LIFE SKILLS

FOR

STANDARD 7

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TABLE OF CONTENTS

UNIT	**PAGE**
UNIT 1 BASIC FACTS ABOUT STIS INCLUDING HIV AND AIDS	3
UNIT 2 HIV TESTING AND COUNSELLING	4
UNIT 3 GENDER AND HIV AND AIDS	6
UNIT 4 HOME BASED CARE AND SUPPORT	7
UNIT 5 PEACEFUL CONFLICT RESOLUTION	8
UNIT 6 INTERPERSONAL RELATIONSHIPS	9
UNIT 7 EFFECTIVE COMMUNICATION ON HIV AND AIDS	10
UNIT 8 SUPPORTING THE LESS PRIVILEGED	12
UNIT 9 DRUG AND SUBSTANCE USE AND ABUSE	13
UNIT 10 PEER GUIDANCE AND COUNSELLING	14
UNIT 11 DECISION MAKING AND PROBLEM SOLVING	15
UNIT 12 STRESS AND ANXIETY	16
UNIT 13 SELF ESTEEM AND ASSERTIVENESS	17
UNIT 14 PHYSICAL AND PSYCHOLOGICAL CHANGES DURING ADOLESCENCE	19
UNIT 15 SEX AND SEXUALITY	20
UNIT 16 PLANNING	22
REFERENCES	24

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UNIT 1 BASIC FACTS ABOUT SEXUALLY TRANSMITTED INFECTIONS (STIs) INCLUDING HIV AND AIDS
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FACTORS THAT INFLUENCE THE YOUTH TO HAVE SEXUAL RELATIONSHIPS

- Peer pressure
- Lack of information about the dangers of sexual relationships
- Desire for sexual experimentation
- Curiosity
- Physical and emotional changes during adolescence
- Cultural pressures

CONSEQUENCES OF SEXUAL RELATIONSHIPS

- Sexually transmitted infections
- Unwanted pregnancies
- School dropout
- Early marriages

WHAT ARE SEXUALLY TRANSMITTED INFECTIONS

These are infections that can be transmitted through body contact during unprotected sex between an infected person and a healthy one.

COMMON SEXUALLY TRANSMITTED INFECTIONS

- Gonorrhoea
- Syphilis
- Herpes
- Hepatitis
- Candidiasis

PROBLEMS ASSOCIATED WITH HIV AND AIDS

- Absenteeism from work and school
- Reduction in productivity
- Congestion in hospitals
- Poverty
- Discrimination
- School dropout
- Orphanhood
- Loss of skilled personnel

WAYS OF MANAGING PROBLEMS ASSOCIATED WITH HIV AND AIDS

- Encouraging people to go for HTC

- Seeking early treatment
- Introducing home based care units
- Sensitising people on income generating activities
- Sensitising people on showing love and care to the patient
- Forming HIV and AIDS groups for easy access to basic needs and support
- Providing guidance and counselling
- Establishing orphanage centres

MODES OF TRANSMISSION OF SEXUALLY TRANSMITTED INFECTIONS INCLUDING HIV AND AIDS

- Unprotected sexual intercourse with an infected person
- Transfusion of contaminated blood
- Common usage of contaminated or unsterilized sharp tools
- Mother to child

EFFECTS OF SEXUALLY TRANSMITTED INFECTIONS INCLUDING HIV AND AIDS

- Destruction of body organs
- Miscarriages
- Cervical cancer
- Ectopic pregnancy
- Baby born blind

PREVENTION OF STIs INCLUDING HIV AND AIDS

- Having protected sex by using condoms properly
- Abstinence from casual sexual intercourse
- Being faithful to uninfected partner
- HIV testing and counselling
- Improving genital hygiene

UNIT 2 HIV TESTING AND COUNSELLING

THE ROLE OF HTC TO THE INDIVIDUAL, FAMILY AND COMMUNITY

To an individual;

- Knowing one's HIV status results in positive behavioural change whether one is infected or not.

- A person who is tested negative for HIV still undergoes counselling to maintain his or her negative status
- The one who is tested positive also receives counselling and is encouraged to protect himself or herself.
- The one tested positive is also advised to seek medical, social and psychological support from health practitioners, religious leaders and others around.

To the family

- Knowing the status of the infected and affected member helps care givers to play a supportive role.

To the community

- Knowing the status of the infected and affected member helps care givers to play a supportive role.

THE KEY FACTORS OF HTC

The purpose of HIV test is to detect antibodies to HIV

These antibodies are produced when a virus or bacteria infects the body. It takes three to six months after exposure to HIV for a test to detect these antibodies.

THE PROCESS OF HTC

- The client is first counselled. This is known as pre-test counselling.
- The client is tested on a sample of blood to detect antibodies for HIV
- The client undergoes post-test counselling
- The client is told of the test results

HIV TEST RESULTS

- A test can be HIV negative or HIV positive
- If the test is HIV negative, it probably means that you are not infected.
- If the test is HIV positive, it means that one is infected with HIV.

BARRIERS TO HTC

→ Scarce testing facilities
→ The stigma of HIV infection
→ Lack of information
→ Perception of low risk
→ Lack of confidentiality
→ Transportation problems
→ Fear of test results

WAYS OF OVERCOMING BARRIERS TO HTC

→ Encouraging people to be open and take AIDS as any other disease
→ Sensitising people on the importance of HTC
→ Publicising all the HTC centres in the area
→ Establishing more HTC centres throughout the country
→ Seeking counselling

UNIT 3 GENDER AND HIV AND AIDS

HOW GENDER ROLES ARE IMPARTED BY THE SOCIETY

Culture and societies influence the roles, behaviours, attitudes and activities that men and women display in the society.

This influence comes from parents, elders, teachers and peers.

Other influences are from media, language, music and religion.

By how toys and tasks are distributed by parents at home.

TERMS ASSOCIATED WITH GENDER

Sex roles

- A biological or natural role performed by either a male or female that needs to be recognised and respected. For example, child bearing is for females, fathering a child is for males.

Gender stereotype

- Expectation of what females should do which is different from males

Gender equality

- Treating both males and females equally

Gender equity

- The principle of fair treatment

Gender bias

- Discriminatory attitudes, beliefs based on social beliefs about males' and females' roles

Gender inequality

- Treatment that favours one sex over another

REASONS WHY MORE FEMALES THAN MALES ARE INFECTED WITH AND AFFECTED BY HIV AND AIDS

- Some females do not have reliable sources of income and depend on males for their financial support
- More females do not negotiate for safer sex
- Females take care of the sick and orphans
- They maintain the home
- They participate in community work
- Their biological make up makes them more vulnerable to contracting HIV which leads to AIDS

These reasons increase their chances of contracting HIV which leads to AIDS.

FACTORS THAT PROMOTE GENDER ROLES IN THE SOCIETY

- Culture
- Religion
- Family values
- Mass media
- Migration

UNIT 4 HOME BASED CARE AND SUPPORT

Home based care and support refers to the provision of medical, psychological, nutritious, spiritual and emotional support to a patient at home or in the community.

WHAT HOME BASED CARE AND SUPPORT INVOLVES

Home based care and support is carried out at the home of the patient, or his or her guardian's home.

It involves the provision of nutritional, emotional, psychological and spiritual support to a person suffering from HIV and AIDS related diseases or any other long illness.

PROBLEMS ASSOCIATED WITH HOME BASED CARE AND SUPPORT

- inadequate knowledge on nutritious foods
- inadequate knowledge on how to take care of the patient
- lack of finances to buy required materials
- lack of basic resources
- inadequate supply of drugs

- lack of conducive environment for the patient
- lack of follow up by medical personnel
- stigmatisation
- inadequate psychological, emotional and spiritual support by the community

WAYS OF MANAGING PROBLEMS ASSOCIATED WITH HOME BASED CARE AND SUPPORT

- training the care providers on how to take care of the patient
- lobbying for financial support from well-wishers
- mobilising the community for help in establishing drug revolving fund
- providing a conducive environment by cleaning the surrounding and digging pit latrines
- persuading medical personnel to visit the patients as frequently as possible
- intensifying psychological, emotional and spiritual support for the patient

IMPORTANCE OF HOME BASED CARE AND SUPPORT

- proper care is provided to the infected and affected person in a familiar environment
- it is cost effective (it reduces costs for guardians and medical personnel)
- it allows more people to be involved in caring for the patient
- it reduces overcrowding in hospitals
- it helps family members and community to accept the epidemic
- it gives chance to guardians to do other activities while looking after the patient
- it relieves the government of the pressure it faces on the number of health personnel, bed space and shortage of drugs

UNIT 5 PEACEFUL CONFLICT RESOLUTION

As people live together in a school, community or family they are bound to be involved in conflicts or disagreements because they have different interests, opinions, beliefs and views.

For them to live together peacefully, they need to learn to resolve these conflicts peacefully.

WAYS OF RESOLVING CONFLICTS PEACEFULLY

I. Negotiation
   Negotiation is a process where people who are involved in conflicts come together and talk to each other about the conflict.

II. Mediation
Mediation is a process where two persons who are in conflict involve a third person to help them come up with the solution to the problem. This person is called a mediator.

III. Arbitration
Arbitration a process similar to mediation, however, the third person that is involved is called an arbitrator. The arbitrator acts like a judge as he or she gives the final judgement as to who is right and who is wrong.

WAYS OF OVERCOMING BARRIERS TO PEACEFUL CONFLICT RESOLUTION

- not being prejudiced or discriminatory
- being tolerant
- respecting other people's ideas, customs and beliefs
- being patient
- dealing with an issue objectively and transparently
- being assertive
- promoting justice
- promoting gender equality
- accepting one's mistakes

BARRIERS TO PEACEFUL CONFLICT RESOLUTION

- prejudice
- intolerance
- discrimination
- gender inequality
- pride
- bribery

UNIT 6 INTERPERSONAL RELATIONSHIPS

Interpersonal relationship is interaction between and among people.

TYPES OF INTERPERSONAL RELATIONSHIPS

a) Relationships within the family
b) Relationships among peers
c) Relationships among juniors and seniors

d) Relationships between males and females

FACTORS THAT MAY ENHANCE RELATIONSHIPS

- love
- empathy
- economic status
- respect
- effective communication
- politeness
- tolerance
- care
- gender sensitivity
- observation of human rights
- honesty
- cooperation

FACTORS THAT DESTROY RELATIONSHIPS

- envy
- dishonesty
- gossip
- jealousy
- poverty
- violence
- sexual harassment
- poor communication
- rudeness
- disrespect
- unfulfilled promises
- gender inequality
- theft
- lies
- property grabbing
- change of status
- witchcraft
- abuse of human rights

UNIT 7 EFFECTIVE COMMUNICATION ON HIV AND AIDS

FACTORS THAT ENHANCE EFFECTIVE COMMUNICATION ON HIV AND AIDS

- choice of channel of communication
- choice of language
- audience to be communicated

SKILLS THAT PLAY AN IMPORTANT ROLE IN EFFECTIVE COMMUNICATION ON HIV AND AIDS

- tolerance
- patience
- empathy
- negotiation

BARRIERS TO EFFECTIVE COMMUNICATION ON HIV AND AIDS MESSAGES

- illiteracy
- lack of knowledge
- gender bias
- low self esteem
- poor channel of communication
- age
- religion
- language used
- social status of the one delivering the message as well as the one receiving it
- stress and anxiety
- noise

WAYS OF OVERCOMING BARRIERS TO EFFECTIVE COMMUNICATION ON HIV AND AIDS MESSAGES

- appropriate words to be used when communicating
- mutual respect between the sender and receiver
- appropriate channel of communication
- avoiding prejudice
- being objective
- improvement of literacy levels
- respect for other people's cultures
- being knowledgeable on HIV and AIDS

UNIT 8 SUPPORTING THE LESS PRIVILEGED

THE LESS PRIVILEGED

The less privileged are people who lack opportunities or advantages enjoyed by other members in communities.

These include

- orphans
- the aged
- the physically and mentally challenged
- street children
- widows
- the sick Needs of the less privileged

NEEDS OF THE LESS PRIVILEGED

- food
- shelter
- clothes
- soap
- beddings
- medication
- educations
- spiritual and moral support
- love
- care
- protection

WAYS OF ASSISTING THE LESS PRIVILEGED

- be provided with adequate and nutritious food
- be provided with reasonable clean home
- be provided with adequate clothes
- be provided with washing and bathing soap
- be provided with blankets
- be provided with adequate medical attention
- be provided with adequate spiritual and moral support
- be provided with adequate education that would empower them with suitable skills to be used
- be trained to be able to engage in some income generating activities so that they can be economically independent
- they also need to be loved and cared for

UNIT 9 DRUG AND SUBSTANCE USE AND ABUSE

MISCONCEPTIONS ASSOCIATED WITH THE USE AND ABUSE OF DRUGS AND SUBSTANCES

- Drugs and substances make a person intelligent
- Drugs make person forget his or her problems
- Drugs are fashionable and that it is primitive not to use drugs and substances
- Drugs make a person feel energetic when doing work or studying

SITUATIONS WHICH PROMOTE ABUSE OF DRUGS AND SUBSTANCES

- Culture
- Poverty
- Unemployment
- Loneliness
- Negative peer pressure

Culture

Some cultures tolerate the use of substances such as alcohol and chamba during ceremonies such as weddings and funerals.

Poverty and unemployment

These make boys and girls start taking drugs and substances in order to forget their problems. As a result, they may engage in unprotected sex thereby contracting STIs including HIV and AIDS.

Loneliness

Sometimes loneliness can influence some people to start taking drugs and substances.

Negative peer pressure

Some youths may abuse drugs and substances because they see others doing the same.

HOW ABUSE OF DRUGS AND SUBSTANCES CAN EXPOSE THE YOUTH TO HIV AND AIDS

- engaging themselves in an unprotected sexual intercourse because of loss of self control
- using unsterilized needles to inject each other

UNIT 10 PEER GUIDANCE AND COUNSELLING

Peer guidance and counselling is where members of the same age group come together to help one another solve their problems.

The youth who are empowered have high self esteem and are able to stand for their rights.

While they may empowered by their parents and teachers, it is necessary that youths of the same age, class, group or school listen to and help each other on how to address the everyday challenges.

Youths must assist one another by finding solutions to their own problems by sharing experiences on how some of them addressed similar challenges.

This can be done through narrating the stories, sharing health talks, one-to-one talks, debates, songs, poems and drama

CHALLENGES THAT THE YOUTH ENCOUNTER

- sexual abuse
- drug and substance abuse
- orphanhood

Sexual abuse

It is very common these days to hear that young people are sexually abused by adults. These adults may take advantage of the youth by offering them rewards such as money and gifts.

In schools, some teachers who are not responsible enough may promise girls and boys high grades in exchange for sexual favours.

This puts the youth at risk of contracting STIs including HIV and AIDS. It is therefore important that the youth resist and report such incidences.

Drug and substance abuse

Due to negative peer pressure, some learners indulge in drug and substance abuse. Alcohol and chamba make it difficult for one to say “no” to premarital sex which contributes to teenage pregnancies, STIs including HIV and AIDS, school drop outs and finally death.

Orphanhood

Orphans usually suffer grief and confusion. This is worsened by prejudice and social exclusion which may lead to dropping out of school and lack of health care. The resulting poverty and lack of support can expose them to risks such as contracting HIV and AIDS.

WAYS OF ADDRESSING CHALLENGES THAT THE YOUTH ENCOUNTER

- By training the youth to think positively

- By training the youth to have a sense of belonging
- By training the youth to stand firm for their rights
- By accepting situations in which they are
- By finding positive ways of improving their situations

UNIT 11 DECISION MAKING AND PROBLEM SOLVING

SITUATIONS THAT MAY REQUIRE DECISION MAKING AND PROBLEM SOLVING SKILLS

- Adolescence
- Sexual relationships
- Peer pressure
- Cultural practices
- Conflicts with parents
- Conflicts among youths

Adolescence

This is the time when youths undergo physical, emotional and psychological changes. They begin to search for their identity.

Sexual relationships

Due to physical and psychological changes, youths become curious to know the physical changes of the opposite sex. In addition to this, they become sexually attracted to members of the opposite sex.

Peer pressure

This is the influence by members of the same age group to behave in a particular way. Peer pressure may have both positive and negative effects.

Culture practices

Some cultural practices can lead to the spread of STIs including HIV and AIDS because they encourage young people to indulge themselves in risky behaviours such as early sex and drug and substance abuse. Such cultural practices are initiation ceremonies, chokolo, fisi, kusasa fumbi and mbirigha.

EFFECTS OF WRONG DECISION MAKING AND PROBLEM SOLVING

Situation	**Effects on the youth**
Adolescence	• Youth indulge themselves in immoral behaviours leading to contraction of STIs including HIV and AIDS.
Sexual relationship	• Unwanted pregnancies • Abortion • Drop out of school • Contraction of STIs including HLV and AIDS
Negative peer pressure	• Leading to drug and substance abuse • Crime • Suicide • Contraction of STIs including HIV and AIDS • Unwanted pregnancies
Culture practice	• Forced marriages • Early marriages • Contraction of STIs including HIV and AIDS.

WAYS OF RESOLVING CONFLICTS AMONG THE YOUTHS AND PARENTS

- the provision of guidance and counselling
- another person initiating a friendly discussion in which the parent and the youth will discuss their problems
- both sides or one of them accepting ideas from the other side
- the parent and youth having the spirit of putting oneself into another's situation

THE IMPORTANCE OF DECISION MAKING AND PROBLEM SOLVING WHEN RESOLVING CONFLICTS AMONG THE YOUTHS AND PARENTS

- Decision making helps a person to analyse an issue and think critically about it in order to solve a given problem
- Promoting the ability to resist situations that may lead to problems
- Helping one to avoid delinquency
- Helping individuals to concentrate on productive activities

UNIT 12 STRESS AND ANXIETY

SITUATIONS THAT MAY LEAD TO STRESS AND ANXIETY

- child abuse
- too much work

- death of a loved one
- adolescence
- academic failure
- divorce
- teenage pregnancy
- poverty
- bullying
- teasing
- unfaithfulness

EFFECTS OF STRESS AND ANXIETY

- suicide
- prostitution
- abortion
- mental confusion
- depression
- theft
- alcohol and drug abuse
- violence
- school drop out

WAYS OF MANAGING STRESS AND ANXIETY

- having enough rest
- playing games
- exercising
- seeking counselling
- talking and interacting with people
- learning to relax properly both mentally and physically
- watching television
- listening to music
- reading

UNIT 13 SELF ESTEEM AND ASSERTIVENESS

FACTORS THAT PROMOTE HIGH SELF ESTEEM

- constructive criticism
- accepting guidance and counselling

- awareness of oneself
- avoiding gender stereotyping
- avoiding religion stereotyping
- avoiding tribal stereotyping
- avoiding disability stereotyping
- rewards
- success in one's plans
- supportive school and home environment

CHARACTERISTICS OF PEOPLE WITH HIGH SELF ESTEEM

- self awareness
- facing challenges positively
- thinking critically
- enjoying work
- having direction and purpose in life
- being an ambitious
- avoiding conflicts

CHARACTERISTICS OF PEOPLE WITH LOW SELF ESTEEM

- fear of facing challenging situations
- showing aggressiveness as a defence mechanism
- counting on others to think on one's behalf
- lack of critical thinking
- fear of making mistakes
- not enjoying work
- lacking direction or purpose in life

IMPORTANCE OF ASSERTIVENESS

- avoiding social problem
- avoiding health problem such as STIs including HIV and ALDS
- achieving set goals
- promoting one's identity
- getting more of what one wants
- feeling good about oneself

HOW SELF ESTEEM PROMOTES ASSERTIVENESS

- high self esteem promotes assertiveness in that it makes one stand firm in achieving one's goal in life

UNIT 14 PHYSICAL AND PSYCHOLOGICAL CHANGES DURING ADOLESCENCE

MEANING OF PUBERTY AND ADOLESCENT AND ADOLESCENT

Puberty

Puberty is a period when boys and girls reach the age when their physical features begin to change from the body of a child to that of an adult.

Adolescence

Adolescence is a period in a person's life between childhood and adulthood.

Adolescent

Adolescent is a young person between childhood and adulthood.

PHYSICAL AND PSYCHOLOGICAL CHANGES IN BOYS AND GIRLS DURING ADOLESCENCE

Changes in boys

Physical changes	**Psychological changes**
➢ Growing taller and heavier. The hands and shoulders become bigger and stronger. ➢ The penis and testes increase in size ➢ The penis becomes erect more often and there may be wet dreams ➢ The skin becomes oily and pimples grow on the face ➢ Hairs grows around pubic area, in the armpits and eventually on the face and chest ➢ Producing sperm ➢ The voice becomes deepers	➢ They prefer to be treated like adults and want to make their own decisions ➢ They develop more self confidence. They do not like to be forced to do things they do not want to do ➢ They develop sexual feelings and start getting excited on seeing a girl ➢ Interest in girls increases and start to taking extra care on how they look ➢ There are frequent changes in their mood and sensitive to their appearance ➢ They develop increased sensitivity to failure ➢ They become more sensitive to remarks from adults and peers about the changes

Changes in girls

Physical changes	**Psychological changes**
➢ Grow faster. The hips get wider and the breasts start to grow ➢ The skin becomes oily and pimples develop on the face ➢ Hair grows around vagina and the armpits	➢ They develop sexual feelings and start getting excited on seeing a boy ➢ Interest in boys increases and start to taking extra care on how they look

➢ They experience first menstruation period ➢ Enlargement of the labia and clitoris ➢ Ovaries get bigger and developed ➢ voice becomes soft	➢ They develop more self confidence and do not like to do things they do not want ➢ They prefer to be treated like adults and want to make their own decisions ➢ They become sensitive to remarks from adults and peers about the changes ➢ Frequent changes in their mood occur ➢ They become increasingly sensitive to failure ➢ Sexual curiosity – desire to know more about sexual organs especially of opposite sex ➢ Keen on reading books concerning sex and other social activities ➢ Desire for independence from parents and other adults ➢ Feeling of love and hate

The physical changes in boys and girls during adolescence tend to influence their psychological changes.

This is because at this stage the sex hormones called testosterone in boys and oestrogen in girls are being produced. These hormones influence their emotional behaviour.

UNIT 15 SEX AND SEXUALITY

Sex refers to one's reproductive system which differentiates males from females.

Sexuality is the total expression of who one is as a human being whether male or female.

SOURCES OF INFORMATION ON SEX AND SEXUALITY

- Parents
- Mass media
- Peers
- Community
- Religion

Parents

Parents are an important source of information from which children learn about sex and sexuality. As parents teach children about accepted codes of conduct and behaviour, they learn about sex and sexuality

Mass media

Mass media such as television, radios, newspapers and magazines contribute a lot to information on sex and sexuality.

Peers

Peers is another important source of information from which children learn about sex and sexuality. They acquire knowledge about males and females. In addition, they learn about their roles as they play and work together at school and home.

Community

Children learn a lot about sex an sexuality by observing what goes on in their community. They also learn through interaction with the members of the community during initiation ceremonies.

Religion

Religion is another source of information to children on sex and sexuality. It teaches different principles of moral behaviour. As children learn about these moral principles they also acquire information about sex and sexuality.

MISCONCEPTION ABOUT SEX AND SEXUALITY

- having sex while standing cannot make a girl become pregnant
- having sex only once cannot make a girl pregnant
- the size of girl's breasts increases if touched frequently by males

CONSEQUENCES OF MISINFORMATION ON SEX AND SEXUALITY

- increasing the possibility of contracting STIs including HIV and AIDS
- disrespecting parents and elders
- lawlessness in the society

IMPORTANCE OF HAVING APPROPRIATE INFORMATION ON SEX AND SEXUALITY

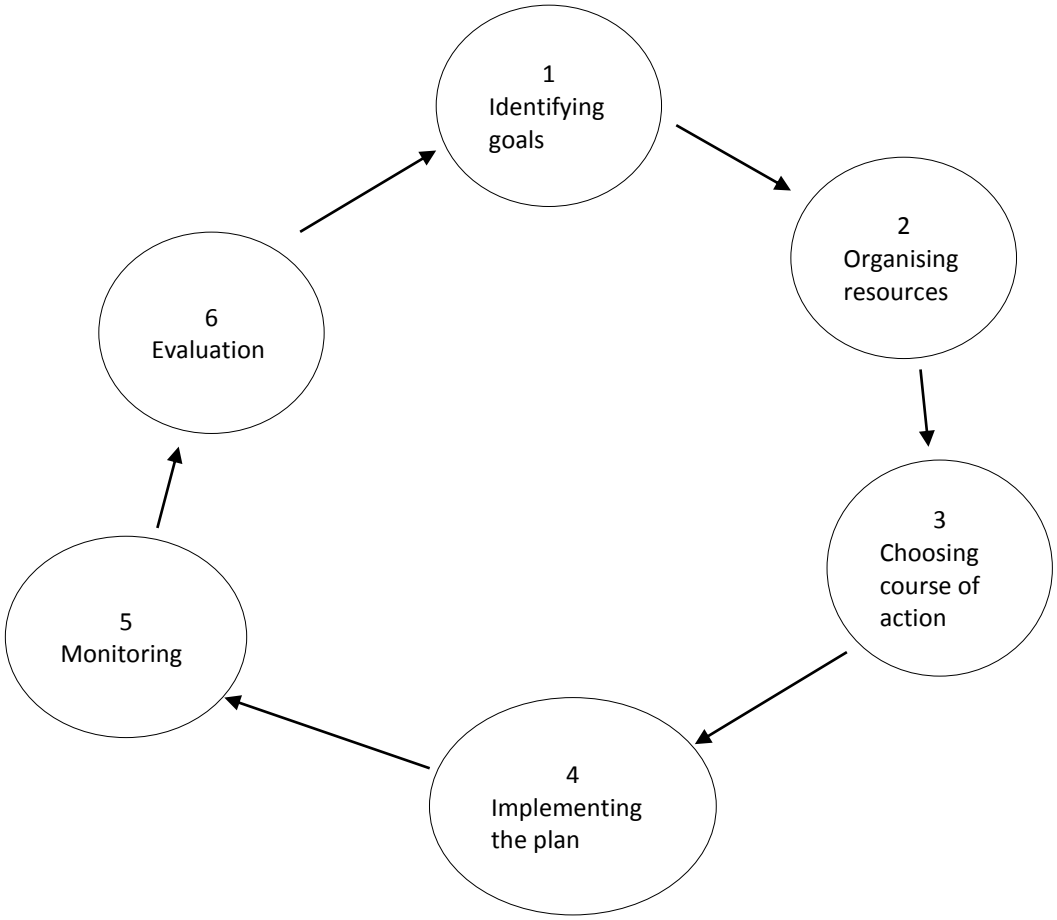
- it may help the youth to cope with problems that come with adolescence
- it may help the youth to avoid getting involved in sexual relationships which may lead to contracting of HIV and AIDS.

UNIT 16 PLANNING

Planning is the process of setting guidelines for oneself to achieve intended goals or objectives.

A plan in a self disciplining guideline to ensure that activities are carried out efficiently.

STAGES IN THE PLANNING PROCESS
Planning involves many stages. Some of the steps are:



1. **Identifying goals**
   Outlining activities one wants to do

2. **Organising resources**
   After the goals have been identified, you think of the resources that you need to achieve your goals. These may include human, material, time, monetary resources. This needs skills such as decision making, creative thinking and critical thinking.

3. **Choosing course of action**
   Selecting alternative ways of achieving your goals by choosing what activity to do.

4. **Implementing the plan**
   Translating the plan into action or doing the activity using the resources available.

5. **Monitoring**
   This is making a follow up to see the progress of the activity to do

6. **Evaluation**
   Assessing what has been done. You actually judge whether the activity is being done according to your plan.

THE IMPORTANCE OF PLANNING

- it helps to save time
- it helps to save money
- it helps to save materials
- achievement of goals
- it is easy to follow the procedures
- it helps to check and judge whether what was planned has been done
- it helps to monitor how the activity is being done
- it helps in obtaining and using resources wisely
- it helps to avoid contracting STIs including HIV and AIDS
- it helps an individual living with HIV and AIDS to avoid spreading it to other individuals including the unborn child
- it helps individuals living with HIV and AIDS to provide for the future of their children including making a wall

SITUATIONS THAT REQUIRE PLANNING

- choice of career
- marriage
- family
- business
- safe motherhood

SITUATIONS THAT CAN CHANGE PLANS

- Dropping out of school
- Early marriages
- Peer pressure
- Rainfall patterns'
- Stress and anxiety

- Natural disasters
- Death
- Lack of resources
- Unplanned pregnancies
- Illnesses
- Conflicting activities

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