



# **Native SISTERS Informing Sisters: Talking, Educating and Reducing Risk (Native SISTER)**

## **Facilitator's Guide**



**Based on:**

**Midwest Prevention Intervention Center  
of the African American Prevention Intervention Network  
Sisters Informing Sisters  
about Topics on AIDS (SISTA)**



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# NATIVE SISTERS INFORMING SISTERS: TALKING, EDUCATING AND REDUCING RISK

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## Additional Notes



### **RECOMMENDED FORMAT**

It is recommended that the Native SISTER intervention be facilitated as a two-day retreat, followed by a Women's Circle session (held three months after the retreat). The implementation manual contains additional resources (handouts, activities, energizers, etc.) that are not included in this guide.

### **OPTIONAL ACTIVITIES**

Opening/closing poems, energizers, and take-home activities can be accessed in the implementation manual in order to tailor the sessions to the intervention program.

### **LITERACY**

In order to ensure that all participants have the opportunity to fully participate in and benefit from the program, past facilitators have suggested reading all materials out loud, including the take-home assignments.

### **HISTORICAL TRAUMA**

Confronting symptoms of HT can be difficult and very emotional. It is recommended that you invite a Behavior Health Specialist or counselor who understands and is trained to deal with the effects of HT to present to your group. Ideally, this person will be someone who is also a resource that participants can access outside of the program.

### **SHARING INFORMATION ABOUT HIV/AIDS, AND OTHER SEXUALLY TRANSMITTED INFECTIONS**

When sharing information about HIV/AIDS and other sexually transmitted infections (STIs), remember to be fact based, culturally sensitive, and nonjudgmental. If you are not sure of the answer, let the participants know that you do not know the answer, but you will find it out for them.

Avoid using or repeating labels such as homosexual, gay, and drug addicts to mention only a few. Instead use terms such as men who have sex with men or substance users. This will keep the focus on risk behaviors, which can lead to infection.

### **SURVEYS AND EVALUATIONS**

Participants are asked to complete one survey before the Native SISTER retreat, one after the second day, and one at the end of the Women's Circle follow-up session. There is also an evaluation form for each day of the retreat. Ensure participants that their answers will be kept anonymous and confidential, and remind them that their knowledge, attitudes, and beliefs are extremely valuable to continuing and improving this program.

# NATIVE SISTERS INFORMING SISTERS: TALKING, EDUCATING AND REDUCING RISK

## Facilitator's Guide



This guide contains at-a-glance agendas, key talking points, and activity prompts for the six sessions of the Native SISTER intervention. It can be used as a supplement to the implementation manual and handouts.

### RECOMMENDED AGENDA

	Activities	Time (Minutes)
Day 1	Opening Poem	5
	Session 1	120
	Session 2	140
	(Optional) Women's Circle	5
	Lunch	60
	Session 3	100
	Closing Reflection	5
Day 2	Opening Poem	5
	Session 4	100
	Session 5	120
	(Optional) Women's Circle	5
	Lunch	60
	Session 6	80
	Closing Reflection	5
Women's Circle Session (3 Months After Retreat)	Open Discussion	120



**Native SISTERS Informing Sisters:  
Talking, Educating and Reducing Risk  
(Native SISTER)**

**SESSION ONE**

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Being a Proud American Indian Woman

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# SESSION ONE

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## Being a Proud American Indian Woman



This session emphasizes the importance of self-love, cultural pride, and the positive qualities of being a American Indian woman.

**ESTIMATED TIME:** 120 minutes

**PURPOSE:** To identify positive role models in their lives and learn about the importance of having and prioritizing personal values, and how they affect decision-making.

**BY THE END OF THIS SESSION, PARTICIPANTS WILL HAVE:**

1. Discussed what it means to be a American Indian woman.
2. Identified positive attributes of being a American Indian woman.
3. Identified American Indian women who are personal role models.
4. Discussed what values are and how having values and recognizing one's strengths can have positive effects on one's life

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# SESSION ONE

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## Being a Proud American Indian Woman

### GLOSSARY



- **Native** refers to a person belonging by birth to a people regarded as indigenous to a certain place, who often maintain cultural identification through tribal affiliation or community recognition.
- **Gender** refers to a person's sex or the behavioral, cultural, or psychological traits typically associated with one's gender or gender that they identify with.
- **Pride** refers to a sense of one's dignity, value, self-respect, and personal worth.
- **Values** are principles, standards, or qualities considered worthwhile or desirable. Values are also the beliefs of a person or social group in which there is an emotional investment (either for or against something). Values are regarded highly, and one's personal values are usually difficult to change.
- The list of **Traditional Native Values** is a set of ten core values, beliefs and behaviors found within many American Indian Tribes. (Sources: [www.dictionary.com](http://www.dictionary.com)  
<http://www.cehd.umn.edu/CAREI/Reports/Rpractice/Spring97/traditional.html>)

# SESSION ONE

## Being a Proud American Indian Woman



### AT-A-GLANCE AGENDA

Activities	Time (Minutes)	Materials
Introductions and Overview	20	<ul style="list-style-type: none"><li>Prepared poster papers</li></ul>
Norms: Native SISTER Agreements	5	<ul style="list-style-type: none"><li>Prepared poster paper</li></ul>
"I Am..." Poem	15	<ul style="list-style-type: none"><li>"I Am..." Poem template 1B</li></ul>
Being a Proud American Indian Woman	20	<ul style="list-style-type: none"><li>Prepared poster paper</li></ul>
Portfolio	20	<ul style="list-style-type: none"><li>Solid colored folders (with pockets)</li><li>Markers, stickers, magazines, glue sticks</li><li>Any other arts and crafts items that can be used to decorate</li></ul>
Traditional Native Values and Personal Values	20	<ul style="list-style-type: none"><li>Traditional Native Values handout 1C</li><li>Strengths and Values Tree handout 1D</li></ul>

### YOU WILL NEED:

- Community referral List
- Section 1 handouts
- Sign-in sheet
- Name tags
- Easel and poster paper
- Markers
- Tape
- Pens/pencils
- Self-stick note pads
- Healthy snacks (if doing "Flavor" icebreaker)
- Copies of "Bingo" cards (if doing "Getting-to-Know-You" icebreaker)
- Folders

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# SESSION ONE

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## Being a Proud American Indian Woman



### INTRODUCTIONS AND OVERVIEW

**PURPOSE:**

- To introduce the Native SISTER facilitators and participants
- To give a brief overview of the Native SISTER intervention
- To create a positive climate for groups sharing and learning

**KEY TALKING POINTS:**

- Native SISTER is a social-skills building intervention for American Indian women, created by American Indian women designed to help reduce sexual risk behaviors
- Native SISTER is adapted from the SISTA curriculum, which was developed by African American women for African American women. Native SISTER has been redesigned using a similar logic model that is based on American Indian theoretical foundations and interventions to be gender and culturally relevant.
- Native SISTER will focus on: Native and gender pride; HIV/AIDS risk reduction education; proactive sexual communication training; condom negotiation and demonstration; and coping skills

**ACTIVITIES:**

- Introductions
- 1-2 Icebreaker activities (recommended: "Flavors," "Getting-to-Know-You" Bingo)
- Questions and Answers



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# SESSION ONE

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## Being a Proud American Indian Woman



### Native SISTER AGREEMENTS

**PURPOSE:**

- To establish a set of agreed upon standards (norms) that will guide behavior during the Native SISTER intervention
- To allow participants to set those standards and adhere to them throughout each session, thus taking ownership of setting a safe and comfortable climate

**KEY TALKING POINTS:**

- Setting agreed upon norms for conduct and behavior will create a safe and comfortable environment during the sessions
- We are not here to judge one another. Negative or derogatory remarks are unproductive and unacceptable
- Examples include:
  - What is shared in the Women's Circle, stays in the Women's Circle
  - No cell phones
  - When someone is speaking listen respectfully

**ACTIVITIES:**

- On the poster paper, write the ground rules the participants suggest
- Post the poster paper in a visible area of the room during each session
- When behavior deviates from the list, refer participants back to the agreements
- Re-visit the agreements at the beginning of each session as a reminder

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# SESSION ONE

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## Being a Proud American Indian Woman



### PARKING LOT/ IN THE KITCHEN

**PURPOSE:**

- To provide participants with a place to “park” their concerns and questions to be answered by facilitators at a later time during the session

**KEY TALKING POINTS:**

- A place where women can gather to talk about issues with other women, where there are no men or children, and where they can speak freely
- Allows participants to post questions and concerns anonymously to be answered at a later time

**ACTIVITIES:**

- Place prepared poster paper “In the Kitchen” on the easel or post it on the wall.
- Distribute self-stick note pads and pens/pencils to participants, and place note pads and pens/pencils the poster paper.

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# SESSION ONE

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## Being a Proud American Indian Woman



### OPENING POEM: "I AM..."

**PURPOSE:**

- To emphasize pride, values, creativity, and strength
- To use examples and experiences from your own lives as strong American Indian women to write your own poem

**FACILITATOR NOTES:**

- Some participants may be reluctant about writing a poem. Explain that we will be using an easy to follow template that will accommodate all levels of creativity. You can also remind them that this is a safe environment and that what they have to say and share is important to the rest of the group. You may also have a participant who would rather not use the template and instead would prefer to free-write and create her own "I Am" poem. Be flexible and encourage all levels of expression!
- Some participants may be reluctant or find it difficult to write or talk about their strengths. They may feel it is boastful or a form of bragging. Remind them again that this is a safe environment and that sharing their strengths and taking pride in them is an important part of this program.

**KEY TALKING POINTS:**

- Did you notice any common themes? Strengths? Worries? Hopes?
- Were there any "I am" statements that were more difficult than others?
- How did it feel to share your poem with the group?
- Is there an "I am" statement we should include in the future?

**ACTIVITIES:**

- Distribute a copy of handout 1B—Template for the "I Am" poem to each participant.
- Read the directions for completing the poem and read the sample poem aloud or ask for a volunteer to read the sample .
- Allow 5-10 minutes for participants to complete the template. (Optional: share your own poem to encourage participation.) Ask if anyone would like to share her poem with the group.

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# SESSION ONE

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## Being a Proud American Indian Woman



### BEING A PROUD AMERICAN INDIAN WOMAN

**PURPOSE:**

- To discuss what it means to be a American Indian woman
- To identify strong American Indian women in our lives

**KEY TALKING POINTS:**

- What does it mean to be a American Indian woman?
- Who is a strong American Indian woman in your life?
- Our culture is grounded in tradition, and as strong American Indian women, we are worthy of carrying on our people's legacy.

**ACTIVITIES:**

- Ask participants the first key talking point; write responses on the prepared poster paper, and ask participants to share explanations.
- Place second prepared poster on easel, and ask participants the second key talking point, asking for explanations.
- Place the two poster papers side-by-side and ask participants to help you link words or characteristics from the first poster paper to a woman (or women) on the second poster paper.

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# SESSION ONE

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## Being a Proud American Indian Woman



### PORTFOLIO

**PURPOSE:**

- To create personalized portfolios for handout storage for future reference
- To personalize and foster ownership in the Native SISTER program

**KEY TALKING POINTS:**

- Folders may be decorated in any manner participants like
- It is important to keep all handouts and bring portfolios to each session

**ACTIVITIES:**

- Distribute folders and art supplies (markers, colored pencils, stickers, magazines, scissors, glue sticks, etc.)
- Allow approximately 30 minutes for decoration and conversation amongst participants.

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# SESSION ONE

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## Being a Proud American Indian Woman



### TRADITIONAL NATIVE VALUES & PERSONAL VALUES

**PURPOSE:**

- To define and discuss values, the importance of having one's own set of values, and how those values impact their personal decision making.

**KEY TALKING POINTS:**

- What are your personal values? Which ones are important to you?
- Reflective questions:
  - Was it hard to identify your strengths and values?
  - Why is it important for us to know what our values are before we make decisions?
  - When have your values guided a decision you made?
  - What decisions in your life might this exercise help you with?
- Keep personal values in mind when making decisions, because thinking about values may stop you from making poor choices that could have negative consequences for you or your loved ones.

**ACTIVITIES:**

- Distribute handout 1C– Traditional Native Values, explaining they are examples of values.
- Distribute handout 1D, explaining the purpose is to reflect on your own strengths and values. Give participants 10 minutes to complete handout.
- Ask volunteers to share their responses.



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**SESSION TWO**

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Historical Trauma & Cultural Resilience

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# SESSION TWO

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## Historical Trauma & Cultural Resilience



This session emphasizes cultural resilience and proposes that confronting and understanding the trauma are the first steps to overcoming and transcending the negative effects.

**ESTIMATED TIME:** 140 minutes

**PURPOSE:** To define historical trauma and explain how its symptoms may contribute to sexual risk factors and other risky behaviors for American Indian women.

**BY THE END OF THIS SESSION, PARTICIPANTS WILL HAVE:**

1. Defined and discussed historical trauma
2. Identified symptoms of historical trauma in their own lives and communities
3. Identified and examined symptoms of historical trauma and how they may affect decision-making and lead to risky behaviors
4. Defined and discussed cultural resilience
5. Identified examples of their own resilience and ability to overcome the effects of trauma
6. Identified resources within their tribes and in their communities that provide guidance, traditional healing



# SESSION TWO

## Historical Trauma & Cultural Resilience



### AT-A-GLANCE AGENDA

Activities	Time (Minutes)	Materials
Introduction to Historical Trauma	40	<ul style="list-style-type: none"><li>• Prepared poster papers</li><li>• Historical Trauma handout 2C</li><li>• Brainstorm handout 2D</li></ul>
Our Backpack	45	<ul style="list-style-type: none"><li>• Backpack</li><li>• Rocks</li><li>• Balloons</li><li>• Our Backpack Handout</li></ul>
Trauma, Risk Factors, & Decision Making	15	<ul style="list-style-type: none"><li>• Decision Making handout 2E</li></ul>
Cultural Resilience Activity: Your Story	40	<ul style="list-style-type: none"><li>• Prepared poster papers</li><li>• Life-line template handout 2F</li><li>• Colored pencils, markers, pens</li><li>• Cultural Resilience handout 2G and CR and Decision Making handout 2G.1</li></ul>

### YOU WILL NEED:

- Section 2 handouts

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# SESSION TWO

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## Historical Trauma & Cultural Resilience



### HISTORICAL TRAUMA: MY COMMUNITY, MY TRIBE, MY LIFE

**PURPOSE:**

- To provide participants with basic information on Historical Trauma.
- To provide examples of trauma and the psychological and emotional effects
- To identify symptoms of Historical Trauma which contribute to and/or co-exist with other risk factors related to HIV/AIDS

**FACILITATOR NOTES:**

- Confronting symptoms of HT can be difficult and very emotional. It is recommended that you invite a Behavior Health Specialist or counselor who understands and is trained to deal with the effects of HT to present to your group. Ideally, this person will be someone who is also a resource that participants can access outside of the program.

**KEY TALKING POINTS:**

- If you have a story to share of what the people and land was before the changes and assimilation took place, please do so.
- Maria Yellow Horse Brave Heart (Lakota) conceptualized the theory of historical trauma and is on the forefront of researching and studying its theories and processes for intervention and healing.
- Each tribe has its own story of trauma and we will be exploring the experience of your tribe and perhaps experiences in your own life

**ACTIVITIES:**

- Distribute handout 2C—Historical Trauma, allowing 2-3 minutes for review.
- Discuss handout and key talking points.

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# SESSION TWO

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## Historical Trauma & Cultural Resilience



### HISTORICAL TRAUMA: MY COMMUNITY, MY TRIBE, MY LIFE

**PURPOSE:**

- To help participants reflect on and verbalize examples of historical trauma they may have experienced

**KEY TALKING POINTS:**

- Discussion questions:
  - How did it feel to share your experiences of trauma with the group?
  - What types of trauma were mentioned most often?
  - How is Tribal or community trauma linked to personal trauma?

**ACTIVITIES:**

- Show video clip from “Breaking the Cycle: Stories of Alaska Native Women” on Historical Trauma
- Distribute handout 2D—Historical Trauma: My Community, My Tribe, My Life, allowing 2-3 minutes for review. Brainstorm examples of trauma in community.
- Break into groups of 3-5 to share examples of trauma in community for 10 minutes, then share as a whole, writing examples on poster paper.

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# SESSION TWO

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## Historical Trauma & Cultural Resilience



### TRAUMA, RISK FACTORS, AND DECISION MAKING

**PURPOSE:**

- To demonstrate how historical trauma and risk factors can be interrelated and often times coexist
- To recognize trauma and other risk factors as the first step towards changing behaviors and making healthier decisions

**KEY TALKING POINTS:**

- What are the similarities between trauma symptoms and risk factors?
- Sometimes people who suffer from depression may choose to self-medicate with alcohol, drugs or sex instead of seeking counseling or dealing with the grief. It has been shown that under the influence of alcohol, the rate of protection decreases while the chance of contracting HIV/AIDS and other STIs increases.
- Ultimately YOU make the decisions that will affect your future and the Native SISTER Intervention is a tool to help educate you in the decision-making process. Before we look to the future, let's reflect on our past.

**ACTIVITIES:**

- Distribute a copy of handout 2E—Trauma, Risk Factors, and Decision Making to each participant.
- Read the introductory paragraph, or ask for a volunteer to read.
- Have discussion about trauma symptoms, risk factors, and decision making as group.
- Have participants fill in the second flow chart using examples from the list above. Ask for volunteers to share their flow chart with the group.

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# SESSION TWO

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## Historical Trauma & Cultural Resilience



### CULTURAL RESILIENCE

**PURPOSE:**

- To allow participants to reflect on important events in their lives, see the positive and negative events which have helped shape them into the women they are today
- To learn about Cultural Resilience and see how both cultural and personal resilience have helped and will continue to help them overcome trauma and other obstacles in their lives

**KEY TALKING POINTS:**

- Discussion questions:
  - Do you or your family practice any of the values/beliefs/behaviors on the medicine wheel?
  - When looking at the medicine wheel, what happens if one area is not in balance with the others?
  - Look at high points or positive events in your life; did any aspects of Cultural Resilience play a part in those events?
  - Now look at the low or negative events. How did you get through that time or overcome the obstacles involved? Did any aspects of Cultural Resilience give you the strength to overcome and move on?
- Cultural Resilience automatically provides us with protective factors that help guide our behavior and decision making.

**ACTIVITIES:**

- Distribute a copy of handout 2G—Cultural Resilience, read or have a participant read the introductory paragraph.
- Begin discussion about traditional native values, cultural resilience, and decision making.



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**SESSION THREE**

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HIV/AIDS and Other STI Education

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# SESSION THREE

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## HIV/AIDS & STI Education



This provides participants with basic information on sexually transmitted infections and their relationship to sex and drugs, and lies the foundation for the remaining Native SISTER

**ESTIMATED TIME:** 100 minutes

**PURPOSE:**

1. To provide factual, up-to-date statistical information on HIV/AIDS and other STIs
2. To provide correct information about STI transmission
3. To encourage assessment of personal risk
4. To discuss the importance of protecting oneself from HIV and other STIs

**BY THE END OF THIS SESSION, PARTICIPANTS WILL HAVE DISCUSSED:**

1. The difference between HIV and AIDS.
2. How people become infected with HIV and other STIs.
3. The impact of HIV/AIDS on American Indian women.
4. Ways to protect themselves from becoming infected with an STI.
5. The benefits of getting tested for STIs.

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# SESSION THREE

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## HIV/AIDS & STI Education

### GLOSSARY



- **Cultural Sensitivity** means being aware that every group or community has its own set of values, attitudes, and beliefs, even though individuals within the group may have differing views. When we are culturally sensitive, we provide information in a neutral way that does not challenge the values and beliefs of any group or individual.
- **Nonjudgmental** means that you avoid expressing opinions or judgments based on your own personal and moral standards. Being nonjudgmental helps people to hear and understand lifesaving information more easily. Additionally, it allows people to decide how they wish to apply information to their own lives within the context of their own values, attitudes, and beliefs. When the facilitator is judgmental, the participants may “shut down” and not receive the information.

Judgmental comments include statements about what is morally right or wrong, who deserves negative consequences, what is normal or abnormal, etc.



# SESSION THREE

## HIV/AIDS & STI Education



### AT-A-GLANCE AGENDA

Activities	Time (Minutes)	Materials
Local HIV/AIDS & STI Information	10	<ul style="list-style-type: none"><li>• STD Low-Down Chart &amp; Infographic Handouts</li></ul>
HIV/AIDS & STI 101	20	<ul style="list-style-type: none"><li>• PowerPoint Presentation</li><li>• HIV/AIDS Facts handout 3D.</li></ul>
Card game or activity	20	<ul style="list-style-type: none"><li>• Prepared poster paper</li><li>• Colored index cards</li><li>• Pens/Pencils</li><li>• Clear plastic cups, water, vinegar, baking soda</li></ul>
Video Clip	45	<ul style="list-style-type: none"><li>• Video and TV/DVD player</li></ul>

### YOU WILL NEED:

- Section 3 handouts
- PowerPoint Presentation
- Computer
- Projector
- Video: "Breaking the Cycle" or "Native Voices"
- TV/ DVD Player

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# SESSION THREE

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## HIV/AIDS & STI Education



### LOCAL HIV/AIDS and other STI STATISTICS

**PURPOSE:**

- To provide participants with basic information on HIV/AIDS and other STIs to raise participants' awareness that these infections impact American Indian women

**KEY TALKING POINTS:**

- To fully understand the impact of HIV and other sexually transmitted infections (STIs), we need to discuss the current surveillance statistics of those who are infected with HIV/AIDS. Statistics are numbers that tell the story about how many people are infected with HIV/AIDS and other STIs, how they became infected, and the demographic characteristics (e.g., gender, age, race) of people with these illnesses.

**ACTIVITIES:**

- Distribute handout 3C– American Indians and HIV/AIDS, allow 2-3 minutes for review, and begin discussion.

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# SESSION THREE

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## HIV/AIDS & STI Education



### HIV/AIDS and other STI 101

**PURPOSE:**

- To provide basic information on HIV and other STI transmission

**KEY TALKING POINTS:**

- What is HIV? What is AIDS?
  - HIV is the virus that causes AIDS. AIDS is the result of HIV infection.
- Body Fluids that Transmit HIV
  - HIV is transmitted through blood, semen, vaginal fluids, and breast milk.
- How do people get infected with different STIs?
  - Having unprotected sex and sharing needles or syringes with an HIV infected person can expose someone to the disease
- How can people reduce their risk of getting an STI?
  - Abstaining from having sex and sharing needles and syringes.
  - Being faithful/monogamous with a person who is not infected with an STI.
  - Condoms should be used consistently and correctly every time you have sex, to reduce your risk of becoming infected .
- How don't people get infected with HIV?
  - HIV is not transmitted in urine, sweat, tears, or saliva
- American Indians are disproportionately affected by HIV. Native Hawaiians/Other Pacific Islanders and American Indians/Alaska Natives (AI/AN) have the 3rd and 4th highest rate of new HIV infections, respectively.

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# SESSION THREE

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## HIV/AIDS & STI Education



### CARD GAME OR ACTIVITY

**PURPOSE:**

- To demonstrate how HIV can be transmitted from person to person

**KEY TALKING POINTS:**

- Card game discussion points:
  - How did you feel about the activity in general?
  - What are the ways you can become infected with HIV?
  - Was there any way to tell if the person you swapped cards with had HIV?
  - Will this activity make you think about being safe when involved in, thinking about, or being pressured into a high risk activity?
  - What could you have done differently to avoid being infected with HIV?
- “Watch it Spread” discussion points:
  - How did you feel about the activity in general?
  - What are the ways you can become infected with HIV?
  - Was there any way to tell if the person you swapped fluids with had HIV?
  - Will this activity make you think about being safe when involved in, thinking about, or being pressured into a high risk activity?
  - What could you have done differently to avoid being infected with HIV?

**ACTIVITIES:**

- Choose either the card game or the “Watch it Spread” activity from the Facilitator's Guide and walk through the activity with participants
- Discuss key talking points above

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# SESSION THREE

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## HIV/AIDS & STI Education



### OPTIONAL VIDEO: “BREAKING THE CYCLE” or “NATIVE VOICES”

**PURPOSE:**

- To address HIV and other STIs as well as risk factors such as abuse, alcohol, and unprotected sex

**YOU WILL NEED:**

- Video: “Breaking the Cycle: Stories of Alaska Native Women” or “Native Voices”
- TV/DVD Player

**KEY TALKING POINTS:**

- Do you feel that there are similarities in the HIV and STI statistics in the video and those in your community?
- Do you feel like talking about sex and sexually transmitted diseases is taboo?
- How can you incorporate what you learned into your life?

**ACTIVITIES:**

- Show “Breaking the Cycle” video, starting from 10 minutes in, or “Native Voices” video
- Discuss key talking points, comparing statistics in video to handout 3C



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**SESSION FOUR**

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Proactive Skills Training

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# SESSION FOUR

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## Proactive Skills Training



**This session focuses on effective communication and sexual negotiation skills.**

**ESTIMATED TIME:** 100 minutes

**PURPOSE:** To teach participants distinctions between using proactive, non-assertive, and aggressive communication styles and behaviors.

**BY THE END OF THIS SESSION, PARTICIPANTS WILL BE ABLE TO:**

1. Explain the differences between aggressive, non-assertive, and proactive behaviors
2. Describe consequences of proactive, non-assertive, and aggressive behaviors in real life sexual situations
3. Use proactive communication skills to communicate their needs and negotiate safer sex practices with their partners
4. Identify situations that may increase risks for unsafe sexual behaviors
5. Identify the six steps of the SISTER Proactive Communication Model
6. Apply the SISTER Proactive Communication Model to their decision-making processes for sexual behaviors

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# SESSION FOUR

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## Proactive Skills Training



### GLOSSARY

- Being **aggressive** means standing up for ourselves even at the expense of others. We use language that is threatening and/or punishing to others involved. When we are aggressive, we fail to consider the other person's needs or feelings. Aggression can be direct or indirect. **Direct aggression** involves name calling, threats or physical harm, and invading personal space. **Indirect aggression** involves defiant stares, rigid posture, and talking behind someone's back.
- Being **non-assertive** means we feel we don't have the right to be heard. We are uncomfortable expressing ourselves and are willing to back down to avoid conflict. We do not tell others how we feel so our needs are not going to be met. Non-assertive people tend to have inconsistent eye contact, low or unsteady voice levels, and cautious body movements.
- When we are being **proactive**, we are thinking ahead and able to stand up for ourselves and tell others how we feel without threatening, punishing, or putting them down. We are able to express what we think, feel, and want without being anxious or afraid. Being proactive in our communication is a skill that can be learned. When we are proactive, we are communicating honestly and directly so the other person does not need to figure out what is on our minds. Being proactive does not mean the other person will agree, and that's OK. But we should strive to express our concerns while considering the other person's feelings in the process.

### FACILITATOR NOTES:

- Confronting symptoms of HT can be difficult and very emotional. It is recommended that you invite a Behavior Health Specialist or counselor who understands and is trained to deal with the effects of HT to present to your group. Ideally, this person will be someone who is also a resource that participants can access outside of the program.



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# SESSION FOUR

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## Proactive Skills Training



### AT-A-GLANCE AGENDA

Activities	Time (Minutes)	Materials
Proactive Skills Training	30	<ul style="list-style-type: none"><li>• Communication Styles handout 4C</li></ul>
How Do I Handle This?	30	<ul style="list-style-type: none"><li>• How Do I Handle This</li><li>• Handout 4D</li></ul>
Native SISTER Proactive Communication Model	40	<ul style="list-style-type: none"><li>• Prepared poster paper</li><li>• Native SISTER Proactive Communication Model and See You At The Casino handouts 4E, 4F</li></ul>

### YOU WILL NEED:

- Section 4 handouts

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# SESSION FOUR

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## Proactive Skills Training



### PROACTIVE SKILLS TRAINING

**PURPOSE:**

- To provide participants with information about the differences between aggressive, non-assertive, and proactive communication styles
- To help participants to recognize and understand the consequences of these behaviors and communication styles

**KEY TALKING POINTS:**

- There are numerous ways we can communicate our needs and wishes to others. However, some ways work better than others. We will explore three different styles of communication and expression: aggressive, non-aggressive, and proactive.
- In order to express ourselves effectively, we must first be able to recognize the difference between the three communication styles.
- What is being aggressive?
- What is being non-assertive?
- What is being proactive?
- What do you see as the major difference between Alyssa's proactive response and her aggressive and non-aggressive responses?

**ACTIVITIES:**

- Distribute handout 4C—Communication Styles to participants
- Discuss handout and key talking points.

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# SESSION FOUR

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## Proactive Skills Training



### HOW DO I HANDLE THIS?

**PURPOSE:**

- To provide participants opportunities to observe the three communication styles that were just explained and discussed—aggressive, non-assertive, and proactive

**KEY TALKING POINTS:**

- What communication style was used?
- What might be the consequences of responding in this manner?

**ACTIVITIES:**

- Distribute handout 4D—How Do I Handle This? to participants
- Read the situations aloud and have participants share how they would handle the situation

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# SESSION FOUR

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## Proactive Skills Training



### Native SISTER PROACTIVE COMMUNICATION MODEL

**PURPOSE:**

- To demonstrate how to use the Native SISTER Proactive Communication Model for making safer sex

**KEY TALKING POINTS:**

- Through practice, participants can become familiar with the steps involved in making decisions and learn how to apply them easily in their everyday lives.
- Discussion Questions
  - Did you think about yourself?
  - Did you use the HIV/AIDS information you learned?
  - Did you think about the situation you were in?
  - Did you state the trouble to James, as well as options and consequences?
  - Did you maintain equality, and let James know in a proactive manner, what you wanted to do?
  - Did you rethink the situation and offer an alternative that you could feel comfortable with?

**ACTIVITIES:**

- Distribute a copy of handout 4E—Native SISTER Proactive Communication Model to each participant.
- Have discussion about six steps in the model.
- Distribute a copy of handout 4F—See You at the Casino to each participant. Read the situation, and begin conversation on discussion questions.



**Native SISTERS Informing Sisters:  
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**SESSION FIVE**

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Behavioral Self-Management Training

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# SESSION FIVE

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## Behavioral Self-Management Training



This session discusses socio-cultural dynamics and symptoms of Historical Trauma which may reduce a woman's confidence in her ability to use condoms and increase her risk for HIV infection.

**ESTIMATED TIME:** 120 minutes

**PURPOSE:** To discuss safer sex negotiation situations that are used to enhance and reinforce the perception, adoption, and maintenance of consistent condom use as a normal behavior.

**BY THE END OF THIS SESSION, PARTICIPANTS WILL:**

1. Practice proactive sexual communication skills.
2. Gain confidence and the ability to overcome partners' objections to consistent condom use.
3. Correctly apply a condom to a penile model.
4. Communicate and negotiate safer sex practices.
5. Apply sexual risk reduction strategies.

# SESSION FIVE

## Behavioral Self-Management Training



### AT-A-GLANCE AGENDA

Activities	Time (Minutes)	Materials
Reasons Why People DON'T Use Condoms & Other Risk Factors	30	<ul style="list-style-type: none"><li>• Prepared poster papers</li><li>• Markers</li></ul>
Condom Basics	10	<ul style="list-style-type: none"><li>• 5 Steps handout 5D</li><li>• Condom use supplies</li></ul>
Condom Line-Up Game	20	<ul style="list-style-type: none"><li>• 5 Steps handout 5D</li><li>• Condom Line-Up Game cards</li></ul>
Condom Use Demonstration and Practice	20	<ul style="list-style-type: none"><li>• Condom Instructions handout 5E and 5E.1</li><li>• Condom use supplies</li><li>• Penile and Female models</li></ul>
Negotiating Safer Sex	20	<ul style="list-style-type: none"><li>• SISTER Proactive Communication Model and Negotiating Safer Sex handouts 5C, 5F</li></ul>
Peer Norms	10	<ul style="list-style-type: none"><li>• None</li></ul>

### YOU WILL NEED:

- Section 5 handouts
- Assortment of male and female condoms
- Anatomically correct vaginal and penile models
- Napkins, paper towels, and hand sanitizer or wet-wipes
- Baskets, boxes or zip lock bags for making safer sex kit samples
- Set of "Condom Line-Up Game" cards

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# SESSION FIVE

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## Behavioral Self-Management Training



### REASONS PEOPLE DON'T USE CONDOMS

**PURPOSE:**

- To help prepare participants to give proactive responses to partners' objections to using condoms

**KEY TALKING POINTS:**

- Remember that using "I" statements when communicating wants and needs is assertive behavior.

**ACTIVITIES:**

- Using the poster paper, brainstorm reasons people don't use condoms (obstacles) followed by what can be said to overcome the obstacles (strategies)



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# SESSION FIVE

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## Behavioral Self-Management Training



### CONDOM BASICS

**PURPOSE:**

- To allow the participants the opportunity to see and touch condoms and lubricants

**KEY TALKING POINTS:**

- Encourage active discussion among group. You can ask questions like:
  - How does the condom feel?
  - Did you check for damage to the package?
  - Did you feel the perforated edge?
- Not having sex (abstinence) is the only 100% sure way to avoid contracting HIV and other STIs. If you choose to have sex, then using latex condoms is the best way for you to protect yourself from sexually transmitted infections. When used correctly for each act of vaginal, anal, or oral sex, latex condoms are the best way for sexually active people to reduce the risk of infection from HIV (the virus that causes AIDS) and sexually transmitted disease (STIs).

**ACTIVITIES:**

- Distribute condoms and lubricants (lubes) to the participants, and hold up a condom for the women to see.
- Move around the room and encourage the participants to open their condoms, take them out of the package, and look at the texture, color, length, width, and shape.
- Ask the women to smell the condom, stretch it, and blow them up like balloons. Points out the fact condoms do stretch and they are very sturdy.

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# SESSION FIVE

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## Behavioral Self-Management Training



### CONDOM LINE-UP GAME

**PURPOSE:**

- To allow the participants the opportunity to see and touch condoms and lubricants

**KEY TALKING POINTS:**

- Encourage active discussion among group.
- Not having sex (abstinence) is the only 100% sure way to avoid contracting HIV and other STIs. If you choose to have sex, then using latex condoms is the best way for you to protect yourself from sexually transmitted infections. When used correctly for each act of vaginal, anal, or oral sex, latex condoms are the best way for sexually active people to reduce the risk of infection from HIV (the virus that causes AIDS) and sexually transmitted disease (STIs).

**ACTIVITIES:**

- Shuffle the Condom Line-Up Game cards, and distribute one per participant
- As a group, have participants arrange the cards in correct order, either standing with cards or on table
- Distribute handout 5D- 15 Steps

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# SESSION FIVE

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## Behavioral Self-Management Training

### CONDOM USE DEMONSTRATION AND PRACTICE



#### **PURPOSE:**

- To give the participants an opportunity to apply the knowledge and skills they have acquired in the previous exercises

#### **KEY TALKING POINTS:**

1. Discuss having safer sex with your partner.
2. Get latex condoms.
3. Store condoms in a cool, dry place until you are ready to have sex.
4. Check expiration date.
5. Penis must be erect.
6. Open condom package carefully to avoid tearing the condom.
7. As you put the condom on, visually inspect it for holes, tears, discoloration or brittle texture.
8. If needed, add a small amount of water-based lubricant to the inside of condom.
9. Pinch (or squeeze) the tip of condom and place it on the erect penis leaving room at the tip for ejaculate.
10. While gently smoothing out the air bubbles, unroll the condom to the base of the penis.

#### **ACTIVITIES:**

- Visible to all participants, demonstrate how to properly open, apply, and remove a condom. As you do so, explain each step and ask open-ended questions to encourage discussion.

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# SESSION FIVE

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## Behavioral Self-Management Training



### NEGOTIATING SAFER SEX

**PURPOSE:**

- To help participants feel more comfortable and confident in their abilities to communicate and negotiate safer sex

**KEY TALKING POINTS:**

- What information could [FEMALE CHARACTER] use in her response to [MALE CHARACTER]'s refusal to use condoms?
- Did you think of yourself?
- Did you use the HIV/AIDS information you learned?
- Did you think about the situation she was in?
- Did you state the trouble to Michael as well as, options and consequences?
- Did you have an equal voice and tell Michael, in a proactive manner, what you wanted to do?
- Did you rethink the situation and suggest an alternative you would feel comfortable with?

**ACTIVITIES:**

- Refer the participants to handout 5C- SISTER Proactive Communication Model to keep in mind during this activity.
- Distribute handout 5F—Negotiating Safer Sex to participants
- Have volunteers role-play three situations (see Facilitator's Guide), being proactive and using "I" statements
- Have volunteers share with group how they felt about situation, and group provide feedback

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# SESSION FIVE

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## Behavioral Self-Management Training



### PEER NORMS

**PURPOSE:**

- To confirm to the participants that their partners could be willing to use a condom, if asked to do so

**KEY TALKING POINTS:**

- Discussion questions:
  - *Many American Indians use condoms.*
    - Do you think this statement is true or false? Why?
  - *If a woman asked them to use a condom, many men say they would use a condom.*
    - Do you think this statement is true or false? Why?
    - Why do you think women don't ask their partners to use condoms?
    - What are some of the consequences, if women don't ask their partner to use condoms?

**ACTIVITIES:**

- Initiate a discussion about the above statements.
- Read each statement that is printed in italic letters and ask the group the questions that follow that statement.
- Poll the group for their responses.



**Native SISTERS Informing Sisters:  
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**SESSION SIX**

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Coping Skills

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# SESSION SIX

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## Coping Skills



This session reviews proactive principles and self management techniques that promote sexual safety.

**ESTIMATED TIME:** 80 minutes

**PURPOSE:** To review proactive principles and self management techniques that promote sexual safety. Also to discuss the effects of drugs and alcohol on safer sex behaviors, and coping with rejection and negative responses from partners to engage in safer sex behaviors.

**BY THE END OF THIS SESSION, PARTICIPANTS WILL HAVE DISCUSSED:**

1. The concept of coping and how it relates to Historical Trauma.
2. How drugs and alcohol are used to cope.
3. How drugs and alcohol can negatively affect decision-making.
4. How to use the Native SISTER Proactive Model to make decisions in risky sexual situations.
5. Ways to cope with rejection and negative feedback.

# SESSION SIX

## Coping Skills



### AT-A-GLANCE AGENDA

Activities	Time (Minutes)	Materials
Coping is...	20	<ul style="list-style-type: none"><li>• Prepared poster papers</li><li>• Markers</li></ul>
Coping with Drugs and Alcohol in Sexual Situations	20	<ul style="list-style-type: none"><li>• Effects of Drugs and Alcohol and Coping with Drugs and Alcohol in Sexual Situations handouts 6C,</li></ul>
Coping with Rejection and Negative Responses	25	<ul style="list-style-type: none"><li>• Coping with Rejection and Negative Responses handout 6E</li></ul>
Closing Reflection	5	<ul style="list-style-type: none"><li>• The South Corner Poem 6A</li></ul>
Women's Circle	5	<ul style="list-style-type: none"><li>• Prepared poster paper</li></ul>
Sessions 1-6 Evaluation	5	<ul style="list-style-type: none"><li>• Handout 6F</li></ul>

### YOU WILL NEED:

- Section 6 handouts
- Paper and envelope for each participant



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# SESSION SIX

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## Coping Skills



### COPING WITH DRUGS AND ALCOHOL IN SEXUAL SITUATIONS

**PURPOSE:**

- To explore and discuss the effects drugs and alcohol can have on sexual decision-making.
- To recognize Cultural Resilience as a tool for healing and coping.

**KEY TALKING POINTS:**

- Drugs and alcohol slow down body functions; therefore, it takes a longer time to think and react.
- Drugs and alcohol distort your vision, shortens coordination, and can damage every organ in the body.
- Drugs and alcohol often make it easier to do and say things you wouldn't normally
- Drugs and alcohol impair your ability to make judgments about sex, increasing your risk for HIV and other STIs.
- 6C Talking Points
  - How do people act when they use drugs or alcohol?
  - Do you know anyone who abuses drugs or alcohol? Do you know why? (trauma, abuse, alcoholism, depression...)
  - What are other ways (besides using drugs and/or alcohol) they might cope with trauma and stress in their lives? (What are some traditional ways, beliefs, and values they can draw strength from?)
  - How does using drugs or drinking alcohol affect a person's ability to make decisions?

**ACTIVITIES:**

- Distribute handout 6C– Effects of Drugs and Alcohol. Read with group, discuss key talking points
- Distribute handout 6D– Coping with Drugs and Alcohol in Sexual Situations . Read the situations and discuss key talking points (see Facilitator's Guide)

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# SESSION SIX

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## Coping Skills



### COPING WITH REJECTION AND NEGATIVE RESPONSES

**PURPOSE:**

- To explore ways to cope with the rejection and negative responses that might arise when negotiating safer sex

**KEY TALKING POINTS:**

- Self-esteem means appreciating your own worth and importance. It helps you to cope better with the challenges of life. If we are thinking of trying to protect ourselves from HIV and other STIs, we must first know and trust that we are capable of facing and overcoming and challenges that await us. Without such beliefs, success in negotiating safer sex behaviors will be extremely difficult.
- Sometimes we will be rejected or receive negative responses to our request, and this may make us feel less than important or cause us to think that our way of thinking is not important. As we learned in Session 1, our values are important and we must know them before we make decisions.
- Sometimes we may cope with situations, but it may not be the best way to handle the situation. As we learned in Session 2, some people are drawn to alcohol and drugs to numb the pain of historical trauma. Having effective coping skills is imperative to our health and well-being. You are worth the effort it takes to learn effective coping skills.

**ACTIVITIES:**

- Distribute handout 6E– Coping with Rejection and Negative Responses. Read with group, discuss key talking points (see Facilitator's Guide), especially in relation to SISTER Proactive Communication Model

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# SESSION SIX

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## Coping Skills



### SESSIONS 1-6 EVALUATION

**PURPOSE:**

- To allow the participants to evaluate and provide final feedback on the sessions and the Native SISTER intervention

**KEY TALKING POINTS:**

- Encourage active discussion among group.
- Not having sex (abstinence) is the only 100% sure way to avoid contracting HIV and other STIs. If you choose to have sex, then using latex condoms is the best way for you to protect yourself from sexually transmitted infections. When used correctly for each act of vaginal, anal, or oral sex, latex condoms are the best way for sexually active people to reduce the risk of infection from HIV (the virus that causes AIDS) and sexually transmitted disease (STIs).

**ACTIVITIES:**

- Distribute handout 6F– Sessions 1-6 Evaluation.
- Remind the participants that “1” indicates a need for improvement and “5” indicates excellent.
- Allow five minutes for completion of the evaluation form.
- Collect the completed evaluation forms.



**Based on:**  
**Midwest Prevention Intervention Center**  
**of the African American Prevention Intervention Network**  
**Sisters Informing Sisters**  
**about Topics on AIDS (SISTA)**

