel supported and loved. Caregivers have less stress.

If the foundation of the Home is strong, the thatch roof will be easier to maintain. If the walls are made poorly, out of bad, negative material, or if we spend all our time worrying about the thatch roof (making rules, disciplining, and punishing our children) without building strong walls, our House of Support will fall down.

If teenagers feel disconnected and emotionally insecure they engage in high risk behaviour that may endanger their lives or affect their future. This will make caregivers feel stressed and unhappy.

As we build the House of Support, it is important to praise caregivers for the commitment that they are making to their children, their family, and themselves.

### 2.3 PHYSICAL EXERCISE

*We start off every session with a physical exercise. Physical exercise can help with stress and tension in the body and the mind. Everybody is different and can do different exercises – we don't want anybody to hurt themselves! Since this is the first session, let's start with a very simple exercise that participants can also practice at home. This exercise uses the whole body.*

*We start with our heads, and then move down and across our bodies, moving our neck from side to side, and then each of our arms, hands, bellies, legs... and finally our feet.*



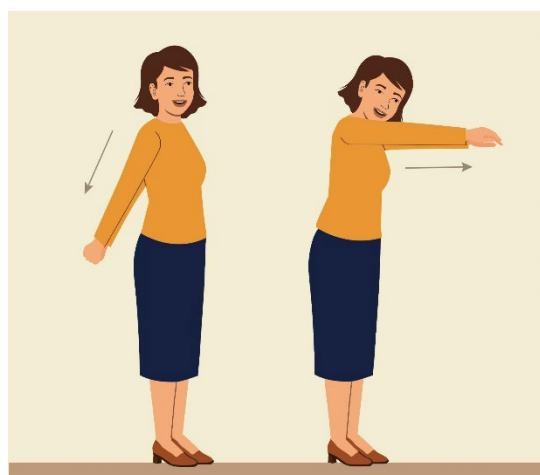
**GUIDELINES: Leading Physical Exercise**

**When teaching the physical exercise with participants for the first time, facilitators need to be patient and explain each movement clearly. It is okay to pause and gently correct movements if necessary. But it's very important that participants only do the exercises that are comfortable for them. It is also very important to make sure the movements are smooth and the breath is relaxed.**

- If someone needs to sit down, encourage him or her to participate as best as they can from a sitting position.
- Many of the caregivers are not used to moving their bodies and may need encouragement and more guidance than you expect. Teenagers should be encouraged to be energetic and playful.
- As you lead the physical exercises each session, the caregivers will gradually become more comfortable with the movements.
- Facilitators should encourage caregivers to do the physical exercises at home regularly and on an ongoing basis, for example first thing in the morning.
- You can suggest that caregivers do it first thing in the morning.
- As you lead warm-ups during each session, the participants will gradually become more comfortable with the movements.
- Facilitators demonstrate the movement that they want participants to copy.
- Facilitators should be creative with this! Use sounds with the movements for fun. Try different movements in different sessions.



Stretch arms straight up as if you want to touch the sky (4 deep breaths).  
Stretch up into your left and right sides (4 deep breaths).



Stretch to the back (4 deep breaths).  
Stretch to the front (4 deep breaths).



Place your chin on your chest and then move your head to the left so that your ear is near your shoulder. Then move the head to the right. (4 times)

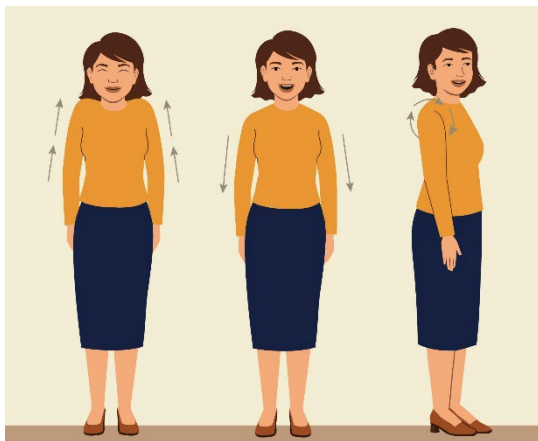
Move your head around in full circles slowly. (4 times)



Stretch your right arm up and put your head on your right shoulder, then put your hand on your ear. (4 deep breaths)

Stretch your left arm up and put your head on your left shoulder, then put your hand on your ear. (4 deep breaths).

Link your hands and use the weight of your arms to hold the back of your head down. (4 deep breaths)

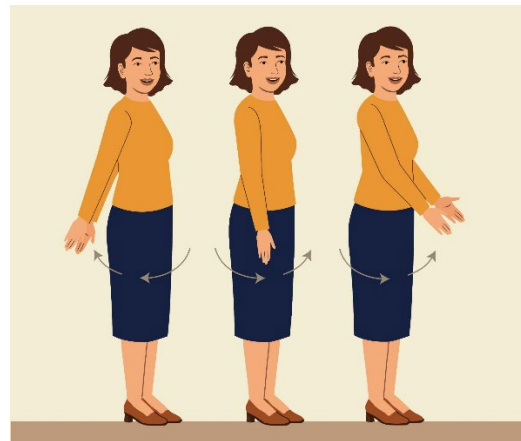


Scrunch your face, squeeze your hands, and bring your shoulders up to your ears. Hold your body tight with your breath.

Release everything and breathe out loudly. (4 times)

Rotate your shoulders in circles to the front. (4 times)

Rotate your shoulders in circles to the back. (4 times)



Relax your arms and let them swing from your shoulders forward and backward with your knees bent slightly. (10 times)

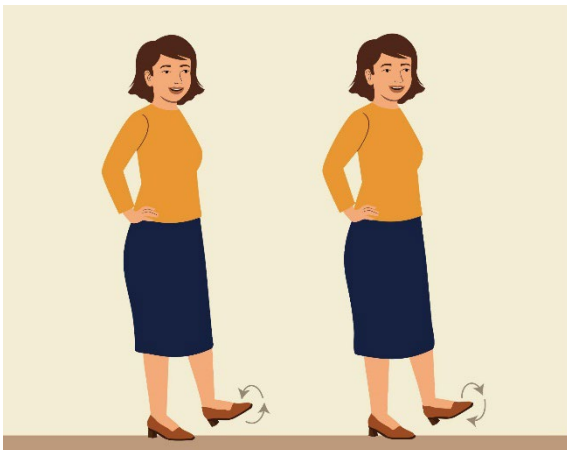


Slightly bend your knees and relax your arms. Turn from side to side leading with your hips and letting the rest of your body follow, including your arms, neck, and head. Allow your arms to swing from side to side. (10 times)



Bend your knees a little, hold them with both hands, and make small circles in both directions. (10 circles each direction)

Hold your waist and make small circles in both directions (10 circles in each direction)



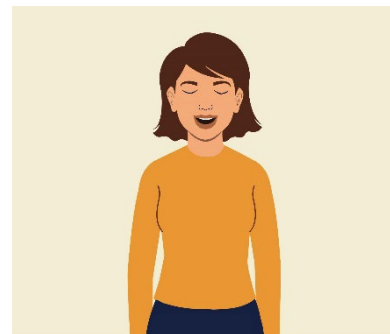
Place one foot on the ground in front of you. Rotate your ankle outward and inward. After 10 circles in each direction, switch feet.



Rotate your wrists in circles as if you are painting. Make sure you go in both directions. Shake your whole body in all directions.



Raise your arms above your head breathing in. Slowly allow your hands to float down by your side as you breathe out.



Stand with your eyes closed and notice how your body feels now.

## PART 2

### 3. CORE LESSON

#### 3.1 ESTABLISHING GROUND RULES: THINGS THAT WILL HELP US WORK TOGETHER

During this session, facilitators ask participants for their ideas about what rules would be helpful to maintain a good environment when the group meets:

*What do we need in order to feel comfortable, respected, and supported in the PLH – FLOURISH programme group each week?*

*It is important that we, as a group, set ground rules on how we will ensure that the time and experiences together over the next 6 weeks are fruitful. These rules should be developed as a group and owned by our group. By creating common rules of how the group will engage, we will ensure that this caregiver-teen workshop is safe, warm and welcoming. Ground rules, or basic rules, will help us to work well together. When we establish Ground Rules it is like we are making a group contract. Can anybody share what they think a “ground rule” is?*

*Ground rules are useful for helping us to run these sessions. These can also help us to live peacefully together in our homes. In this session we will start with the ground rules for the programme and then we will talk about how ground rules, or household rules, work in your home.*

**GUIDELINES: Facilitating the Ground Rules Discussion**

1. Participants are divided into two groups, one with the teens, one with the caregivers.
2. Everyone needs to have a chance to speak if they want.
3. One Facilitator per group leads the discussion and writes rules and comments on the flip chart (or big paper stuck to the wall) to look at later.
4. Facilitators can ask participants for rules around specific issues like arriving on time, cell phone use, respect, etc.
- 4a. An important ground rule can also be that teens and caregivers arrange who reminds whom about homework and when.
5. Make sure everyone in the group understands. For example, if someone mentions respect, ask what that means to her. What sort of behaviour shows respect? Does everyone agree? Would someone like to add something?
6. Help participants to make the rules in a positive way. So, instead of “no interrupting” we could say “listen respectfully when other people talk”.
7. Give participants a chance to debate and discuss what a “rule” could be. For example: Someone might suggest “Keep your cell phone on silence”. You may want to talk about “What counts as “silent”?”, “Can we keep our phones on “vibrate”?”
8. Everybody must agree on a rule before we write it down!
9. The groups return to the large group and share the rules they have collected using the posters. No individual contributions are identified. The rules should remain anonymous.
10. Compare similarities and differences between the group works. As a facilitator it is very important to start with the positive aspects and similarities of the two groups. This allows caregivers and teens to see that there are overlapping rules and commonalities. Emphasize and strengthen the commonalities, address the feelings of the two groups if they find strong commonalities.
11. In total, about 10 rules should be set for the large group.



**Praise! Praise! Praise!**

**Praise suggestions and praise actions – praise what you want to see more of from your participants!**

Some helpful ground rules might include:

- “Please try to come on time and be at every session”
- “If you cannot attend, please tell the facilitators (It is okay to send a ‘please call me!’)”.
- “There is no right and no wrong in whatever we do or say. Everyone is different and will have different experiences in the workshops.”
- “Everyone has an opportunity to speak and practice.”
- “Respect each other by listening and paying attention to whoever is speaking.”
- “What we say in the group, stays in the group. Nobody talks about it to anyone else who wasn’t here.”

- “Share only what you feel comfortable about sharing.”
- “Accept and respect that people hold different rules”.
- “Feel free to ask the Facilitators any questions you might have”

### 3.2 CONTENT WORK<sup>2</sup>

#### 3.2.1 STAGES OF CHILD DEVELOPMENT



During this activity, you will introduce to the participants the different stages of child development. It is important that caregivers/adolescents are aware of different competencies and characteristics of children and adolescents of different stages as they develop. The characteristics of children and adolescents can shape caregivers’ expectations, goals, and activities with their children/adolescents and can support the children and adolescents in developing a better self-understanding. This new information can promote mutual understanding and ensure a uniform knowledge base in the families. It may be that the challenges and problems that caregivers face are rooted in expecting children and adolescents to behave in ways that they are not yet developmentally ready for.

#### **Display the Stages of Child Development up until Early Adolescence (Table 2a)**

Explain to the group that although children and adolescents develop at different rates, there are certain things that we expect children and adolescents to be able to do at certain times, called ‘developmental’ milestones. Remind participants that a range of factors affect children’s development. These include nutrition, health, genetics, physical environment, stress, interaction, presence of siblings, and other factors. Explain that all children and adolescents develop at different rates so they may not always fit within these age stages.

As you discuss Table 2a, emphasize that there are developmental tasks for age four and under, but up for the session you only want to focus on age seven and up.

**Table 2a – Stages of child development (early and middle childhood) with developmental tasks**

<p><b>Early Childhood (4–7 years)</b></p>		<ul style="list-style-type: none"> <li>• Same as infant (0 -1 years) and toddler (2-3 years) but also...</li> <li>• Learns through actions; play. Develops relationships with other children. (Play is important and can teach social values.)</li> <li>• Has questions; seeks answers.</li> <li>• Finds it difficult to separate fantasy from reality. Expresses feelings in dramatic ways.</li> <li>• May talk a lot; ask many questions. Answers can be short but should be honest. The child may ask again if not clear or if she or he wants more information.</li> <li>• Does not like to lose, share or take turns, but losing and taking turns can be taught.</li> </ul>
<p><b>Middle Childhood (8–12 years)</b></p>		<ul style="list-style-type: none"> <li>• Same as infant, toddlers, and early childhood but also...</li> <li>• Interested in learning in school.</li> <li>• Starts to want independence and trust.</li> <li>• Wants to spend time with other children.</li> <li>• May express interest in religious matters, spirituality.</li> <li>• May answer back to adults to show that they “know”.</li> <li>• Can be very self-conscious and sensitive. May be very active. (The child’s unique temperament emerges clearly at this stage.) But can learn to better manage anger and tolerate frustration.</li> </ul>

<sup>2</sup> Information for CONTENT WORK is taken from:

Delfos et al., 2009, 2011; Eschenbeck & Knauf, 2018; Konrad & König, 2018

## GROUP DISCUSSION ABOUT STAGES OF CHILD DEVELOPMENT

Remember that it is your job to guide caregivers/adolescents to find their own reasons instead of lecturing them. Use questions to help guide the discussion. Write the ideas that caregivers/adolescents suggest on the flipchart.

**Facilitate a group discussion about the activity. The following questions might be helpful:**

For caregivers:

- Why do you think is important for us to know what children and adolescents can already do (and cannot do yet) at a specific age?
- How does this affect the way caregivers parent or discipline their children?
- How does this affect the way we relate and communicate to children?

For adolescents:

- Why do you think is important to you to know what you can already do (and cannot do yet) at a specific age?
- How does this affect the way of your own thinking about yourself?
- How does this affect the way you can communicate to your caregivers?

**Possible reasons to understand child developmental levels:**

- It allows you to have realistic expectations for children and adolescents
- You can be patient with children and adolescents as they learn new skills
- Helps you to know how to communicate to your children and adolescents
- You can approach children and adolescents at their level and go at their pace
- You can support children and adolescents to develop through life
- You can be aware if children and adolescents are experiencing developmental delays or problems that might need extra support.
  
- It allows you to have realistic expectations for your own behaviour
- You can be patient with yourself as you learn(ed) new skills
- You can develop a better self-understanding
- It helps you to express and communicate your thoughts and feelings to your caregivers more appropriately

### **GROUP DIVIDES: SEPARATE CAREGIVERS AND TEENS HERE**

You can briefly explain the reason for the separation: *In separate sessions, similar topics are prepared and discussed in an age-appropriate manner. Separate sessions are only there to allow caregivers and children and adolescents to openly and freely share their views with their peers.*

### **3.2.2 CAREGIVERS PART (SEPARATE)**

#### 3.2.2.1 DEVELOPMENTAL STAGES AND TASKS DURING ADOLESCENCE

*Adolescence is defined as between the ages of 11-20. The phase of adolescence is distinguished from childhood because many developments and changes take place at the onset of adolescence.*

*Three stages can be distinguished in adolescence.*

*Early adolescence (approx. 10-12/13 years), middle adolescence covers the period between 14/15-17 years, while late adolescence is characterized by the direct transition to young adulthood (16-20 years).*

*The three stages are considered separately because the developmental tasks of the young people in each stage differ from each other.*

*A developmental task is a task believed to be mastered at a specific developmental stage of life for everyone in this stage (in this case during adolescence) and how successful this task is completed is related to healthy adjustment. These tasks may relate to physical skills, emotional adjustment, intellectual advancement, or social relationships. They may also refer to attitudes toward the self and the body, or the formation of standards and values.*

#### GROUP ACTIVITY: EXPLORING DEVELOPMENTAL TASKS

Divide caregivers into groups of 3-4 people.

Give each group a piece of flipchart paper and pens.

Ask them to collect developmental tasks of adolescence.

The caregivers should number the individual developmental tasks as they write them down so that it is easier to compare them later.

The participants (and facilitators) may require additional support with this – examples from the developmental chart above may help or perhaps they can go around and dig up a few examples communally first.

When the groups have finished, invite each group to explain their notes to the whole group.

Allow the participants to add anything that the groups might have missed.

#### GROUP DISCUSSION: DISCUSSION ABOUT DEVELOPMENTAL TASKS

Remember that it is your job to guide caregivers to find their own reasons instead of lecturing them.

Use questions to help guide the discussion. Write the ideas that caregivers suggest on the flipchart.

At the end, hand out the lower part of the Table.

**Facilitate a group discussion about the activity. The following suggestions might be helpful:**

Possible developmental tasks of adolescence:

- Acquisition of school and professional qualifications.
- Developing gender identity and building social bonds with peers.
- Shifting the frame of reference in which young people orient themselves from the family reference system to the peer group. The adolescents become more independent from their families in favor of the orientation towards the peer group.
- Beginning to challenge adult rules (including their values and moral).
- Use of consumer, media and leisure offers.
- Building their own value system, developing their own ideals and set their own course.
- Exploring intimate relationships, including sexual activity.
- Forming their own identity and have a growing sense of their sexuality.
- Developing a healthy attitude towards their own body (and body changes occurring during adolescence).
- Dealing with having mood swings.

Events that are not faced by every young person and are not age-related in their occurrence:

- Critical life events
- Everyday stressors

**The following questions might be helpful:**

- Why do you think is important for you to know which developmental tasks your children and adolescents have to cope with?
- How does this affect the way you parent or discipline your children and adolescents?
- How does this affect the way you relate and communicate to your children and adolescents?



**Possible reasons to understand adolescents’ developmental tasks:**

- You can be patient with your children and adolescents
- Helps you know how to communicate to your children and adolescents
- You can have a better understanding for their behaviour
- You can support your children and adolescents to develop through life
- You can be aware if your children and adolescents are experiencing developmental delays or problems

**GUIDELINES: Facilitating the Collection of Suggestions**

1. One facilitator leads the collection while the other writes notes and comments on the flip chart (or big paper stuck to the wall) to look at later.  
Attention, in separate parts in which only one facilitator leads the discussion, you can ask a participant to support you.
2. Facilitators can ask participants for the description of developmental tasks more detailed or around specific issues like arriving on time, cell phone use, respect, etc.
3. Make sure everyone in the group understands. For example, if someone mentions self-confidence, ask what that means to her/him. What sort of behaviour shows self-confidence? Does everyone agree? Would someone like to add something?
4. Give participants a chance to debate and discuss what a “self-image” could be. For example: Someone might suggest “It is important to accept your Self/body image”. You may want to talk about “What counts as “accept”?”, “Should we love us or can we just accept ourselves?”

**Table 2b – Stages of child development (early and late adolescence) with developmental tasks**

<p><b>Early adolescence (10-12/14 years)</b></p>		<ul style="list-style-type: none"> <li>• Beginning to challenge adult rules.</li> <li>• Often insecure and confused.</li> <li>• Feelings get hurt easily and have mood swings</li> <li>• Try to be the boss and are unhappy if they lose.</li> <li>• Peers are important and influential</li> <li>• Needs: Some freedom but consistency in rules, affection, reassurance, self-esteem, encouragement to believe in their abilities.</li> </ul>
<p><b>Later adolescence (15-19 years)</b></p>		<ul style="list-style-type: none"> <li>• Your child is almost an adult, he/she is able to communicate with you about almost anything.</li> <li>• He/she can think about new ideas, develop their own ideals and set their own course.</li> <li>• They are forming their own identity and have a growing sense of their sexuality.</li> <li>• They may prefer being with peers more than with caregivers.</li> <li>• They may show risk-taking behaviours, frequent mood swings, and rebellious attitudes</li> <li>• The most important things that caregivers can do in this stage are:             <ul style="list-style-type: none"> <li>- Continue providing love, support and guidance and build a strong caregiver-child connection</li> <li>- Monitor the child’s activities</li> <li>- Nurture the child’s independence</li> </ul> </li> </ul>

		- Encourage child to begin to take responsibility for the future
--	--	--

### 3.2.2.2 CHALLENGES ASSOCIATED WITH CHANGES DURING THE DEVELOPMENTAL STAGE OF ADOLESCENCE

Extend the group discussion to possible challenges that adolescents might have to cope with if these have not yet come up automatically in the group discussion.

Facilitator: It is important to emphasize clearly distinguishing developmental tasks and challenges. There are intersections, but there are also clear differences. It is important that challenges and tasks are collected on different flipchart sheets. Otherwise they will be mixed up and no clear distinction is possible.

The developmental task is set for every healthy teen, but not every child and adolescent is equally exposed to the challenges. Developmental challenges influence the child's and adolescents's ability to deal with the tasks; they are influencing factors that can prevent the child from coping with the tasks in a normative manner.

Ask the caregivers for possible challenges in coping with development tasks. One facilitator leads the collection and writes short notes and comments on the flip chart (or big paper stuck to the wall) to look at later. Make sure to number the notes.

When the collection is finished, display table 3.

**Table 3 - Selection of challenges in adolescence<sup>3</sup>**

Area of Change	Description and Potentially Associated Challenges
<b>Hormones</b>	<p>Secretion of sex hormones cause the development of primary and secondary sexual characteristics.</p> <p>Boys: growth of testicles and penis, pubic hair growth, beard growth, first ejaculation, change in voice</p> <p>Girls: breast growth, maturing of the uterus and ovaries, pubic hair growth, first period</p> <p>Secretion of growth hormones cause growth spurts. The development of the internal organs lags behind physical growth. This can lead to fatigue or cardiovascular problems. In the further course of the development, the internal organs then also adapt to the new body. Bodily changes precede psychosocial development.</p>
<b>Self/body image</b>	<p>A specific aspect of self-image that plays an important role in adolescence is body image. The physical changes that take place during puberty have to be accepted, which is also closely related to accepting one's gender role and dealing with one's own sexuality.</p>
<b>Sleep</b>	<p>Changes in the circadian rhythm can lead to lack of sleep. This can lead to a lower attention span and learning performances, but also a reduced emotion regulation with a stronger dependence on rewards and reduced behavioral inhibition. This can encourage risky and addictive behavior.</p>
<b>Gender strategies</b>	<p>Female adolescents increasingly report looking for social support and problem-centered coping, whereas male adolescents report cognitive avoidance strategies (especially in socially demanding situations).</p>
<b>Individual Differences</b>	<p>Individual differences in puberty are caused by genetics but are also connected to population groups. Healthy eating habits and psychological wellbeing are also important topics in adolescent development as may be climate change.</p>

After the table has been discussed, hand out the HANDOUT – DEVELOPMENT OF SEXUAL CHARACTERISTICS.

### 3.2.2.3 FACILITATOR'S SUMMARY: PARENTING CONSIDERING THE DEVELOPMENTAL CHALLENGES OF ADOLESCENTS

*Adolescents can get under a lot of pressure through growing up. Speed of development in physical aspects, emotions, moral aspects can be different. In addition, there are often changing expectations of the environment or society of the young people. That can create a field of tension which is sometimes overwhelming for the teens.*

*Recommended is a parenting style characterized by a high degree of warmth and responsiveness with clear rules and requirements for children and adolescents to behave competently. Being informed about your teens life is not so much a matter of extreme close supervision and more so, the result of establishing a close trustful relationship that allows teens to communicate their experiences openly.*

*Have you got any questions left?*

Facilitators should make space for questions at regular intervals and should model these questions in

<sup>3</sup>Based on and adapted from Delfos et al., 2009; Konrad & König, 2018

order to normalize the enquiry process: *“One question I had when I was first learning about this was...”*

### **3.2.3 TEENS PART (SEPARATE)**

#### 3.2.3.1 DEVELOPMENTAL STAGES AND TASKS DURING ADOLESCENCE

*Adolescence is defined as between the ages of 11-20. The phase of adolescence is distinguished from childhood because many developments and changes take place at the onset of adolescence.*

*Three stages can be distinguished in adolescence.*

*Early adolescence (approx. 10-12/13 years), middle adolescence covers the period between 14/15-17 years, while late adolescence is characterized by the direct transition to young adulthood (16-20 years).*

*The three stages are considered separately because the developmental tasks of the young people in each stage differ from each other.*

*A developmental task is a task believed to be mastered at a specific developmental stage of life for everyone in this stage (in this case during adolescence) and how successful this task is completed is related to healthy adjustment. These tasks may relate to physical skills, emotional adjustment, intellectual advancement, or social relationships. They may also refer to attitudes toward the self and the body, or the formation of standards and values.*

The teens should understand that changes are normal and that these don't all happen to the same people at the same time. With development being different but for everyone at some time during this phase, teens may be self-conscious to discuss their development (one reason why we separate caregivers and teens). As facilitator please consider the importance of separating the groups according to gender if suitable. Finally, it is very important to also set boundaries around talking about bodies. You may support teenagers in perceiving and expressing e.g. setting their boundaries.

#### GROUP ACTIVITY: EXPLORING DEVELOPMENTAL TASKS

Divide teens into groups of 3-4 people.

Give each group a piece of flipchart paper and pens.

Ask them to collect developmental tasks of adolescents.

The teens should number the individual developmental tasks as they write them down so that it is easier to compare them later.

When the groups have finished, invite each group to explain their notes to the whole group.

Allow the participants to add anything that the groups might have missed.

#### GROUP DISCUSSION: DISCUSSION ABOUT DEVELOPMENTAL TASKS

Remember that it is your job to guide the teens to find their own reasons instead of lecturing them.

Use questions to help guide the discussion. Write the ideas that teens suggest on the flipchart.

**Facilitate a group discussion about the activity. The following suggestions might be helpful:**

Possible developmental tasks of adolescents:

- Acquisition of school and professional qualifications.
- Developing gender identity and building social bonds with peers.
- Shifting the frame of reference in which young people orient themselves from the family reference system to the peer group. The adolescents become more independent from their families in favor of the orientation towards the peer group.
- Beginning to challenge adult rules.
- Use of consumer, media and leisure offers.
- Building their own value system, developing their own ideals and set their own course.

- Exploring intimate relationships, including sexual activity
- Forming their own identity and have a growing sense of their sexuality.
- Developing a healthy attitude towards their own body (and body changes occurring during adolescence)
- Dealing with having mood swings.

Events that are not faced by every young person and are in their occurrence not age-related:

- Critical life events
- Everyday stressors

**The following questions might be helpful:**

- Why do you think it is important for us to know which developmental tasks adolescents have to cope with?
- Have you already experienced some of these (or others) developmental tasks yourself?
- How does this might affect the way your caregivers interact with you?
- How does this affect the way how you communicate to your caregivers?


**Possible reasons to understand your own developmental tasks:**


- You can have a better understanding for your behaviour
- You are able to ask your caregivers for support in a more targeted manner
- You are able to classify your own changes better
- Helps us know that it is normal to deal with some challenges

**GUIDELINES: Facilitating the Collection of Suggestions**

1. One facilitator leads the collection. Either he/she takes notes him-/herself on what the teens say on the flip chart (or big paper stuck to the wall) to look at later or he/she asks a teenager to support him.
2. Facilitators can ask participants for the description of developmental tasks more detailed or around specific issues like arriving on time, cell phone use, respect, etc.
3. Make sure everyone in the group understands. For example, if someone mentions self-concept, ask what that means to her/him. What sort of behaviour shows self-confidence? Does everyone agree? Would someone like to add something?
4. Give participants a chance to debate and discuss what a “self-image” could be. For example: Someone might suggest “It is important to accept your Self/body image”. You may want to talk about “What counts as “accept”?”, “Should we love us or can we just accept ourselves?”

**Table 2b – Stages of child development (early and late adolescence) with developmental tasks**

<p><b>Early adolescence (10-12/14 years)</b></p>		<ul style="list-style-type: none"> <li>• Beginning to challenge adult rules.</li> <li>• Often insecure and confused.</li> <li>• Feelings get hurt easily and have mood swings</li> <li>• Try to be the boss and are unhappy if they lose.</li> <li>• Peers are important and influential</li> <li>• Needs: Some freedom but consistency in rules, affection, reassurance, self-esteem, encouragement to believe in their abilities.</li> </ul>
--	---	--

<p style="text-align: center;"><b>Later          adolescence          (15-19 years)</b></p>		<ul style="list-style-type: none"> <li>• Your child is almost an adult, he/she is able to communicate with you about almost anything.</li> <li>• He/she can think about new ideas, develop their own ideals and set their own course.</li> <li>• They are forming their own identity and have a growing sense of their sexuality.</li> <li>• They may prefer being with peers more than with caregivers.</li> <li>• They may show risk-taking behaviours, frequent mood swings, and rebellious attitudes</li> <li>• The most important things that caregivers can do in this stage are:             <ul style="list-style-type: none"> <li>- Continue providing love, support and guidance and build a strong caregiver-child connection</li> <li>- Monitor the child’s activities</li> <li>- Nurture the child’s independence</li> <li>- Encourage child to begin to take responsibility for the future</li> </ul> </li> </ul>
---	---	---

### 3.2.3.2 CHALLENGES ASSOCIATED WITH CHANGES DURING THE DEVELOPMENTAL STAGE OF ADOLESCENCE

Extend the group discussion to possible challenges, they might have to cope with.  
 Leave the teens in groups.

Facilitator: It is important to emphasize clearly distinguishing developmental tasks and challenges. There are intersections, but there are also clear differences. It is important that challenges and tasks are collected on different flipchart sheets. Otherwise they will be mixed up and no clear distinction is possible.

The developmental task is set for every healthy teen, but not every child and adolescent is equally exposed to the challenges. Developmental challenges influence the child's and adolescents's ability to deal with the tasks; they are influencing factors that can prevent the child from coping with the tasks in a normative manner.

Ask them for possible challenges in coping with their development tasks. One facilitator leads the collection and writes notes and comments on the flip chart (or big paper stuck to the wall) to look at later.

When the collection is finished, display table 3.

**Table 3 - Selection of challenges in adolescence**

Area of Change	Description and Potentially Associated Challenges
<b>Hormones</b>	<p>Secretion of sex hormones cause the development of primary and secondary sexual characteristics.</p> <p>Boys: growth of testicles and penis, pubic hair growth, beard growth, first ejaculation, change in voice</p> <p>Girls: breast growth, maturing of the uterus and ovaries, pubic hair growth, first period</p> <p>Secretion of growth hormones cause growth spurts. The development of the internal organs lags behind physical growth. This can lead to fatigue or cardiovascular problems. In the further course of the development, the internal organs then also adapt to the new body. Bodily changes precede psychosocial development.</p>
<b>Self/body image</b>	<p>A specific aspect of self-image that plays an important role in adolescence is body image. The physical changes that take place during puberty have to be accepted, which is also closely related to accepting one's gender role and dealing with one's own sexuality.</p>
<b>Sleep</b>	<p>Changes in the circadian rhythm can lead to lack of sleep. This can lead to a lower attention span and learning performances, but also a reduced emotion regulation with a stronger dependence on rewards and reduced behavioral inhibition. This can encourage risky and addictive behavior.</p>
<b>Gender strategies</b>	<p>Female adolescents increasingly report looking for social support and problem-centered coping, whereas male adolescents report cognitive avoidance strategies (especially in socially demanding situations).</p>
<b>Individual Differences</b>	<p>Individual differences in puberty are caused by genetics but are also connected to population groups. Healthy eating habits and psychological wellbeing are also important topics in adolescent development as may be climate change.</p>

**3.2.3.3 FACILITATOR'S SUMMARY: PARENTING CONSIDERING THE DEVELOPMENTAL CHALLENGES OF ADOLESCENTS**

Explain to the group, that the asynchronous development of individual areas (e.g. physical, emotional, moral) creates a field of tension, that is often intensified by the changed expectations of the environment or society of young people.

*In summary it is important for everyone to have space to express their personality and interests. This is equally relevant for adolescents and should be done in a collaborative process with the adolescent. Recommended is a parenting style characterized by a high degree of warmth and responsiveness with clear rules and requirements for adolescents. Your caregivers' interest and their questions about your life is not so much a matter of extreme close supervision and more so, the result of establishing a close trustful relationship that allows you to communicate your experiences openly and have valuable exchange with your caregivers.*

*Have you got any questions left?*

**GROUP COMES BACK TOGETHER**

As a facilitator you should acknowledge that the groups have had related but separate conversations, and why. Hang up the posters with the collected notes in the large group for everyone to see. If required to make it comfortable going forward invite some discussion.

Questions following group work:

- Is there anything that surprises you positively when you look at the list?

Questions for caregivers:

- What surprises you about the results of your children and adolescents?

Questions for teens:

- When you look at the caregivers’ chart, is there anything that makes you wonder about your caregivers or makes you proud?
- Does anyone think something like: Oh, my mother knows about my challenges, she understands me?

Facilitator should emphasize...

... that caregivers and their help are important for young people to overcome challenges.

... positive aspects of the points made, e.g. positive emotions that were mentioned. Emphasis on caregivers’ pride in their children.

... on strengthening factors of children's self-confidence (e.g. parents are proud of children, which can promote children's self-confidence).

Building Block: As a caregiver, you can help your children to cope with many of the challenges and in crises. You will learn how this can be done in the following sessions. You learn strategies and methods. The main learning effect is that **you can support your children and adolescents**. Caregivers can support children and adolescents in their autonomy and help them exploring safely.

#### 4. SESSION CLOSE

##### 4.1 PREPARING FOR HOME ACTIVITY

Each week, participants are encouraged to practice at home what they have learned during the session. Facilitators will review what the home activity is at the end of every session.

**GUIDELINES: Facilitating Home Activity**

1. Set practical goals with participants about when, where, and what they will be doing for their home activity.
2. Facilitators should ask the participants the following questions ahead of home activity:
  - What time? Where in the house or outside?
  - How can you do it without too much distraction?
  - Why might the TV make it difficult for everybody to participate (concentration skills)?

At the beginning of each new session, participants will share their experiences doing the home activity. These discussions will be an opportunity to share what went well, talk about how home activity is connected to the core principles, and problem-solve ways of dealing with challenges that participants faced at home. When challenges are being discussed, participants will be encouraged to come up with solutions and support them in trying them out in role-play or something



else. Always give big praise and applause to everyone brave enough to stand up and act.

#### HOME ACTIVITY EXERCISE FOR THE WEEK:

Before the end of the session, make sure you remember to assign Home Activities.

**Building Block: It is what you do at home that makes the difference!**

1. Encourage caregivers and teens to do their physical exercises we introduced at the beginning of the session or they can use the simple physical exercise which is part of the handout they will use at home!
2. Caregivers and teens should review their goals that they set during the pre-group session home visit. They should also share these goals with their other family members. Take a moment either here or previously to acknowledge that if the entire family is not present, the group may want to strategies on how to share information and experiences with others in the household, and why this might be important.

#### 4.2 REVIEW TOPICS COVERED

Facilitators reflect with group on today’s session to summarize learning:

*Which topics and core principles did we talk about today?*

Possible answers from participants include:

- We built ground rules which are useful for helping us to run these sessions.
- Thinking about developmental stages helps us to ....
  - ... to have realistic expectations for children.
  - ... to be patient with children and adolescents as they learn new skills.
- Understanding developmental tasks of teens and knowing their possible challenges can lead to healthy relationships and long-term achievement in life, because ...
  - ... we can communicate to children and adolescents in a proper way.
  - ... we can approach children and adolescents at their level and go at their pace.
  - ... we can support children and adolescents to develop through life.
  - ... we can be aware if children and adolescents are experiencing developmental delays or problems that might need extra support.
- Recommended is a parenting style characterized by a high degree of warmth and responsiveness with clear rules and requirements for children and adolescents.
- Caregivers’ interest and questions about the life of adolescents is not so much a matter of extreme close supervision and more so, the result of establishing a close trustful relationship that allows them to communicate experiences openly and have valuable exchange.

Facilitators ensure to draw out all important points of today’s session from participant responses by asking follow-up questions as needed.

#### 4.3 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY

Facilitators tell participants that in the next session they will talk about building a positive relationship whilst spending quality time together. Remind participants to do their home activity. **Building Block: It is what you do at home that makes the difference!** Facilitators tell participants about time and location of next session.

#### 4.4 THANK AND PRAISE PARTICIPANTS & CLOSE

You may introduce the family handbook. The handbook reminds parents and teens of the activities, illustrated stories, and core building blocks during the session

**GUIDELINES: Handouts**

As a facilitator, please remember to hand out the handouts at the appropriate point in the session or all of them at the end of the session! This helps to minimize the workload of the facilitators. If the handouts are forgotten/not handed out in a session, they can also be handed out later by e-mail or at the beginning of the next session.

This reminder will only be given once, now at the beginning of the training, please make a reminder note yourself if you need it.

ILLUSTRATION – STRETCHING YOUR BODY


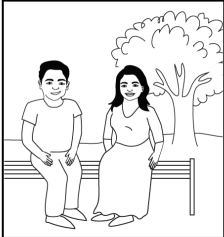


Stretch arms straight up as if you want to touch the sky  
(4 deep breaths).  
Stretch up into your left and right sides  
(4 deep breaths).



Raise your arms above your head breathing in.  
Slowly allow your hands to float down by your side as you breathe out.

HANDOUT – STAGES OF CHILD DEVELOPMENT (EARLY & LATE ADOLESCENCE)<sup>4</sup>

<p><b>Early adolescence (10-12/14 years)</b></p>		<ul style="list-style-type: none"> <li>• Beginning to challenge adult rules.</li> <li>• Often insecure and confused.</li> <li>• Feelings get hurt easily and have mood swings</li> <li>• Try to be the boss and are unhappy if they lose.</li> <li>• Peers are important and influential</li> <li>• Needs: Some freedom but consistency in rules, affection, reassurance, self-esteem, encouragement to believe in their abilities.</li> </ul>
<p><b>Later adolescence (15-19 years)</b></p>		<ul style="list-style-type: none"> <li>• Your child is almost an adult, he/she is able to communicate with you about almost anything.</li> <li>• He/she can think about new ideas, develop their own ideals and set their own course.</li> <li>• They are forming their own identity and have a growing sense of their sexuality.</li> <li>• They may prefer being with peers more than with caregivers.</li> <li>• They may show risk-taking behaviours, frequent mood swings, and rebellious attitudes</li> <li>• The most important things that caregivers can do in this stage are:             <ul style="list-style-type: none"> <li>- Continue providing love, support and guidance and build a strong caregiver-child connection</li> <li>- Monitor the child’s activities</li> <li>- Nurture the child’s independence</li> <li>- Encourage child to begin to take responsibility for the future</li> </ul> </li> </ul>

<sup>4</sup> Naungan Kasih Positive Parenting Program (“Protecting through Love” in Bahasa Melayu) was developed for Malaysia and is based on Parenting for Lifelong Health (PLH). PLH is a charitable organization based in the United Kingdom that developed content for this Malaysian version of PLH.

HANDOUT – DEVELOPMENT OF SEXUAL CHARACTERISTICS

At the age of about seven years, an intensive phase with increased hormone production sets in. This affects, among other things, the growth hormone, the special hormones for regulating the growth of the sex glands and the production of androgens: the 'male' sex hormone testosterone and the 'female' estrogen. It will take about five more years before the effects of this process become clearly visible, starting around the age of twelve during puberty.

The order of development of sexual characteristics **in boys** is fairly constant.

1. The testicles and scrotum grow first.
2. After that comes the pubic hair.
3. Growth, growth spurt and penis growth usually occur a year later.
4. Beard and armpit hair usually appear late in puberty.

The timing of the first ejaculation is not clear. Some speak of an age of around fourteen, a year after the onset of penis growth, others of an average age of twelve. An effusion without semen - emission - can take place much earlier, in exceptional cases it is possible from the age of eight.

According to research, increases in testosterone are associated with increases in sexual and romantic fantasies, as well as behaviors such as infatuation, wet dreams, and masturbation.

Another consequence of the 'male' hormone is the deepening of the voice.

**In girls**, there is less of a fixed sequence of development. Breast growth usually occurs before the growth spurt begins. The first menstruation occurs later in puberty, between the ages of thirteen and fifteen. Being overweight increases the risk of premature menarche. After menstruation, it usually takes another one to two years until the girl is sexually mature.

Boys are biologically adult around the age of sixteen, girls at fifteen.

**Table 3 - Selection of challenges in adolescence**

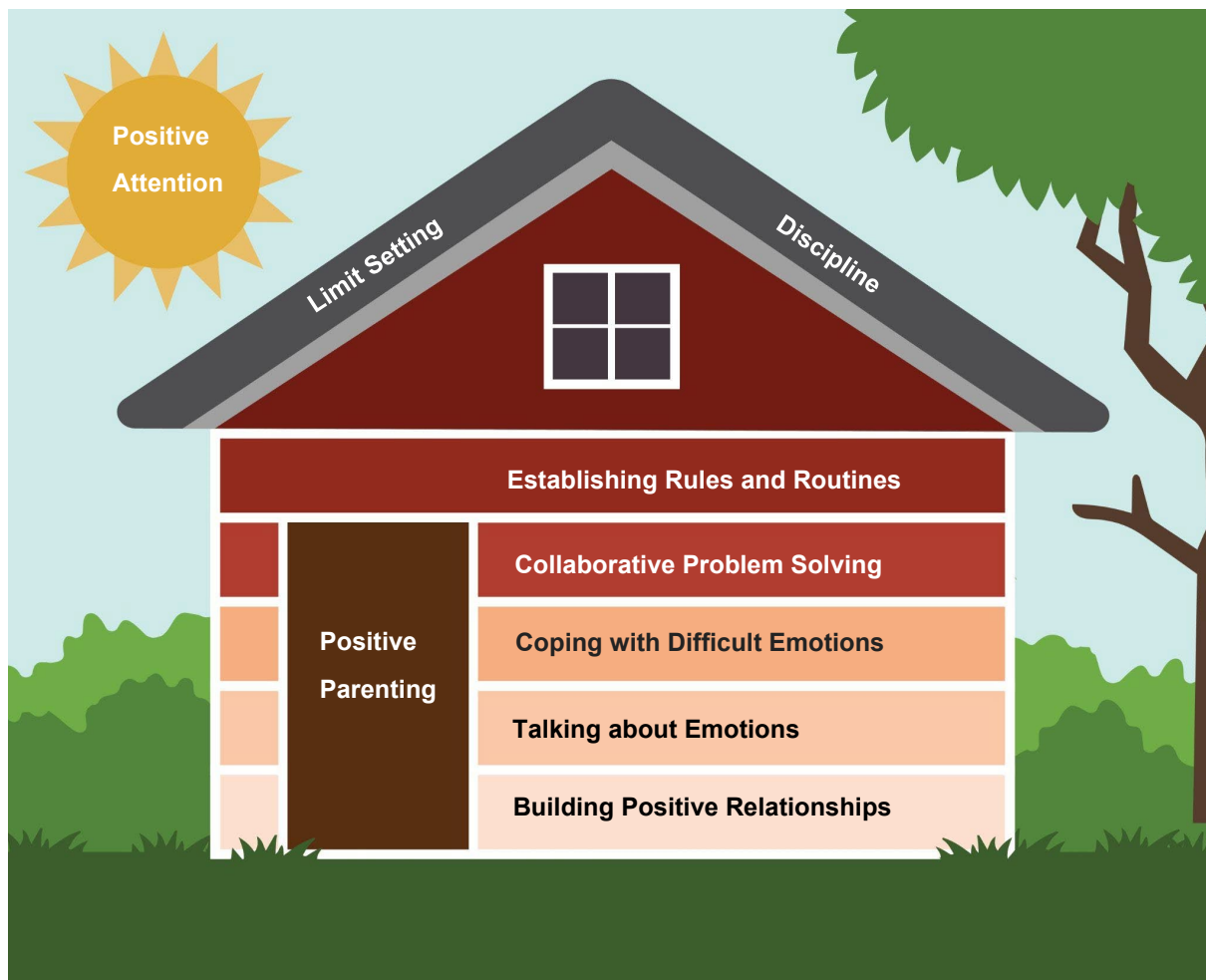
Area of Change	Description and Potentially Associated Challenges
<b>Hormones</b>	Secretion of sex hormones cause the development of primary and secondary sexual characteristics. Boys: growth of testicles and penis, pubic hair growth, beard growth, first ejaculation, change in voice Girls: breast growth, maturing of the uterus and ovaries, pubic hair growth, first period Secretion of growth hormones cause growth spurts. The development of the internal organs lags behind physical growth. This can lead to fatigue or cardiovascular problems. In the further course of the development, the internal organs then also adapt to the new body. Bodily changes precede psychosocial development.
<b>Self/body image</b>	A specific aspect of self-image that plays an important role in adolescence is body image. The physical changes that take place during puberty have to be accepted, which is also closely related to accepting one's gender role and dealing with one's own sexuality.
<b>Sleep</b>	Changes in the circadian rhythm can lead to lack of sleep. This can lead to a lower attention span and learning performances, but also a reduced emotion regulation with a stronger dependence on rewards and reduced behavioral inhibition. This can encourage risky and addictive behavior.
<b>Gender strategies</b>	Female adolescents increasingly report looking for social support and problem-centered coping, whereas male adolescents report cognitive avoidance strategies (especially in socially demanding situations).
<b>Individual Differences</b>	Individual differences in puberty are caused by genetics but are also connected to population groups. Healthy eating habits and psychological wellbeing are also important topics in adolescent development as may be climate change.

Information are taken from:

Delfos, M. F., Kiefer, V., & Delfos, M. F. (2009). „Wie meinst du das?": Gesprächsführung mit Jugendlichen; [13–18 Jahre] (3. Aufl). Beltz.

Konrad, K., & König, J. (2018). Biopsychologische Veränderungen. In A. Lohaus (Hrsg.), *Entwicklungspsychologie des Jugendalters* (S. 1–21). Springer Berlin Heidelberg. [https://doi.org/10.1007/978-3-662-55792-1\\_1](https://doi.org/10.1007/978-3-662-55792-1_1)

ILLUSTRATION – HOUSE OF SUPPORT



## PLH – FLOURISH PROGRAMME

### HOME CATCH-UP

**Caregiver's Name**

**Teenager's Name**

**Date**

**Group**

**Facilitator's Name**

### SESSION 1: INTRODUCING THE PROGRAMME & ESTABLISHING RULES

**Goal:** Introduce the programme and make ground rules and goals with participants

**Overview:** In PLH – FLOURISH we want to build a house of support with strong walls to support the roof to keep everybody sheltered.

Facilitators are partners who work with participants to make plans and practice solutions to help make life at home better and less stressful. Facilitators will not be providing answers!

Participants are experts in their own lives! During PLH - FLOURISH we share our expert knowledge and solve problems together.

**Illustration: Exercise**

Stretching your body: We try to exercise every day to warm our bodies up, take away stress and make us feel good. We also regularly do emotional check-ins and check-outs.

**Core Lesson:**

- Ground rules help us to work together, both in sessions and in our homes. Discuss ground rules that were agreed during the session. Do you agree or disagree with these rules?
- What makes our relationships healthy and supportive, and what can make our relationships unhealthy and stressful?
- Review caregiver/teen goals for the programme.
- Review changes occurring in the developmental stage for the age of the individual teen
- Make a name tag to wear to the next session.

**Home activity:** We practice at home what we learnt during the session. This helps us remember. At the beginning of each session, we discuss how home activity went to try to understand what worked and find solutions for things that were difficult.

Think about what you want to get out of the PLH – FLOURISH programme for you and your family? Share this goal with your other family members.

Attending sessions can be difficult. Is there anything we can do to help you attend sessions? It is important to have a non-blaming attitude about attendance!

Did any other members of the household participate in this home catch-up? Who?

## SESSION 2: BUILDING A POSITIVE RELATIONSHIP THROUGH SPENDING TIME TOGETHER

### Table of content

PART 1 INTRODUCTION FOR FACILITATORS.....	73
1. WELCOME & SESSION PREPARATIONS.....	74
1.1 FACILITATORS TAKE ATTENDANCE.....	74
1.2 WELCOME PARTICIPANTS & CIRCLE SHARE .....	74
1.3 THANK EVERYONE FOR COMING AND PRAISE FOR TIMEKEEPING .....	75
1.4 HOME ACTIVITY DISCUSSION .....	75
2. SESSION OVERVIEW FOR THE DAY.....	77
2.1 FRAMING THE DAY: INTRODUCING THE PROGRAMME & SESSION.....	77
2.2 PHYSICAL EXERCISE.....	78
2.3 GAME.....	78
TRUST GAME: PAIR TASK .....	78
TRUST GAME: DISCUSSION .....	78
PART 2 .....	79
3. CORE LESSON.....	79
3.1 WHAT IS SPENDING QUALITY TIME AND PRAISE?.....	79
3.2 ROLE-PLAY .....	81
ROLE PLAY: IGNORING THE GOOD.....	81
3.3 DISCUSSION ABOUT ROLE-PLAY .....	82
3.4 ACTIVITY: PRAISING EACH OTHER .....	82
3.5 DISCUSSION ABOUT ACTIVITY .....	82
4. SESSION CLOSE .....	82
4.1 PREPARING FOR HOME ACTIVITY.....	82
4.2 HOME ACTIVITY .....	83
4.3 REVIEW TOPICS COVERED .....	83
4.4 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY.....	83
4.5 THANK AND PRAISE PARTICIPANTS.....	84
ILLUSTRATION FOR SESSION 2.....	85
PLH - FLOURISH PROGRAMME .....	86



Legend

- **GUIDELINE**-Boxes indicate important information that should definitely be considered!
- *Green cursive font marks passages of text are examples of text passages to illustrate how key messages can be delivered. They only serve as demonstration to facilitate your own wording which is preferred.*
- Normal upright writing marks content that can only be reproduced in the general sense

**PART 1 INTRODUCTION FOR FACILITATORS**

The focus of this week’s session is on

- a) building a positive relationship while spending time with each other
- b) understanding the benefits of praise and practice ways of praising.

In this session your main goals as a facilitator will be to engage participants on:

- Spending time together to get to know each other
- Establishing trust
- Listening to each other carefully
- Praise will increase the behaviour that you are praising.
- Giving praise right after good behaviour makes praise more effective!
- Try to give specific praise

**Table 1 - SESSION 2 PREPARATIONS & OUTLINE**

Goal of the session	<p>The goals of the session are</p> <ul style="list-style-type: none"> <li>➤ To introduce the participants to the concept of spending quality time together. Quality time = special attention to your family.</li> <li>➤ To encourage caregivers to praise their child and to share some of the benefits of structured praise.</li> </ul>
Core Principles	<ul style="list-style-type: none"> <li>➤ Spending time makes us get to know each other better.</li> <li>➤ Spending time provides us an opportunity to communicate to each other our needs and wants.</li> <li>➤ Spending time strengthens the bond between a caregiver and child.</li> <li>➤ Spending time helps us pay attention to each other’s interest.</li> <li>➤ Praise helps to build positive relationships.</li> <li>➤ Praise encourages the behaviour you want to see.</li> <li>➤ The positive behaviours you praise will happen more often.</li> <li>➤ Praise helps to boost a teenager’s self-confidence and sense of responsibility.</li> </ul>
Training materials & resources	<ul style="list-style-type: none"> <li>➤ Flip chart, paper, pens, markers</li> <li>➤ Attendance register</li> <li>➤ Name tag materials</li> <li>➤ Printed copies of Session Illustration “Quality time and notice the good”</li> </ul>

Venue Preparations:	<ul style="list-style-type: none"> <li>➤ Make sure that the workshop venue is clean.</li> <li>➤ Set up chairs where the participants will sit in a circle.</li> <li>➤ Prepare all the materials that you will use during the group session.</li> </ul>
---------------------	--

COMPONENT	TIME	ACTIVITIES
Welcome & Session Preparation	40 mins	<ul style="list-style-type: none"> <li>➤ Facilitators take attendance.</li> <li>➤ Participants settle down &amp; do their name tags.</li> <li>➤ Welcome, thank everyone for coming and praise time keeping.</li> <li>➤ Home activity discussion.</li> </ul>
Session overview for the day	15 mins	<ul style="list-style-type: none"> <li>➤ Framing the day</li> <li>➤ Physical exercise</li> <li>➤ Trust Game</li> </ul>
Core Lesson	55 mins	<ul style="list-style-type: none"> <li>➤ Discussion: What is spending quality time and praise?</li> <li>➤ Role-play: Ignore the good.</li> <li>➤ Discussion about role-play.</li> </ul>
Session Close	10 mins	<ul style="list-style-type: none"> <li>➤ New home activity for the week                             <ul style="list-style-type: none"> <li>• Spend 15 minutes' quality time together, therefor think of an activity to do together.</li> <li>• Practice giving each other structured praise once a day.</li> </ul> </li> <li>➤ Today's session review</li> <li>➤ Reminder of next session date and thank &amp; close</li> <li>➤ Make sure you leave the room in order</li> <li>➤ Share your observations in facilitator report</li> </ul>
Total sum of minutes		120 mins

## 1. WELCOME & SESSION PREPARATIONS

### 1.1 FACILITATORS TAKE ATTENDANCE

As participants arrive, invite them to sit down. Remember to take attendance as each new person arrives.

### 1.2 WELCOME PARTICIPANTS & CIRCLE SHARE

At the beginning of the session, invite the participants to go around the circle and share how they are feeling today. *Can you do this in one word?*

**GUIDELINES: Facilitating Circle Share**

1. Facilitators start the circle share with themselves, using one word to describe how they feel.
2. Move around the circle, giving participants a chance to say one word about how they feel.
3. Remember to praise and thank participants for sharing – especially at the beginning when this is new.
4. It is fine if participants do not want to share, simply move on to the next person.



**Try taking 5-10 minutes to use circle share at the beginning of each new session so that participants can get a chance to practice sharing emotions. Remember that facilitators should model this process too!**

**1.3 THANK EVERYONE FOR COMING AND PRAISE FOR TIMEKEEPING**

Remember you want to model positive behaviour – including providing praise!

**1.4 HOME ACTIVITY DISCUSSION**

Guide a discussion about the previous week's home activity. As a reminder, last week participants were asked to review and share their goals.

**GUIDELINES: HOME ACTIVITY DISCUSSION**

1. During the homework discussion, the groups should not be separated under any circumstances, even if the caregivers might monologue. The connection between caregivers and teens should be strengthened. If a caregiver monologue, this can be reported back as an observation: "I find it quite interesting that you talk all the time, maybe it would be interesting to hear what your child wants to say."
2. Limit discussion to 35 minutes. If a person/family reports too much, they should be kindly interrupted. How should this work? You can say:
  - "This is really interesting, we will continue this later. If someone else also has an interesting point to report, they can link to it."
  - If caregivers get too detailed: "Oh that's an interesting idea, we'll put that idea in the idea box (set up a symbolic idea box to collect talking points that there is no time for at that particular point when the caregivers bring them up) and come back to it at a later time if their point is still important then."
  - If caregivers report something that does not fit / belong to the topic at all, you politely thank them for their contribution and move on: "If we have time, we can come back to this later".
  - Another possibility is to refer caregivers to counselling centers if the topic does not fit the programme at all.
3. When discussing homework, it is important not only to talk about homework, but also to practice overcoming challenges or reported difficulties in the plenary session. Practicing together should be done directly.



These tips are not repeated in the following sessions, but they remain valid.

Home activity discussions are opportunities to share successes, reinforce core principles, and problem solve ways of overcoming challenges:

- Brainstorm solutions with participants
- Practice applying the solution.
- Evaluate how it worked

**GUIDELINES: Guide a Discussion**

When challenges are being discussed, try to encourage the participants to come up with solutions and support them in trying them.

Always give big praise and applause to everyone brave enough to share.

As this is the first home activity discussion, here are some possible questions to get the discussion going:

You can use Who? What? Where? Why? When? How? during every discussion.

- WHO? Who was able to review their goals and share them with other family members?
- WHAT? What goals did you share?
- WHERE? Where did you talk about your goals?
- WHY? Why was it important to share and talk about your goals?
- WHEN? When did you talk about your goals?
- HOW? How did you feel reviewing and sharing your goals?

**Feel free to ask follow-up questions!**

**Ask targeted questions with the goal of drawing out building blocks!**

## 2. SESSION OVERVIEW FOR THE DAY

### 2.1 FRAMING THE DAY: INTRODUCING THE PROGRAMME & SESSION

In this session, we help participants discover that trust is essential to building positive relationships. Trust can grow by spending quality time with each other. We focus on four main points:

1. Spend time focusing on each other
2. Make time to listen to each other
3. Don't criticize
4. Praise the good things you see in each other

In this session, you will introduce caregivers and teens to two very important skills - spending quality time together and praise.

Due to various demands that caregivers and teenagers encounter daily – such as school and work, it can be challenging sometimes to find time to spend time together. A strong caregiver-child relationship is not possible without spending dedicated time together.

*Spending time creates space for you, as a caregiver, to be more available to your children and adolescents and more involved in their life - protecting them from unhealthy or unsafe behaviours and situations.*

*As a caregiver, having a strong connection with your child is important. Teenagers do their best when they have a solid and healthy relationship with their caregiver(s). Positive communication plays an important role in establishing a warm relationship. Speaking to your teenager in a positive and encouraging way makes them to develop confidence and feel good about themselves.*

*When spoken to in a harmful way, teenagers feel bad about themselves and about others around them.*

*When the foundation is right a caregiver is able to communicate with their child about a number of issues. Even sensitive issues (drinking alcohol, smoking or making decisions about intimate relationships) are better talked about when the relationship is healthy.*

*For teenagers, benefits equally accrue from a healthy relationship with their caregivers. A healthy relationship makes it possible to understand the caregivers' point of view and experiences, to solve problems together with the caregivers and to enjoy sharing the things and ideas that interest them or make them curious.*

## 2.2 PHYSICAL EXERCISE

Encourage participants to do their physical exercises once a day! Lead them through the head-to-toe stretch that we introduced in the first session.

*Did anybody try this exercise at home?*

If anybody did/do this at home then now is a good moment to ask if they would like to lead the group. This helps establish the collaborative culture of the group as it gives the ‘leadership’ role to another caregiver – or teen.

Remind participants to do the exercise together at home every day!

## 2.3 GAME

### TRUST GAME: PAIR TASK

In this game the participants think about how to care for their partner and how to allow oneself to be led.

#### **GUIDELINES: How to facilitate the Trust Game**

1. During exercise, it can be entertaining to have music playing.
2. For the exercise, caregiver-child/teen pairs are to be formed. The children and teenagers should choose their partner, but not their own caregiver. They should choose a stranger. Decide if you would like to play inside or outside.
3. Facilitators show activity with a partner. Show both a secure and insecure ways of leading. The safe style of leadership means leading the partner carefully and calmly, the unsafe style means shaking, making more hectic and restless movements. The person being guided can be led around the room either from the front by the hands or from behind by the shoulders.
4. Ask participants to choose who will go first. That person will be the leader.
5. The leader asks the guided person for permission to touch their shoulders or hands.
6. Ask second person to close his/her eyes and allow him/herself to be led around the room or the space.
7. When the facilitator claps after some time, the leadership style should change from secure to insecure.
8. Finally, the facilitator gives another verbal signal so that the roles of leader and follower switch.

### TRUST GAME: DISCUSSION

Get them to explain the experience of the game first as this enables them to articulate to themselves some of the characteristics of trust.

- *Try to transfer the experience about trust and mutual responsibility in the game to the topic of today's session. What can you learn for dealing with each other?*
- *Why do you think you played this game?*
- *Did you learn anything?*

*This game reminds you about how trust works. It also reminds you that people communicate in lots of ways without using words!*

**Ask targeted questions with the goal of drawing out building blocks (linking trust to building positive relationships in the family!**

Reminder: Last week, building block 1 "Establishing an Understanding of Variations in Child & Adolescent Development" was elaborated. Caregivers, children and adolescents discussed what can and cannot be expected from young people at what age and that age expectations are very variable. This week we will work on the building block "Building Positive Relationships".

Mutual trust is the basis for a good relationship. Trust is necessary in order to want to open up to each other in the first place and thus to be able to talk about sensitive issues. Praise helps to build trust.

PART 2

3. CORE LESSON

3.1 WHAT IS SPENDING QUALITY TIME AND PRAISE?

The Core Lesson focuses on “quality time” and “praise” and begins with a discussion about what “quality time” and “praise” is. Let participants brainstorm both questions separately so that they can focus on exploring distinct concepts before bringing them together. Helpful questions to start a discussion see next page.

For most “quality time” will be a new idea – including facilitators. Ask participants what “quality time” means to them. Write down their ideas!

Quality time:

- FOCUS on each other
- LISTEN to each other
- PRAISE each other for good things
- PRAISE without criticizing

When people spend quality time with each other, they have to listen to each other (even if we do not agree with each other).

*There are lots of ways to spend quality time together. Let’s brainstorm a few:*

**OPTIONAL GUIDELINES: Make It a Pantomime Game!**

Want to make it fun? Instead of saying their activity out loud, caregivers and teens could mime (act) their activity and the other participants can guess the activity.

- It is important to talk about the things that matter to caregivers and their teenagers. Say what is important to you!
- Another good way to support someone is to spend time with them when they are doing something that they enjoy. For example, go to see your teenager’s soccer match!
- But you don’t have to do something special to spend quality time together. You can spend quality time just sitting next to each other. You can spend quality time together whether you are feeling healthy or sick, energetic or tired, strong or weak.

**A few things to keep in mind when you spend “quality time”:**

- When you spend quality time with each other, you don’t have to agree with each other but you do have to listen to each other.
- Communication is very important to build healthy relationships. You need to listen to each other and respect each other’s choices as family members, friends, partners.



Reminder: practical exercise has priority!  
Don't go into too much theoretical detail, favor practice.

*What does it mean to “praise”?*

*Can anybody share any ideas about what they think “structured praise” might be?*

**Structured praise** is one way to show that you like someone’s positive behaviour.

*It is based on the idea that everything you do is more likely to happen again if it is rewarded in some way. Behaviour that is ignored, or not rewarded, is less likely to happen again. It is important to reward teenagers and caregivers when they behave in a way that you would like to see them repeat. When you reward good behaviour with praise, others want to behave that way more often in the future. The way you give praise is also important. You must tell the other person exactly what they have done that has pleased you.*

**Caregivers:**

*You try to praise our teenagers as soon after their good behaviour as possible.*

*With some teenagers, especially teenagers who have behaviour problems, it can be difficult to notice any good behaviour. To begin with, you might have to praise them for small things, such as folding their clothes nicely or playing a game with their little sibling. With some situations that can feel stressful, it can be difficult to try to be positive and give structured praise. Try to start with something really small and manageable, like remembering to take medication every day.*

**Teenagers:**

*Sometimes when you’re really in a bad mood with your caregiver, you only notice the times they are angry with you. But your caregivers do things all the time to help you, like making dinner, or working so that you can afford to go to school or coming with you for an appointment at the clinic. It can be really helpful to notice some of these things and praise them for it. You should also be praising and appreciating things that your caregivers do for you!*

Here are some questions to start the discussion:

- ➔ Facilitators use the Who?, What?, Where?, Why?, When?, How? questions to guide brainstorming.
- WHO? Who should spend time together that feels special? Who should praise?
- WHAT? What activity could caregivers and teenagers do together that would feel special?  
What can you praise about each other?
- WHERE? Where could caregivers and teens spend time together that would be special?
- WHY? Why should caregivers and teens try to spend time together doing something special?  
Why should caregivers and teens praise each other?
- WHEN? When is a good time to spend quality time together? At night? In the morning? On weekends?
- HOW? How can caregivers and teens spend time together in a special way? How can they praise each other?

There are lots of good reasons to spend time with and praise each other.

Here are a few to add to the discussion:

- Improves bonding between caregiver and teenager.
- Builds self-esteem since caregiver/teen feels that they are valuable and loved.
- Builds learning skills and problem-solving.
- Teenagers become more willing to help around the house.
- Caregivers feel like their hard work in the house is more valued.
- Listening carefully to teenagers and valuing their ideas encourages them to think for themselves and take the lead.
- Spending time with each other gives caregivers a chance to learn a lot about their teenager’s interests and what they can do. It also helps caregivers understand how they can support their teens.





**Establishing a safe and supportive environment at home will make kids and teens less likely to engage in unhealthy or unsafe (sexual) behaviours and will help caregivers to have conversations with their teens around difficult topics.**

**BUILDING BLOCKS**

- LISTEN to each other, to what the other is saying and doing (Remember: Listening does not mean agreeing with each other, always LISTEN)
- PRAISE each other for good things (PRAISE without criticizing)

**3.2 ROLE-PLAY**

In Session 2 we introduce **role-plays as an important learning tool** used in the programme. Like storytelling, these role-plays, which we also sometimes call “scenarios”, let **participants see the experiences of other caregivers and teens outside of their own lives.**

Role-plays can also allow participants to be assertive – or active – in the scenarios. This helps participants develop problem-solving skills that they can use in their daily lives. To begin, in this session **facilitators act out** the following role-plays:

**Introducing the Family**

*Today we meet the families that we will follow during the PLH - FLOURISH programme. The first family consists of mama, Tata, their two adolescents, Catalina (17-year-old girl), Radu (15-year-old boy) and the child Axenia (10-year-old girl). We also meet the grandmother Doina (the mother of tata), who is taking care of Stela (16-year girl) and Ion (12-year boy) who are orphans. Stela and Ion are cousins to Catalina and her siblings.*

*Throughout the programme we will be talking and reflecting on their family experiences. In some instances, we will be acting out their family experiences! This will be great fun! Just like our families, these families face many challenges including relational problems that exist between the caregivers and their child and adolescents. It is important to note that the characters in the role plays are fictional.*

**Please inform the participants that the family is not a real family that exists even though common names have been used.**

**ROLE PLAY: IGNORING THE GOOD**

*In this first role-play, we meet mama and her daughters, 17-year-old Catalina and 10-year-old Axenia. Axenia is doing her homework. She is doing her math homework while her sister Catalina is helping her. Mama is busy cooking dinner.*

*Let’s watch and listen to what happens.* Facilitators read the role-play with assigned roles out loud. Remember: Try not to let a caregiver role-play the unfavorable parenting behaviour. Caregivers and teens can play supporting roles or model the favorable parenting behaviour.

Axenia (thinking about a difficult task):	<i>“....add it first.... and then subtract the number ....”</i>
Catalina:	<i>“Axenia! Well done! You calculated the result correctly! Keep doing! The more you practice the better you will get.”</i>
Catalina:	<i>“Mama! Come and see! She’s doing so well!”</i>
<i>Axenia smiles at the idea of her mother coming to see her calculating.</i>	
Mama (doesn’t listen):	<i>“Yes, very good Axenia, but dinner will be ready soon, so I wish you could learn to do your homework quicker. I want to sleep early today. I am tired.”</i>
Catalina:	<i>“But mama, I’m helping Axenia and she is getting so much better. You should come and have a look!”</i>
Mama (getting angry):	<i>“I don’t have time for that – I said I was tired! Now please do as you are told and finish up and come and help serve dinner.”</i>

### 3.3 DISCUSSION ABOUT ROLE-PLAY

Now think about the role-play you just saw, it’s time to discuss. Here are some questions to get you started:

- How does Axenia feel if mama would praise her? How does it affect her math?
- How does Axenia feel when her mother tells her to hurry up?
- How do you think mama telling Axenia to “learn to calculate quicker” affected the praise she first gave to Axenia when she said “Yes, well done”?
- How do you think that mama’s criticism will affect Axenia’s attitude about math in the future?
- What would you suggest they could do differently?

### 3.4 ACTIVITY: PRAISING EACH OTHER

*Think of a time when you were praised – when someone said something good about you. How did it make you feel? What are the benefits of praise?*

Participants should practice praising each other here (using the guidelines below).

**GUIDELINES: Facilitating the Practice of Praising**

- This activity is to take place in the family caregiver-teen pairs.
- First, each person compliments her or his partner. Encourage participants to make eye contact and use the name of the person they are complimenting.
- The compliments can be about anything as long as they are sincere.
- Participants should keep praise specific and enthusiastic.
- Then they should think of activities they can do together.
- Motivate them to think of things that don’t cost any money. Remember to try to encourage the teens to lead!
- Remind them to provide praise!
- The one who receives praise must not interrupt, must not criticize the praise, he only listens and thanks.

### 3.5 DISCUSSION ABOUT ACTIVITY

Here are some questions to get you started:

- How did the praise feel?
- How did it feel to praise someone else?
- Was it difficult to find something to praise about the other person?

Facilitator: Remember, caregivers and children are always in a relationship through their life together, they know many aspects of each other's actions, so that they have many possibilities to develop praise based on each other's actions. Because praise does not refer to something somebody like or dislike, it is not identical to a compliment. You can praise how someone does something even if you don't like the result. E.g. you can praise someone for their conscientious way of putting on make-up even if you don't like the result/make-up visually yourself.

One praises the other person's personal contribution to any result/action.

## 4. SESSION CLOSE

### 4.1 PREPARING FOR HOME ACTIVITY

This activity will help participants get ready for home activity by helping them to think of different activities they can do together to spend quality time during the week.

Each caregiver/teen team should try to think of a few ideas and present these to the group. Facilitators can write down ideas on the flip chart so that participants can see a “bank” of activities to choose from if they are having trouble deciding.

Possible activities could include:

- Doing chores together
- Eating dinner together
- Telling a story
- Walking somewhere together
- playing the teens favorite game together

Finally, each family in turn should decide on an exercise and share it with the group.

This activity should also help warm up participants for second home activity by giving them a chance to practice praising. Focus the home activity preparation first on establishing ways that each dyad can spend time with each other. Then create a quick segue that establishes that quality time is also a good time to practice praising.

#### 4.2 HOME ACTIVITY

**Building Block: It is what you do at home that makes the difference!**

- 1. Spend at least 15 minutes of quality time together during the week. Allow the teen to take the lead in deciding what activity it will be. Caregivers: Make the decision together but try to follow your teen’s lead! If you don’t have time because you have too many chores to do, can you do one of these together, like walking together to the shops? Each day ask about each other’s day and try to listen carefully.*
- 2. Practice giving each other structured praise once a day.*

Remind participants of the skills they learned last week and motivate them to continue training.

*Make it a routine to practice and automate your skills:*

*From Session 1: Complete a physical exercise once a day! You can either use the physical exercise we did at the beginning of the session, or you can invent your own.*

#### 4.3 REVIEW TOPICS COVERED

Facilitators reflect with group on today’s session to summarize learning:

*Which topics and core principles did we talk about today?*

Possible answers from participants include:

- It is important to spend quality time together.
- Spending time together helps to get to know each other and to establish trust.
- It is important to listen to each other carefully when spending quality time together.
  
- Praise will increase the behaviour that you are praising.
- Giving praise right after good behaviour makes praise more effective!
- Try to give specific praise
- Praise should come without criticism

Facilitators ensure to draw out all points above from participant responses by asking follow-up questions as needed.

#### 4.4 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY

*In the next session we talk about ‘Problem Solving’.*

*But before then, remember to do your home activity!*

Facilitators remind participants about time and location of next session.

#### 4.5 THANK AND PRAISE PARTICIPANTS

ILLUSTRATION FOR SESSION 2

Quality time and notice the good! (Positive)



Catalina: That was already very good.  
Now calculate the next task, to practice even more.



Mama: I am very proud of my two daughters.  
Axenia, you are working so hard, I know math is not easy. And thank you very much Catalina for helping your sister so I can cook. You are a big help to me.

## PLH - FLOURISH PROGRAMME

### HOME CATCH-UP

**Caregiver's Name**

**Teenager's Name**

**Date**

**Group**

**Facilitator's Name**

### SESSION 2: BUILDING A POSITIVE RELATIONSHIP THROUGH SPENDING TIME TOGETHER & PRAISING EACH OTHER

**Goals:** 1) Building a positive relationship while spending quality time with each other.  
2) Understand the benefits of praise and practice ways of praising.

**Overview:**

In this session, you find out how trust can grow by spending quality time with each other. When people spend quality time with each other, they have to listen carefully to each other (even if we do not agree with each other).

Quality time:

- FOCUS on each other
- LISTEN to each other
- PRAISE each other for good things
- PRAISE without criticizing

Furthermore, you focus on the importance of positive attention and praise. Positive attention can be when somebody supports or encourages you, like going to your soccer match or encouraging you to complete a difficult task. Praise can be when somebody says something good about something you have done.

**Illustration:** Notice the good! (Positive) In this illustration you see how positive attention is important to building good relationships and encouraging good behaviour.

**Core Lesson:**

Let's discuss "quality time". Think about the illustration:

1. What does it mean to spend "quality time" together? When you spend quality time with each other, you don't have to agree with each other, but you do have to listen to each other.
2. There are lots of good reasons to spend time with each other: Spending time with each other gives caregivers a chance to learn a lot about their teenager's interests and what they can do. It also helps caregivers understand how they can support their teens to be happy, healthy and safe.
3. There are lots of ways to spend quality time together: If you spend time with each other, you might talk about the things that give you stress. Then it is much easier to support each other because you know what is upsetting to the other person.
4. How does Axenia feel when mama praises her? Do you think mama's praise will affect Axenia's reading? Can you think of something you appreciate or like about your caregiver/teen?

Structured praise is one way to show that you like someone's positive behaviour. It is based on the idea that everything you do is more likely to happen again if it is rewarded in some way. Behaviour that is ignored, or not rewarded, is less likely to happen again.

The way you give praise is also important: You must tell the other person exactly what they have done that has pleased us.

Caregivers: You must try to praise out teenagers as soon after their good behaviour as possible. To begin with, you might have to praise them for small things.

Teenagers: You should also be praising and appreciating things that your caregivers do for you!

**Home activity:**

- 1) Spend at least 15 minutes of quality time together. Each day ask about each other's day and try to listen carefully.
- 2) Practice giving each other structured praise once a day.

Make it a routine to practice and automate your skills:

From Session 1: Complete a physical exercise once a day! You can either use the physical exercise we did at the beginning of the programme, or you can invent your own.

**Attending sessions** can be difficult. Is there anything we can do to help you attend sessions? It is important to have a non-blaming attitude about attendance!

Did any other members of the household participate in this Home catch-up? Who?

## SESSION 3: TALKING ABOUT EMOTIONS AND SENSITIVE TOPICS

### Table of content

PART 1: WELCOME AND INTRODUCTION FOR FACILITATORS .....	89
1. WELCOME & SESSION PREPARATIONS.....	90
1.1 FACILITATORS TAKE ATTENDANCE .....	90
1.2 WELCOME PARTICIPANTS & CIRCLE SHARE .....	91
1.3 THANK EVERYONE FOR COMING AND PRAISE FOR TIMEKEEPING .....	91
1.4 HOME ACTIVITY DISCUSSION .....	91
2. SESSION OVERVIEW FOR THE DAY .....	92
2.1 FRAMING THE DAY: INTRODUCING THE PROGRAMME & SESSION .....	92
EMOTIONS (FEELINGS) AND DECISION-MAKING .....	92
2.2 GAME: CONTAGIOUS EMOTIONS.....	93
2.2.1 DISCUSSION .....	93
PART 2 .....	94
3. CORE LESSON: NAMING FEELINGS, TALKING ABOUT EMOTIONS & OTHER SENSITIVE ISSUES ....	94
3.1 ROLE-PLAY: AXENIA’S TEST .....	94
3.2 DISCUSSION ABOUT ROLE-PLAYS .....	94
3.3 DISCUSSION - TALKING ABOUT EMOTIONS.....	95
3.4 ACTIVITY: TAKING A PAUSE .....	96
3.5 SENSITIVE TOPIC: THE EXAMPLE OF RELATIONSHIPS WITH PEERS.....	97
ROLE-PLAY: MY NEW FRIEND .....	98
3.6 CAREGIVERS PART (SEPARATE) .....	99
3.6.1. TALKING ABOUT SENSITIVE TOPICS.....	99
3.6.2. TALKING WITH YOUR TEEN .....	100
3.7 TEENS PART (SEPARATE) .....	101
3.7.1 TALKING ABOUT SENSITIVE TOPICS.....	101
3.7.2 ACTIVITY: MAKE YOUR CHOICE .....	101
3.8 KEY TIPS FOR TALKING ABOUT SENSITIVE ISSUES (SUCH AS BULLYING, ALCOHOL, BODY CHANGES AND INTIMATE RELATIONSHIPS) .....	103
4. SESSION CLOSE .....	103
4.1 HOME ACTIVITY .....	103
4.2 REVIEW TOPICS COVERED .....	104
4.3 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY.....	104
4.4 THANK AND PRAISE PARTICIPANTS .....	104
PLH – FLOURISH PROGRAMME .....	106



LEGEND

- **GUIDELINE**-Boxes indicate important information that should definitely be considered!
- Sentences marked in black always refer to separate group work
- *Green cursive font marks passages of text are examples of text passages to illustrate how key messages can be delivered. They only serve as demonstration to facilitate your own wording which is preferred.*
- Normal upright writing marks content that can only be reproduced in the general sense

PART 1: WELCOME AND INTRODUCTION FOR FACILITATORS

Welcome to the Session 3 of the Parenting for Lifelong Health Programme for Parents and Teens! This session is about emotions, how to identify, name and discuss them and intimate issues and communicating about them.

In this session caregivers and teens will be taught on the following:

- How one can be aware of their own emotions
- Understanding how to react and deal with other people’s emotions.
- How talking about emotions makes us happier and helps us build stronger relationships.
- How using your communication skills is also essential when we need to talk about sensitive topics, like drinking alcohol, smoking, having the first relationship, kissing....

**Table 1 - SESSION 3 PREPARATIONS & OUTLINE**

Goal of the session	The goal of this session is to help caregivers and teens to learn how to be aware of their emotions and express them in a healthy way. Both positive and negative emotional experiences are part of our normal life and being aware of them helps one to manage them better.
Core Principles	<ul style="list-style-type: none"> <li>➤ Talking about our emotions helps us control how we react or respond in difficult situations.</li> <li>➤ Talking about our emotions helps develop awareness of our feelings and thoughts.</li> <li>➤ Talking about emotions helps us to move past difficult ones and resolve conflicts better.</li> <li>➤ Talking about sensitive topics like e.g. body changes and intimate relationships is an important strategy to avoid problematic situations</li> <li>➤ Offer a safe, blame-free conversational space when you discuss sensitive topics.</li> </ul>
Training materials & resources	<ul style="list-style-type: none"> <li>➤ Flip chart, paper, pens, markers</li> <li>➤ Attendance register</li> <li>➤ Name tag materials</li> <li>➤ Printed copies of Session Illustration ‘Talking about emotions’</li> </ul>
Venue Preparations:	<ul style="list-style-type: none"> <li>➤ Make sure that the workshop venue is clean.</li> <li>➤ Set up chairs where the participants will sit in a circle.</li> <li>➤ Prepare all the materials that you will use during the group session.</li> </ul>

COMPONENT	TIME	ACTIVITIES		
Welcome & Session Preparation	40 mins	<ul style="list-style-type: none"> <li>➤ Facilitators take attendance.</li> <li>➤ Circle share</li> <li>➤ Welcome, thank everyone for coming and praise time keeping.</li> <li>➤ Home activity discussion.</li> </ul>		
Session overview for the day	20 mins	<ul style="list-style-type: none"> <li>➤ Framing the day</li> <li>➤ Emotions Game</li> </ul>		
Core Lesson	60 mins	<ul style="list-style-type: none"> <li>➤ Role-play: Axenia’s Test.</li> <li>➤ Discussion about role-plays.</li> <li>➤ Discussion - Talking about emotions.</li> </ul>		
		<ul style="list-style-type: none"> <li>➤ Taking a pause.</li> <li>➤ Sensitive topic: Relationships with peers.</li> <li>➤ Role-play: My new friend.</li> <li>➤ Discussion about role-play.</li> </ul>		
		<table border="1" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <b>CAREGIVERS PART</b> <ul style="list-style-type: none"> <li>➤ Talking about sensitive topics.</li> <li>➤ Talking with your teen</li> </ul> </td> <td style="width: 50%; vertical-align: top;"> <b>TEENS PART</b> <ul style="list-style-type: none"> <li>➤ Talking about sensitive topics.</li> <li>➤ Activity: Make your choice</li> </ul> </td> </tr> </table>	<b>CAREGIVERS PART</b> <ul style="list-style-type: none"> <li>➤ Talking about sensitive topics.</li> <li>➤ Talking with your teen</li> </ul>	<b>TEENS PART</b> <ul style="list-style-type: none"> <li>➤ Talking about sensitive topics.</li> <li>➤ Activity: Make your choice</li> </ul>
		<b>CAREGIVERS PART</b> <ul style="list-style-type: none"> <li>➤ Talking about sensitive topics.</li> <li>➤ Talking with your teen</li> </ul>	<b>TEENS PART</b> <ul style="list-style-type: none"> <li>➤ Talking about sensitive topics.</li> <li>➤ Activity: Make your choice</li> </ul>	
<ul style="list-style-type: none"> <li>➤ Key tips for talking about body changes and intimate relationships.</li> </ul>				
Session Close	15 mins	<ul style="list-style-type: none"> <li>➤ New home activity for the week                             <ul style="list-style-type: none"> <li>• Taking a Pause at home and thinking about how you feel.</li> <li>• Comment on your own emotions and ask your teen/caregiver about theirs.</li> <li>• Have a conversation with your caregiver/teen about body changes and intimate relationships.</li> </ul> </li> <li>➤ Maintain practicing previous home activities.</li> <li>➤ Today’s session review</li> <li>➤ Reminder of next session date.</li> <li>➤ Thank &amp; close.</li> <li>➤ Make sure you leave the room in order.</li> <li>➤ Share your observations in facilitator report.</li> </ul>		
Total sum of minutes		120 mins		

## 1. WELCOME & SESSION PREPARATIONS

### 1.1 FACILITATORS TAKE ATTENDANCE

As participants arrive, invite them to sit down. Remember to take attendance as each new person arrives.

## 1.2 WELCOME PARTICIPANTS & CIRCLE SHARE

At the beginning of the session, invite the participants to go around the circle and share how they are feeling today. *Can you do this in one word?*

### **GUIDELINES: Facilitating Circle Share**

1. Facilitators start the circle share with themselves, using one word to describe how they feel.
2. Move around the circle, giving participants a chance to say one word about how they feel.
3. Remember to praise and thank participants for sharing – especially at the beginning when this is new.
4. It is fine if participants do not want to share, simply move on to the next person.



**Try taking 5-10 minutes to use circle share at the beginning of each new session so that participants can get a chance to practice sharing emotions.**

## 1.3 THANK EVERYONE FOR COMING AND PRAISE FOR TIMEKEEPING

Remember you want to model positive behaviour – including providing praise!

## 1.4 HOME ACTIVITY DISCUSSION

Guide a discussion about the previous week's home activity.

### **Building Block: It is what you do at home that makes the difference!**

As a reminder, last week participants were asked to practice giving each other structured praise once a day and to spend at least 15 minutes of quality time together during the week.

Home activity discussions are opportunities to share successes, reinforce core principles, and problem solve ways of overcoming challenges:

- Brainstorm solutions with participants
- Practice applying the solution.
- Evaluate how it worked



**Reminder: practical exercise has priority!**  
When challenges are reported, go back to practicing together.

**GUIDELINES: Guide a discussion**

When challenges are being discussed, try to encourage the participants to come up with solutions and support them in trying them.

Always give big praise and applause to everyone brave enough to share.

As this is the second home activity discussion, here are some possible questions to get the discussion going:

You can use Who? What? Where? Why? When? How? during every discussion.

- WHO? Who was able to spend some quality time together or to collect some experiences with praising?
- WHAT? What did you praise?
- WHERE? Where have you enjoyed quality time?
- WHY? Why was it important to have quality time or to praise each other?
- WHEN? When did you take quality time or praise each other?
- HOW? How did you feel praising and spending time together?

**Feel free to ask follow-up questions!**

**Ask targeted questions with the goal of drawing out building blocks!**

**Always give big praise and applause to everyone brave enough to share.**

## 2. SESSION OVERVIEW FOR THE DAY

### 2.1 FRAMING THE DAY: INTRODUCING THE PROGRAMME & SESSION

In Session 3, participants learn some communication skills. They practice naming feelings and talking about emotions, and also practice talking about sensitive topics like intimate relationships.

We also work on being aware of the feelings that others have and responding to their feelings by showing that we understand. Before we start it's important to say that talking about emotions is probably a new thing for lots of the participants. It's something they may not have tried before, especially with their children/caregivers, and this means that it might feel strange or hard to do.

We use this space to try talking about emotions for the first time, remembering that there is no right or wrong way to do this. We will be talking about all types of emotions, including the positive and difficult ones. Talking about emotions helps the participants to become aware of emotions – it does not mean that they have to share the specific reasons for or stories behind their emotions with the person they would like to understand them better. What is shared in the session remains confidential.

### EMOTIONS (FEELINGS) AND DECISION-MAKING

Facilitators should include a brief discussion about how one's emotional health is also related to risk behaviour and decision-making, e.g. around alcohol, smoking or first (intimate) relationships with peers

Remember: Facilitators should be aware that relationships itself should not be identified as the problem needing resolving, but rather the pressure and potential risks that can come with building peer relationships and – maybe later on - sexual activity.

For example:

An adolescent experiencing emotional problems such as depression, may feel very sad and try to look for ways to help him or her feel better. Some of the choices that they make may have negative consequences.

- They might use alcohol to make them feel better

- Some may think that smoking with peers will make them feel better.

Both of these choices also may seem promising in getting peer attention or may be additionally linked to experiencing peer pressure.

Just like how some adults can also make poor decisions when their emotions are not managed, young people are at risk of making emotional decisions that can affect them for the rest of their life (e.g. drinking alcohol, smoking or becoming unexpectedly pregnant or feeling bad for a long time about yourself after having taken drugs or having had a relationship that turned out different than you expected or even included violence).

Naming feelings can help to deal with fear, resentment, anger, shame, rejection or self-stigma that may occur as they experience violence.

The way caregivers sometimes respond to their children when they face emotional issues can either result in positive or negative management of those issues. That is why it is important that caregivers too are able to model positive control of their own emotions so that the children to may learn from them. When both caregivers and teens are able to acknowledge and process how they feel, they are able to make better choices and avoid negative consequences together. This also requires that caregivers and teens can talk about difficult things together, like relationships, kissing for the first time, alcohol, smoking and violence.

## 2.2 GAME: CONTAGIOUS EMOTIONS

For facilitators only: This game should help participants to start thinking about the different emotions they feel and how they express them. This game also introduces the idea that their emotions rub off on those around them and can be “contagious”!

### **GUIDLINES: Facilitating contagious emotions game**

1. Participants stand in a circle.
2. The facilitator starts by showing an emotion on his/her face to the person standing next to him/her. The participant will have to make the same face and then show it directly to the whole group.
3. At the same moment when the facial expression is shown to the group, all participants in the group are asked to guess what emotion it is.
4. Then a participant thinks about an emotion, mimics it on his or her face and passes the emotion on to the person standing next to him or her. The other person mimics the emotion and presents it to the group again. All participants guess.

With this game, participants can practice expressing many emotions right from the start, get more in touch with feelings and learn that there are clear signals for certain emotions that many people interpret in a similar way.

Having trouble thinking of emotions?

Try out these ideas: Happy, sad, angry, scared, excited, worried, funny, proud.

### 2.2.1 DISCUSSION

*How do you feel now after the game? What did you notice about yourself when you showed the emotion?*

*Why do you think you played this game? Did you learn anything about emotions from this?*

This game should help participants to start thinking about the different emotions they feel and how they express them. This game also introduces the idea that their emotions rub off on those around them and can be “contagious”!

Remember: Ask targeted questions with the goal of drawing out building blocks!

PART 2

3. CORE LESSON: NAMING FEELINGS, TALKING ABOUT EMOTIONS & OTHER SENSITIVE ISSUES

3.1 ROLE-PLAY: AXENIA'S TEST

1)

*Axenia comes home from school. Tata is sitting at home.*

Tata:	<i>"Hello my dear, how was your day at school?"</i>
Axenia (in a terrible mood):	<i>"Who cares?"</i>
Tata:	<i>"Axenia, please don't talk to me that way. Did you get the results of your math test? How did you do?"</i>
Axenia:	<i>"Yes! I failed, OK?! I hate school! And I hate you for making me go!"</i>
<i>Axenia storms out of the house.</i>	

2)

*Axenia comes home from school. Tata is sitting at home.*

Tata:	<i>"Hello my dear, how was your day at school?"</i>
Axenia (in a terrible mood):	<i>"Who cares?"</i>
Tata:	<i>"Axenia, you don't seem very happy, do you want to talk about it?"</i>
Axenia:	<i>"I'm sorry, I just miss my old math teacher who passed away. She was so nice and always explained in a way that I understood. Now I just find it so frustrating that I studied so hard for my math test and still failed"</i>
Tata:	<i>"That is sad and frustrating. I know how much you liked her and how hard you studied. Maybe we can ask your new teacher for extra help with math? I can come in to talk to her tomorrow if that would help?"</i>
Axenia:	<i>"Thank you, I think that might be a good idea."</i>
Tata:	<i>"You know, you might feel sad about losing your teacher and frustrated about not being good at math right now, but I've never met someone who can write stories the way you can, Axenia!"</i>
<i>Axenia smiles at her tata.</i>	

3.2 DISCUSSION ABOUT ROLE-PLAYS

*What is similar in both role plays, what is different? What did you notice?*

*Think about how Axenia's emotions affect the action in the first role-play you saw.*

Here are some questions to get you started:

- How did you feel in the role of Axenia/Tata? (Direct questioning of the actors' emotions in the role-play situation.)
- How is it in your daily life, are there similar situations, how do you feel there? (The aim is to link everyday experiences with the role-play situation.)
- What is upsetting Axenia?
- What emotion is Axenia feeling?
- How does she respond to her tata's question about her test?
- How do you think tata feels about her response?

*Think about how the way Axenia handles her emotions affect the positive action in the second role-play you saw.*

Here are some questions to get you started:

- How does Axenia handle her feelings at first?
- How does the teacher’s death affect how she sees life?
- What happens when Axenia apologizes to her tata and explains to him what is wrong?
- How is Axenia feeling at the end of the scenario?

When discussing the role-plays in this session, be sure to have participants talk about and try the following steps:

- Identifying emotions (Example Questions)
  - How does it feel physically to be happy, sad, angry, disgusted, surprised, or afraid?
  - When in your life have you felt these emotions?
  - What are the thoughts that are associated with these feelings?
  - How do these thoughts affect your behaviour?
  - Where do you feel that in your body? What does it look like in your face?
  - How do you know when you or your child/parent is feeling this emotion?
- Accepting emotions
- Responding in a controlled way to emotions

*Sometimes when unpleasant emotions feel overwhelming you tend to respond in a negative way and make poor decisions. Can you give examples of when you have experienced difficult emotions and made an unhelpful decision as a result of that emotion? Why were these bad decisions?*

*What are some bad decisions someone can make when:*

1. *They are angry*
2. *They are sad or feeling low*

*Sometimes you go through experiences that affect you deeply that may cause you to see life’s experiences in a negative way. It is important that you realize that negative experiences are part of life but they should not determine the decisions you make or the goals you have set for yourselves.*

Building blocks:

\*Feelings are connected to thoughts and physical sensations.

\*Share your feelings in the family

\*for parents: model positive control of your own emotions (we are models of behaviour to our children!)

\*Acknowledge your (teens) feelings

### 3.3 DISCUSSION - TALKING ABOUT EMOTIONS

*Now let’s talk more generally about it is important to speak about emotions.*

Here are some questions to get you started:

- What would you get out of sharing how you feel with someone else? What about positive emotions? And difficult emotions?
- What impact does sharing of emotions have on the type of decisions you make?  
Why do you think it is important for you to recognize the emotions of other people? How can this impact your relationship with them?

Some things that might come up:

- Talking about emotions helps you control your reactions to these emotions. If you are frustrated and you speak about it, you are less likely to shout in anger at other people.
- Talking about emotions increases the joy you get from the positive emotions.
- By sharing your emotions, you strengthen your relationships. It helps you understand each other better so you can learn how to support each other.
- Letting feelings “out” in a controlled way actually helps you stay healthy (by reducing the risk of heart disease, high blood pressure etc.) and safe (by preventing impulsive or sudden decisions that may have harmful consequences).

*Expressing emotions is important when communicating, such as when you would like somebody to understand you, or when discussing difficult topics like private parts of the body, making choices around relationships or talking with others about violence. By reflecting on and managing your emotions, you can make healthy and safe decisions.*

Facilitators can close-off the core lesson discussion with the following text:

*It's easy sometimes to allow our emotions to affect the decisions you make or how you look at life. Sometimes these decisions have a lasting effect.*

*For example, when one is angry it is easy for them to resort to violence, or if feeling sad drink alcohol, and even when depressed seek other ways to make them feel happy or loved like having a relationship.*

*That is why it is important for you to talk about emotions. By naming and acknowledging your emotions it can help us process them better.*

### 3.4 ACTIVITY: TAKING A PAUSE

Taking a Pause is an activity that participants can use to help them deal with unpleasant emotions and difficult situations.

*This might be a new thing for you – it was new for us!*

*Taking a Pause is a simple exercise that allows us to stop and feel calm by taking a deep breath. This is different from taking a break: It is taking a break from a problem by reminding yourselves that you are okay.*

*The Taking a Pause can be used at any time during the day. It can also be a short activity (30 seconds) or as long as 3 minutes.*

*The Taking a Pause is introduced in 3 key steps:*

#### *1. Becoming Aware:*

*You recognize what is happening and acknowledge your experience.*

*You stop yourselves from thinking over and over about a problem.*

*You become aware of your thoughts, emotions, and physical body.*

#### *2. Gathering Attention:*

*You focus on the feeling of the breath moving in and out of your body.*

*You keep your attention on your breath for as long as you feel is necessary.*

*You notice when your mind wanders off and bring the attention back to the breath.*

#### *3. Expanding Awareness:*

*You open to the whole body and into the world.*

*You notice your thoughts, emotions, and physical sensations.*

*You prepare yourselves to take your next step in your day.*

*You can take a pause at any moment in the day – especially when feeling stressed.*



**GUIDELINES: Leading Taking a Pause**

*Sometimes when you are experiencing stress or your children or parents are making you very annoyed, you need to take a Moment to stop, acknowledge your experience, and compose yourselves.*

*We call this Taking a Pause.*

*Step 1: Preparation*

*Find a comfortable upright sitting position with your feet flat on the floor, your hands resting in your lap.*

*Close your eyes if you feel comfortable.*

*Step 2: Becoming Aware*

*Ask yourself, “What is my experience in this moment?”*

*Notice what thoughts you are experiencing. Notice if they are negative or positive.*

*Notice how you feel emotionally. Notice if your feelings are pleasant or unpleasant.*

*Notice how your body feels. Notice any discomfort or tension.*

*Step 3: Gathering Attention*

*Notice that you are breathing.*

*You may want to place one hand on your stomach and feel it rise and fall with each breath.*

*Follow your breath all the way in, how it pauses, and how it exhales out.*

*If you notice that you have started to think about something, this is completely natural.*

*Just keep bringing your focused attention back to the feeling of your breath.*

*Step 4: Expanding Awareness*

*Allow your focus to expand to the whole body.*

*Noticing if there is any discomfort, tension, or pain.*

*Allow your breath to travel to that part of the body.*

*You may want to reassure yourself by saying “It’s okay. Whatever it is, I am okay.”*

*When you are ready, open your eyes.*

*Step 5: Reflecting*

*Taking a moment to reflect whether you feel any different from before taking a Taking a Pause.*

Facilitators should remind participants that they can Take a Pause at any moment in the day – especially when they feel stressed.

**3.5 SENSITIVE TOPIC: THE EXAMPLE OF RELATIONSHIPS WITH PEERS**

Taking a Pause can be a helpful way for caregivers and teens to prepare for conversations around difficult or sensitive topics, like talking about body changes or relationships with peers. Being calm is also important to make decisions that prevent unhealthy or unsafe situations.

A calm and pleasant conversational style is therefore important in order to be able to communicate with others.

*As you’ve already learned talking about emotions also helps to control your reactions to emotions. If you are frustrated and you speak about it, you are less likely to shout in anger at other people. Expressing emotions is also an important strategy when communicating, such as when you would like your caregivers to understand you, or when discussing difficult topics like private parts of the body or talking with others about peers and relationships or violence. By reflecting on and managing your emotions, you can have helpful conversations with your teen/caregiver.*

*So far you have learned the strategies (taking a pause, talking about emotions) and now you are practicing applying them to sensitive conversation topics, such as getting closer with a peer.*

Getting closer to peers is just an example, there are many other sensitive topics during adolescence (and also adulthood). What is a sensitive topic, may be individual in each family but how to approach such topics, requires the same skills. Learning such skills, such as talking about feelings, will help building support in your family.

#### ROLE-PLAY: MY NEW FRIEND

*Catalina is chatting to her friend George.*

George:	<i>"Tomorrow is Saturday, let's go to the cinema and watch a movie together."</i>
Catalina:	<i>"I don't know... I will text you per Viber later".</i>
<i>Catalina returns home and sits on her bed.</i>	
Catalina (thinking to herself):	<i>"I really want to see George again. But what should I tell my caregivers. And what if something bad happens? I'm not sure how to deal with this problem!"</i>
<i>Catalina walks up to her mother.</i>	
Catalina:	<i>"Mama, I have a problem I can't work out on my own. Can I talk to you about something private?"</i>
Mama (thinking to herself):	<i>"How has my daughter grown up so fast? A private problem? Oh dear. Take a deep breath..."</i>
Mama:	<i>"Sure, my darling. What is the matter?"</i>
Catalina:	<i>"George wants me to go watch a movie with him tomorrow. I really like him, but I am not sure what to do."</i>
Mama:	<i>"Thank you for sharing this with me, Catalina. I know that you are fond of George, but this is a serious issue. You are only 16 and he is 18. I feel concerned that it is not safe for you to be alone with him. He might pressure you into doing something that you are not prepared to do. I don't want to tell you who you can see but we need to have some rules about how you spend time together."</i>
Mama:	<i>"What do you think would be a fair rule about how you spend time together?"</i>
Catalina:	<i>"How about if I have a rule to be back home from cinema at certain time?"</i>
Mama:	<i>"That would be fine. You can call George later and agree to the date as long as he respects the rule."</i>
Catalina (smiling):	<i>"Okay. Thank you for understanding, mama."</i>

Questions to guide discussion about role-play:

- What do you think about mama's response to Catalina?
- Why do you think mama involved Catalina in solving the issue?
- Do you think the solution will work? Why? If not, what would you suggest?
- Notice how mama used a "I feel" statements when talking to Catalina about her concern. Why do you think she did this instead of using "You Statements" directed at Catalina?

#### **GROUP DIVIDES: SEPARATE CAREGIVERS AND TEENS HERE**

Before you divide the group, explain why the division and why the conversation.



Reminder: practical exercise has priority!  
Don't go into too much theoretical detail, favour practice.

*In the last role-play the mother and daughter were talking about intimate relationships. This is an important area for caregivers and teens to discuss. Caregivers can provide guidance about safety and teens can seek advice about how to manage intimate relationships for the first time. The division is intended to help each group to speak openly and honestly about their own age-appropriate thoughts without having to share this directly with their own family members.*



**Divide the group into one caregiver-only group and one teen-only group when you lead this discussion about sensitive topics like intimate relationships and body changes.**

### 3.6 CAREGIVERS PART (SEPARATE)

**NOTE AS A FACILITATOR:** The topics listed below as sensitive topics should only be seen as examples. The examples can be changed. You as a facilitator can choose a topic which is essential for the current group. It is not primarily about the specific sensitive topic, but about introducing communication and talking about individually sensitive topics.

Remember this for the following sessions when discussing sensitive topics. It is primarily about the techniques and strategies taught, not about the specific content of the conversation, which may vary.

If something is triggered in the adults by the previous role play, a topic is raised or something else, the topic can be dealt with in the caregiver part, just in case something comes up.

#### 3.6.1. TALKING ABOUT SENSITIVE TOPICS

Discussions around body changes and intimate relationships can start early, before the age of 9, by just responding to questions a child may have in a simple and accurate way. From the age of 10, children start to enter puberty and need to know about their changing bodies and feelings, and how to cope with sexual feelings safely.

#### **GUIDELINES: Leading the Discussion**

1. The facilitator leads a group discussion.
2. At the beginning of the conversation, caregivers should first be asked what their personal attitude is to talking about sensitive topics as bullying, alcohol, smoking or intimacy with their children before advice is given.  
*How do you and your children handle sensitive issues at the moment?  
Think about your own teenage years. What do you wish you had known at that time, to help you make healthy and safe decisions, and prevent/respond to unsafe situations?*
3. Have a big group discussion on further questions (see below).
4. Write their responses on the flipchart.
5. Make sure that everyone has the opportunity to share their opinions.

- For some, it may be the first time they talk about intimate relationships, alcohol and physical changes in public, which can be unfamiliar. After all, who might be familiar with such topics of conversation from talking to their own parents?

- Why it is important for you to discuss smoking, drinking alcohol, the experience of bullying, body changes, intimate relationships and safety with your teen?
- Why should you talk to your teen about body changes and intimate relationships?
  - Teens might feel that talking about relationships/kissing/body changes/ etc. with their caregivers is embarrassing or that they might get in trouble, so you will probably have to start the discussion.
  - Teens generally behave responsibly when they feel that their caregivers take them seriously.
  - Teens think about the consequences of their actions when they are part of the discussion.
  - Teens trust their caregivers when they feel trusted. This means that they are more likely to share if they are in trouble.
  - Teens are more likely to ask for advice if they are used to talking to their caregivers.
- What information is necessary to have a helpful discussion on bullying, body changes, intimate relationships, staying safe and teens protecting themselves?
- **How can caregivers help teens** understand and prepare for the physical changes in their body that take place during adolescence, like developing body hair, menstruation in girls, voice dropping and wet dreams in boys?
- **What should caregivers do** if they discover that their teen is being bullied, takes drugs or is having a relationship with a boy/girlfriend? How can they discuss this with their teen and maintain a loving and trusting relationship?
- **How can you keep your teen safe** in the (sexual) relationships they have? How can you help them understand the responsibilities that go along with their choice, e.g. to drink alcohol to smoke or to have an intimate relationship?

### 3.6.2. TALKING WITH YOUR TEEN

#### **How can you talk to your teen about relationship, physical closeness or intimacy?**

- It is okay to feel awkward about discussing body changes and intimate relationships with teens, but it is a caregiver's responsibility to be open and factual. Making these topics secret just makes them more mysterious and interesting.
- Explain that a relationship or physical closeness is good for mature people who care for each other and can carry responsibility for each other.
- Teens are finding their way in life and typically insecure. Try to discuss and explore together how they could come into contact with others, how they can build relationships. Be calm and focus on finding solutions together.
- If a caregiver discovers that his/her teen is having an intimate relationship or first experiences with physical closeness, he/she should try to remain calm. Anger towards the teen will harm their relationship.
- In relation to the adolescent's disclosed difficulties, discuss solutions together: Ask for and listen to each other's opinions. When making decisions, think through the possible consequences together.
- If the caregiver lacks information or needs advice themselves about bullying, alcohol or health, they can consult with their community health worker or social worker or even a trusted friend or relative. Caregivers can better guide their teens when they have the right information.

#### *Helpful perspectives for caregivers when discussing issues related to intimacy with their child:*

- *Keep-open minded if possible: listen to what your child is interested in without immediately judging what they say. For many caregivers this is quite difficult because they are anticipating consequences once needs are expressed but talking about this does not mean that children will also act on it. Being there to talk to also if the issues are sensitive, fosters a trusting basis for conversations in which a teen feels comfortable and is more likely to open up.*

- *Remind yourself: try things out, test your limits, intimacy with peers are developmentally appropriate needs that emerges during transition into adolescence. Think about your own growing up and possible parallels with your child? What are your experiences in the past?*
- *Instead of forbidding and disallowing or limiting your teen, ensure a safe and nonjudgmental basis for discussion. Motivate the teen to ask questions.*
- *Be empathetic to how difficult it can be for teens to stand up to peer pressure and to resist against existing perceived "behavioral norms."*

### 3.7 TEENS PART (SEPARATE)

#### 3.7.1 TALKING ABOUT SENSITIVE TOPICS

**NOTE AS A FACILITATOR:** The topics listed below as sensitive topics should only be seen as examples. The examples can be changed. You as a facilitator can choose a topic, which is essential for the current group. It is not primarily about the specific sensitive topic, but about introducing communication and talking about individually sensitive topics.

Remember this for the following sessions when discussing sensitive topics. It is primarily about the techniques and strategies taught, not about the specific content of the conversation, which may vary.

#### **GUIDELINES: Leading the Discussion**

1. The facilitator leads a group discussion.
2. At the beginning of the conversation, teens should first be asked what their personal attitude is to talking about sensitive topics as relationships, kissing, bullying, drinking alcohol with their parents before advice is given.  
*How do you and your parents handle sensitive issues at the moment?*
3. Have a big group discussion on further questions (see below).
4. Write their responses on the flipchart.
5. Make sure that everyone has the opportunity to share their opinions.

- Have any of you ever talked to your parents about sensitive/intimate issues like bullying, body changes of yourself, relationship problems or love?
- What do you need from your caregivers to help you understand and prepare for the changes that happen to your body as you get older, like developing body hair, menstruation in girls, voice dropping and wet dreams in boys?
- How can you discuss with your caregivers about these topics? Or identify problems that might come up with these topics and think about whether and what caregivers would see as problematic with these topics.

#### 3.7.2 ACTIVITY: MAKE YOUR CHOICE

**For the facilitators it is important to note that the teens should be introduced to the sensitive topics such as intimate relationships, physical closeness, kissing carefully. You will approach such topics cautiously through the sessions.**

Facilitators remind participants of the ground rules: There are no wrong answers and everyone can share without judging each other.

As a facilitator, you can use the previous role play as a starting point for the subsequent discussion and work phase on the topic of sensitive topics.



Reminder: practical exercise has priority!  
Don't go into too much theoretical detail, favor practice.

1. Facilitator explains that he/she will read out a statement, and participants have to move to the left side of the room if they agree and the right side if they disagree. Once everybody has chosen agree or disagree, facilitator asks multiple participants to explain why they chose this option.
  - *Intimate Relationships with other teens with hugging, kissing and physical closeness are important and healthy.*
  - *Teens have relationships in order to be physically close to each other.*
  - *Teens kiss and hug because it feels nice.*
  - *Teens do not kiss because they fear getting an infection*
  - *Teens do not have any physical closeness because they want to wait until marriage*
  - *Teens hug and kiss to feel close to someone*
  
2. Facilitator asks participants (ensure everyone can participate, but no one has to say anything if they don't want to):
  - *What sensitive or shameful topics do you know or avoid (e.g. bullying, drinking alcohol, smoking, having a relationship, physical closeness, kissing etc.)?*
  
  - *Why are sensitive topics like drinking alcohol, smoking, bullying or relationships with peers difficult to talk about together?*  
(Possible answers from participants include: Teen is considered too young; Talking about sex is seen as encouraging sex; Single caregivers don't know how to talk to teen of the opposite gender; Teens are not used to opening up to caregivers, they are ashamed, feel guilty).
  
  - *Why would it be important to talk about sensitive topics?*  
(Possible answers from participants include: Using vague descriptions can cause confusion among teens and reinforce the stigma around talking openly about sex and dangerous situations. This increases the risk of teens making unsafe and unhealthy choices, and finding themselves in unsafe situations where they are unable to communicate clearly or reach out for adequate support).
  
  - *What do you wish you knew when you enter into an intimate relationship for the first time, kissed someone, tried alcohol, tested other drugs or experienced bullying, e.g. at school?*  
(Facilitators can give their own examples or examples mentioned during their training to get the discussion started).
  
  - *What could be the benefits of caregivers and teens talking together about sensitive topics?*  
(Possible answers from participants include: Talking helps teens get correct information and consider consequences to stay safe, caregivers and teens trust each other more, teens more likely to ask for advice in future difficult situation).
  
  - *Where do you get information about drugs, bullying or having a relationship with a peer?*  
(Facilitators emphasize that information about sex comes from many sources like school, TV, friends – knowing about smoking, alcohol, kissing does not mean you are kissing, smoking or drinking alcohol yourself already).

Facilitators can close-off the discussion with the sentence:

*To have helpful, supportive talks, you need to be able to identify and talk about your emotions first, then you can talk about and understand the choices you have.*

### **GROUP COMES BACK TOGETHER**

#### 3.8 KEY TIPS FOR TALKING ABOUT SENSITIVE ISSUES (SUCH AS BULLYING, ALCOHOL, BODY CHANGES AND INTIMATE RELATIONSHIPS)

##### **GUIDELINES: Leading the Discussion**

1. After the groups discuss separately, ask caregivers and teens to discuss what they talked about.
2. Write their responses on the flipchart.
3. Make sure that everyone has the opportunity to share their opinions.
4. Then have a big group discussion on key tips (see below) and further questions.

Drawing on the previous activity, the facilitator summarises the tips that were mentioned for talking about sensitive issues like body changes and intimate relationships as a family and asks participants to add any other tips.

Possible answers from the participants include:

- Teens might feel that talking about sensitive topics (alcohol, bullying, intimate relationships) with their caregivers is embarrassing or that they might get in trouble, so caregivers will probably have to start the discussion.
- Teens generally behave responsibly when they feel that their caregivers take them seriously.
- Teens think about the consequences of their actions when they are part of the discussion.
- Teens trust their caregivers when they feel trusted. This means that they are more likely to share if they are in trouble.
- Teens are more likely to ask for advice if they are used to talking to their caregivers.
- It is okay to feel awkward about discussing body changes and intimate relationships with teens, but it is a caregiver's responsibility to be open and factual. Making these topics secret just makes them more mysterious and interesting.
- Explain that an intimate relationship is good for mature people who care for each other and can carry responsibility for each other.
- Teens are finding their way in life and typically insecure. Try to discuss and explore together how they could either wait with alcohol or intimacy until they are older (e.g. if the worries are too great) or how they can approach the topic safely and in an age-appropriate way (e.g. if curiosity is too great). Be calm and focus on finding solutions together.
- If a caregiver discovers that his/her teen is having a relationship, drinking alcohol, smoking, being bullied he/she should try to remain calm (though he/she can express feeling disappointed). Anger towards the teen will harm their relationship.
- Discuss solutions together: Ask for and listen to each other's opinions. When making decisions, think through the possible consequences together.
- If the caregiver lacks information or needs advice themselves about bullying, drinking alcohol, smoking or sexual and reproductive health, they can consult with their community health worker or social worker or even a trusted friend or relative. Caregivers can better guide their teens when they have the right information.

#### 4. SESSION CLOSE

##### 4.1 HOME ACTIVITY

*At least once during the week*

- *try Taking a Pause at home and think about how you feel*
- *comment on your own emotions and ask your teen/caregiver about theirs. Need a tip? This is often easiest to do when they look happy. Or maybe when you are spending quality time together!*
- *share that feeling with your caregiver or teen. You can also share with teachers and neighbors and friends!*
- *If you find this strange to do at first, keep it very simple:*
  - *“Today I feel...”*
  - *“How are you feeling?”*
- *Have a conversation with your caregiver/teen about body changes and intimate relationships.*

Remind participants of the skills they learned last week and motivate them to continue training.

*Make it a routine to practice and automate your skills:*

*From Session 2: Spend at least 15 minutes of quality time together during the week. Each day ask about each other’s day and try to listen carefully. Practice giving each other structured praise once a day.*

*From Session 1: Complete a physical exercise once a day! You can either use the physical exercise we did at the beginning of the session, or you can invent your own.*

#### 4.2 REVIEW TOPICS COVERED

Facilitators reflect with group on today’s session to summarize learning:

*Which topics and core principles did we talk about today?*

Possible answers from participants include:

- Be aware of your own emotions
- Understand how to react and deal with other peoples’ emotions
- Speaking about emotions makes us happier, helps us to build stronger relationships, and helps us to make calm decisions that keep us healthy and safe.
- Talking about sensitive topics like body changes and intimate relationships is important to keep teens healthy and safe.
- Be open and neutral, when talking about sensitive topics
- Even though it can be difficult, it is important to talk about sensitive topics like bullying or intimate relationships.

Facilitators ensure to draw out all points above from participant responses by asking follow-up questions as needed.

#### 4.3 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY

*In the next session we talk about ‘What do we do when we are angry’.*

*But before then, remember to do your home activity!*

**Building Block: It is what you do at home that makes the difference!**

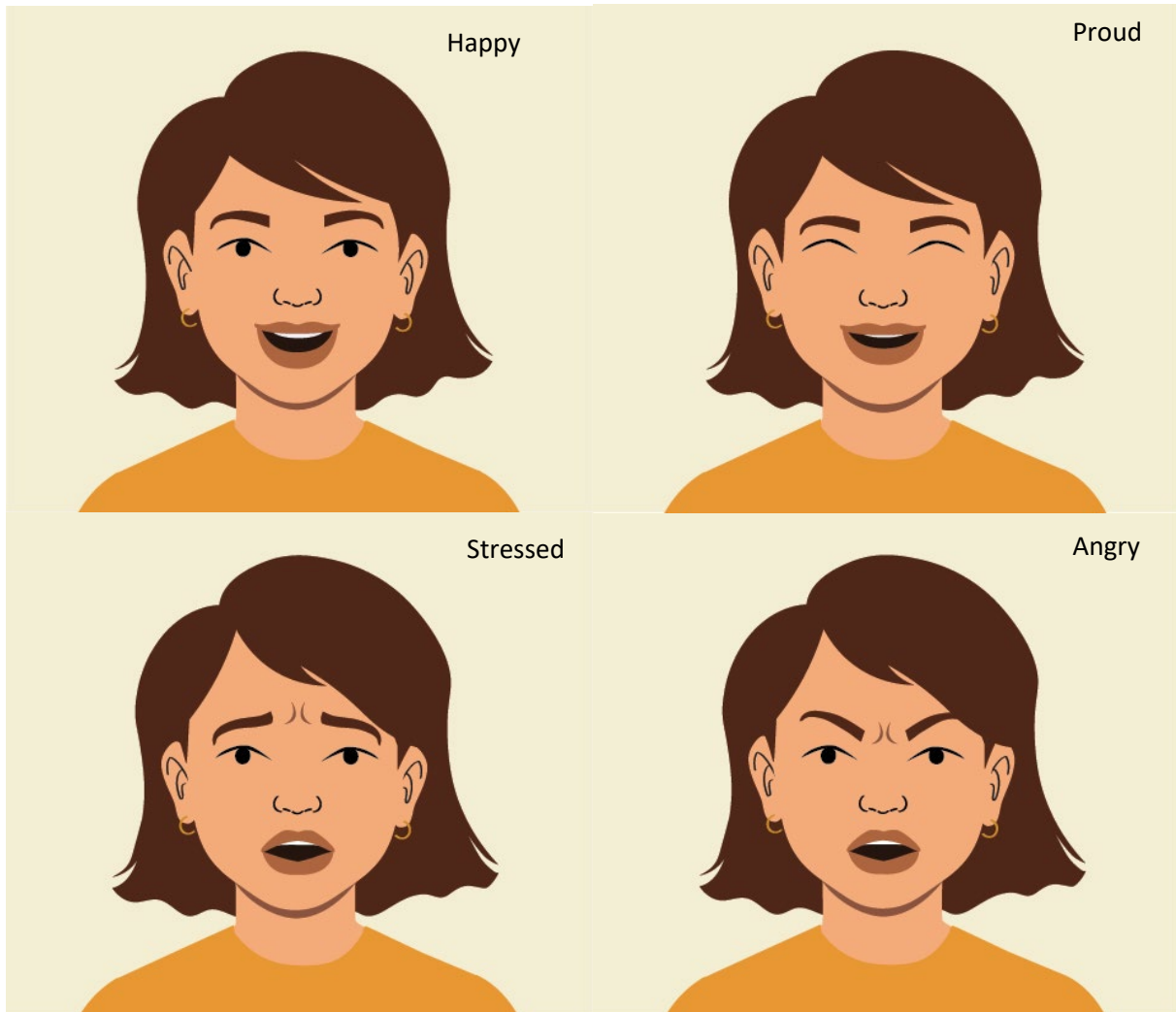
Facilitators remind participants about time and location of next session.

#### 4.4 THANK AND PRAISE PARTICIPANTS



ILLUSTRATION FOR SESSION 3

Talking about emotions...



## PLH – FLOURISH PROGRAMME

### HOME CATCH-UP

**Caregiver's Name**

**Teenager's Name**

**Date**

**Group**

**Facilitator's Name**

### SESSION 3: TALKING ABOUT EMOTIONS

**Goal:** Learn to identify, name and discuss emotions

**Overview:** Participants continue to practice communication skills, this time by focusing on naming feelings and talking about them.

You also work on being aware of the feelings that others have, and responding to their feelings by showing that you understand. Talking about emotions is probably a new thing for lots of you.

**Illustration:** Talking about emotions

**Core Lesson:** Can participants guess the emotion expressed in the illustration? Can they mimic the emotion? Can they offer a response in their own faces?

Now let's talk about why it is important to speak about emotions:

- Talking about emotions helps you control your reactions to these emotions. If you are frustrated and you speak about it, you are less likely to shout in anger at other people.
- By sharing your emotions, you strengthen your relationships.
- Letting feelings "out" in a controlled way actually helps you stay healthy and make safe and healthy decisions.
- Talking about your emotions and becoming calm also makes it easier to talk about sensitive topics like bullying, drinking alcohol, smoking or intimate relationships.

Try Taking a Pause – which can help you control your reactions to stressful emotions:

- You stop yourself from thinking over and over about a problem.
- You become aware of your thoughts, emotions and physical feelings.
- You focus on the feeling of the breath moving in and out of your body.

**Home activity:** At least once during the week comment on your own emotions and ask your teen about theirs.

**Attending sessions** can be difficult. Is there anything we can do to help you attend sessions? It is important to have a non-blaming attitude about attendance!

Did any other members of the household participate in this Home catch-up? Who?

**SESSION 4: WHAT DO WE DO WHEN WE ARE ANGRY**

**TABLE OF CONTENT**

PART 1 INTRODUCTION FOR FACILITATORS.....	108
1. WELCOME & SESSION PREPARATIONS.....	109
1.1 FACILITATORS TAKE ATTENDANCE.....	109
1.2 WELCOME PARTICIPANTS & CIRCLE SHARE .....	109
1.3 THANK AND PRAISE EVERYONE FOR COMING .....	110
1.4 HOME ACTIVITY DISCUSSION .....	110
2. SESSION OVERVIEW FOR THE DAY .....	110
2.1 FRAMING THE DAY: INTRODUCING THE PROGRAMME & SESSION.....	110
2.2 PHYSICAL EXERCISE.....	111
2.3. OPTIONAL: PRACTIZE TAKING A PAUSE.....	111
PART 2 .....	111
3. CORE LESSON: WAYS OF COPING WITH ANGER AND STRESS.....	111
3.1 CAREGIVERS PART (SEPARATE) .....	111
3.1.1 ROLE-PLAY: MAMA IS SICK .....	111
3.1.2 DISCUSSION ABOUT ROLE-PLAYS .....	112
3.1.3 ACTIVITY: REHEARSING FOR LIFE.....	113
OLD TOOLS: TALKING AND TAKING A PAUSE .....	113
NEW TOOL: CHANGING UNHELPFUL TO HELPFUL THOUGHTS.....	113
3.1.4 ACTIVITY: STAY CALM AND EXPLAIN YOURSELF: “I FEEL” STATEMENTS.....	114
3.2 TEENS PART (SEPARATE) .....	114
3.2.1 ROLE-PLAY: THE TEST .....	114
3.2.2 DISCUSSION ABOUT ROLE-PLAYS .....	115
3.2.3 ACTIVITY: REHEARSING FOR LIFE.....	116
OLD TOOLS: TALKING AND TAKING A PAUSE .....	116
NEW TOOL: CHANGING UNHELPFUL TO HELPFUL THOUGHTS.....	116
3.2.4 ACTIVITY: STAY CALM AND EXPLAIN YOURSELF: “I FEEL” STATEMENTS.....	117
3.3 TAKING A PAUSE.....	118
4. SESSION CLOSE .....	118
4.1 HOME ACTIVITY .....	118
4.2 REVIEW TOPICS COVERED .....	119
4.3 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY.....	119
4.4 THANK AND PRAISE PARTICIPANTS.....	119

ILLUSTRATION FOR SESSION 4 ..... 120

PLH – FLOURISH PROGRAMME..... 121

MATERIAL AND IMPRESSIONS FROM THE FACILITATOR TRAINING (11.09.23 - 13.09.2023)..... 122

**LEGEND**

- **GUIDELINE**-Boxes indicate important information that should definitely be considered and possibly communicated to participants (“key messages”).
- Sentences marked in black always refer to separate group work
- *Green cursive font marks passages of text are examples of text passages to illustrate how key messages can be delivered. They only serve as demonstration to facilitate your own wording which is preferred.*
- Normal upright writing marks content that can be conveyed in a general sense

**PART 1 INTRODUCTION FOR FACILITATORS**

In this session, we will be talking about managing anger and solving problems. Like in the last session, the teens and caregivers are in different groups for the core lesson. Key points of Session 4:

- This session specifically focuses on “difficult” emotions such as stress and anger.
- It’s important to understand that these emotions are not bad and shouldn’t be ignored.
  - Everybody experiences stress and anger sometimes.
- What is important to manage actions and sayings when somebody feels stressed and angry.
- We use this session to help participants come up with and practice ways of dealing with these emotions and expressing them in non-violent ways.

**Table 1 – SESSION 4 PREPARATIONS & OUTLINE**

Goal of the session	In this session caregivers and teens learn about how to manage anger in an effective way. It is important that both caregivers and teens develop strategies that will help them respond to situations that make them angry in a more effective and non-aggressive way.
Core Principles	<ul style="list-style-type: none"> <li>➤ Managing your anger helps you to control aggressive reactions towards a situation.</li> <li>➤ Learning to manage your stress and anger can improve your situation and help you feel better.</li> </ul>
Training materials & resources	<ul style="list-style-type: none"> <li>➤ Flip chart, paper, pens, markers</li> <li>➤ Attendance register</li> <li>➤ Name tag materials</li> <li>➤ Printed copies of the Illustration ‘Mama is sick’ (positive)</li> </ul>
Venue Preparations:	<ul style="list-style-type: none"> <li>➤ Make sure the workshop venue has the opportunity for using two different rooms to separate the large group into adolescents only and caregivers only.</li> <li>➤ Make sure that the workshop venue is clean.</li> <li>➤ Set up chairs where the participants will sit in a circle.</li> </ul>

	➤ Prepare all the materials that you will use during the group session.
--	---

COMPONENT	TIME	ACTIVITIES	
Welcome & Session Preparation	40 mins	<ul style="list-style-type: none"> <li>➤ Facilitators take attendance.</li> <li>➤ Participants settle down &amp; circle share.</li> <li>➤ Welcome, thank everyone for coming and praise time keeping.</li> <li>➤ Home activity discussion.</li> </ul>	
Session overview for the day	10 mins	<ul style="list-style-type: none"> <li>➤ Framing the day</li> <li>➤ Physical exercise</li> </ul>	
Core Lesson	60 mins	<b>PARENTS SESSION</b> <ul style="list-style-type: none"> <li>➤ Role-play: Mama is sick.</li> <li>➤ Discussion about role-play.</li> <li>➤ Activity: Rehearsing for life.</li> <li>➤ Old tools: Talking and Taking a Pause.</li> <li>➤ New tool: Changing negative to positive thoughts.</li> <li>➤ Activity: Stay calm and explain yourself: “I feel” statements.</li> </ul>	<b>TEENS SESSION</b> <ul style="list-style-type: none"> <li>➤ Role-play: The Test.</li> <li>➤ Discussion about role-play.</li> <li>➤ Activity: Rehearsing for life.</li> <li>➤ Old tools: Talking and Taking a Pause.</li> <li>➤ New tool: Changing negative to positive thoughts.</li> <li>➤ Activity: Stay calm and explain yourself: “I feel” statements.</li> </ul>
		<ul style="list-style-type: none"> <li>➤ Taking a Pause.</li> </ul>	
Session Close	15 mins	<ul style="list-style-type: none"> <li>➤ New home activity for the week                             <ol style="list-style-type: none"> <li>1. Practice ‘Take a Pause’</li> <li>2. Saying “I feel”: Caregivers and teens should try to have an “I feel” discussion with each other</li> </ol> </li> <li>➤ Today’s session review</li> <li>➤ Reminder of next session date and thank &amp; close</li> <li>➤ Make sure you leave the room in order</li> <li>➤ Share your observations in facilitator report</li> </ul>	
Total sum of minutes		125 mins	

## 1. WELCOME & SESSION PREPARATIONS

### 1.1 FACILITATORS TAKE ATTENDANCE

As participants arrive, invite them to sit down. Remember to take attendance as each new person arrives.

### 1.2 WELCOME PARTICIPANTS & CIRCLE SHARE

At the beginning of the session, invite the participants to go around the circle and share how they are feeling today in one word.

### 1.3 THANK AND PRAISE EVERYONE FOR COMING

Remember you want to model positive behaviour – including providing praise for sharing emotions, which can be difficult!

### 1.4 HOME ACTIVITY DISCUSSION

Facilitators lead a discussion about the previous week's home activity.

As a reminder, last week participants were asked to try to comment on their emotions and ask their caregiver/teen about theirs. Later in the session, participants dealt with sensitive issues such as bullying, drinking alcohol or intimate relationships for the first time. That caregivers and children learn to talk appropriately about different sensitive topics is a big part of this programme.

Home activity discussions are opportunities to share successes, reinforce core principles, and problem solve ways of overcoming challenges:

- Brainstorm solutions with participants
- Practice applying the solution.
- Evaluate how it worked



Reminder: practical exercise has priority!  
When challenges are reported, go back to practicing together.

#### **GUIDELINES: Guide a Discussion**

When challenges are being discussed, try to encourage the participants to come up with solutions and support them in trying them.

Always give big praise and applause to everyone brave enough to share.

As usual, here are some possible questions to get the discussion going:

You can use Who? What? Where? Why? When? How? during every discussion.

- WHO? Who was able to try Taking a Pause? Who had a talk about emotions?
- WHAT? What emotions did you discuss? What experiences did you have during Taking a Pause?
- WHERE? Where did you talk about your feelings? Where did you do Taking a Pause?
- WHY? Why was it important to Take a Pause or to talk about your feelings?
- WHEN? When did you talk about your emotions or Take a Pause?
- HOW? How did you feel after Taking a Pause or discussing your emotions?

**Feel free to ask follow-up questions!**  
**Ask targeted questions with the goal of drawing out building blocks!**

## 2. SESSION OVERVIEW FOR THE DAY

### 2.1 FRAMING THE DAY: INTRODUCING THE PROGRAMME & SESSION

Remind participants that what they say in the sessions remains confidential.

*In Session 4, we continue thinking and talking about difficult emotions and conversations. You know that it can be challenging to manage the demands of life whether as a caregiver or as a teenager. And sometimes you encounter situations or people that make you angry or upset. Stress or anger can be caused by life's difficulties, such as challenges at school, relational problems you have at home and*

*at school with friends and family, and even worries about the future. You may have experienced a situation or behaviour that you see as being unfair, hurtful, or in some other way 'wrong'.*

Questions for an introductory discussion:

- Did anybody ever felt angry?
- What strategies did you use already?

Have a discussion on successful and useless strategies to regulate feelings like anger.

Develop in the group a common list about strategies.

If the participants in the large group are silent, the facilitators can, if necessary, flexibly decide to separate the groups and discuss strategies with teens and caregivers separated, after that bring the results together in the whole group.

## 2.2 PHYSICAL EXERCISE

Encourage participants to do their physical exercises once a day!

*Did anybody try this exercise at home?*

Lead them through the head-to-toe stretch that we introduced in the first session.

If anybody did/do this at home then now is a good moment to ask if they would like to lead the group. This helps establish the collaborative culture of the group as it gives the 'leadership' role to another caregiver – or teen.

Remind participants to do the exercise together at home every day!

## 2.3. OPTIONAL: PRACTIZE TAKING A PAUSE

If there was no time to do the "TAKING A PAUSE" exercise in the previous session, it can be introduced at this point in session 4.

## PART 2

### 3. CORE LESSON: WAYS OF COPING WITH ANGER AND STRESS

#### GROUP DIVIDES: SEPARATE CAREGIVERS AND TEENS HERE

#### 3.1 CAREGIVERS PART (SEPARATE)

##### 3.1.1 ROLE-PLAY: MAMA IS SICK

1)

*Mama felt sick and decided to go to the clinic. She found out that she is diabetic. Mama is sitting in her room, looking and feeling stressed. Axenia walks in.*

Axenia:	<i>"Hi mama you don't look well, is there anything wrong? What did they say at the clinic"</i>
Mama (becomes angry):	<i>"Get out of my room, you come and ask silly questions, huh! Who told you to come into my room! Who are you to ask that question? Silly child."</i>
Axenia (scared):	<i>"I am sorry mama, I didn't mean to make you angry, I was just asking."</i>
Mama (shouting):	<i>"Next time you should not ask me things that don't concern you! GET OUT!"</i>
<i>Axenia runs out of the room, crying.</i>	

2)

*Remember last time mama was sick and decided to go to the clinic. When she went there she found out that she is diabetic. She is sitting in her room, looking and feeling stressed. Axenia walks in.*

Axenia:	<i>"Hi mama you don't look well, is there anything wrong? What did they say at the clinic?"</i>
Mama (sighs):	<i>"They found out that I am diabetic, which is making me feel stressed."</i>
Axenia (worried):	<i>"Oh no! That sounds bad! Diabetic! Should I worry?"</i>
Mama:	<i>"Don't you worry too, Axenia – it will only make everything feel worse."</i>
Axenia:	<i>"Ok, well, I understand why you look worried, Mama... But you know what? My teacher is also diabetic and she's now healthy again! (smiling) I think you are going to be fine like my teacher, mama."</i>
Mama:	<i>"Yes, the nurses at the clinic told me and other women that we will be fine. I need to look after ourselves, eat healthy and make sure I take my medication every day."</i>
<i>Axenia looks at her mother and they both smile and look more relaxed.</i>	
Mama:	<i>"It's always nice to talk to you my girl, every time we talk I feel better and stronger. Come, let's do something fun together. Do you want to listen to some music?"</i>
Axenia (smiling):	<i>Yes, let's listen to your favourite song.</i>

### 3.1.2 DISCUSSION ABOUT ROLE-PLAYS



**Reminding participants that all caregivers and teenagers experience stress and anger and that all relationships sometimes have conflict – it's a normal part of life. In this role-play different ways of dealing with anger and stress will be displayed.**

During this discussion, the facilitator can ask a participant for writing down others' suggestions while the facilitator can guide the discussion.

This should be a guided discussion led initially by the facilitator.

Questions to ask regarding the role-plays:

- What is different in the two role-plays?
- How does communication differ?
- How would Axenia deal with her own problems in the future if she takes scene 1 as a model?
- What feelings does Axenia experience in the two different role plays?
- How did the mother feel in the different role plays?
- How does mama deal with her stress?
- How does it affect Axenia?
- How does Axenia's reaction to her mother's stress feel for Axenia? And for mama?
- Does mama's anger help her to feel better?

In the second role-play mama dealt with her stress very differently than in the first role-play, where we saw her get angry and shout.

- What are some of the better ways to respond to a stressful situation than with anger?
- Can anybody remember any of the skills we talked about in other sessions that might be useful for mama and Axenia?
- Can you think of any other skills that might be helpful in a stressful situation like the one we saw in the role-play?

Ways of Coping with Anger and Stress: We saw how mama acted when she was angry.

Let's think about how you act when you get angry.

- Have you ever experienced any of these emotions?
- How do you behave when you are feeling angry or stressed? Does your behaviour help?
- What do you do when you get stressed and angry?



- How do stress and anger affect the way you make decisions?
- Why might it be good for you to learn how to cope with stress and anger?

Facilitator: If caregivers interject that they want to protect their child/teen by withholding potential overwhelming information from them emphasize the perspective of the child/teen.

- What is the child's perspective? The child feels excluded and that information is withheld from him/her. The child/teen is feeling excluded, not included and possibly not being old/intelligent enough.

Facilitators should emphasize: Children often understand more than parents give them credit for!

### 3.1.3 ACTIVITY: REHEARSING FOR LIFE

Now there is a thematic leap that should be made clear. Participants are now introduced to strategies which do not directly relate to the previous role play.

Ask the caregivers for tools they've already learned in earlier sessions that they can use in order to deal with difficult emotions.

#### OLD TOOLS: TALKING AND TAKING A PAUSE

- Talking: Caregivers can use I-feel sentences to express their feelings and communicate with another person more appropriate. This promotes mutual understanding and strengthens the relationship.
- Taking a Pause: Using the tool Taking a Pause caregivers learn to be aware of their feelings, to breath consciously and to stay calm.

Some of the issues, participants might mention, include:

**Talking:** Positive conversations – even about difficult emotions or topics such as drinking alcohol, smoking or intimacy (kissing, physical closeness) – with our caregivers/teens can help reduce stress.

**Being aware of anger or stress:** Learning to identify our feelings before we react is a good starting point for managing negative emotions

**Breathing:** The breathing exercise we practiced last week help to stay calm and remind us that whatever we are feeling is okay.

Remind caregivers to use these tools when responding to their teen, and to help their teen to also use these tools before making decisions in their relationships.

#### NEW TOOL: CHANGING UNHELPFUL TO HELPFUL THOUGHTS

This activity gives participants a new way to stay calm and deal with anger and frustration. It helps them to catch negative thoughts before they become too big and turn them into positive thoughts that are more helpful!

#### How to change unhelpful to helpful thoughts?

1. Participants share what happens to them when something is frustrating.
  - E.g.: A) I found out I am diabetic.
  - B) My teenager stole money from me.
2. Participants share some of the unhelpful thoughts and feelings that come up in a situation like this.
  - E.g.: A) This means I am sick and will not be able to lead a normal life.
  - B) Now I will teach it discipline.

➔ **Facilitators write these on one half of a flipchart.**
3. Facilitators ask participants to change the unhelpful thoughts and feelings into helpful thoughts that can help them during stressful situations.

- E.g.:
- A) I am going to be fine if I take good care of myself, take my medication and get support and advice from the clinic. My family will also help to support me.
  - B) I am annoyed, but I don't even know the reason. I should try to understand my child and work out a solution with him/her.

➔ **Write these on a flipchart as well.**

**Rehearsing for life:** Now that you know a few different ways that you can deal with stress and anger, let's practice:

**GUIDELINES: Facilitating Rehearsing for Life**

1. Participants pair up and "practice" telling each other they have a serious illness/lost their jobs/experienced violence.
2. One person starts by telling their partner how they feel about the fact they have a serious illness/lost their jobs/experienced violence.
3. Practice thinking and then telling your partner a helpful thought that might help to make the difficult situation feel less stressful and more manageable.
4. Change places!

**3.1.4 ACTIVITY: STAY CALM AND EXPLAIN YOURSELF: "I FEEL" STATEMENTS**

*Sometimes it feels like our teens just don't understand us! Other times it feels like they just don't listen. This can be very frustrating and make us feel like we should just give up trying to talk to them. One way to try to talk to your teens about something difficult is to use an "I feel" sentence. These are easy ways to express exactly what you are feeling in a simple way. They work like this: "I feel [emotion]" ... when you [name action] ... and I would like you to [name wish]."*  
So, one example could be: "I feel disrespected when you yell at me. I would like you to talk to me in a normal voice."

*These statements are also useful for you to use with your children because it teaches them to do the same.*

*Let's practice!*

*Can you think of some cases you could use an "I feel..." statement based on situations you experienced with your teen?*

*Can you think of any other "I feel..." statements that might help in your daily life?*

*Can you offer any "I feel..." statements about yourself right now?*

Remember to praise participants for their efforts!

**3.2 TEENS PART (SEPARATE)**

**3.2.1 ROLE-PLAY: THE TEST**

1)

*Tata, mama, Catalina and Radu are at the dinner table. They have just finished eating. Catalina and her brother Radu got their final reports today at school. Radu has failed and Catalina has passed.*

Tata:	<i>"Mhh! Children now it's time for me and your mama to see how did you do at school."</i>
Mama:	<i>"Yes, I can't wait to see your reports my children."</i>
	<i>Catalina runs to get hers, Radu walks slowly, with his head down, to fetch his. They both give their reports to their tata.</i>

Catalina (smiling, pushes her report into her tata's hands):	<i>"Tata! Look! I passed!"</i>
<i>Tata looks at Catalina's report and smiles.</i>	
<i>Tata frowns as he looks at Radu's report first.</i>	
Tata:	<i>"And this Radu? Do you know how much I pay towards your fees and you waste my money like this!"</i>
Radu (angry and shouting):	<i>"I hate school! I want to drop out anyway, I am a man I will take care of myself I don't need school"</i>
<i>Radu storms out.</i>	

2)

*Tata, mama, Catalina and Radu are at the dinner table. They have just finished eating. Catalina and her brother Radu got their final reports today at school. Radu has failed and Catalina has passed.*

Tata:	<i>"Mhh! Children now it's time for me and your mama to see how did you do at school."</i>
Mama:	<i>"Yes, I can't wait to see your reports my children."</i>
<i>Catalina runs to get hers, Radu walks slowly, with his head down, to fetch his. They both give their reports to their tata.</i>	
<i>Tata frowns as he looks at Radu's report first.</i>	
Catalina (smiling, pushes her report into her tata's hands):	<i>"Tata! Look! I passed!"</i>
<i>Tata looks at Catalina's report and smiles.</i>	
Radu (takes a deep breath):	<i>"Catalina, hold on a second, he was looking at my report."</i>
Radu (addressing his tata):	<i>"I know you will be disappointed, and I am too. I felt really scared about showing you my report. I know I can do better at school, it's just that I feel like I don't get it sometimes."</i>
Tata:	<i>"I know you are doing your best, Radu. We'll have to put our heads together and think of how we can help. You are so clever, after all! Catalina, congratulations on a great report. You are both doing your best, and I am proud of my children for this."</i>

### 3.2.2 DISCUSSION ABOUT ROLE-PLAYS

**Remember: Ask targeted questions with the goal of drawing out building blocks!**

Reminder: The House of Support already consists of the three building blocks:

1. Establishing an Understanding of Variations in Child & Adolescent Development.
2. Building Positive Relationships
3. Talking about Emotions

Today, skills for the building block "Coping with difficult Emotions" are to be practised.

The facilitator can ask a teen to write down discussion points on a flipchart. The facilitator guides the discussion.

Questions to ask after the role-play:

- What is different in the two role-plays?
- How does the communication differ?
- How does the father's behaviour influence Radu's attitude towards school in role-play 1 and 2?
- How does Tata's response affect Radu?
- What feelings does Radu experience in the two different role plays?

- How did the father feel in the different role-plays? How does Radu feel about his school grades?
- How does Radu feel about the fact that Catalina has passed?
- What could Radu do to make it easier for him to show bad school grades to his family?

Let’s talk a little bit about how you deal with anger:

- What do you do when you get stressed and angry? Does it help your stress or anger?
- How do stress and anger affect the way you make decisions?

Then participants should be encouraged to think about a time that they were stressed or angry and acted out in a violent way. They should talk about what bad things happen when you use violence because you are stressed or angry.

Participants should now think about a time when they were stressed or angry and reacted with withdrawal. Explain to the teens that sometimes children hide within themselves their feelings of anger and frustration, long before they act out violently or react in another unhealthy way.

Finally, participants should think about why might it be good to learn how to cope with stress and anger?

### 3.2.3 ACTIVITY: REHEARSING FOR LIFE

Now there is a thematic leap that should be made clear. Participants are now introduced to strategies which do not directly relate to the previous role play.

Ask the teens for tools they’ve already learned in earlier sessions that they can use in order to deal with difficult emotions.

#### OLD TOOLS: TALKING AND TAKING A PAUSE

**Talking:** Participants can use I-feel sentences to express their feelings and communicate with another person more appropriate. This promotes mutual understanding and strengthens the relationship.

**Taking a Pause:** Using the tool Taking a Pause helps participants to learn to be aware of their feelings, to breath consciously and to stay calm.

Some of the issues participants might mention include:

**Talking:** Positive conversations with our caregivers – even about tricky subjects like drinking alcohol, smoking or intimacy (kissing, physical closeness) – can help reduce stress.

**Being aware of anger:** Learning to identify our feelings before we react is a good starting point.

**Breathing:** The breathing exercise we practiced last week help to stay calm and remind us that whatever we are feeling is okay.

Remember to praise the suggestions that teens are making!



**Remind teens to use these tools when they are feeling overwhelmed with a negative emotion like anger or stress**

#### NEW TOOL: CHANGING UNHELPFUL TO HELPFUL THOUGHTS

This activity gives participants a new way to stay calm and deal with anger and frustration. It helps them to catch negative thoughts before they become too big and turn them into positive thoughts that are more helpful!

**How to change unhelpful to helpful thoughts?**

1. Participants share what happens to them when something is frustrating.  
E.g.: I keep failing math.
2. Participants share some of the unhelpful thoughts and feelings that come up in a situation like this.  
E.g.: This means I am stupid and will not be able to lead a normal life.  
→ Facilitators write these on one half of a flipchart.
3. Facilitators ask participants to change the unhelpful thoughts and feelings into helpful thoughts that can help them during stressful situations.  
E.g.: I am going to be fine if I keep working at it and get support and advice from my teacher. My family will also help to support me.  
→ **Write these on a flipchart as well.**

**Rehearsing for life:** Now that you know a few different ways that you can deal with stress and anger, let's practice.

### 3.2.4 ACTIVITY: STAY CALM AND EXPLAIN YOURSELF: "I FEEL" STATEMENTS

1. Place a chair in the centre of the discussion circle as an imaginative point of contact for the children. The children stand around it in the outer circle.

*Instead of watching a positive role-play, you are going to take turns pretending to be Radu in role-play you just saw.*

*Sometimes it feels like your caregivers just don't understand us! Other times it feels like they just don't listen. This can be very frustrating and make us feel like we should just give up trying to talk to them. One way to try to talk to your caregivers about something difficult is to use an "I feel" sentence. These are easy ways to express exactly what you are feeling in a simple way. They work like this: "I feel [emotion]" ... when you [name action] ... and I would like you to [name wish]."*

*So, one example could be: "I feel sad when you yell at me. I would like you to talk to me in a normal voice."*

Facilitators will use the following scenario to help participants practice how to manage stress and anger in a controlled way.

2. Facilitator models activity:
  - Tell the chair why Radu is angry!
  - Express how Radu feels using a "I feel" sentence.
  - Think about what he would like to change, and why.
  - Suggest about what would make the situation better for Radu.
  - Can you think of any other "I feel..." statements that might work in this role-play?
  - Can you offer any "I feel..." statements about yourself right now?
3. Participants volunteer to try "being Radu" one by one: The facilitator can use the following questions to guide the task:
  - *Tell the chair why Radu is angry.*
  - *Express how Radu feels using a "I feel" sentence.*
    - *Can you think of some ways Radu could use an "I feel..." statement based on the role-play you just saw?*
  - *Think about what he would like to change, and why.*
  - *Suggest about what would make the situation better for Radu.*
  - *Can you think of any other "I feel..." statements that might work in this role-play?*
  - *Can you offer any "I feel..." statements about yourself right now?*

## GROUP COMES BACK TOGETHER

As a facilitator you should acknowledge that the groups have had related but separate conversations, and why. Hang up the posters with the collected notes from the “NEW TOOL: CHANGING UNHELPFUL TO HELPFUL THOUGHTS” in the large group for everyone to see. If required to make it comfortable going forward invite some discussion.

When the participants read the notes, do they understand everything? Do they notice anything when they compare the contents? Do they have questions or are they perhaps surprised? To conclude the short group discussion, you can ask the participants to form “I feel” sentences in the round.

### 3.3 TAKING A PAUSE

*Taking a Pause is a tool you learnt last week. You can use this to help yourselves to deal with stress. Facilitators lead the group in the Taking a Pause activity. Afterwards, ask the participants how this activity might help them cope with anger and frustration. These are the skills that need to be highlighted (during a Pause): **being aware of your emotions, breathing, talking, changing negative into positive thoughts.***

## 4. SESSION CLOSE

### 4.1 HOME ACTIVITY

- 1. Take a pause, notice your feelings: When you feel stressed or angry, practice one of the skills we talked about during the session (being aware of our emotions, breathing, talking, changing negative into positive thoughts).*
- 2. Saying “I feel”: Caregivers and teens, you should try to have an “I feel” discussion with each other:*
  - Sometimes the best way to let your caregiver or teen know how you feel is just to start a conversation by saying “I feel”.*
  - Caregivers can use this sentence as a way to talk about behaviour that they find difficult in their teen. They can then use the same conversation to let their teen know that there will be consequences if they continue the difficult behaviour. Caregivers should think about whether there is a behaviour that annoys them that they could talk about with their teen in this way.*
  - Teens can say “I feel” as a way to talk to their caregivers if they feel like their caregivers are not being fair or not giving them a chance to speak. It’s a calm way to tell your caregivers exactly what you are feeling, to explain your side of the story... and even to say “I feel sorry”! Is there a recent time when you have wanted to say “I feel sorry” to your caregivers?*

Remind participants of the skills they learned last week and motivate them to continue training.  
*Make it a routine to practice and automate your skills:*

- From Session 3:*
- At least once during the week*
- 1. try Taking a Pause at home and think about how you feel*
  - 2. comment on your own emotions and ask your teen/caregiver about theirs. Need a tip? This is often easiest to do when they look happy. Or maybe when you are spending quality time together!*
  - 3. share that feeling with your caregiver or teen. You can also share with teachers and neighbors and friends!*
- If you find this strange to do at first, keep it very simple:*
- “Today I feel...”*
  - “How are you feeling?”*

*4. Have a conversation with your caregiver/teen about body changes and intimate relationships.*

*From Session 2: Spend at least 15 minutes of quality time together during the week. Each day ask about each other's day and try to listen carefully. Practice giving each other structured praise once a day.*

*From Session 1: Complete a physical exercise once a day! You can either use the physical exercise we did at the beginning of the session, or you can invent your own.*

#### 4.2 REVIEW TOPICS COVERED

Facilitators reflect with group on today's session to summarise learning:

*Which topics and core principles did we talk about today?*

Possible answers from participants include:

- Feeling stressed and angry is part of life
- We can learn to manage our reactions to feeling stressed and angry
- Managing our anger will make us feel better and will help us to make good decisions
- We already have several useful tools to help us deal with anger and stress
- "I feel" statements can help someone else understand your situation better

Facilitators ensure to draw out all points above from participant responses by asking follow-up questions as needed.

#### 4.3 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY

In the next session, we focus on problem solving, collect conflict solutions without the use of verbal or physical violence, e.g. insults, pressuring or hitting and discuss why it is important to have them. Before then, please remember do your home activities!

**Building Block: It is what you do at home that makes the difference!**

Facilitators remind participants about time and location of next session.

#### 4.4 THANK AND PRAISE PARTICIPANTS

ILLUSTRATION FOR SESSION 4

Mama is sick ...



Axenia: Hi mama you don't look well, is there anything wrong? What did they say at the clinic?

Mama: They found out that I am diabetic, which is making me feel stressed.



Axenia: Oh no! That sounds bad! Diabetic! Should I worry?

Mama: Don't you worry too, Axenia – it will only make everything feel worse.



Axenia: Ok, well, I understand why you look worried, Mama... But you know what? My teacher is also diabetic and she's now healthy again! I think you are going to be fine like my teacher, mama.



Mama: Yes, the nurses at the clinic told me and other women that we will be fine. I need to look after ourselves, eat healthy, and make sure I take my medication every day.



Mama: "It's always nice to talk to you my girl, every time we talk I feel better and stronger. Come, let's do something fun together. Do you want to listen to some music?"

Axenia: Yes, let's listen to your favorite song.



## PLH – FLOURISH PROGRAMME

### HOME CATCH-UP

Caregiver's Name

Teenager's Name

Date

Group

Facilitator's Name

#### SESSION 4: WHAT DO WE DO WHEN WE ARE ANGRY?

**Goal:** Managing anger and solving problems

**Overview:** In Session Five, participants continue thinking and talking about emotions. This session specifically focuses on “negative” emotions such as stress and anger.

- Everybody experiences stress and anger sometimes.
- What needs to be managed is what you do and say when you feel them.

**Illustration:** Mama is sick (positive)

**Core Lesson:** What do anger and stress mean to you? Have you ever experienced these emotions? Let's think about how you act when you get angry:

- What do you do when you get stressed and angry?
- How do stress and anger affect the way you make decisions?
- Why might it be good for you to learn how to cope with stress and anger?
- Can you think of any skills that might be helpful in a stressful situation like the in the illustration?

Remember being aware of emotions, taking a pause, and talking? Another helpful trick is to change negative into positive thoughts.

Share what happens to you when something is frustrating or stressful. Share the negative thoughts and feelings that come up in a situation like this. These are easy ways to express exactly what you are feeling in a simple way. They work like this: “I feel [emotion]” ... when you [name action] ... and I would like you to [name wish].”

Change the negative thoughts into positive thoughts that can help during stressful situations. Try it out using an example of a time something made you feel stressed out or frustrated.

**Home activity:**

When you feel stressed or angry, practice one of the skills you talked about (being aware of your emotions, breathing, talking, changing negative thoughts).

Practice using “I feel [name emotion]” statements. Can you think of any “I feel” statements that you can form for yourself right now?

**Attending sessions** can be difficult. Is there anything we can do to help you attend sessions? It is important to have a non-blaming attitude about attendance!

Did any other members of the household participate in this Home catch-up? Who?

MATERIAL AND IMPRESSIONS FROM THE FACILITATOR TRAINING (11.09.23 - 13.09.2023)

Results of the introductory discussion under framing the day

Strategy for controlling anger General	with Adolescents
Leaving the house	- beating a pillow
Shopping	- Let's talk afterwards
Listening to music	- I'm furious: Don't touch me
Swearing, cursing	- whispering instead of shouting
Doing something with hands	- explaining why shouting
Agree with all	
Breathing - inhaling	
Count 1-10	
Talking to the mirror	

Results of the activity: Rehearsing for life  
New tool: Changing unhelpful to helpful thoughts

I will die soon!  
I'm annoyed but I don't know when I will die, until then I will have a nice time with my family.

SESSION 5: PROBLEM SOLVING & TALKING ABOUT SENSITIVE TOPICS WITHOUT CONFLICT

TABLE OF CONTENT

PART 1 INTRODUCTION FOR FACILITATORS..... 124

1. WELCOME & SESSION PREPARATION ..... 125

    1.1 FACILITATORS TAKE ATTENDANCE ..... 125

    1.2 WELCOME PARTICIPANTS & CIRCLE SHARE ..... 125

    1.3 THANK AND PRAISE EVERYONE FOR COMING ..... 125

    1.4 HOME ACTIVITY DISCUSSION ..... 125

2. SESSION OVERVIEW..... 126

    2.1 FRAMING THE DAY ..... 126

    2.2 PHYSICAL EXERCISE: HUMAN KNOT ..... 127

3. CORE LESSON..... 128

    3.1 ROLE-PLAY: THE NEW FANCY PHONE..... 128

    3.2 DISCUSSION ABOUT ROLE-PLAY ..... 129

    3.3 THINKING ABOUT CONSEQUENCES..... 130

    3.4 WHY HAVE CONSEQUENCES FOR DIFFICULT BEHAVIOUR? ..... 131

    3.5 BRAINSTORMING ALTERNATIVES TO VIOLENCE AND YELLING ..... 131

        ROLE PLAY: TURN DOWN THE VOLUME ..... 132

        ROLE-PLAY DISCUSSION ..... 132

4. SESSION CLOSE ..... 132

    4.1 HOME ACTIVITY ..... 132

    4.2 REVIEW TOPICS COVERED ..... 133

    4.3 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY..... 135

    4.4 THANK AND PRAISE PARTICIPANTS ..... 135

ILLUSTRATION FOR SESSION 5..... 136

PLH – FLOURISH PROGRAMME ..... 137

LEGEND

- **GUIDELINE**-Boxes indicate important information that should definitely be considered and possibly communicated to participants (“key messages”).
- Sentences marked in black always refer to separate group work
- *Green cursive font marks passages of text are examples of text passages to illustrate how key messages can be delivered. They only serve as demonstration to facilitate your own wording*

*which is preferred.*

- Normal upright writing marks content that can be conveyed in a general sense

**PART 1 INTRODUCTION FOR FACILITATORS**

In this session, we will learn the techniques of solving problems.

In Session 5, we focus on the following core skills and principles:

- Peaceful solutions for family problems are possible
- Planning of action can help solve problems
- Take everybody’s opinion seriously
- Consider consequences when making decisions
- Using problem-solving skills to talk about body changes and intimate relationships

**Table 1 - SESSION 5 PREPARATIONS & OUTLINE**

Goal of the session	<p>The goal of this session is for the caregivers and teens to learn effective methods of solving problems so that problems that arise at home can be effectively solved without using harsh forms of discipline.</p> <p>Caregivers and teens will get an opportunity to reflect on some challenges faced in families and how to deal with them. The session will assist caregivers specifically on how to manage difficult teenager behaviours and assist teens manage their behaviours.</p>
Core Principles	<ul style="list-style-type: none"> <li>➤ Developing and practicing problem-solving skills helps us to face challenges and find new solutions to difficult situations.</li> <li>➤ There are peaceful ways to approach difficult situations and resolving conflicts.</li> <li>➤ There are alternative ways in which we can deal with problem behaviours that are not harsh or violent.</li> </ul> <p>For caregivers:</p> <ul style="list-style-type: none"> <li>➤ Stick to today’s problem: Remember it is the behaviour that is difficult, not the teenager, and there are ways of addressing the problem that are peaceful and collaborative.</li> </ul> <p>For teens:</p> <ul style="list-style-type: none"> <li>➤ Give your caregiver a chance, sometimes you can work out a problem together.</li> </ul>
Training materials & resources	<ul style="list-style-type: none"> <li>➤ Flip chart, paper, pens, markers</li> <li>➤ Attendance register</li> <li>➤ Name tag materials</li> <li>➤ For the activity ‘How do I look? – Children are aware of their bodies’:             <ul style="list-style-type: none"> <li>• Wallpaper, pencil, scissors, template of body outline</li> </ul> </li> <li>➤ Printed copies of the handouts:             <ul style="list-style-type: none"> <li>• “Putting out a fire”</li> </ul> </li> </ul>
Venue Preparations:	<ul style="list-style-type: none"> <li>➤ Make sure that the workshop venue is clean.</li> <li>➤ Set up chairs where the participants will sit in a circle.</li> </ul>

➤ Prepare all the materials that you will use during the group session.

COMPONENT	TIME	ACTIVITIES
Welcome & Session Preparation	40 mins	<ul style="list-style-type: none"> <li>➤ Facilitators take attendance.</li> <li>➤ Participants settle down.</li> <li>➤ Welcome and circle share.</li> <li>➤ Thank everyone for coming.</li> <li>➤ Home activity discussion.</li> </ul>
Session overview for the day	20 mins	<ul style="list-style-type: none"> <li>➤ Framing the day.</li> <li>➤ Physical exercise.</li> <li>➤ Activity: “Human Knot”.</li> </ul>
Core Lesson	50 mins	<ul style="list-style-type: none"> <li>➤ Role-play: The new fancy phone.</li> <li>➤ Discussion about role-play / Introduction of the problem-solving stages.</li> <li>➤ Thinking about consequences.</li> <li>➤ Why have consequences for difficult behaviour?</li> <li>➤ Brainstorming alternatives to violence and yelling.</li> <li>➤ Role-play: Turn down the volume.</li> <li>➤ Discussion about the role-play.</li> </ul>
Session Close	15 mins	<ul style="list-style-type: none"> <li>➤ New home activity for the week                             <ul style="list-style-type: none"> <li>• Practice problem solving on the problem you decided on in the session and discuss the consequences of behaviours and solutions.</li> <li>• Identify an appropriate consequence</li> </ul> </li> <li>➤ Today’s session review</li> <li>➤ Reminder of next session date and thank &amp; close</li> <li>➤ Make sure you leave the room in order</li> <li>➤ Share your observations in facilitator report</li> </ul>
Total sum of minutes	125 mins	

1. WELCOME & SESSION PREPARATION

1.1 FACILITATORS TAKE ATTENDANCE

As participants arrive, invite them to sit down. Remember to take attendance as each new person arrives.

1.2 WELCOME PARTICIPANTS & CIRCLE SHARE

At the beginning of the session, invite the participants to go around the circle and share how they are feeling today in one word.

1.3 THANK AND PRAISE EVERYONE FOR COMING

Remember you want to model positive behaviour – including providing praise!

1.4 HOME ACTIVITY DISCUSSION

Facilitators lead a discussion about the previous week’s home activity.

**Building Block: It is what you do at home that makes the difference!**

As a reminder, last week caregivers and teens were asked to practice “Taking a Pause”. Caregivers and teens should have also practiced trying to notice their feelings consciously during the week (being aware of their emotions, breathing, talking) and changing unhelpful into helpful thoughts. Some activity discussions are opportunities to share successes, reinforce core principles, and problem solve ways of overcoming challenges:

- Brainstorm solutions with participants
- Practice applying the solution.
- Evaluate how it worked



**Reminder: practical exercise has priority!**  
When challenges are reported, go back to practicing together.

**GUIDELINES: Guide a discussion**

When challenges are being discussed, try to encourage the participants to come up with solutions and support them in trying them.

Always give big praise and applause to everyone brave enough to share.

As usual, here are some possible questions to get the discussion going:

You can use Who? What? Where? Why? When? How? during every discussion.

- WHO? Who was able to practice some skills and who had an “I feel” discussion?
- WHAT? What skills did you practice? What feelings did you discuss?
- WHERE? Where did you practice or talk about your feelings??
- WHY? Why was it important to practice and to talk about feelings?
- WHEN? When did you practice or talk about your feelings?
- HOW? How did you feel after practicing skills and discussing your feelings?

**Feel free to ask follow-up questions!**

**Ask targeted questions with the goal of drawing out building blocks!**

2. SESSION OVERVIEW

2.1 FRAMING THE DAY

*This session is about developing and practicing problem-solving skills that will help you to face challenges and resolve conflicts. Conflicts happen in every family and house.*

*Sometimes conflicts are a result of unhelpful behaviour. Everybody misbehaves sometimes – including caregivers and teens!*

*• Teenagers go through a lot of physical and emotional changes and can sometimes get into difficult situations or make poor decisions.*

*• Sometimes caregivers feel so stressed they let feelings of anger take over.*

*This session aims to give you a plan of action you can follow to find a peaceful solution to a problem.*

*In order to do this, you will also think about consequences and how thinking about these can help you to make decisions when you face problem situations.*

*Can you think of any skills we talked about in previous sessions that might be helpful for this session? Before we start, let’s remind ourselves in detail about some of the skills we already have that might be useful in these two sessions.*

- Spending quality time together (Session 2)
  - When people spend time together they know each other better and create opportunities to talk about problems before they get too big.
- Praising positive behaviour (Session 2)
  - Strengthens a positive relationship and makes it easier to address difficult issues with each other.
- Be aware of your emotions (Session 3)
  - Facilitates communication and sharing emotional experiences and helps addressing one's own problems.
- Learning to cool down with Taking a Pause (Session 3)
  - Can lower the tension level and makes you act and react less emotionally in a conflict situation.
- Coping with negative thoughts: Consider helpful thoughts (instead of unhelpful thoughts) through changing your way of thinking (Session 4)
  - Can defuse problems in advance and make them less significant.

## 2.2 PHYSICAL EXERCISE: HUMAN KNOT

There is so much exciting content on the agenda for today that we have combined the physical exercise with a game to save a little time. The physical exercise this week will be the human knot. Today you are doing a physical exercise that will get you already thinking about solving problems. This activity helps explore how people can work together to solve a problem that they created in the first place.

This can be a helpful lesson: When we have a problem without a solution, we can let go. Letting go is different from giving up!

It is important to show how this activity works before you start so that everyone knows what is expected.

**GUIDELINES: Facilitating the Human Knot**

1. Facilitators should ensure that older participants are able to participate in this activity comfortably. Otherwise they are welcome to sit and watch.
2. Divide caregivers and teens into two groups. If the group is very big, then divide caregivers and teens into two groups of about 8 (care should be taken to ensure an even number of groups). It should not be divided into a caregiver and an adolescent group, but into mixed groups. But care should be taken that the caregiver-child-pairs are mixed and that stranger caregivers and adolescents hold hands.
3. Each group takes a turn to watch each other as they “untie the knot”.
4. To start, everyone stands up. If some participants cannot stand, make sure the standing participants work around them.
5. Everyone stands in a circle facing each other. Now pairs are formed by two people holding each other's hands at a time. The hands should not be crossed. Each person holds the hands of only one person. Don't hold the hand of someone standing next to you.
6. Now you are in a human knot!
7. Without letting go of hands, the Human Knot must be “untied” until it becomes a circle. Participants should be aware of each other and ensure that nobody gets hurt!
8. Start untangling... but no talking!
9. Facilitators instruct caregiver/teen group to say what the other group is doing well.
10. Once separate caregiver and teen groups have a turn, the entire group creates human knot. Entire group tries to untangle the human knot. Remember – no talking!
11. Facilitators comment on what the group is doing well. It is very important that the facilitator does not interfere with the groups – let them do it themselves!
12. Most groups will be able to untie their Human Knot. However, sometimes a group will find themselves stuck.
13. The facilitator can ask the entire group if there is anything they can do to solve this problem.
14. If the knot is still tied, the facilitator can suggest there is another alternative – letting go.
15. Ask participants what they learned from the activity. Possible answers:
  - a. Cooperation is necessary for problem solving.
  - b. It is important to be careful with each other.
  - c. Trial and error are often necessary until a good solution is found
  - d. Sometimes new ideas / unconventional ways are necessary for problem solving.
  - e. If the first attempt does not work, do not get frustrated, it is important to test different options.
  - f. Communication is a precondition for joint problem solving.

3. CORE LESSON

Facilitators to lead all activities in this core lesson as outlined.

3.1 ROLE-PLAY: THE NEW FANCY PHONE

*Mama sees a phone on Catalina's bedside table which she has never seen before.*

Mama:	<i>“Catalina, where did you get that thing?”</i>
Catalina:	<i>“It's from Mihai, my friend who bought it for me. It's a gift to say thank you for helping his sister with Math last weekend.... It's a nice phone mum it takes photos – let me take a selfie of you and I!”</i>



Mama (shouting):	<i>"I don't want to see that expensive thing! That man is no good! How does he think you are going to repay him for this?!"</i>
Catalina (upset):	<i>"That's not how it works, mama! That's not fair!"</i>
Mama:	<i>"I don't want to hear it!"</i>
Catalina (frustrated):	<i>"You're not even trying to listen to me! I don't know why I even try with you!"</i>

3.2 DISCUSSION ABOUT ROLE-PLAY

Questions to discuss about the role-play:

- How did Catalina feel, how did mum feel?

What is the problem in this role-play? What does mama see the problem is? What does Catalina see the problem is?

- Why is mama worried about Catalina receiving gifts?
- Did mama and Catalina have a good conversation about relationships with peers in the role-play you just saw? Why or why not?
- Why is it challenging for caregivers to talk to their children about this?
- Why do teenagers find it difficult to also talk to their caregivers about these issues?

Facilitators can have the following discussion with caregivers:

*Caregivers are often concerned about protecting their teenagers from sexual exploitation, abuse or maltreatment, emotionally, physically and/or sexually. They also would like to protect them from experiences of Intimate Partner Violence and all of these associated consequences for feelings and the body, including STI, teen pregnancy, addiction, anxiety or mood disorders and want to support them staying healthy, focused at school and a lot of other things that can affect them today and into the future.*

*Teenagers are more concerned with having independence and making their own decisions – including decisions about relationships – at this stage in their lives. This means that problems can arise because caregivers and teenagers have different priorities.*

*Problems can be a lot like a fire. Think about if you are cooking and accidentally your pot catches on fire. Fires are hot, dangerous and can easily get out of control if we don't tackle them early enough. When there is a fire, we need to keep calm and think clearly. Otherwise, the fire will be difficult to contain and may cause more damage to our homes.*

*Solving problems can be a lot like putting out a fire because of the steps we have to go through to put the fire out.*

*Six steps to problem-solving:*

1. *Identify the problem: Ask yourself, "What is the problem?"*
2. *Brainstorm solutions: Ask yourself, "What are the different solutions?"*
3. *Figure out what the consequences of each solution would be: Ask yourself, "What are the pluses and minuses of each solution?"*
4. *Choose one solution: Ask yourself, "Which solution should we chose?"*
5. *Try it out! Try the solution that you chose.*
6. *Reflect on whether it worked: Ask yourself, "Did our solution work?"*

Facilitators can use the illustration with the fire when they are reviewing the steps to problem solving.

*Because teenagers are no longer young children, they are able to work out problems together with their caregivers. Now let's look at the role-play we just saw and use the 6 steps we need to put out a fire to find a solution.*

To start the discussion off, facilitators could ask:

- Does mama use any of the six steps to solve the problem?
- What resolutions did they come up with?
- How could mama and Catalina use the 6-steps of problem-solving to identify a better solution?

Some of the suggestions that may come up include:

They could...

- ... Ignore the problem.
- ... Explore the consequences of different actions.
- ... Discuss the problem together.
- ... The caregiver could punish the teens.

One of the facilitators should write all the comments on the flip chart.

Once you have a lot of suggestions, ask the participants to put them in the order that we use for problem-solving and re-write them on the flipchart.

At the end, you should have a list of the six problem solving steps.

It is perfectly fine if they are worded differently, but it is important that all six steps are there.

Participants might struggle to think of some steps (especially 1, 3 & 6) and you might have to guide them there with questions.



**Emphasize again, the building block here:**

It is important to talk together about the problem in order to develop a common understanding. You cannot look for solutions to the problem if you do not yet agree on the problem. In order to reach agreement on the problem, it needs the communication of emotions, i.e. I-feel statements. Only when the problem is clear to both sides can solutions be sought.

In summary: 1. talk about the problem, 2. agree on the problem, 3. find a solution.

3.3 THINKING ABOUT CONSEQUENCES

*Thinking about the pluses and minuses – the consequences – of solutions when your problem solve can be tricky, just like being tangled up in a human knot and not really knowing which way is best to get out!*

*What is a consequence?*

*A consequence is simply the result of an action: Like the consequence of not doing the dishes today is having no clean dishes to eat from tomorrow, or the consequence of driving drunk might be a car accident. It's important for teenagers to learn that their actions have consequences. Positive actions are more likely to result in positive consequences and negative actions are more likely to result in negative consequences and potentially harm. It is also important that caregivers learn the core principles of consequences so that they can set fair consequences for their children: Consequences must be realistic, immediate, consistent, and reasonable.*

*Caregivers can use consequences if teenagers break household rules, like staying out too late. These consequences can mean taking away privileges, or things that teens are allowed to do, like going to a friend's house. Consequences help teach teenagers how to be responsible and make decisions about their actions. Teenagers like responsibility because it helps them to feel useful and needed. Can any of the teens think of responsibilities they might have?*

*Praising responsibility is rewarding for teens and a positive experience for caregivers.*

### 3.4 WHY HAVE CONSEQUENCES FOR DIFFICULT BEHAVIOUR?

Facilitators can use the information about consequences to help guide the conversation:

*Sometimes it feels like teenagers are experts at making caregivers feel stressed or frustrated. This can sometimes make caregivers want to react with hitting or yelling. Hitting is a way of punishing that usually only makes the problem worse for everyone in the long run. It may also teach your teen that it is okay to hit or yell, which may cause more problems: What if they hit their little sister or yell at their teacher?*

*All sorts of relationships and actions have consequences – not just those affecting caregivers and teens.*

*Can you think of other relationships and issues that may be affected by consequences? Friendships? Romantic relationships? Professional relationships, for instance, with the clinic nurse or doctor?*

*Here are three things to remember about consequences:*

1. *Consequences teach your teenagers that their negative behaviours, like staying out late or not doing the dishes when you ask them, have results that they might not like. These could be things like not being allowed out after school for a week, or not being allowed to watch television until they wash the dishes. And these results will help teenagers to remember to correct their negative behaviour.*
2. *Consequences should focus on the negative behaviours you want to change.*
3. *In order for consequences to work as a deterrent for unwanted behaviour they must be realistic, immediate, consistent, and reasonable:*
  - *Realistic: Caregivers must be able to follow through with the consequence they give*
  - *Immediate: Consequences should happen as soon as possible after the negative behaviour*
  - *Consistent: Whenever your teen breaks a rule or does a negative behaviour, you need to be able to use a consequence. If you only do it some of the time, then your teen will think that s/he can get away with it sometimes!*
  - *Reasonable: Consequences should be related to the behaviour and fair!*
4. *Discuss consequences in advance with your teenager. When caregivers discuss the consequences of behaviours and relationships with their teens, this helps teens make safe and healthy decisions. Remember consistency of consequences and communicating them in advance are very important features of consequences. Never come up with them surprisingly or in anger.*

*It's also important for caregivers to use praise so that teenagers understand all of their good behaviours, like doing the dishes today means we eat off a clean plate tomorrow. This will encourage them to behave in this way more and more.*

*Staying calm helps caregivers and teens to talk about problems and the consequences of specific behaviours. Understanding each other and considering consequences is important to make good decisions. In contrast, violence and yelling are not helpful consequences, and it is important for caregivers and teens to have alternatives in place when conflicts arise.*

### 3.5 BRAINSTORMING ALTERNATIVES TO VIOLENCE AND YELLING

Rules and routines help caregivers protect their children from unsafe behaviours or harm. Teens often start feeling pressured by their peers into behaving irresponsibly or doing things that may cause them harm. They are also starting to engage in intimate relationships and may feel pressure from others to do something that they may or may not want to.

Routines can protect young people from a number of harmful experiences and also help to positively manage their behaviours and health. Healthy boundaries are especially important in relationships and physical closeness.

Use the role-plays “Turn down the volume!” to help participants think about alternatives to violent behaviour.

**ROLE PLAY: TURN DOWN THE VOLUME**

*Mama has lost her job. She comes home, frustrated and stressed, and finds Radu listening to loud music. She sits down and tries to think through her situation, but she can’t concentrate because of the music.*

Mama (shouting):	<i>“Radu why do I have to repeat myself every day? Please stop playing music so loud! I can’t hear myself think!”</i>
Radu (shouting over the music):	<i>“What’s wrong Mom?”</i>
Mama (angry):	<i>“You don’t listen to me when I am talking, Radu – I asked you to TURN THE VOLUME ALL THE WAY DOWN! I can’t hear myself think! Come here so I can twist your ear!”</i>
Radu (covering his ears):	<i>“No! Mama! You will hurt me if you do that!”</i>
	<i>Radu’s sister Axenia comes running into the room to show her brother that she has made a house out of paper.</i>
Axenia:	<i>“Radu! Look! I have built a house made out of paper!”</i>
	<i>Radu (angry) is not interested in playing with his sister and crushes her house with his hand.</i>
Radu:	<i>“Who cares about your stupid house!”</i>
	<i>Axenia runs out of the house, crying... Mama sits and watches, looks upset and discouraged.</i>

**ROLE-PLAY DISCUSSION**

Questions to help discuss the role play:

- Is there a better way mama could have expressed herself or managed the situation a bit better?
- Facilitator asks participants to act these positive solutions out in front of the group.
- Is there a relationship between mama’s reaction and how Radu treated his sister?
- What alternative methods did you as a group identify that mama can use to handle the situation?

*Caregivers also sometimes worry that their teens will not be able to think about the consequences for the decisions and actions they make outside of the home.*

*By discussing consequences in a calm way, caregivers can help their teens understand the potential harm associated with specific choices, for example in choices regarding having a relationship or even just in choosing new friends. For discussing consequences of decisions around sensitive issues, we’d like to divide you as in previous sessions in two groups, one teens-only and one caregivers-only. This will help everyone to feel comfortable brainstorm and practice problem-solving from their perspectives in their peer group. (I.e. caregivers with other caregivers, and teens with other teens) before later on practice this within their family (i.e. caregiver – teen).*

**4. SESSION CLOSE**

**4.1 HOME ACTIVITY**

1. *Problem-solving: Choose a problem from home that you will practice problem-solving during the week. The “problem” can be around risky situations or any other problem that participants want to work on together practicing collaborative problem-solving and can commit to now. Using the problem that was chosen during the session might be a great option if participants can agree to, practice problem-solving regarding the respective issue at home. Remember to think about the consequences of each solution that you consider as a family.*

2. *Identify an appropriate consequence: Caregivers and teens, you should identify together one appropriate consequence (realistic, immediate, consistent and reasonable) for when the teen shows a specific challenging behaviour (e.g. a risky behaviour).*

Remind participants of the skills they learned last week and motivate them to continue training.  
*Make it a routine to practice and automate your skills:*

*From Session 4: Take a pause, notice your feelings: When you feel stressed or angry, practice one of the skills we talked about during the session (being aware of our emotions, breathing, talking, changing negative into positive thoughts).*

*Saying “I feel”: Caregivers and teens, you should try to have an “I feel” discussion with each other.*

*From Session 3: At least once during the week*

1. *try Taking a Pause at home and think about how you feel*
2. *comment on your own emotions and ask your teen/caregiver about theirs. Need a tip? This is often easiest to do when they look happy. Or maybe when you are spending quality time together!*
3. *share that feeling with your caregiver or teen. You can also share with teachers and neighbors and friends!*

*If you find this strange to do at first, keep it very simple:*

- *“Today I feel...”*
- *“How are you feeling?”*

4. *Have a conversation with your caregiver/teen about body changes and intimate relationships.*

*From Session 2: Spend at least 15 minutes of quality time together during the week. Each day ask about each other’s day and try to listen carefully. Practice giving each other structured praise once a day.*

*From Session 1: Complete a physical exercise once a day! You can either use the physical exercise we did at the beginning of the session, or you can invent your own.*

#### 4.2 REVIEW TOPICS COVERED

Facilitators reflect with group on today’s session to summarize learning:

- *Which topics and core principles did we talk about today?*

Possible answers from participants include:

- Peaceful solutions for family problems are possible.
- Planning of action and thinking carefully about the consequences of a plan can help solve problems.
- The six steps to problem-solving:
  1. Identify the problem
  2. Brainstorm solutions
  3. Figure out what the results of each solution would be
  4. Choose one solution
  5. Try it out
  6. Did it work?

For caregivers:

- Stick to today’s problem: Remember it is the behaviour that is difficult, not the teenager.

- Say exactly what you want to get what you want.
- Use praise to encourage good behaviour.
- Hitting and screaming make you and your teen both feel worse, not better.
- Discipline is about teaching for the future and not punishment.
- Strategies to deal with difficult conversations:
  - Be open and neutral when talking about sensitive issues,
  - managing emotions through taking a pause,
  - using special time together to build trust required to talk about these types of issues,
  - using ‘I feel’ statements,
  - collaborative problem-solving.

For Teens:

- Stay calm and explain yourself.
- Give your caregiver a chance! Sometimes you can work out a problem together.
- Remember to consider your caregiver’s point of view, too. This might help you see a problem (and solution!) differently.
- Difficult behaviour comes with consequences.
- Making rules together is important to keep teens healthy and safe.

Finally, if there is enough time left, you can summarize the building blocks for everyone and outline the current status of the House of Support.

**Building Blocks within this Session 5:**

- \*Resolving conflicts together can help teens learn how to solve their own problems in a constructive way
- \*Take a pause/deep breath with your teen
- \*Help him/her identify the problem
- \*Think together of solutions.
- \*Choose a solution jointly.
- \*Try it out. See if it works
- \*Reflect with your teen on whether it worked
- \*Praise each other for working together to solve the issue!

**Current status of the House of Support.**

- Session 1: Establishing an understanding of variations in child & adolescent development.
  - ➔ It is perfectly normal for children to develop at different speeds, only this must be recognized by parents.
- Session 2: Building a positive relationship.
  - ➔ The basis of every good relationship is mutual trust.
- Session 3: Talking about emotions and sensitive issues.
  - ➔ We only open up when you trust. In order to be able to address feelings, you need the ability to observe and name your own feelings and becoming aware of them.
- Session 4: Coping with difficult emotions.
  - ➔ Working on feelings is only possible when we can reliably recognize them.
- Session 5: Collaborative problem-solving.
  - ➔ Remember the six steps, which can help you.

Facilitators ensure to draw out all points above from participant responses by asking follow-up questions as needed.

#### 4.3 REMIND PARTICIPANTS ABOUT NEXT SESSION AND HOME ACTIVITY

In the next session we will focus on establishing rules and routines. Again, caregivers and teens will separate into two groups for the core lesson. But before then, remember to do your home activity. Facilitators remind participants about time and location of next session. It's important to stress that they meet at the same time, even though the group will separate into smaller teen-only and caregiver-only groups for the core lesson.

#### 4.4 THANK AND PRAISE PARTICIPANTS

ILLUSTRATION FOR SESSION 5

Putting out a fire!

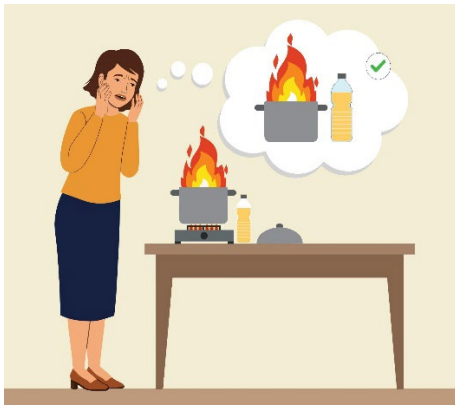
Solving problems can be a lot like putting out a fire because of the steps we have to go through to put the fire out:



First, we have to decide what kind of fire it is (Is it from the paraffin stove? From a wood fire?)



Then we ask, what are my options to put out this fire? Which option would work best? Choose one!



Try it out!



Reflect on whether or not it worked.

Next time having a problem remember these six steps you need to put out a fire to find a solution for your problem of a different kind also.

	<b>Problem-solving</b>	<b>Putting out a fire</b>
1	Identify the problem (what is the problem)	First, we ask, what are my options to put out this fire?
2	Brainstorm solutions (What are the different solutions)	Then we ask, what are my options to put out this fire?
3	Figure out what the consequences of each solution would be (A consequence is the result of an action. What are the advantages and disadvantages of the different solutions?)	Which option would work best?
4	Choose one solution (which solution should we chose?)	Choose one!
5	Try it out!	Try it out!
6	Reflect on whether it worked (Dis your solution work?)	Think about whether or not it worked.



## PLH – FLOURISH PROGRAMME

### HOME CATCH-UP

**Caregiver's Name**

**Teenager's Name**

**Date**

**Group**

**Facilitator's Name**

#### SESSION 5: PROBLEM SOLVING & DEALING WITH PROBLEMS WITHOUT CONFLICT

**Goal:**

- Learn the techniques of problem solving
- Identify problem behaviours and focus on the behaviours you want
- Learn relevant and non-harmful alternatives to harsh discipline

**Overview:**

- This session is about developing and practicing problem-solving skills that will help face challenges.
- This session aims to give participants a plan of action they can follow to find a new solution to a problem.
- Conflicts can happen in every family and house. There are lots of different ways to approach difficult situations without hitting and yelling.
- In this session, you think about acting on problems without violence, by using consequences.
- Caregivers focus on giving clear instructions to their teens in order to encourage good behaviour.
- Teens focus on working with their caregivers to problem-solve.

**Illustration:** Putting out a fire...

**Core Lesson:** Solving problems can be a lot like putting out a fire because of the steps we have to go through to put the fire out:

1. Identify the problem (Where is the fire? What is the problem?)
2. Brainstorm solutions (What are the different options to put out the fire?)
3. Figure out what the advantages and disadvantages of each option (What are the consequences?)
4. Choose one solution (Which solution should we chose?)
5. Try it (Try it out!)
6. Reflect on whether it worked (Did our solution work?)

Can you think of how you could use these six steps to solve the following problem?

A teenage girl has been given a fancy expensive phone as a gift from a man in the neighborhood. You are concerned as a caregiver about this. How do you use the 6 steps to solve this problem?

Sometimes it feels like teenagers are experts at making caregivers feel stressed or frustrated. This can sometimes make you want to react with hitting or yelling. Hitting is a way of punishing that usually only makes the problem worse for everyone.

The first step to dealing with their difficult behaviour is to remember to try to be in control of your emotions.

You can do this by using “I feel” statements to express ourselves when you have to talk about a difficult problem. Talking about the consequences of difficult behaviour with your teenagers is also a good idea:

- Consequences tell your teenagers that their actions may have results that they don’t like, and this may help them fix their difficult behaviour.
- Consequences should focus on the specific behaviour you want to change.
- For consequences to work, they need to be realistic, immediate, consistent, and reasonable.

Practice communicating and problem-solving the following case:

Teenager comes home two hours after they were supposed to. It is late and dark and mama has been worried about whether or not they are safe.  
As soon as they walk in the door mama starts yelling: “Where have you been? Didn’t you think I would be worried about you? You only ever think about yourself!”

**Home activity:**

1. Practice (6 steps of) problem-solving with a problem from your home.
2. Practice Taking a Pause.

**Building Block: It is what you do at home that makes the difference!**

**Attending sessions** can be difficult. Is there anything we can do to help you attend sessions? It is important to have a non-blaming attitude about attendance!

Did any other members of the household participate in this Home catch-up? Who?

**SESSION 6: ESTABLISHING RULES & ROUTINES**

**Table of content**

PART 1 INTRODUCTION FOR FACILITATORS ..... 140

1. WELCOME & SESSION PREPARATION ..... 142

    1.1 FACILITATORS TAKE ATTENDANCE ..... 142

    1.2 WELCOME PARTICIPANTS & CIRCLE SHARE ..... 142

    1.3 THANK AND PRAISE EVERYONE FOR COMING ..... 142

    1.4 HOME ACTIVITY DISCUSSION ..... 142

2. SESSION OVERVIEW ..... 143

    2.1 FRAMING THE DAY ..... 143

    2.2 PHYSICAL EXERCISE ..... 143

    2.3 GAME OF NO RULES ..... 143

    2.4 DISCUSSION ABOUT THE GAME OF NO RULES ..... 143

PART 2 ..... 144

3. CORE LESSON ..... 144

    3.1 ROLE-PLAY: ROUTINES FOR COMING HOME ..... 144

    3.2 DISCUSSION ABOUT ROLE-PLAYS ..... 145

    3.3 “SAYING NO” ACTIVITY ..... 146

    3.4 CAREGIVERS PART (SEPARATE) ..... 146

        3.4.2 TALKING ABOUT ABUSE ..... 146

    3.5 TEENS PART (SEPARATE) ..... 147

        3.5.1 ACTIVITY: BEING A STRONG TREE ..... 147

    3.6 MY BODY IS MINE ..... 148

    3.7 GROUP DISCUSSION ..... 149

4. SESSION CLOSE ..... 149

    4.1 PREPARING FOR HOME ACTIVITIES: WHY SHOULD WE MAKE FAMILY RULES AND ROUTINES? ..... 149

    4.2 HOME ACTIVITIES ..... 149

    4.3 REVIEW TOPICS COVERED ..... 150

    4.4 PROGRAMME CLOSURE & CELEBRATING ..... 152

        4.4.1 INVITE PARTICIPANTS TO THINK ABOUT THE PROGRAMME ..... 152

        4.4.2 TALK ABOUT HOW THEY CAN CONTINUE TO SUPPORT EACH OTHER ..... 152

        4.4.3 YOUR ON-GOING HOME ACTIVITY: KEEPING THE FIRE ALIVE ..... 152

        4.4.4 CELEBRATE ACHIEVEMENTS! ..... 153

SESSION CLOSURE & PROGRAMME END ..... 153

HANDOUT FOR CAREGIVERS: IDENTIFYING HOUSEHOLD RULES ..... 154  
 HANDOUT FOR CAREGIVERS: YOU CAN TALK ABOUT ABUSE ..... 155  
 PLH – FLOURISH PROGRAMME ..... 156  
 MATERIAL AND IMPRESSIONS FROM THE FACILITATOR TRAINING (11.09.23 - 13.09.2023)..... 157

LEGEND

- **GUIDELINE**-Boxes indicate important information that should definitely be considered!
- Sentences marked in black always refer to separate group work
- *Green cursive font marks passages of text are examples of text passages to illustrate how key messages can be delivered. They only serve as demonstration to facilitate your own wording which is preferred.*
- Normal upright writing marks content that can only be reproduced in the general sense

PART 1 INTRODUCTION FOR FACILITATORS

This week’s session is focused on making family rules and routines. Caregivers and teens will be together again in this session. In Session 6, we focus on the following core skills and principles on establishing rules and routines:

- Rules should be simple and clear
- Household rules are for *everyone* in the home
- Caregivers and teens can make rules and the consequences for breaking them together
- Rules and routines help keep families secure and reduce stress

**Table 1 - SESSION 6 PREPARATIONS & OUTLINE**

Goal of the session	<p>This session builds the main skills on how caregivers can establish rules and routines with their teenagers. The session emphasizes the importance of household rules and how routines can help</p> <ul style="list-style-type: none"> <li>• to establish a positive home environment,</li> <li>• to reduce stress and to keep families secure,</li> <li>• AND ALSO: to keep teens safe and healthy in relationships with peers.</li> </ul>
Core Principles	<ul style="list-style-type: none"> <li>➤ Rules and Routines at home help keep families secure and reduce stress inside and outside of the home.</li> <li>➤ Establishing rules can ensure that everyone at home takes responsibility and make healthy decisions about their actions</li> <li>➤ Rules should be simple and clear</li> </ul> <p>For caregivers: Some of the good about house rules and routines:</p> <ul style="list-style-type: none"> <li>• They teach responsibility.</li> <li>• Children and teenagers understand what is expected of them.</li> <li>• They help keep family members safe and healthy.</li> </ul> <p>Remember: Offer a safe, blame-free conversational space if you discuss sensitive topics.</p>

	<p>Transboundary Issues (e.g. Consent and Intimacy):</p> <ul style="list-style-type: none"> <li>• Only a clear, conscious, and continuous “yes” means “yes”, and everything else means “no”.</li> <li>• Make your right to your own body rules heard - your body belongs to you.</li> <li>• It can be helpful to share problems with caregivers.</li> </ul>
Training materials & resources	<ul style="list-style-type: none"> <li>➢ Flip chart, paper, pens, markers</li> <li>➢ Attendance register</li> <li>➢ Name tag materials</li> <li>➢ Printed copies of the handouts: <ul style="list-style-type: none"> <li>• Identifying household rules</li> <li>• You can talk about abuse</li> </ul> </li> </ul>
Venue Preparations:	<ul style="list-style-type: none"> <li>➢ Make sure that the workshop venue is clean</li> <li>➢ Set up chairs where the participants will sit in a circle</li> <li>➢ Prepare all the materials that you will use during the group session</li> </ul>

COMPONENT	TIME	ACTIVITIES	
Welcome & Session Preparation	40 mins	<ul style="list-style-type: none"> <li>➢ Facilitators take attendance.</li> <li>➢ Participants settle down.</li> <li>➢ Welcome and circle share.</li> <li>➢ Thank everyone for coming and praise.</li> <li>➢ Home activity discussion.</li> </ul>	
Session overview for the day	20 mins	<ul style="list-style-type: none"> <li>➢ Framing the day</li> <li>➢ Physical Exercise</li> <li>➢ Activity: “Game of No Rules”</li> <li>➢ Discussion on “Game of No Rules”</li> </ul>	
Core Lesson	60 mins	<ul style="list-style-type: none"> <li>➢ Role-play: Routines for coming home</li> <li>➢ Discussion about role-play</li> </ul>	
		CAREGIVERS / TEENS PART (SEPARATED)	
		<p>CAREGIVERS PART</p> <ul style="list-style-type: none"> <li>➢ Talking about abuse</li> </ul>	<p>TEENS</p> <ul style="list-style-type: none"> <li>➢ Activity: Being a strong tree</li> </ul>
		CAREGIVERS / TEENS PART (SEPARATED)	
Session Close	20 mins	<ul style="list-style-type: none"> <li>➢ Preparing for Home Activity: Why should families make rules?</li> <li>➢ New home activity for the week <ul style="list-style-type: none"> <li>• Teens and caregivers make together two rules for their household and share these with the rest of the family</li> <li>• Have at least one mealtime together as a family during the week</li> </ul> </li> <li>➢ Today’s session review</li> <li>➢ Programme closure and celebration</li> <li>➢ Thank and close</li> <li>➢ Make sure you leave the room in order</li> <li>➢ Share your observations in facilitator report</li> </ul>	

Total sum of minutes	140 mins
----------------------	----------

## 1. WELCOME & SESSION PREPARATION

### 1.1 FACILITATORS TAKE ATTENDANCE

As participants arrive, invite them to sit down. Remember to take attendance as each new person arrives.

### 1.2 WELCOME PARTICIPANTS & CIRCLE SHARE

At the beginning of the session, invite the participants to go around the circle and share how they are feeling today in one word.

### 1.3 THANK AND PRAISE EVERYONE FOR COMING

Remember you want to model positive behaviour – including providing praise!

### 1.4 HOME ACTIVITY DISCUSSION

Guide a discussion about the previous week's home activities. As a reminder, last week caregivers and teens were asked to practice problem-solving around their jointly identified problem such as a specific risky behaviour and finding collaboratively an appropriate consequence.

Home activity discussions are opportunities to share successes, reinforce core principles, and problem solve ways of overcoming challenges:

- Brainstorm solutions with participants
- Practice applying the solution.
- Evaluate how it worked.



Reminder: practical exercise has priority!  
When challenges are reported, go back to practicing together.

#### **GUIDELINES: Guide a discussion**

When challenges are being discussed, try to encourage the participants to come up with solutions and support them in trying them.

Always give big praise and applause to everyone brave enough to share.

As usual, here are some possible questions to get the discussion going:

You can use Who? What? Where? Why? When? How? during every discussion.

- WHO? Who would like to share their homework experiences with other group members?
- WHAT? What problem did you choose to work on? What consequence did you find?
- WHERE? Where did you talk about your problems and consequences?
- WHY? Why was it important to share and talk about your problems and consequences?
- WHEN? When did you talk?
- HOW? How did you feel talking about and sharing your problems?

**Feel free to ask follow-up questions!**

**Ask targeted questions with the goal of drawing out building blocks!**

## 2. SESSION OVERVIEW

### 2.1 FRAMING THE DAY

*In Session 6, we discuss the importance of rules:*

*Rules are there to keep family members safe and to make sure that everybody helps in the household. We also think about last session's discussion about how to solve problems without using violence as a strategy and about the importance of clear consequences. This will help to think about the consequences of breaking rules.*

*Remember the rules you made during our first session? Can anybody remember any of the ground rules you made? Like those, household rules should be simple and specific.*

*They also apply to everyone, even if they change according to the needs of the house and age of the teenagers. Can anybody think of a rule they might already have in their household?*

*Rules also help caregivers protect their children from unsafe behaviours or harm. Teens often start feeling pressured by their peers into behaving irresponsibly or doing things that may cause them harm. They are also starting to engage in intimate relationships and may feel pressure from others to do something that they may or may not want to.*

*Rules can protect young people from a number of harmful experiences and also helps to positively manage their behaviours and health. Healthy boundaries – or lines that mark the limit of an area of comfort – are especially important in relationships and around corporal closeness.*

### 2.2 PHYSICAL EXERCISE

Encourage participants to do their physical exercises once a day! Lead them through the head-to-toe stretch that we introduced in the first session.

### 2.3 GAME OF NO RULES

1. Ideally there should be 4 teams of about 5 players each.

**GUIDELINES: Group size**

In order for this calculation to work, the PLH groups would have to be limited to a maximum of 10 caregiver-teen-pairs. However, sometimes more than one parent can come to a session, so that you can adapt the group sizes flexibly and spontaneously to the conditions.

2. You will need some sort of treasures e.g. papers with “treasure” written on them.
3. Each team is assigned an area in a playing field.
4. At the centre of the area at equal distance from each team, there is a pile of “treasures”.
5. At the signal of the facilitator the teams are told to collect as many “treasures” as they can for their teams and to deposit the treasure in their corner.

The expected outcome is that first all teams scramble to the centre and grab the treasure like crazy, then they will start “stealing” from each other/ snatching them from each other/from each other's corners, then they will begin devising methods of “protecting” their treasures... The facilitator must be careful that no one gets hurt!!!

6. At the signal of the facilitator the game stops. Participants are out of breath and should be accusing each other of treasure theft at this point and no winner/loser can be decided!
7. Warning! Participants should be careful and play gently with each other so that nobody gets hurt as they race for the treasure!

### 2.4 DISCUSSION ABOUT THE GAME OF NO RULES

Ask teams to explore why having no rules was not a good way to play a game:

- What rules would you make for the game?
- Was the game fair?

- Were people being considerate of others?
- Why did people behave the way they did?
- How can this be made so it doesn't happen?
- Why are rules so important for a game?

PART 2

3. CORE LESSON

Facilitators to lead all activities in this core lesson as outlined.

*What's a rule?*

*Rules help to tell you what is okay and not. Like the laws that run a country, they usually have a reason, like keeping you safe or making sure that things run smoothly. They also help to understand each other and to know what you expect from one another. And this helps bring down stress for everyone in the home.*

*Creating and keeping rules together helps families to stay healthy and safe. When teens have clear rules at home, this can also help them set clear boundaries towards people outside the home, for example in their relationships with others.*

- *Praise your children when they follow the household rules.*
- *Be consistent with your household rules and routines.*
- *Rules and routines give your children a sense of security and keep them safe.*

*Recommendation for establishing house rules:*

- *Caregivers should establish house rules when everyone is calm and quiet.*
- *Caregivers should make their household rules clear and specific.*
- *Caregivers should praise and rewards can help support adolescents in following a household rule.*

3.1 ROLE-PLAY: ROUTINES FOR COMING HOME

1)

*Catalina is lying in her bed, reading a book.*

Mama (enters):	<i>"Catalina why are still reading your book; what time is it? Huh!"</i>
Catalina:	<i>"It's 10 o'clock, mama and I'm reading my book, I don't see any problem with that."</i>
Mama:	<i>"It is bed time and you've been coming home from your friends after sunset. You know you are supposed to be home before sunset every day!"</i>
Catalina:	<i>"I don't like being home so early, I'd like to stay outside as long as my friends do."</i>
Mama:	<i>"Ok, that's your choice but it's not my fault if you get any trouble!"</i>
<i>Mama walks out and slams the door.</i>	

2)

*Catalina is lying on her bed, reading a book.*

Mama (enters):	<i>"Catalina, you have been coming home from your friends after sunset." "It is too dangerous in the community after dark. From now on, our household rule is that you need to come home before sunset, okay?"</i>
Catalina:	<i>"I don't like being home so early."</i>
Mama:	<i>"I know that it is hard to come home before sunset every day, although some of your friends stay out longer. I am concerned for your wellbeing and want you to be safe. It will feel normal once you start doing it every day."</i>
Catalina:	<i>"Okay, then it would be helpful for me at the beginning, if you write me a short reminder."</i>



Mama (hugs Catalina):	<i>"I'm so happy that we can talk about these kinds of things and make rules together. It makes me feel relieved that you are willing to listen to me when it comes to safety. You are such a responsible young lady now, soon it will be your turn to remind me about things."</i>
-----------------------	---

### 3.2 DISCUSSION ABOUT ROLE-PLAYS

Questions regarding the role play:

- What does mama do differently in the two role-plays?
- How does mum communicate the house rules in the two role-plays to Catalina?
- What does mama do to support Catalina to follow the house rule in role-play one and two?
- What rule is broken in the first role-play?
- How does having a routine – doing the same thing every day – help Catalina and mama?
- Do you have any routines in your household?
- Can you think of any differences between rules and routines?
- Why is it important for children/teens to be home before sunset every day?
- What could mama and Catalina do together to help them to remember to be home punctual?
- Can you think of a time this happened to you?

**Remember: Ask targeted questions with the goal of drawing out building blocks!**

*Rules and routines usually go hand-in-hand.*

*If the rule is that school starts at 8 am every day in order to ensure that everybody can start learning at the same time, it's usually helpful to have a routine in the morning to make sure that all teenagers attending school get there by 8.*

*Routines are things that you do that you follow regularly. Like rules, they usually have a reason, like making sure that you take medication every day, or helping to make sure everybody is ready for school at the right time, or as the above, coming home at the same time each day. Routines are usually helpful in getting things done on a regular basis.*

*Can you think of any good things about routines?*

Some good things about routines:

- They help create a sense of security in the household.
- Normal routines reduce the stress of a busy life.
- They make it easier to have healthy eating and sleeping and homework habits.

*Rules and routines may also be helpful to develop for situations in which you feel unsafe. This will be discussed in the next section where the main topic is to set clear boundaries. A very important part of rules is setting "personal rules", rules that are important to you in order to set clear boundaries.*

#### **Building Blocks:**

- \*Household rules must be positive, specific, and realistic as well as clear
- \*Pay positive attention to support rules and routines
- \*Be consistent with your household rules and routines
- \*Household rules and routines may help everyone feeling safe and secure in the family

#### **GROUP DIVIDES: SEPARATE CAREGIVERS AND ADOLESCENTS HERE**

Caregivers and teens both cover the same or similar content, but in separate locations.  
Facilitators to lead all activities in this core lesson as outlined.

### 3.3 “SAYING NO” ACTIVITY

*In some situations – especially when you do not feel safe – you need to set clear boundaries, instead of explaining how you feel. In these cases, you should use the word “NO!”.*

- *In which kind of situations can it be helpful to say “NO” clearly?*  
(Possible answers from participants include: In unhealthy or unsafe situations that pose a risk of force or harm. For example, when teen is pressured/forced to hug or kiss someone, experiences pressure to drink alcohol/smoke or is bullied)
- *How can we say “NO” with our voice and with our body? Practice this if you have time.*  
(Possible answers from participants include:
  - Saying “NO” with specific words: “NO! I don’t want to drink alcohol/smoke/ I don’t want you to touch me / kiss me / I am not ready!
  - Saying “NO” loud and clear with your voice
  - Saying “NO” with your body by stepping away, putting a hand out, crossing arms.
  - Saying “NO” in a meaningful way by looking someone in the eye.)
- *Will saying “NO” always work to stop a situation?*  
(Possible answers from participants include: No, sometimes the other person will not listen or will continue to put pressure using his/her higher status/age/authority/money. Saying “NO” can be especially difficult if abuse has occurred.)
- *Where can we get help or support if saying “NO” does not work?*  
(Possible answers from participants include: Adults we trust, local support services – see referral policy)



**Remember to praise each volunteer for coming forward!**

**Remind participants that it is always best to avoid a situation that puts them at risk but that this is not always in their control.**

*As we mentioned in the beginning of the programme it is challenging to be caregiver or teenager, especially when it comes to these issues.*

*The teenage years are an important stage when caregivers need to prepare their child for adulthood. No one was born with the full understanding of skills. Caregivers had to learn most of them through their own personal experiences and in other cases from others. It is important to remember that the way caregivers interact with children has a lasting effect on their well-being.*

*A healthy caregiver-child-relationship is important for encouraging positive behaviours.*



**It is important that caregivers are able to effectively handle stressful situations and problem behaviours of their teens in a constructive manner.**

**Please note that the following activities differ between caregivers and adolescents.**

### **3.4 CAREGIVERS PART (SEPARATE)**

#### 3.4.2 TALKING ABOUT ABUSE



**Facilitators explain that the following discussion will be about talking about abuse. For the facilitators it is important to note that the caregivers are not used to this topic, it is new and probably uncomfortable for most of them. You need to approach this topic cautiously through the session.**

**Important for facilitators: Remember that an exception to confidentiality applies if a person is a danger to themselves or others and action is necessary to protect a person.**

Facilitators remind participants of the ground rules: There are no wrong answers and everyone can share without judging each other.

*What can you do when you hear about sexual violence regarding a teen?*

## COUPLE WORK

1. The facilitator divides the participants into pairs of two
2. He/she hands them the short passage 'Talking about abuse ...'.
3. The pairs should read the text and summarize what contents they consider as important to provide to affected teens.

### Talking about abuse

Say what abuse is and don't leave it at hints. You can say:

4. "There are sometimes adults or young people who touch children stupidly, i.e. on the buttocks, penis, vagina or breasts (use terms that are common in your family in each case). Some people also want to have photos or videos of children naked. No one is allowed to do this because it is strictly forbidden, but there are people who do it anyway. These can also be people you like and whom everyone finds nice. Nevertheless, even then it is in no way okay. It is very important to me that you know that you can talk to me about such things. No matter when and even if it is really unpleasant for you, you can really tell me everything. By the way, even and especially if that person doesn't want to talk about it or even forbids you to talk about it."<sup>1</sup>

Discuss the results of the small groups in plenary.

Facilitators ensure to draw out all points below from participant responses by asking follow-up questions as needed:

- Teens never have to let something happen to them if they are uncomfortable with these behaviors.
- Teens are allowed to say "no" at any time if someone does something they don't want. This is their personal right at any time.
- Pressure to conform can be very strong. Even a self-confident teenager can be persuaded to do things he or she does not want to do under peer pressure or under emotional abusive conditions. Encourage young people to listen to their own feelings, if it does not feel right, they can trust themselves and listen to their feeling.

*Key tips: What can you do when you hear about sexual violence regarding a teen?*

- *Trust the teen and care for the person who discloses.*
- *Stay calm and praise the teen for having the confidence to tell you and self-disclose. Try to manage and regulate your own negative emotions - it is not helpful to panic, be embarrassed or become angry at this point, it may only frighten or silence the teen. You can talk later to another adult to seek assistance in dealing with your own negative emotions.*
- *Support the teen to get help (e.g., family, friends etc.)*  
*Is there a counselling institute? Do you have friends or family around you who can give you social support?*

Provide the caregivers the handout 'You can talk about abuse' as a short summary of this section.

## **3.5 TEENS PART (SEPARATE)**

### 3.5.1 ACTIVITY: BEING A STRONG TREE

Remember the teens on the exercise they did a few minutes ago. Ask them what they have learned from the "Saying No Activity".

For the next activity, the teens are asked to spread out in the room at least an arm's length away from their neighbors. If feasible, the teens stand around the room with bare feet or in socks.

<sup>1</sup> Cited from: *Wie kann ich mit Kindern über sexuelle Gewalt sprechen?*, 2023, p. 4

Explain to them that you will now verbally guide them through the next activity and that they don't have to do anything but listen to your voice and your guidance.

At the beginning of the exercise, the teens are asked if they know a particularly large and strong tree, they can imagine.

*Maybe you see such a tree on the way to school; maybe there is a tree like that in your garden; maybe you remember a walk in the woods...*

*Did everyone find a tree? Then you can close your eyes if you like and imagine that you are this tree<sup>2</sup>: Your feet are solidly on the ground. You have long and strong roots that are deep in the earth and that make you stand very sure and still. Your tribe is big and strong. Your arms/branches reach up to the sky. Imagine the tree slowly moving back and forth in the wind.*

*Now the wind is getting stronger - storm is coming! The movements of the tree become stronger! Try moving your body in the storm. Your feet always remain firmly on the ground. You are agile and strong!*

*You as a tree want to resist the wind and tell it "this is not okay!" You want to be left alone and feel safe again! Shout out loud "No!"*

Encourage the children to shout "No" out loud, do it as a model. Give the teens time to experiment.

*Bravo, you put the wind in its place and shouted "No!" loud and clear! Your strong and thick roots keep you firmly in the ground.*

*The wind dies down again and the you, the tree, stands completely still again.*

*Feel the calm! Your feet are firmly on the ground! Your body is straight! Your arms stretch towards the sky and the sun. You feel safe.*

At the end of the activity, you collect together how the teens experienced the exercise and how they felt.

Together with the teens, consider in which situations they can use this feeling of strength well.

The caregivers and teens continue to remain separated for the following activity. The content will again be conducted simultaneously for the caregivers and adolescents.

### 3.6 MY BODY IS MINE<sup>3</sup>

Facilitator lead a group discussion:

*Your body belongs to you. You can decide for yourself which physical touches you allow and which not, also in the family or with friends. You have your own rules about your body. Show others clearly what your 'personal rules' are by saying "no" to boundary violations.*

*What does the term 'sexual abuse' mean?*

- *If you feel that someone is pressuring you, making stupid comments about your appearance or body, touching you without asking, hugging you, kissing you or wanting you to touch them, this is called abuse or sexual abuse. That is not OK!*
- *Sexual violence can happen to boys and girls.*
- *Sexual violence can occur among children and young people, both women and men become perpetrators.*
- *Perpetrators are often known and familiar people and only rarely strangers.*
- *Looks and words can also hurt. Abuse can take many forms. Sexual violence often begins insidiously and triggers strange, contradictory feelings. It does not necessarily have to feel like violence or be associated with pain.*

<sup>2</sup> Fieweger, E. (o. D.). Kinder stärken und stabilisieren: Anregungen für Schulkinder. ptz Stuttgart.

<sup>3</sup> This information is taken from

Bundeszentrale für gesundheitliche Aufklärung (BZgA), o. J.

*Wie kann ich mit Kindern über sexuelle Gewalt sprechen?*, 2023

- *Sexual violence can also take place without direct physical contact, e.g. when someone wants a nude photo. So, there is also sexual violence in chat rooms and on social networks.*

*All your feelings are important and valuable and must be respected and recognized by those around you – your personal rules about how you want to be touched and treated must be respected. You have the right to be comfortable and to trust your feelings. If you have a strange feeling, then you are allowed to listen to it and take it seriously.*

*What would you do, if somebody does something to you, you don't want – if they break one of the rules you have set about how you want to relate?*

- *You can say no*
- *walk away*
- *talk about it: Talk to People you trust until you find someone who believes you and will help you fight back. Even if you promised not to tell: You are allowed to pass bad secrets on. You are allowed to talk about what happens to you and to get some help. There are nice secrets that make fun like surprises. But there are also bad secrets that e. g. cause stomach pain or make you feel uncomfortable.*
- *defend yourself*
- *you can get loud and rude*

*Where you can get help?*

*There are counseling centers that you can turn to anonymously, where you will be listened to and believed. Even if you're not quite sure whether what happened to you counts as sexual violence, talk to someone you trust about it or contact a counseling center. The responsibility and blame always lies with the perpetrators. No matter what you were told.*

## **GROUP COMES BACK TOGETHER**

### 3.7 GROUP DISCUSSION

In the large group, the last activity is taken up again. Take a big poster and collect all the ideas, thoughts and learning experiences from the exercise MY BODY IS MINE.

- What do the caregivers and the teens take away from the exercise?

Are there commonalities? Where do the group experiences differ?

### 4. SESSION CLOSE

#### 4.1 PREPARING FOR HOME ACTIVITIES: WHY SHOULD WE MAKE FAMILY RULES AND ROUTINES?

Now that participants have had a chance to think about how hectic it can be to play a game with no rules and a chance to think about the differences between rules and routines, they should start thinking about how rules and routines might work in a house and why they are important.

*What are some of the rules and routines you think work well in your house? Why do you think they work well?*

Some of the good things about house rules and routines could include:

- They teach responsibility.
- They help keep family members safe and healthy.
- Children and teenagers understand what is expected of them.

#### 4.2 HOME ACTIVITIES

New Home Activities

- Teens and caregivers select some rules and discuss them with each other before making them house rules. Both, teens and caregivers should have the possibility to introduce a rule, or at least to suggest a rule.  
For support hand out the handout 'Identifying household rules'.
- Choose 2 specific household rules to discuss with each other and with other family members.

- Additionally, try to establish the new house rule having at least 1 mealtime together as a family during the week.

Remind participants of the skills they learned last week and motivate them to continue training.

*Make it a routine to practice and automate your skills:*

*From Session 5: Problem-solving: Choose a problem from home that you will practice problem-solving during the week. The “problem” can be around risky situations or any other problem that participants want to work on together practicing collaborative problem-solving and can commit to now. Using the problem that was chosen during the session might be a great option if participants can agree to, practice problem-solving regarding the respective issue at home. Remember to think about the consequences of each solution that you consider as a family.*

*Identify an appropriate consequence: Caregivers and teens, you should identify together one appropriate consequence (realistic, immediate, consistent and reasonable) for when the teen shows a specific challenging behaviour (e.g. a risky behaviour).*

*From Session 4: Take a pause, notice your feelings: When you feel stressed or angry, practice one of the skills we talked about during the session (being aware of our emotions, breathing, talking, changing negative into positive thoughts).*

*Saying “I feel”: Caregivers and teens, you should try to have an “I feel” discussion with each other.*

*From Session 3: At least once during the week*

- 1. try Taking a Pause at home and think about how you feel*
- 2. comment on your own emotions and ask your teen/caregiver about theirs. Need a tip? This is often easiest to do when they look happy. Or maybe when you are spending quality time together!*
- 3. share that feeling with your caregiver or teen. You can also share with teachers and neighbors and friends!*  
*If you find this strange to do at first, keep it very simple:*
  - “Today I feel...”*
  - “How are you feeling?”*
- 4. Have a conversation with your caregiver/teen about body changes and intimate relationships.*

*From Session 2: Spend at least 15 minutes of quality time together during the week. Each day ask about each other’s day and try to listen carefully. Practice giving each other structured praise once a day.*

*From Session 1: Complete a physical exercise once a day! You can either use the physical exercise we did at the beginning of the session, or you can invent your own.*

#### 4.3 REVIEW TOPICS COVERED

Facilitators reflect with group on today’s session to summarise learning:

*Which topics and core principles did we talk about today?*

Possible answers from participants include:

- Thinking carefully about the consequences of a plan can help solve problems.
- Rules should be simple and clear.
- Household rules are for everyone in the home.
- Caregivers and teens can make rules and the consequences for breaking them together.
- Rules and routines help keep families secure and reduce stress.
- Personal rules can help keep teens safe and healthy in relationships (with peers).
- Talking about setting boundaries, is an important strategy to avoid problematic situations.
- Only a clear, conscious, and continuous “yes” means “yes”, and everything else mean “no”.
- Saying “NO” with your voice and body language helps to clearly show what you want in an unsafe situation. If the situation continues, ask for help.

For Teens:

- Stay calm and explain yourself.
- Give your caregiver a chance! Sometimes you can work out a problem together.
- Remember to consider your caregiver’s point of view, too. This might help you see a problem (and solution!) differently.

Facilitators ensure to draw out all points above from participant responses by asking follow-up questions as needed.

#### 4.4 PROGRAMME CLOSURE & CELEBRATING

##### 4.4.1 INVITE PARTICIPANTS TO THINK ABOUT THE PROGRAMME

Participants talk about the things that they thought were helpful during the programme. They have the opportunity to listen to what other participants thought was helpful, too.

Some questions that might get the discussion going:

- What were your goals at the beginning of the PLH – FLOURISH programme?
- What have you achieved during the programme?
- What was the most important thing that you learned?
- How have you changed? How has your relationship with your caregiver/teen changed?
- Has safety changed inside your house and/or outside your house?

A reminder of what we covered:

Session 1: You established common ground rules and learned new information about developmental stages of children.

Session 2: You learned about building a positive relationship through spending time with each other. We discussed praise and you practiced ways of praising.

Session 3: You learned to identify, name and discuss emotions.

Session 4: You learned ways to manage anger.

Session 5: You discuss problem solving skills without using violence.

Session 6: You made family rules and routines.

**This topics may be outlined on a flipchart and hung up when the discussion starts.**

##### 4.4.2 TALK ABOUT HOW THEY CAN CONTINUE TO SUPPORT EACH OTHER

The last session of the programme can feel difficult to many caregivers and teens because of the support and community that the sessions have given them every week.

The programme helped to show us that we have skills, but many of these came from the ideas and knowledge of the participants.

This means that participants have what they need to continue to support each other and their families. You can do this by setting up meetings with each other every week or month, or get-togethers with your PLH - FLOURISH Partners, especially those who live near you. Remember, too, that there are people you can contact in the community who can help you (Lifeline and the clinic, for example). Facilitators should remember to praise whatever suggestions the participants make.

##### 4.4.3 YOUR ON-GOING HOME ACTIVITY: KEEPING THE FIRE ALIVE

*The programme may be over but your work as a caregiver and teen continues.*

*The home activities are the most important part of the PLH – FLOURISH programme.*

*It is important that you and your families continue to do these activities.*

*If it helps, you can use a checklist to help remind you to do your home activities each week.*

*One day, they will become so natural that we will not even think about them when we do it.*

*Until then, we must practice! Reward yourself whenever you do a home activity!*

##### ONGOING HOME ACTIVITIES

- *Quality time - Spend Quality time with your teen.*
- *Praise - Praise your teen for positive behaviours. Praise yourself and other members of your family, too!*
- *Clear Positive Instructions - Give clear and positive instructions to your teen.*
- *Problem-Solving - Problem-solving together. Try using the 6 steps.*
- *Household Rules - Reinforce household rules with lots of praise for good behaviour.*



#### 4.4.4 CELEBRATE ACHIEVEMENTS!

*We do this in a ceremony where each participant will receive a certificate of achievement. We'll need your help with presenting certificates and cheering everybody on!*

**GUIDLINE: CELEBRATION**

Facilitators organize handing out certificates. This will be done in two big groups:

First caregivers and then teens.

To start off, one facilitator should hold all the certificates for caregivers and the other should hold all the certificates for teens.

Caregivers collect certificates for their teens from facilitator 1.

Teens collect certificates for their caregivers from facilitator 2.

Ask caregivers to present a certificate to their teen. Remember to encourage everybody to clap as certificates are being handed out.

Ask teens to present a certificate to their caregiver. Remember to encourage everybody to clap as certificates are being handed out.

SESSION CLOSURE & PROGRAMME END

## HANDOUT FOR CAREGIVERS: IDENTIFYING HOUSEHOLD RULES

1. Discuss together with your child what household rules you would like to establish.
2. Household rules can either be rules that apply all the time (e.g. – Talk respectfully to your elders) or rules that happen at a certain time in the day and specifically for children (e.g. – Come home at 6 pm).
3. Identify together with your child one specific household rule that you would like to introduce during the week (“Which one this week?”).
4. Write down your household rule.
5. How to make a household rule with your child:  
Key steps are similar to giving an instruction:
  - a. Get your child’s attention: Use name, go to child’s level, establish eye contact.
  - b. Offer one suggestion for a household rule, which is important to you, that you’d like to discuss with the child common.
  - c. Explain the rule and reason for the rule.
  - d. Make sure, that the child has the possibility to say his/her opinion.
  - e. Make sure you word the rule in a positive way. Instead of “No child should be out of the house after dinner”, word it as “All children must remain at home after dinner”. –
  - f. Predict success.
  - g. Plan a reward!
6. Praising and encouraging all the time.
7. Discussion, reflection and evaluation about practice.

## HANDOUT FOR CAREGIVERS: YOU CAN TALK ABOUT ABUSE

- Teens never have to let actions / things happen to them if they are uncomfortable with them.
- Teens are allowed to say "no" at any time if someone does something they don't want, that is their right at any time.
- Pressure to conform can be very strong. A self-confident teenager can be persuaded to do things they don't want to do under peer pressure or emotional abuse. Encourage young people to listen to their own feelings, that is always right.

Helpful attitudes when discussing sexual issues with your child:

- for a confidential relationship signal transparency and objectivity, remain open and neutral.
- For teens, intimacy with peers is a basic need.
- Instead of issuing prohibitions, ensure a safe and charge-free basis for discussion. Motivate them to ask questions.
- Be empathetic to how difficult it can be for teens to stand up to peer pressure and to resist against existing "behavioral norms."

What can you do when you hear about sexual violence regarding a teen?

- Trust the teen and care for them.
- Stay calm, support the teen and honors the teen for having the confidence to tell you.  
Your own panic, embarrassment or anger would only frighten or silence the child. Receive information
- Seek support for yourself and the teen affected.
- Where can you and the teen get help (e.g. family, friends, etc.)?
- Is there a counselling institute? You are not alone with this burden!

### **Talking about abuse**

Say what abuse is and don't leave it at hints. You can say:

"There are sometimes adults or young people who touch children stupidly, i.e. on the buttocks, penis, vagina or breasts (use terms that are common in your family in each case). Some people also want to have photos or videos of children naked. No one is allowed to do this because it is strictly forbidden, but there are people who do it anyway. These can also be people you like and whom everyone finds nice. Nevertheless, even then it is in no way okay. It is very important to me that you know that you can talk to me about such things. No matter when and even if it is really unpleasant for you, you can really tell me everything. By the way, even and especially if that person doesn't want to talk about it or even forbids you to talk about it."<sup>4</sup>

---

<sup>4</sup> As cited in: Wie kann ich mit Kindern über sexuelle Gewalt sprechen? (2023, Januar). NICHT WEGSCHIEBEN(04)

## PLH – FLOURISH PROGRAMME

### HOME CATCH-UP

Caregiver's Name

Teenager's Name

Date

Group

Facilitator's Name

### SESSION 6: ESTABLISHING RULES AND ROUTINES

**Goal:** Making family rules and routines

**Overview:** In this session, we discuss rules and think about the consequences of breaking rules. We also talk about the importance of household rules and how these go together with routines that can be helpful for everyone in the home.

**Core Lesson:** Based on the handout 'IDENTIFYING HOUSEHOLD RULES', why do you think it is important to have rules? How does having a routine – doing the same thing every day – help structuring the daily life in families?

Rules and routines usually go together:

- Rules help to tell us what is okay and not. They should be clear and can be for everyone in the home.
- Rules can protect young people from a number of harmful experiences and also help to positively manage their behaviours and health. Healthy boundaries are particularly important in relationships and with regard to physical closeness.
- Routines are things that we do that we follow regularly. Like rules, they usually have a reason, like making sure that we take medication every day, or helping to make sure everybody is ready for school at the right time.

Rules and routines can help you to understand what you can expect from each other, and that can sometimes help bring the stress down in the home.

Do you follow any rules or routines? Are they helpful?

When a situation is not safe, you can say "NO" using your voice and body language.

If the situation continues – which can happen – always make sure to ask for help.

**Home activities:** Make two rules for your household and share these with your family.

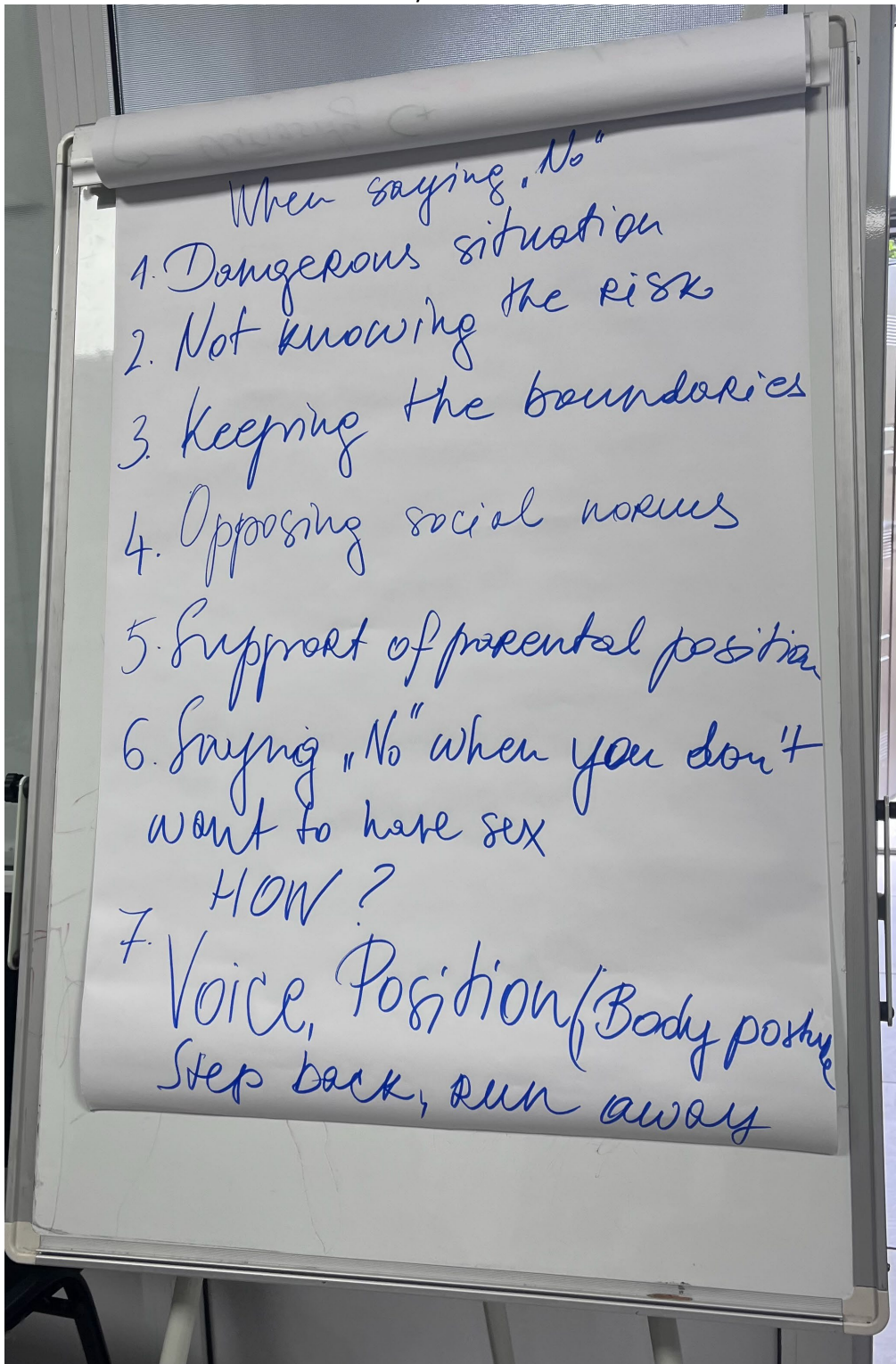
You should discuss together how you can "say no" using words and body language in unsafe situations (and practice this if an unsafe situation arises).

**Attending sessions** can be difficult. Is there anything we can do to help you attend sessions? It is important to have a non-blaming attitude about attendance!

Did any other members of the household participate in this Home catch-up? Who?

MATERIAL AND IMPRESSIONS FROM THE FACILITATOR TRAINING (11.09.23 - 13.09.2023)

Results of the activity 3.3 "SAYING NO" ACTIVITY



## Bibliography

### For the Introduction

Delfos, M. F., Kiefer, V., & Delfos, M. F. (2011). „Sag mir mal ...“: *Gesprächsführung mit Kindern (4 bis 12 Jahre)* (7. Aufl). Beltz.

Fryszler, A., & Eggemann-Dann, H.-W. (2022). *Systemisch arbeiten mit Jugendlichen: Haltungen, Strategien, Methoden und Settings*. Vandenhoeck et Ruprecht.

Melzer, C., & Methner, A. (2012). *Gespräche führen mit Kindern und Jugendlichen: Methoden schulischer Beratung*. Kohlhammer.

### For Session 1

Delfos, M. F., Kiefer, V., & Delfos, M. F. (2009). „Wie meinst du das?“: *Gesprächsführung mit Jugendlichen ; [13–18 Jahre]* (3. Aufl). Beltz.

Delfos, M. F., Kiefer, V., & Delfos, M. F. (2011). „Sag mir mal ...“: *Gesprächsführung mit Kindern (4 bis 12 Jahre)* (7. Aufl). Beltz.

Eschenbeck, H., & Knauf, R.-K. (2018). Entwicklungsaufgaben und ihre Bewältigung. In A. Lohaus (Hrsg.), *Entwicklungspsychologie des Jugendalters* (S. 23–50). Springer Berlin Heidelberg.  
[https://doi.org/10.1007/978-3-662-55792-1\\_2](https://doi.org/10.1007/978-3-662-55792-1_2)

Konrad, K., & König, J. (2018). Biopsychologische Veränderungen. In A. Lohaus (Hrsg.), *Entwicklungspsychologie des Jugendalters* (S. 1–21). Springer Berlin Heidelberg.  
[https://doi.org/10.1007/978-3-662-55792-1\\_1](https://doi.org/10.1007/978-3-662-55792-1_1)

### For Session 3

*Wie kann ich mit Kindern über sexuelle Gewalt sprechen?* (2023, Januar). NICHT WEGSCHIEBEN(04)

### For Session 5

Braun, G. (1999). *Ich sag' nein: Arbeitsmaterialien gegen den sexuellen Mißbrauch an Jungen und Mädchen* (28., überarb. Aufl). Verl. an der Ruhr.

Bundeszentrale für gesundheitliche Aufklärung (BZgA). (o. J.-a). *Das Erste Mal*. Abgerufen 3. November 2023, von <https://shop.bzga.de/pdf/13066010.pdf>

Bundeszentrale für gesundheitliche Aufklärung (BZgA) (Hrsg.). (o. J.-b). *Mädchenfragen*. Abgerufen 3. November 2023, von <https://shop.bzga.de/pdf/13066002.pdf>

Bundeszentrale für gesundheitliche Aufklärung (BZgA). (o. J.-c). *Meine Rechte*. Abgerufen 3. November 2023, von <https://shop.bzga.de/pdf/13066009.pdf>

Erzbischöfliches Ordinariat Berlin, Beauftragter zur Prävention von sexualisierter Gewalt, Teilbereich Jugendseelsorge im Erzbischöflichen Ordinariat Berlin, Bund der Deutschen Katholischen Jugend, & Diözesanverband Berlin (Hrsg.). (2022). *Kinder schützen- Kinder stärken Prävention von sexualisierter Gewalt in der Kinder- und Jugendarbeit*.

[https://praevention.erzbistumberlin.de/fileadmin/user\\_mount/PDF-Dateien/Erzbistum/Praevention/2017AHJugendarbeitAuflage3\\_akt\\_web.pdf](https://praevention.erzbistumberlin.de/fileadmin/user_mount/PDF-Dateien/Erzbistum/Praevention/2017AHJugendarbeitAuflage3_akt_web.pdf)