

Module on **SABLA**



National Institute of Public Cooperation and Child Development
5, Siri Institutional Area, Hauz Khas, New Delhi - 110016



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कृष्णा तीरथ
Krishna Tirath



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MESSAGE

In view of the socio-economic conditions under which women in India were constrained to lead their lives from time immemorial, they were often labelled as *abla*, which (in Hindi) means 'without power' ('*a*' in Hindi meaning 'No' and '*ba*' meaning 'Power'). The Rajiv Gandhi Scheme for Empowerment of Adolescent Girls (RGSEAG) also called SABLA, is rightly named after our former Prime Minister Rajiv Gandhi's abiding concern for empowering (making them *Sabla*) women. Admittedly, women are making outstanding contribution in several areas, but on a limited level and there is urgent need to strengthen the existing infrastructure and creating new facilities for their development.

In the more liberal twenty-first century with more opportunities opening to them, they have forayed into all spheres. It has been established by now that they can excel in equal measure provided they are given opportunity. Yet most of them continue to suffer from gender discrimination, violence and unfair treatment due to stereotyped mindsets.

Currently being operated in 200 districts of the country, the coverage of SABLA Scheme is likely to be expanded in near future. Its implementation is being facilitated by infrastructure of Integrated Child Development Services (ICDS). SABLA shall be implemented in coordination with other line Departments and Ministries for achieving proper delivery of services. Apart from the MWCD's flagship programme Integrated Child Development Services (ICDS), the dent made by other schemes related to women such as Kishori Shakti Yojana, Swadhar, Short-Stay Home and Relief and Rehabilitation of Rape Victims are perceptible in improved socio-economic status of women across the country.

The *Module on SABLA*, being brought out by National Institute of Public Cooperation and Child Development (NIPCCD), is a welcome addition to the literature for trainers and extension personnel in that it contains useful information for enhancing the knowledge of field workers, particularly in the area of health & nutrition, home management accessing public services and economic empowerment, direly needed by women at grassroots level. Director, NIPCCD and his colleagues deserve appreciation for bringing out this handy book, which can be profitably used by the extension functionaries.

(Krishna Tirath)

HEALTH

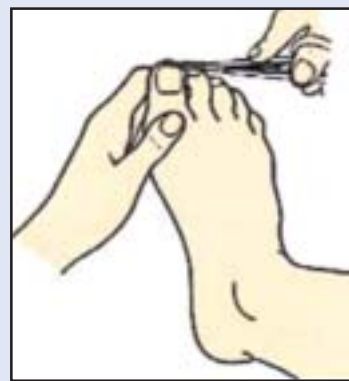


PERSONAL HYGIENE AND SANITATION

PERSONAL HYGIENE AND SANITATION

SESSION	Personal Hygiene and Sanitation
OBJECTIVE	To make adolescents understand the need and importance of personal hygiene.
CONTENT	<ul style="list-style-type: none"> • Need and Importance of Personal Hygiene • Personal Hygiene- What, Why and How • Environmental Sanitation- Need and Importance • Diarrhoea Management
DURATION	1 Hour
RESOURCE PERSON	Field Trainers (Mother NGOs/Field NGOs)/ Master Trainers
TRAINING METHOD	Presentations using flipcharts on personal hygiene followed by discussion and demonstration on preparation of ORS
LEARNING OUTCOME	Adolescent girls will be able to understand the concept of personal hygiene and sanitation practices in order to remain healthy. They will also be able to understand the management of diarrhoea.





Salient Points

- More than half of all illnesses and deaths among children and adolescents are caused by germs that enter the body through contaminated food, water or dirty hands.
- To remain healthy, one should maintain personal hygiene and keep the environment clean.
- Many illnesses, especially diarrhoea can be prevented by good hygiene practices.

Personal Hygiene

- Brush teeth regularly and rinse mouth with water after each meal.
- Hands should always be washed before preparing, serving or eating the food, and before feeding children.
- Adolescent girls should take bath once a day and should wear clean clothes.
- Adolescent girls should keep the hair clean to avoid infection of head louse.
- It is important to cut nails regularly and keep them clean.
- Adolescent girls should use clean cloth or sanitary pads during menstruation (the period of their monthly cycle).

Sanitation

- The single most important action to prevent spread of germs is to dispose of all faeces - both human and animal safely. Human faeces needs to be put in a toilet or a latrine, which needs to be kept clean. Animal faeces needs to be kept away from the house, paths and areas where children play.
- Sanitary toilet should always be used for defecation.
- Latrines and toilets needs to be cleaned regularly. Latrines should be kept covered and cleaned after use.
- It is important to wash hands with soap and water after defecation to help protect against illnesses. It is also important to wash hands after handling animals or raw food.
- Washing hands with soap and water helps remove and stop germs from getting onto food or into mouth. Soap and water should be placed conveniently near the latrine or toilet.
- Don't walk bare foot. Adolescents should wear appropriate footwear especially when outside home.



Good Habits

- ❖ Brush teeth regularly, every morning and at night before going to sleep.



- ❖ Take bath everyday and wear clean clothes.



- ❖ Cut nails and keep them clean.



- ❖ Wash hair regularly.



- ❖ Clean ears and eyes.

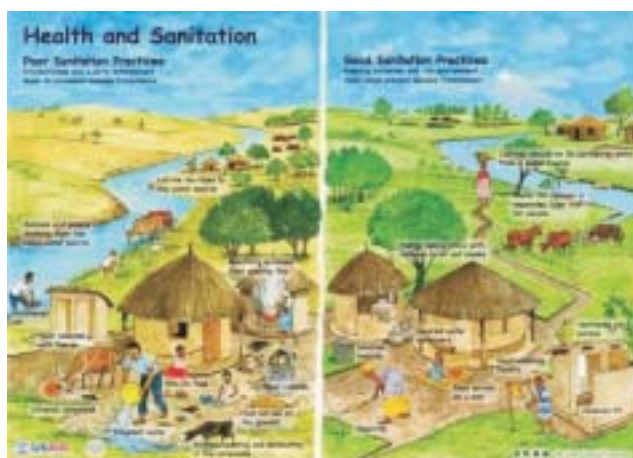


- ❖ Wash hands with soap before and after eating food and after using the toilet.



Environmental Sanitation

- Steps should be taken to prevent or reduce indoor air pollution e.g., use of smokeless *chulhas*.
- Household garbage should be collected in a garbage bin and disposed into a compost pit or community bin, if available. These bins should be covered as germs can spread by flies, cockroaches, rats and mice, which thrive in refuse such as food scraps and peelings from fruits and vegetable.
- Keeping household and nearby areas clean and free from faeces, refuse and waste water can help prevent disease. Household waste water can be disposed off safely by making a soak pit or a channel to the kitchen garden or the field.
- Prevent stagnation of water around houses and hand pumps to prevent breeding of mosquitoes.



Chemicals and Pesticides

- Chemicals such as pesticides, insecticides or fertilizers and herbicides can be dangerous if even small quantities get into water supply or into food, hands or feet. Clothes and containers used for handling/storing chemicals should not be washed near a household water source.
- Pesticides and other chemicals should not be used around the household or near a water source. Chemicals should not be stored in or near drinking water containers or near food.



PHYSICAL EXERCISE

PHYSICAL EXERCISE

SESSION	Physical Exercise
OBJECTIVE	To make adolescents understand the importance of Exercise, Yoga and Meditation in leading a healthy life.
CONTENT	<ul style="list-style-type: none"> • Need and importance of Physical Exercise- Why be active. • Need and Importance of De-stressing oneself through physical activities like Yoga, Meditation and Physical Exercise. • Learning ways of doing Yoga and Meditation. • Use of Yoga and Meditation in day to day life.
DURATION	1 Hour
RESOURCE PERSON	Field Trainers/ Yoga specialists who has received training in Physical exercise, Yoga and Meditation.
TRAINING METHOD	Presentation and demonstrations and practical exercises.
LEARNING OUTCOME	Adolescents will be able to understand the importance and need of physical activities like exercise, yoga and meditation in their life. Adolescents will learn some Yoga/ Meditation exercises.





Salient Points

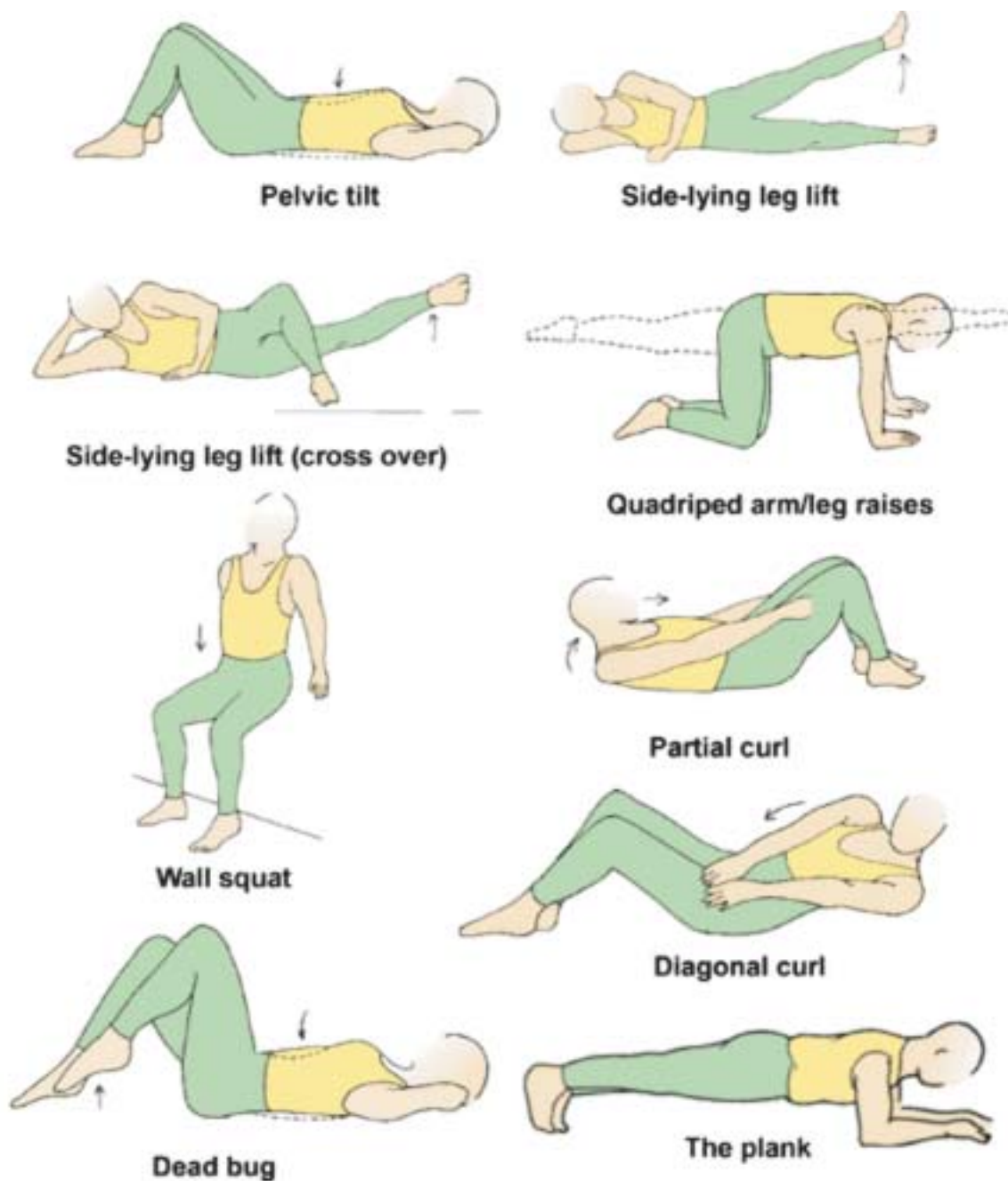
- Physical exercise is any bodily activity that enhances or maintains physical fitness and overall health. It is performed for many different reasons which include strengthening muscles and the cardiovascular system, improving athletic skills, weight loss or maintenance and for enjoyment.
- Regular physical activity is essential for good health. If adolescents are not physically active, they have an increased risk of illness.
- Now-a-days illnesses like diabetes, heart disease doesn't happen overnight, it is the result of our bad habits.
- According to the World Health Organisation, physical activity reduces risk of certain cancers (e.g. colon cancer and breast cancer), Type II diabetes, stroke, osteoporosis, low back pain, stress, depression and obesity.
- Even though heart attack and stroke are rare in adolescents, evidence shows that the processes leading to these conditions begin in childhood and adolescence. Inactive children/adolescents, when compared with active children/adolescents, weigh more, have higher blood pressure and have lower levels of heart-protective "good" cholesterol.
- Adolescents should do one hour of physical activity on most days of the week, preferably on a daily basis.
- Any type of moderate or higher intensity exercise is suitable for adolescents.
- Activities like brisk walking, kicking ball in the play ground, skipping and active play are all counted as exercise.
- Walking to school or to market and being active at home can make a significant contribution to an adolescent's activity levels.
- Adolescents who are physically active benefit from increased strength, improved fitness, increased bone mass, reduced blood pressure, reduction in anxiety and stress and improved self esteem.

Physical Exercise

- Frequent and regular physical exercise boosts the immune system, and helps prevent lifestyle diseases such as heart disease, cardiovascular disease, Type 2 diabetes and obesity.
- Exercise also improves mental health, helps prevent depression, promotes maintenance of positive self-esteem and can even augment an individual's sex appeal or body image.
- Adolescent girls can practice games with a physical activity component. The games will help them to learn team building and cooperation.
- Simple physical exercise like walking and cycling should be encouraged.



Types of Exercise



Exercises are generally grouped into three types depending on the overall effect they have on the human body:

- **Flexibility exercises**, such as stretching, help to improve the range of motion of muscles and joints.
- **Aerobic exercises**, such as cycling, swimming, walking, rowing, running, hiking or playing tennis, for the heart and lung.



- **Anaerobic exercises**, such as weight training, functional training or sprinting, helps to increase short-term muscle strength.

Yoga

Yoga is highly therapeutic. Some of the ailments that have been proven to be relieved, reversed and even healed through the practice of Yoga are acidity, allergies, alzheimer disease, anaemia, anger, anxiety, arthritis, asthma, back pain, bronchitis, cancer, chronic fatigue, colitis, common cold, constipation, depression, diabetes, epilepsy, eye problems, facial wrinkles, gastro-intestinal disorders, headaches, heartburn, hepatitis, high blood pressure, hypertension, immune-deficiency, impotence, menopause, menstrual cramps, migraine, nervous tension, obesity, osteoporosis, skin problems, slipped disk, sterility, stiffness, stress, insomnia, thyroid.

Types of Yoga Poses

- **Seated poses** – These are useful for practicing breathing exercises and relaxation or meditation techniques. They are also often used as a warm up or as a starting point for other poses. Performing seated poses can help improve one's posture and hips.
- **Standing poses** – These are often used as warm up or as a starting point for other poses. They are beneficial for strengthening legs, opening one's hips and improving sense of balance.
- **Inversions** – They help in improving blood circulation, calms mind and improving overall health. They are also believed to reverse the ageing process and reduce the effect of the gravity on one's body.
- **Relaxation and restorative poses** – It is important to take time to perform these at the end of each yoga practice. One can use this time to relax body and mind and allow energy released by the poses to move freely throughout the body.



- **Counter poses** – These are yoga poses that stretch spine in the opposite direction from a previous pose or return spine to a neutral position.
- **Twists** – These can be performed to stretch and strengthen the back and abdominal muscles, increase the flexibility of spine and improve blood circulation. They improve the functioning of internal organs by providing them with fresh supply of blood as one twists and releases body.
- **Balancing poses** – These are useful for improving balance and coordination as well as developing ability to remain grounded in a pose. Keeping the body balanced encourages one to achieve focus, quietness and balance of mind.
- **Forward bends** – They help stretch the entire back of body, especially the hamstrings. Forward bends are also often used to release tension, calm the mind and soothe the nervous system. Similar to back bends, forward bends help keep the spine strong and supple.
- **Back bends** – These are among the most challenging poses in yoga. They help strengthen back and keep the spine strong and supple. Back bends also open the front of body, especially the chest.
- People have reported wonderful experiences on health benefits of Yoga. The transformation takes one beyond the present. In one session of Yoga, adolescents can practice Yoga poses (asanas), breathing exercises (pranayama), meditation and chanting. Yoga is fun and relaxing activity while, at the same time, being delectably challenging to beginners.
- Meditation is a mental exercise by which the adolescents can attempt to get beyond the reflexive, “thinking” mind into a deeper state of relaxation or awareness.
- Different meditative disciplines encompass a wide range of spiritual or psychophysical practices that may emphasise different goals from achievement of a higher state of consciousness, to greater focus, creativity or self-awareness, or simply a more relaxed and peaceful frame of mind.

Activity I - Practicing Yoga

Instruction for Trainers

First of all, adolescents may be informed about the basics of Yoga such as the procedure for doing yogic exercises and the Breathing Pattern that has to be followed.

- Each Asana helps one to become more aware of one’s body, mind, and environment. While beginning the yoga exercises, a warming up is required like experimenting with poses, moving in and out so that one feels comfortable.
- While practicing yoga exercises, one must make sure that one does not feel any discomfort or pain.



Yogic Exercises and Breathing



- Breathing is an essential part of practicing yoga exercises. One should never hold one's breath during a pose.
- It should also be made sure that one's breath is never forced or strained. Laboured breathing indicates that one is working too hard and should come out of the pose slightly.
- When one starts practicing yoga, one can hold for three full breaths through most yoga poses. If one feels comfortable in the pose, hold for longer; if uncomfortable, one should come out of the pose immediately.

Activity II - Meditation

First of all, ask all the adolescent girls to sit comfortably and breathe slowly.

Then ask them to follow these steps-

- Breathe in and out deeply. While breathing in, let the stomach come out and while breathing out, let the stomach go in. Shoulders should be relaxed and dropped down as one breathes deeply.
- Now close eyes.
- Now imagine that you are at your favourite place - in the mountains, in a park, on a hill station, near a lake or stream or any other place. Try to see the colours and hear the sounds that are there, such as birds chirping, the sound of wind in the woods, of the waves in the sea.
- If you can see the colours and feel the air, you are totally relaxed and calm. You can feel the tension moving from your head to shoulders, down to your legs and out of your feet. Now you have no tension in your body.
- Now start counting backwards from 50 to 30.
- Give gratitude for all the good things in your life.
- Now count from 30 to 10.
- Wish for peace and strength to face everyday challenges with a positive attitude, and for help to reach for your goal.
- Now continue counting backwards till 1.
- Now open your eyes and stretch yourself.



FIRST AID

FIRST AID

SESSION	First Aid
OBJECTIVE	To enable the adolescents to practice First Aid methods for injury management. (If they encounter any situation requiring First Aid).
CONTENT	<ul style="list-style-type: none"> • What is First Aid? • To familiarise them with a first aid box and its use.
DURATION	2 Hours
RESOURCE PERSON	Field Trainers of MNGOs/FNGOs (who are well versed with First Aid techniques).
TRAINING METHOD	Lecture-cum-discussion followed by demonstration.
LEARNING OUTCOME	The adolescents will be able to handle the emergencies/situations which require First Aid.





Salient Points

- First aid is defined as initial care for an illness or injury.
- It is usually performed by a non-expert person to a sick or injured person in emergency until definitive medical treatment can be accessed.
- The most common injuries are falls, burns, drowning and road accidents.
- Many serious injuries can be prevented, if parents and caretakers are careful and keep the environment safe.
- Children/adolescents should be kept away from boiling water, fire, cooking stoves, lamps etc.
- Sharp and pointed objects like knives, scissors should be kept out of reach of children/adolescents.
- Small objects should be kept out of the reach of children/adolescents to prevent choking.
- Poisons, chemicals and pesticides, medicines, bleach, acid and liquid fuels should be kept in clearly marked bottles.
- Play area should be made secure to protect children/adolescents from falling.
- Elders should accompany children/adolescents while crossing the road.
- In case of medical emergency/accidents, immediate action should be taken, call ambulance at 102 and fire station at 101.

Burns

- If a person's clothing catches fire, quickly wrap the person in a blanket.
- Use plenty of cold, clean water to cool the burnt area immediately.
- Use any soothing medication like Burnol on burnt area.
- If blister occurs, take the person to nearest health centre
- Do not remove any thing that is sticking to the burn
- Give plenty of fluids such as juices or water with little sugar and salt to drink.



Electric Shock



- Electrical appliances, electric wires, plug points, etc. should be used carefully.
- In case of electric shock do not waste time, immediately switch off the main switch for electricity supply before touching the person who had electric shock.



- If the person is restless or unconscious take the person to the nearest doctor/health centre immediately.

Road Accidents

- One should walk on the side of the road facing traffic.
- While crossing the road, always use pedestrian crossing.
- Do not play near the road.
- If the injury is on head or backbone area, do not move head and neck.
- If the person is in extreme pain, s/he may have broken bones. Do not move the injured part, immediately get medical help.
- In case of bruises or sprains, immerse the injured part in cold water.
- If the person is unconscious take him to nearest health centre.



Drowning

- In case a person is drowning, immediately take the person out of the water.
- If the mouth/face is blocked with mud or froth, clean the face and mouth with an available cloth.
- Make the person lie down and press the stomach. Then turn the person and press back of stomach to take out water from the body.
- If the person is breathing but is unconscious, roll the person on to the side so that the tongue does not block breathing.
- If the person is having difficulty in breathing, make the person lie flat on the back and tilt his/her head back slightly; hold the person's nostrils close and blow into mouth; blow hard enough to make the person's chest rise; count up to three and blow again and continue till the person begins breathing.
- After giving first aid, immediately take the person to the nearest health centre.



Poisoning



- In case a person swallows poison, do not try to make the person vomit as it may result in greater illness.
- If the poison is on the person's skin or clothes, remove the clothing and pour large amounts of water over the skin.
- Wash the skin thoroughly several times with soap.
- If a person has poison in her or his eyes, splash clean water in the eyes for at least 10 minutes.



- Take the person immediately to a health centre or hospital along with the sample of poison and/or its container.

Snake Bite

- In case of a snake bite do not waste time by running after the snake.
- Tie a cloth tightly a little above the snake bite and give a cut on the bitten area to squeeze out blood to remove the poison.
- Do not let the person sleep.
- Do not consult snake charmers, ojhas & traditional healers, rather take the person to the health centre immediately.



Bruises/ Broken Bones



- Limit movement of head and back and avoid twisting of spine.
- An abnormal posture of arms or legs may be due to a fracture. In that case, immobilise the limb with the help of a sling or a wooden log tied to the limb.
- Don't move the injured area, instead provide support and get medical help immediately.

Cuts/ Wound

- Wash the cut/wounded area with water/antiseptic solution.
- Dry the surface around the cut/wounded area.
- Apply antiseptic and cover the cut area with a clean cloth or a bandage.
- For all cuts/wound the person should be given tetanus toxoid injection if medically advised.
- If the person is bleeding heavily, raise the injured area, above the level of the chest and press firmly against the wound until bleeding stops.
- Take the person to health centre for medical help.



Choking



- Keep playing and sleeping areas free from small objects such as buttons, beads, coins, seeds and nuts.
- In case a person has accidentally swallowed an object and is coughing, do not interfere, let him/her try to cough up the object. If the object does not release quickly, try to remove it from the person's mouth.



- For infants and small children, support the head and neck; turn the child's face down with head lower than the feet, give blows at the back to dislodge the object, if unable to dislodge the object, take the child to the nearest health centre.

Supplies required in a First Aid Kit

- Adhesive bandages
- Dressings
- Sterile gauze pads
- Cotton
- Cotton clothes
- Roller bandage
- Triangular bandages



- Saline
- Antiseptic
- Antibiotic creams
- Scissors
- Blades
- Alcohol
- Thermometer
- Soap

Class Activities

Instructions for Trainers

Instructors may demonstrate the techniques wherever essential and ask adolescent girls to practice. The activity is done to train adolescents to help the patients even with a sprain. All activities under First Aid would need to be practiced. Adolescents may be divided into group of two, one can become patient while other can provide First Aid and then change their role of practice.

Activity I - Tying Bandages

First thing to be kept in mind is to remain calm and keep emotions and stress under check. They can be innovative and creative at such times like they can use clean handkerchiefs, part of sarees/chunies and petticoats, or use a simple soap and clean water, if a disinfectant and bandages are not available.

The trainer may demonstrate the correct way to tie a bandage.



SAFE DRINKING WATER

SESSION	Safe Drinking Water
OBJECTIVE	To discuss the importance of safe drinking water and household method for making water safe and potable.
CONTENT	<ul style="list-style-type: none"> • Importance of water • Uses of water • Safe Handling of water • Storage of water • Household methods to make water safe
DURATION	45 Minutes
RESOURCE PERSON	Field Trainer from MNGOs/FNGOs or Master Trainer
TRAINING METHOD	Presentation and demonstration
LEARNING OUTCOME	The adolescent girls will gain knowledge on household methods for making water safe and potable. They would also learn safe handling of water.





Salient Points

- Water is essential for life. We can live without food for some days but we cannot live without water. Water accounts for 60% of our body weight.
- In India only 42% of the people get safe drinking water . Some 1.8 million people die every year of diarrhoeal diseases like cholera, and many others are seriously sickened by water borne illnesses like, diarrhoea, jaundice, typhoid, etc. many of which are easily preventable.
- We should only consume drinking water which is safe. Water should be free from any kind of pollutants. Water suitable for domestic use should be taken from a spring, deep well or upland surface water.

Uses of Water

Water is used for:

- Drinking
- Bathing
- Washing
- Cooking
- Irrigation



Purification of Water

- Water should be safe and wholesome i.e., it should be free from disease causing agent like bacteria, parasites, viruses etc.
- We can easily purify the water at our home and without any special requirement of expensive equipments.
- Most of the suspended impurities can be removed by filtration.
- Boiling of water kills all the disease causing organisms.



Two very simple methods for purification of water are **Boiling and Filtration**.

- Boiling and Filtration of Water is done as per the activity mentioned below.
- Chlorination can be done using bleaching powder and stored water chlorination can be done using chlorine tablets.
- One tablet of chlorine (0.5 gram) is sufficient for chlorination of 20 litres of water. Take 20 litres of water in a large clean container after filtering through a clean cloth. Put one tablet



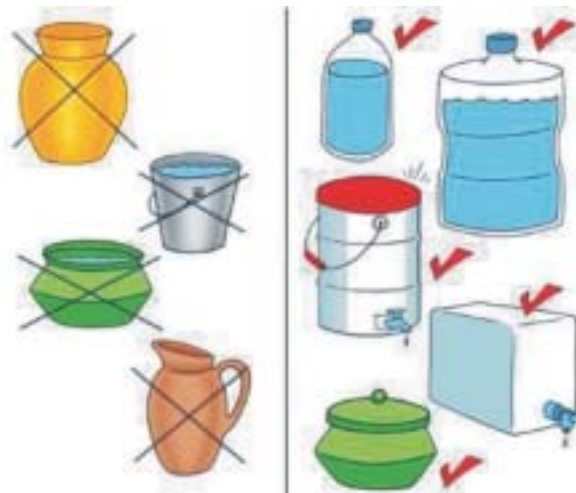
of chlorine in it and stir vigorously for few seconds. Leave this water for half an hour and consume afterwards.

Class activity: Demonstration

- Demonstrate one method for purification of water.
- Materials required- A vessel, a gas stove, a muslin cloth and a lid.
- Methodology- Boil water for 20 minutes. Let it cool down covered with a muslin cloth. As it cools down, transfer it into any suitable container and then cover it with a lid.

Storage of Water

- After purifying the water, it is also very important how we store it, because improper storage can re-contaminate the water.
- A few simple points which should be kept in mind when storing water are to store the water in a container which has a tight lid on it, or if the container with lid is not available, we can simply tie a clean muslin cloth on the mouth of the container and then cover it with a plate.



Handling

- One must take care while handling water. One should never dip one's hands in the container, so as to avoid contamination. To avoid contact of hands in the water container, one should always use a ladle to take out water.
- One should wash the water containers daily, to avoid any contamination.



If we keep these points in mind, we can prevent ourselves from water-borne illnesses and lead a healthy life.



DIARRHOEA MANAGEMENT

SESSION	Diarrhoea Management
OBJECTIVE	To discuss the symptoms and causes of diarrhoea and to enable the adolescents to manage it.
CONTENT	<ul style="list-style-type: none"> • What is Diarrhoea? • Causes of Diarrhoea • Management of Diarrhoea • Preparation of ORS
DURATION	45 Minutes
RESOURCE PERSON	Field Trainers from MNGOs/FNGOs/Master Trainers
TRAINING METHOD	Presentation and demonstration
LEARNING OUTCOME	The adolescent girls will gain knowledge on diarrhoea and its management. They would also learn preparation of ORS.





Salient Points

Many illnesses, especially diarrhoea, are caused by germs found in human faeces. If germs get into water or on food, hands, utensils or surfaces used for preparing and serving food, they can be swallowed and can cause illness.

Diarrhoea

- Passage of loose or watery stools is called diarrhoea.
- Diarrhoea causes dehydration which is dangerous.
- Diarrhoea is not itself a disease, but a symptom of several diseases.
- There may be abdominal pain, which may reduce after a stool is passed.
- Children are more likely than adults to die from diarrhoea because they become dehydrated more quickly.
- Diarrhoea is also a major cause of child malnutrition.

Causes of Diarrhoea

- Bacterial/Viral Infections: Several types of bacteria/virus which get into our body through contaminated food or water are the main causes of diarrhoea.
- Unhygienic habits and consumption of stale food may also cause diarrhoea.
- Parasitic infections are also a cause for diarrhoea.
- Food intolerance - Some people are not able to digest specific component of food properly, such as lactose, the sugar found in milk - which ultimately leads to diarrhoea.

Home Treatment for Diarrhoea

- Intake of home available fluids
- Oral Rehydration Solution (ORS)
- Continued feeding
- Continued breastfeeding

What is ORS?

ORS (oral rehydration salts) is a special combination of dry salts that is mixed with safe water. It can help replace the fluids lost due to diarrhoea.

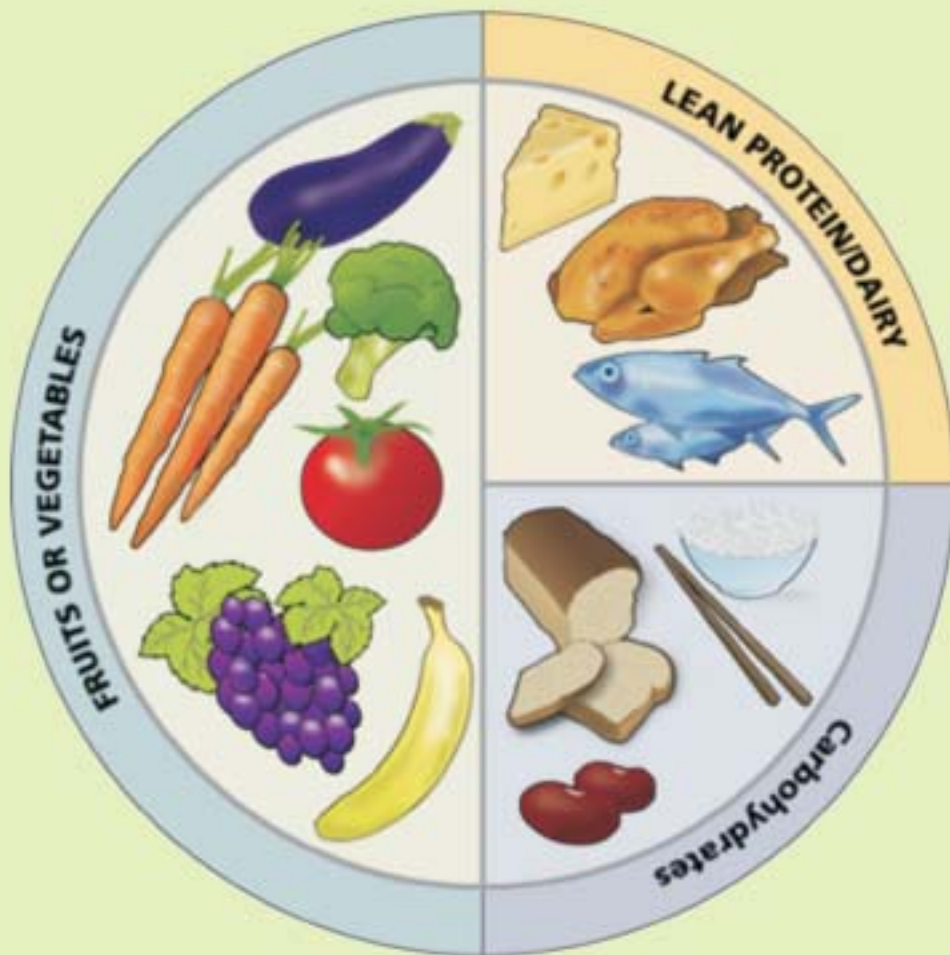
How is ORS prepared?

1. Put the contents of the ORS packet in a clean container. Check the packet for directions and add the correct amount of clean water. Too little water could make the diarrhoea worse.
2. Add water only. Do not add ORS to milk, soup, fruit juice or soft drinks. Do not add sugar.
3. Stir well, and feed it to the child from a clean cup. Do not use a bottle





NUTRITION



BASICS OF NUTRITION

BASICS OF NUTRITION

SESSION	Basics of Nutrition
OBJECTIVE	To impart knowledge about good nutrition and to understand nutritional needs during adolescence
CONTENT	<ul style="list-style-type: none"> • Need and functions of food • Nutritional needs during adolescence • Factors influencing nutrition of adolescents • Components of balanced diet • Nutritional deficiencies in adolescents and its prevention
DURATION	2 Hours
RESOURCE PERSON	Master Trainers/Trainers of MNGOs/FNGOs
TRAINING METHOD	Presentation and discussion
LEARNING OUTCOME	Adolescent girls will be able to understand the functions of food and importance of good nutrition and balanced diet in prevention of nutritional deficiencies





Salient Points

Why do we need food?

- Life cannot exist without food.
- Food helps in physical growth, mental development and maintenance of the body at all developmental stages of life and hence is needed for the newborn child, growing adolescents, pregnant women, women in reproductive age group and elderly persons.
- Balanced diet is essential for the adolescent to be healthy.

Functions of Food

Physiological Functions

- Provides energy
- Provides material for growth and development, body building, and body repairs.
- Gives protection from diseases

Psychological Functions

- Satisfies emotional needs
- Gives sense of security

Social Functions

- Bring people together thereby facilitating sharing of views, ideas and thoughts.
- Promote sense of sharing.

Balanced Diet

Balance diet is one which contains different types of foods in such quantities and proportions that the daily needs for energy, protein, minerals are met for proper growth, development and maintenance of the body processes.

The following are the nutrients required by our body:

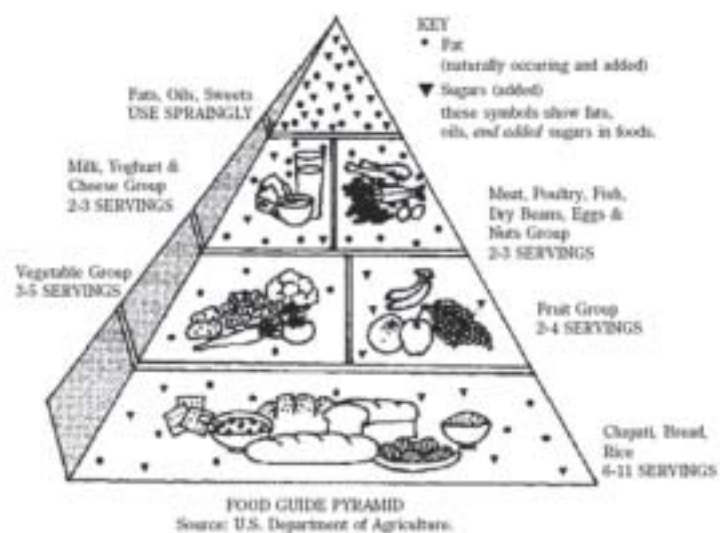
- Carbohydrates (energy giving)
- Proteins (body building)
- Fats (energy giving and promotes absorption of certain vitamins)
- Vitamins (protective)
- Minerals (protective)
- Water



Food Pyramid

Food Groups

1. Cereals and millets
2. Pulses and legumes
3. Vegetables (Green leafy vegetables, Roots and tubers & other vegetables)
4. Fruits
5. Milk and milk products
6. Meat, Fish & Poultry
7. Sugar and Jaggery (Gur)
8. Fats and Oils
9. Nuts and oilseeds



Sources and Functions of Essential Nutrients

Nutrients	Sources	Functions
1. Carbohydrates	<ul style="list-style-type: none"> • Cereals, millets, roots and tubers, such as potatoes, sweet potatoes, yam, tapioca, colocasia (arbi) sugar and jaggery (Gur). 	<ul style="list-style-type: none"> • Supply energy to the body.
2. Proteins	<ul style="list-style-type: none"> • Pulses and legumes, milk, cheese, curd, nuts and oilseeds, meat, liver, fish and egg. 	<ul style="list-style-type: none"> • Builds and repair body tissues, muscles and vital fluids like blood. • Helps in formation of substances that help in digestion and fight infections.
3. Fats	<ul style="list-style-type: none"> • Butter, ghee, vegetable oils and fats, oilseeds, nuts and soya bean. 	<ul style="list-style-type: none"> • Serve as a rich source of energy and provide essential fatty acids and help in absorption of certain vitamins.
4. Vitamins and Minerals	<ul style="list-style-type: none"> • Green leafy and yellow vegetables (e.g. spinach, cabbage, carrots & pumpkin), fresh fruits, yellow and red fruits, milk and milk products and fortified foods. 	<ul style="list-style-type: none"> • Helps keeping the body healthy.



Importance of Vitamins and Minerals

Nutrients	Sources	Functions
Vitamin A	<ul style="list-style-type: none"> Dark green leafy vegetables (spinach, mint and radish leaves, drumstick leaves, curry leaves, coriander), and yellow vegetables and fruits (pumpkin, ripe mango, papaya and carrot). Some animal foods like milk & milk products (butter and ghee). 	<ul style="list-style-type: none"> Helps in preventing nutritional blindness. Provides immunity to the body and prevent infections.
Vitamin B Complex	<ul style="list-style-type: none"> Cereals, pulses, legumes, vegetables, eggs, milk and milk products. 	<ul style="list-style-type: none"> There are a number of vitamins in this group that are essential for normal growth and protection of the body.
Vitamin C	<ul style="list-style-type: none"> Citrus fruits like Guava, amla, orange, grapes, and tomato etc. 	<ul style="list-style-type: none"> Enhances response to immunity and is essential for good health and protection against diseases. Helps in absorption of iron. Helps in healing of wounds.
Vitamin D	<ul style="list-style-type: none"> Fish liver oil, cod liver oil, butter, egg and exposure to sunlight. 	<ul style="list-style-type: none"> Is essential for the formation of bones.
Vitamin E	<ul style="list-style-type: none"> Wheat germ, vegetable oil, whole grains. 	<ul style="list-style-type: none"> Helps in eliminating harmful substances from the body.
Calcium	<ul style="list-style-type: none"> Vegetables (spinach, mustard greens), ragi, cheese, milk, curd and butter milk. 	<ul style="list-style-type: none"> Is essential for normal development and strengthening of bone and teeth.
Iron	<ul style="list-style-type: none"> Green leafy vegetables (spinach, methi), legumes, meat and chicken. 	<ul style="list-style-type: none"> Is needed for formation of blood.
Iodine	<ul style="list-style-type: none"> Iodized salt. 	<ul style="list-style-type: none"> Prevents goitre and other disorders.



Increased Nutritional Needs during Adolescence

Adolescence is a phase of rapid and continuous physical, mental and sexual growth and development. Adolescents have increased nutritional need as they gain up to 50% of their adult weight, more than 20% of their adult height and 50% of their adult skeletal/bone mass during this period. Adolescent girls also need additional requirement of iron to compensate for menstrual blood loss, and calcium which gives strength to the bones. The right quantity and quality of food consumed by adolescents during this phase will help them in their adult life too.



Reasons for Poor Nutrition of Adolescent Girls

- Lack of knowledge in the family and community about the importance of nutrition during adolescence.
- Lack of food because of socio-economic circumstances.
- Poor dietary intake of vegetables and fruits.
- Bad and unhygienic cooking habits.
- Dieting/fasting as adolescents are concerned about their body figure.
- Inequitable distribution of food in the family with the female adolescents being denied nutritious food.
- Social reasons—girls and women eat the leftovers after the male members of the family have eaten.
- Mostly in rural areas, girl child is less breastfed which may lead to poor nutrition in adolescence.
- Lack of appetite due to stress and strain.



Nutritional Deficiencies in Adolescents and its Prevention

Anaemia

Causes

- Insufficient intake of iron, folate and vitamin C rich foods
- Hookworm infestation
- Low absorption of iron in body
- Loss of blood through menstrual bleeding in adolescent girls and women
- Frequent episodes of malaria

Signs and Symptoms

- Shortness of breath
- Dizziness
- Headache
- Coldness in the hands and feet
- Pale skin, nails, eyes etc.
- Lack of appetite



Consequences

- Decreased work capacity
- Maternal mortality
- Impaired cognitive functioning

Prevention and Treatment

- Eat foods that are rich in iron such as green leafy vegetables (spinach, mint, raddish leaves, drumstick leaves), egg yolk, fish, liver and meat.
- Include rich foods in vitamin C such as guava, amla, oranges, lime, green leafy vegetables in the diet.
- Do not take tea or coffee with meals or for at least one hour after taking iron tablets and meals.
- Maintain personal hygiene and sanitation and safe handling of food.
- Wear footwear to prevent worm infestation, take a course of de-worming if worm infestation is suspected before starting iron supplementation.
- Prevent early marriage and early motherhood.
- Prevent breeding of mosquitoes to protect self & family from malaria.
- Regular consumption of iron and folic acid tablets.



Vitamin A Deficiency

Causes

- Low intake of vitamin A-rich foods
- Frequent illness like diarrhoea, acute respiratory tract infections and measles etc.
- Not feeding colostrum
- Delayed breastfeeding
- Delayed and inappropriate complementary feeding.



Sign and Symptoms

- Night blindness
- Dry eyes
- Dry skin

Prevention and Treatment

- Eat foods that are rich in vitamin A such as yellow, red and green leafy vegetables (pumpkin, carrots, spinach, mint, radish leaves, drumstick leaves); fruits (Mango, Papaya); milk and milk products, egg, fish and liver.
- Increase intake of ghee/oil/butter in the diet.



For the Child

- Initiate breastfeeding as early as possible.
- Feed colostrum to the child.
- Initiate appropriate complementary feeding at six months of age with continued breastfeeding.

Iodine Deficiency Disorders (IDD)

Causes

- Lack of iodine in the body
- Consumption of foods grown on land deficient in iodine
- Ignorance about using iodised salt.

Sign and Symptoms

- Swelling in neck
- Protruding eyes
- Dullness/tiredness

Consequences as

- Goitre
- Mental Retardation & Deafness
- Abortion/Still Births

Prevention of Iodine Deficiency Disorders (IDD)

- Always consume iodised salt.
- Sea foods may be used, if acceptable and affordable.



HEALTHY COOKING AND EATING HABITS

SESSION	Healthy Cooking and Eating Habits
OBJECTIVE	To discuss about healthy cooking and methods for improving quality of food
CONTENT	<ul style="list-style-type: none"> • Methods for improving quality of food • Food fortification and its benefits • Conservation of nutrients
DURATION	1 Hour 30 Minutes
RESOURCE PERSON	Master Trainers/MNGOs/FNGOs
TRAINING METHOD	Lecture-cum-discussion and Demonstration
LEARNING OUTCOME	Adolescent girls will be able to understand the methods to enhance the nutritive value of food and better cooking practices





Salient Points

Methods to Improve the Nutritive Quality of Food

Instructions for Instructors:

On the first day of the training programme, wash the green gram well and soak it for a day or in clean water. On second day, tie it in a wet cloth and hang it. On the third day, demonstrate how the sprouts are formed. While showing the demonstration of other food preparations, offer these sprouts to participants for tasting.

Sprouting is the practice of soaking, draining and then hanging seeds in a wet cloth until they germinate, or sprout.

Benefits of Sprouting

- Enhanced vitamin C and B complex.
- Helps to prevent constipation and gas formation.



Fermentation is done by grinding cereals and pulses, mixing and keeping it at room temperature over night. It helps in increasing vitamin C and B complex.

Enrichment of food is done by mixing two or more types of food stuff. It is a method where by we enrich the food item with essential nutrients in order to increase its nutritive value.

A few ways by which we can fortify our food items are:

- Mixing soya flour in wheat flour to increase the protein content of wheat flour.



- Mixing ragi flour into wheat flour to increase the calcium content of wheat flour.
- Mixing bajra flour into wheat flour to increase iron content of wheat flour.
- We can sun dry amlas which may be added to any dal or vegetable while preparing to increase the vitamin C content of our food.
- Similarly we can sun dry carrots and use them to increase vitamin A content of our food.
- Iodised salt available in market should be used.

Benefits of Enrichment of Food

- Improves micronutrient content of the food.
- Increases the consumption of nutrients in the body.
- Enables to incorporate some food items which are generally not consumed.
- Enables to give children foods which are generally not liked by them.

Cooking

Benefits of Cooking

- Cooking makes our food palatable and helps in easy digestion.
- Cooking destroys harmful germs.
- Good cooking practices can increase the nutritional benefits of food items.



Nutrient losses during cooking

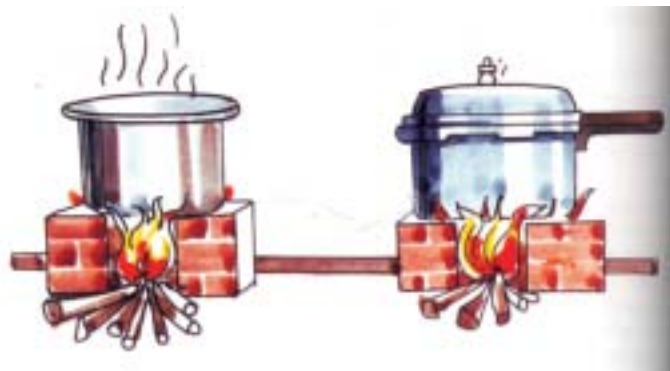
- Food contains a lot of useful nutrients like vitamins and minerals, which can easily be lost while cutting, washing and cooking at high temperature.
- Nutrients are lost when vegetables are washed after cutting into small pieces for cooking.
- Poor cutting and washing practices easily destroy B-group vitamins.
- Vitamins are lost during washing of cut vegetables and cooking.
- Cooking at high temperature leads to destruction of nutrients.
- The most easily destroyed nutrients are the water soluble ones. Vitamin B complex and C are lost by exposure to excess water, air, heat and light.



- Fat-soluble vitamins on the other hand e.g. A, D, E and K are more stable.
- Proteins are not lost much in daily cooking. They may get denatured if overcooked.
- Minerals leach out from boiled legumes but their loss is lesser than vitamins.

Cooking Tips

- Proper methods of cooking can reduce the loss of minerals substantially.
- Consumption of properly washed raw and fresh vegetables is beneficial.
- Rice should be washed in water once or twice only.
- The water used for soaking the rice should be used in cooking.
- The amount of water used to cook rice and vegetables should be adjusted so that it is absorbed and need not be drained.
- If the water in which rice, dal or vegetables are cooked is extra, it should be used as soup, or in making dough, because when we boil anything in water all its nutrients comes into water, and by throwing away the extra water we would be losing nutrients.
- Use fresh vegetables.
- Include sprouted cereals and pulses in the diet.
- Wash vegetables or fruits before cutting and peeling. Cut or peel them just before you cook or eat.
- Cooking food in a pressure cooker prevents loss of vitamin C.
- Iron pan may be used for cooking food.
- Cooking time should be short.
- When we prepare paneer out of milk, the whey water should never be thrown away, rather it should be used in making wheat dough etc.
- We should always cover and cook green vegetables, it takes less time and nutrients are not lost.
- Heat can also destroy some of the nutrients, like vitamin C, lemon may be added after cooking.

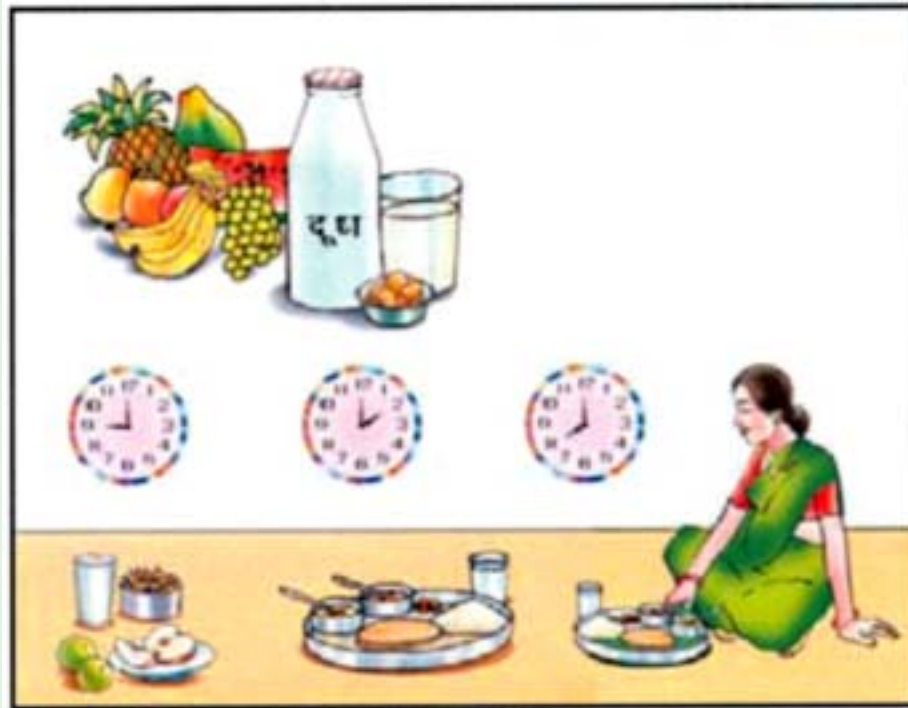


NUTRITION DURING PREGNANCY
AND
LACTATION

NUTRITION DURING PREGNANCY AND LACTATION

SESSION	Nutrition during Pregnancy and Lactation
OBJECTIVE	To make adolescent girls understand the Nutritional Care of women during pregnancy and lactation
AGE GROUP	14-18 years
CONTENT	<ul style="list-style-type: none"> • Nutritional Care during Pregnancy • Nutritional Care during Lactation
DURATION	1 Hour
RESOURCE PERSON	Master Trainers/MNGOs/FNGOs
TRAINING METHOD	Presentation and discussion
LEARNING OUTCOME	Adolescent girls will be able to understand the importance of good nutrition during pregnancy and lactation





Salient Points

Pregnancy

- Eat balanced diet and variety of foods, so that all nutritional needs are fulfilled.
- Eat four to five times a day.
- Increase intake of cereals, pulses, milk and milk products, fresh fruits and green leafy vegetables.
- Consume meat, fish and egg, if culturally accepted and affordable.
- Include oil or ghee in the diet as these are rich source of energy.
- Consume iodised salt.
- Drink plenty of water.
- Eat small amounts of food at short intervals, if suffering from nausea and vomiting but should not stop eating.
- No food should be avoided during pregnancy but intake of tobacco and alcohol should be prohibited.
- Consume 'Supplementary Food' provided at AWC daily.
- Avoid food fads and disbeliefs regarding food intake.



Lactation

- A nursing mother, in addition to normal diet, needs one additional good quality meal every day.
- A nursing mother needs more proteins (high quality) for milk production. She should have more of whole grain cereals, pulses/dals, milk, curd, green leafy vegetables and fruits. Also, only iodised salt should be used.
- A nursing mother should take plenty of fluids.
- A nursing mother should not eat spicy and high calorie food such as ghee, nuts, etc. in excessive amount so as to avoid undesirable gain in weight.
- If a nursing mother does not consume required amount of food, her own body stores will be used for production of milk, thus affecting her health.
- No food is forbidden during lactation.
- A nursing mother should consume the supplementary food provided at the Anganwadi Centre for six months after delivery to meet the increased nutritional requirements of breastfeeding.

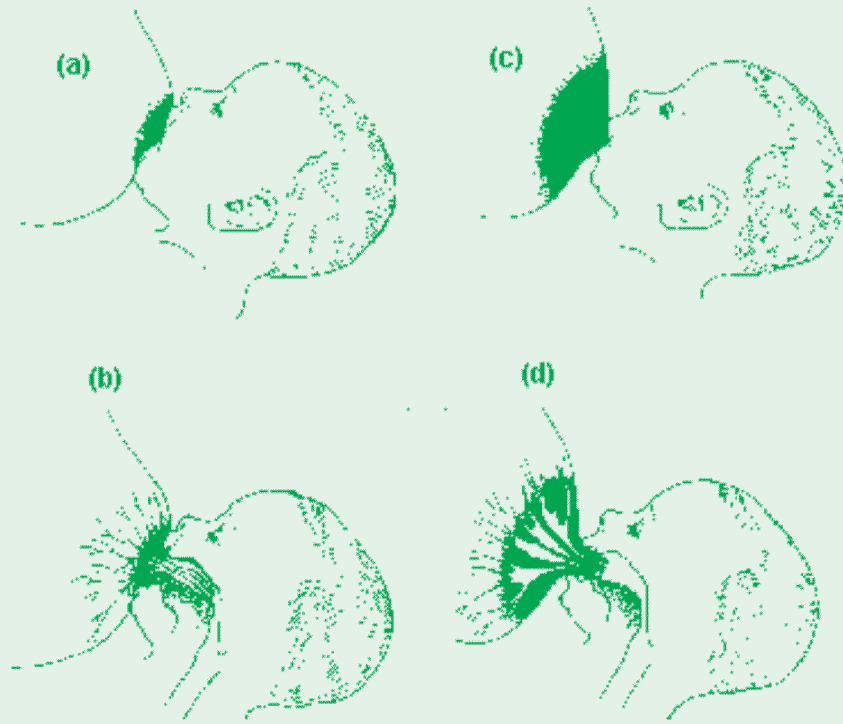


BREASTFEEDING

BREASTFEEDING

SESSION	Breastfeeding
OBJECTIVE	To learn good breastfeeding practices and advantages of breast milk for the mother and the child
CONTENT	<ul style="list-style-type: none"> • What is colostrum and its benefits? • Why Exclusive breastfeeding? • Correct positioning of feeding a child. • Advantages of breastfeeding for mother and baby. • Myths and facts related to breastfeeding.
DURATION	1 Hour and 30 Minutes
RESOURCE PERSON	Master Trainers/MNGOs/FNGOs
TRAINING METHOD	Presentation and Group discussion
MATERIAL REQUIRED	Flipcharts
LEARNING OUTCOME	Adolescent girls will be able to understand the importance of breastfeeding for growth and development of child.





Instructions for Trainers

The session may be conducted with the help of Flipcharts. Initiate the discussion on what is breast milk and what is the importance of breast milk? Then display flipcharts 1-9.

Flipchart 1

Breastmilk is the first natural food for child. It provides all the energy and nutrients that the child needs for the first six months of life, and continues to provide up to half or more of a child's nutritional needs during the second half of the first year and upto one-third during the second year of life.

Flipchart 2**Colostrum and its importance**

- **Colostrum is the first milk that is produced immediately after birth.**
- **Colostrum should not be discarded, as it is very good for the child.**
- **Colostrum is thick yellow coloured secretion and is rich in protein, vitamin A and substances that protect the new born child from infections. This lasts for first 2-4 days of lactation.**
- **Certain maternal conditions like diabetes and anaemia can affect the composition of colostrum.**

Flipchart 3**Exclusive Breastfeeding and its Importance**

- **Exclusive breastfeeding is defined as feeding the child breast milk with no supplementation of any type of food (not even water).**
- **National guidelines recommend that all children be breastfed exclusively for the first six months of life.**
- **Exclusive breastfeeding for six months reduces gastrointestinal infection and ensures proper growth.**



Flipchart 4

Advantages of Breastfeeding

To Baby:

- Breast milk is easy to digest.
- Breast milk contains substances which protect the child from many types of infections like diarrhoea, respiratory infections etc.
- Suckling helps in the development of jaws and teeth of the child.
- Early skin to skin contact with the mother gives warmth to the child.
- Helps the mother and child to develop a close and loving relationship.
- Breast milk is readily available, quiet safe at right temperature and free of cost.

To Mother:

- Breastfeeding reduces the risk of excessive bleeding after delivery.
- Breastfeeding makes mother feel emotionally satisfied and her self-image is enhanced.
- Breastfeeding protects mother from breast and ovarian cancers and delays onset of menstrual cycle.

Flipchart 5

How much and how often should the infant be fed?

- A newborn baby should be fed as often as every 2 hours or perhaps more frequently in the beginning.
- The mother should try nursing 10 to 15 minutes on each breast alternatively.
- By 2 to 3 months of age, an infant needs to be breastfed for six to eight times a day.



Flipchart 6

Signs of Under and Over feeding

Signs of underfeeding

The baby's skin remains wrinkled even after the first month of life, and the baby's face does not seem to fill out (this may signal inadequate weight gain). The baby does not appear to be satisfied, even after a full feed.



Signs of overfeeding




Warning signs of overfeeding may include vomiting after a full feed and having frequent loose watery stools. Many babies "spit up" during burping because the digestive tract is immature; this is not the same as vomiting all or most of a feed.



Flipchart 7

Breastfeeding positions

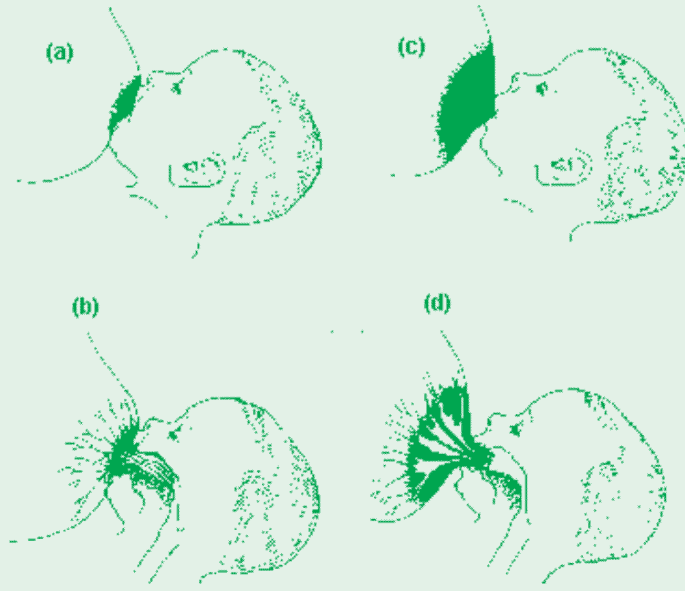


This is the classic 'front hold' or 'cradle position'.

The 'underarm position' shown above is also known as the 'footy hold'. It's possible to feed twins together in this position.

The 'lying down' position is particularly good for mothers who have had a caesarean section or if one's bottom is sore after the birth.

Flipchart 8



Signs of good attachment are

- Chin touching breast
- Mouth wide open
- Lower lip turned outward
- More areola visible above than below the mouth
- No pain

Signs of poor attachment are

- Chin separated from the breast
- Mouth looks closed
- Lower lip pointed forward
- More areola visible below the mouth and lower lip
- Feel pain



Instructions for Trainers

Now ask the participants, what are the different customs/ myths prevailing in the society regarding breastfeeding. Sum up the discussion and invite further comments or suggestions.

Flipchart 9

MYTHS	FACTS
Colostrum should be discarded	Colostrum should be given as it is very useful for the baby.
Prelacteals are beneficial (honey, gripe water, sugar water, Swarna Prashan)	Prelacteals can be harmful.
There is not enough milk for the first 3 to 4 days after birth.	Infants are well hydrated via the placenta at birth. Small colostrum feedings (5-15 ml) are:- appropriate for the size of the infant's stomach - easy to manage as infant learns to coordinate sucking, swallowing and breathing
There is no immunologic benefit to breastfeeding after the first 3 months.	Although the greatest protection from infection appears to be in the first few months of life, breast milk continues to contain direct anti-infective factors and immune-modulators as long as it is produced. As an individual's immune system is not thought to be fully mature for at least 2-4 years, breast milk changes over time to meet the needs of the developing infant and child.
Breastfeeding past 2 yrs of age is abnormal and causes over dependence on the mother.	There is no evidence in the child psychology or developmental literature to suggest that a longer duration of breastfeeding engenders abnormal dependence on either mother or child. In fact, the research suggests that children breastfed longer are more independent than their peers.
Early feedings should be timed to prevent maternal sore nipples.	Infant feeding patterns vary widely as does maternal skin sensitivity. Sore nipples are usually caused by poor latch-on and poor positioning, further aggravated by unnecessary washing, lotions and creams. Timed breastfeeding does not prevent sore nipples, but does decrease duration of breastfeeding.
If a mother has an infection she should stop breastfeeding.	Acute infectious diseases in the mother are NOT a contraindication to breastfeeding if such diseases can be readily controlled and treated. By the time diagnosis is made, the infant has already been exposed. Breastfeeding should continue so that the infant will receive mother's antibodies and other host resistance factors in breast milk.
Jaundiced babies should not continue breastfeeding.	Early onset (days 3-5) jaundice is due to decreased breast milk intake. It is a form of starvation jaundice. The more frequently an infant feeds in the first few days of life, the lower his bilirubin will be. There is no need to temporarily discontinue breastfeeding (for 12-48 hrs) unless the bilirubin exceeds 20.
Women with small breasts make less milk.	Milk volume regulation in lactating women is regulated by infant demand. The amount of milk made per feeding and per 24 hours depends on the frequency and completeness of emptying of the breasts, not the size of the breasts. The more frequently and more completely the breasts are emptied, the more milk is made. The size of the breast determines only the storage capacity. Infants of mothers with small breasts may need to breastfeed more frequently to take in the same amount of milk per 24 hrs as infants of mothers with larger breasts.
Breastfeeding prevents pregnancy.	Although any breastfeeding does not guarantee against pregnancy, a woman who is exclusively breastfeeding, less than 6 months postpartum and whose periods have not returned (Lactational Amenorrhea Method-LAM) has the same chance of pregnancy as if she were taking hormonal contraception.



COMPLEMENTARY FEEDING AND CHILD CARE PRACTICES

SESSION	Complementary Feeding and Child Care Practices
OBJECTIVE	To discuss about healthy child rearing practices
CONTENT	<ul style="list-style-type: none"> • Care of new born • Complementary feeding / Age specific feeding • Feeding problems and its solutions • Undernutrition in children • Immunisation • Common ailments and its prevention
DURATION	2 Hour and 30 minutes
RESOURCE PERSON	Master Trainers/MNGOs/FNGOs
TRAINING METHOD	Presentation and discussion
LEARNING OUTCOME	Adolescent girls will be able to understand the concept of healthy feeding practices for child, under nutrition among children and how can it be prevented





Salient Points

Care of New Born

- Keep the child warm
- Do not bath child for first 7 days
- Start breastfeeding immediately after birth, give nothing else not even water
- Keep the child away from people who are sick
- Weigh the child at birth
- Give special care, if child is less than 2.5 kg

Instructions for Trainers

Ask the adolescent girls about the danger signs and symptoms in a new born child. Discuss and explain the following danger signs and symptoms.

Jaundice: Most healthy newborns develop a yellow tinge over their body after the first day due to the immaturity of liver. However, if the yellowness appears on the first day of life or it involves palms or soles, consult your doctor immediately. This could be observed by pressing and blanching the baby's sole for few seconds with your thumb and looking out for the return of colour, whether it is pink or yellow.

Poor Activity and Lethargy: Newborns keep their eyes closed for most of the time but awake with gentle stimulation. If a baby who was crying lustily before develops a weak cry, difficulty in feeding or becomes listless needs medical attention. Such a baby may be small or premature, or has an infection, or may be too cold. Remember that irritability in newborn is rather infrequent as compared to sluggish activity.

Breathing Difficulty: Rapid and fast breathing usually more than 60/minute, deep movements of lower chest and upper abdomen, grunting sounds with breathing, and blue colour of lips and tongue are all danger signs in a newborn. You can count the baby's breathing rate when he or she is resting and quiet and not while crying or immediately after feeding the baby.



Hypothermia: Hypothermia or low body temperature is a risk for newborn in any climate whether it is in tropical or in cold hilly areas. To find out whether the baby is feeling cold or not, touch the sole of foot with the back of your hand and then touch the stomach. If the sole feels colder than the stomach, the baby may be having low body temperature that is called hypothermia. This increases the baby's risk to develop cold injury and also increases baby's energy needs.

Delayed passage of stool and urine: Newborn should pass their first stool and urine within first 24 and 48 hours of birth respectively. Healthy newborn may pass up to 8 to 12 stools per



day, even with the passage of wind or after feeds. This pattern is normal and is not a cause of worry if the baby feeds well, is active and gaining weight normally.

Vomiting: Most babies bring out a little amount of curdled milk after feeding once in a while. This occurs as the air swallowed with breast milk is expelled out of stomach along with the ingested milk. However, if the vomiting is persistent, forceful, greenish yellow or brownish, then seek medical help.



Excessive weight loss: A normal newborn can lose up to 8 to 10 per cent of their birth weight initially and regain it after 7 to 10 days of life. If they lose excessive weight or take too long to regain it, it may indicate either the baby is sick or not getting enough milk. Severe illness often produces subtle signs in newborns and may sometimes be overlooked initially. Parents are the best observers to keep a watchful eye on their newborn to detect any deviation in their behaviour and seek medical help early.

Diarrhoea: Change in established bowel pattern towards greater frequency and looseness in child should be taken seriously. Many children pass stools while being fed but otherwise remain alright and keep on gaining weight. Breastfed babies pass more frequent stools than formula-fed babies. Maternal ingestion of drugs like laxatives and certain fruits like mango may result in loose stool in breastfed babies; it does not need any specific treatment. In infective diarrhoea in a newborn, baby needs treatment with medicine in addition to replacement of fluid losses and electrolytes.

Cyanosis or Bluish discoloration: Cyanosis is bluish discoloration of skin and mucosa. Peripheral cyanosis is seen in the extremities only. It may be normal in babies in the first few days of life, especially when they are cold. Central cyanosis is a very important danger sign. It is seen all over especially on lips and tongue. Central cyanosis indicates underlying cardiac or respiratory disease and therefore always requires prompt attention and appropriate referral.

Activity 2

Instructions for Trainers

After the discussion on dangerous signs, group activity about the feeding practices that should be followed may be conducted. For the activity, divide adolescent girls in four groups and give flipcharts and markers to each group. The groups may be asked to work on feeding practices of different groups such as: Birth -6 months; 6- 12 months; 1-2 years and 2-5 years.

Now ask all groups to make presentations in the class and make changes, if any as per WHO recommendations for feeding young children which are given below.

WHO RECOMMENDATIONS FOR FEEDING YOUNG CHILDREN

At Birth:

- Initiate breastfeeding as early as possible, preferably within half hour.
- Do not give pre-lacteals such as water, honey or any milk, other than breast milk.
- Do not discard colostrum.



Birth to 6 Months

- 'Exclusive' breastfeeding until the child is 6 months old. Not to give the child anything other than breast milk, not even water.
- Breastfeed as frequently as the child wants during day and night, atleast 8 times in 24 hours.
- When a child begins to fuss, sucks fingers or moves lips, it indicates that he/she is hungry.
- Ensure that one breast is emptied completely, before shifting to the other.
- The child does not require water or any other fluids, as breast milk quenches 'thirst' as well as 'hunger'.

**At 6-9 months**

- Start by offering 2-3 tablespoons of thick porridge/ mashed food 2-3 times a day.
- Gradually increase the quantity to 125 ml.
- At 8 months help the child to feed him/herself with his/her fingers.
- Avoid foods, such as nuts, grapes, raw carrots etc., as they can cause 'choking'.
- Give 1-2 snacks in between meals, depending on the appetite.

At 9-12 months

- Offer finely chopped or mashed foods that child can pick up about ½ cup, 3-4 times a day.
- Give 1-2 snacks in between meals depending on his appetite.
- Feed him/her from his/her own bowl patiently, talking to him/her and looking into his/her eyes lovingly.
- Remove distractions, if any, to keep the child interested in meals.
- Do not force feed. Do not feed left-overs.
- To increase energy density of foods, add 1-2 tsp of ghee/oil to the food. If the preparation is thin, then 2/3 to 3/4 cup should be given each time.

1-2 years

- Breastfeed as often as the child wants, upto the age of 2 years or beyond.
- Continue to give 3-4 meals of nutritious foods chopped/ mashed if necessary, ¾ - 1 cup (250 ml) at each meal. Also give 1-2 snacks in between meals.
- Give variety of foods.



- Actively help the child to eat.

2- 5 years

- Give family foods, 3 meals each day. Also give nutritious snacks, twice daily, in between meals.
- Give variety of foods, if the child refuses, offer him 'tastes' of the food several times.
- Do not force feed the child. Give realistic portions depending on his age, size and activity.
- Increase the quantity of food as child grows older.



Safe Food Preparation and Hygiene

- Wash hands with soap before preparing food, before feeding the child, and after using latrine / toilet.
- Obtain clean/ safe water for drinking, treat it properly, store in a clean covered vessel, and use clean scoop to draw it.
- Wash child's cup / spoon with soap and clean water/ or boil, if possible before use.
- Avoid feeding bottles as far as possible, as they are difficult to clean.
- Prepare food in clean utensils, cook food thoroughly, especially meat, poultry, egg and sea food. Re-heat cooked food before using.
- Cover the left-over food, refrigerate if possible. Discard cooked food kept at room temperature for more than 2 hours.



KEY MESSAGES TO MOTHER ABOUT CARE OF YOUNG CHILD

- Brain development is most rapid during first two years of life. So young children need to be stimulated by playing with others, moving around, hearing sounds, having things to see, touch and explore.
- Teach the child to communicate by speaking, listening and playing with him/her.
- Illness interferes with normal growth and development. To prevent illness, immunise the child.
- Protecting children from physical and emotional distress helps them gain confidence to explore and learn.



Solving Feeding Problem

Feeding Problems	Solutions
Age group : Birth to 6 months	
1. Mother is not breastfeeding exclusively	<ul style="list-style-type: none"> - Breastfeed at least 8 times during day and night. - Do not give glucose water, tea, animal milk, porridge and even water. This will reduce the protection given by breast milk.
2. Mother feels she does not have enough breast milk	<p>To increase her breast milk supply</p> <ul style="list-style-type: none"> - She should breastfeed the baby more often and for longer period at each feed. - She should breastfeed during the day and at night. - She should eat more and drink more fluids.
3. Mother goes out to work and is unable to feed the child	<ul style="list-style-type: none"> - Mother should breastfeed the baby often before going to work after returning from work and at night. - If possible, she should take the baby to work and she must take brief breaks from work to feed the child. - She may express her milk before going to work for the child to be given in her absence.
4. Mother has flat or retracted nipples and cannot feed the child	<ul style="list-style-type: none"> - Teach the mother to gently pull the nipples and massage them with oil (do not use mustard oil). This should be done 3-4 times per day. - Refer the mother to a doctor if the problem does not improve in 2-3 days.
5. Mother has sore nipples or swelling on the breast	<ul style="list-style-type: none"> - Refer to a doctor. - Breast milk should be expressed regularly every 2 hours. - If the breast is infected, throw away the expressed breast milk.
6. Child is fed by a bottle	<ul style="list-style-type: none"> - Advise the mother to stop bottle feeding. This can be very harmful. - Put the child to breast every time child is hungry, and feed for as long as the child suckles. - Since breast milk may take 3-4 days to improve, feed the animal milk by a cup and a spoon.
7. Baby is unable to take breastfeed	<ul style="list-style-type: none"> - There may be problem in suckling, position or attachment. Refer to a doctor/health worker who can solve the problem.



Feeding Problems	Solutions
Age group: 6 months up to 12 months	
1. Child is given diluted animal milk	<ul style="list-style-type: none"> - Try and increase breast milk feeding by increasing the frequency and by feeding for longer duration. - Animal milk should never be diluted. - If mother is very worried that animal milk is too strong, advise her to give plain clean water after a feed.
2. Mother has discontinued breastfeeding. She considers child is too old to breastfeed.	<ul style="list-style-type: none"> - Breastfeeding can be done up to 2 years. - Resume breastfeeding by putting the child to breast every 2-3 hours. Breast milk will come back after 3-4 days.
3. Complementary food is not being given	<ul style="list-style-type: none"> - Tell the mother that only breast milk is not sufficient for the child hence additional foods need to be introduced. - Introduce soft mashed food cooked in oil/ghee like mashed cooked vegetables (peas, carrots) with oil, mashed fruit (banana, chiku, mango, papaya). - Khichari with oil or cooked dal and rice with oil.
4. Child does not want to eat complementary foods	<ul style="list-style-type: none"> - Offer the child its most favourite food. - Play with the child or divert his/her attention to the things which attract the child while feeding. - If at all, child is fussy, mother will have to be more patient and persistent while feeding the child. - Introduce only one food at a time and repeat it till the child starts liking the food
5. Child spits out the food given	<ul style="list-style-type: none"> - Do not place the food on tip of the tongue, place the food inside the mouth.
Age group: 12 months up to 2 years	
1. Child is not actively fed	<ul style="list-style-type: none"> - Mother or somebody in the family who is responsible, should feed the child. - The food for the child should be separate from the rest of the family. - There should be some food left behind when the child has finished the meal.
2. Child does not take family foods	<ul style="list-style-type: none"> - Make sure that family foods like dal, vegetable, meat, eggs, rice are soft and mashed. - Do not add any chillies or spices in the child's serving. - Offer what the child likes. - Give snacks (biscuit, chikki, besan laddoo, fried potato). - If still breastfeeding, give breast milk only after the child has eaten other foods.



Feeding Problems	Solutions
Age group: 2 years up to 5 years	
1. Child is not hungry.	<ul style="list-style-type: none"> - Identify the most favourite food and offer it. - Give snacks the child likes (biscuits, channa, groundnut, chikki, besan laddoo, fried potato). - Increase the frequency of food to more than 5 times daily if the child cannot eat enough at one meal.
3. Family is poor and cannot give snacks between meals.	<ul style="list-style-type: none"> - Get supplementary nutrition from Anganwadi centre and give it to the child. - Increase the frequency of family foods to 5 times per day instead of 3 times.
4. Child is under nourished.	<ul style="list-style-type: none"> - Increase the amount of food at every meal. - Give foods which are thick and have oil added. - Give food more often. - Include snacks (procured from Anganwadi Centre, biscuits, chikki, chana, ground nut, laddoo, panjiri, fried potato, seasoned fruits) in between meals.



Immunisation

National Immunisation Schedule for Infant, Children and Pregnant Women

Vaccine	When to give	Dose	Route	Site
For Pregnant Women				
TT-1	Early in pregnancy	0.5 ml	Intra-muscular	Upper arm
TT-2	4 weeks after TT-1*	0.5 ml	Intra-muscular	Upper arm
TT-Booster	If received 2 TT doses in a pregnancy within last 3 yrs*	0.5 ml	Intra-muscular	Upper arm
For Infants				
BCG	At birth or as early as possible till one year of age	0.1 ml (0.05 ml till 1mth age)	Intra-dermal	Left upper arm
Hepatitis B	At birth or as early as possible within 24 hours	0.5 ml	Intra-muscular	Antero-lateral side of mid-thigh
OPV-0	At birth or as early as possible within the first 15 days	2 drops	Oral	Oral
OPV 1, 2 & 3	At 6 weeks, 10 weeks and 14 weeks	2 drops	Oral	Oral
DPT 1, 2 & 3	At 6 weeks, 10 weeks and 14 weeks	0.5 ml	Intra-muscular	Antero-lateral side of mid-thigh
Hep B 1, 2 & 3	At 6 weeks, 10 weeks and 14 weeks	0.5 ml	Intra-muscular	Antero-lateral side of mid-thigh
Measles	9 completed months-12 months	0.5 ml	Sub-cutaneous	Right upper arm
Vitamin-A (1 st dose)	At 9 months with measles	1 ml (1 lakh IU)	Oral	Oral
For Children				
DPT Booster	16-24 months	0.5 ml	Intra-muscular	Antero-lateral side of mid-thigh
Measles 2 nd dose	16-24 months	0.5 ml	Sub-cutaneous	Right upper arm
OPV Booster	16-24 months	2 drops	Oral	Oral
Japanese Encephalitis**	16-24 months	0.5 ml	Sub-cutaneous	Left upper arm
Vitamin-A*** (2 nd to 9 th dose)	16 months. Then, one dose every 6 months up to the age of 5 years	2 ml (2 lakh IU)	Oral	Oral
DPT Booster	5-6 years	0.5 ml	Intra-muscular	Upper arm
TT	10 years & 16 years	0.5 ml	Intra-muscular	Upper arm

*Give TT-2 or Booster doses before 36 weeks of pregnancy. However, give these even if more than 36 weeks have passed. Give TT to women in labour, if she has not previously received TT.

**JE Vaccine, in selected endemic districts after the campaign.

*** The 2nd to 9th doses of Vitamin A can be administered to children 1-5 years old during biannual rounds, in collaboration with ICDS.



Malnutrition

Instruction for Trainers

Now display flipchart showing types of undernutrition in child and discuss differences between kwashiorkor and marasmus.

Kwashiorkor

- Weight usually 60 per cent less than the expected (depends on oedema)
- Low height
- Apathy
- Moon face
- Scanty, lusterless hair
- Oedema - swelling in legs due to accumulation of fluids
- Pigmentation patches, peeling and ulceration in skin.



Marasmus

- Head disproportionately large with little hair
- Low height and weight (below 60 per cent of the expected weight)
- Pigmented or peeling skin lesions
- No muscle mass – ribs can be seen
- Disinterested in environment and is immobile
- Lethargic – sits or lies in same position for hours together often with eyes closed
- Loss of appetite – does not eat or spit out
- Looks like an old man.



Common Ailments and its Prevention

Fever

- Is a symptom not an illness. However, fever should never be ignored, as it is an external symptom of an infection or disease.
- The temperature control mechanism of young children is not really well developed. As a result the temperature varies with changes of season. It can suddenly shoot up and also come down suddenly.
- Rise in temperature (up to 99.4°C) could not be necessarily due to illness, but by the child's activity or the warmth of a room.
- High fever can cause:
 - Febrile convulsions - uncontrolled twitching or jerking movements. The child may also become unconscious. Most convulsions are of a very short duration lasting not more than a few seconds.
 - Don't pick up the child.
 - Lay him on his back on a bed.
 - Turn his head to the side so that his tongue does not obstruct the windpipe.
 - Take him to the doctor if the child has:
 - Irritability
 - Nausea or vomiting

What you can do

- Keep the room cool. Open the windows or try using a fan to cool the child.
- Dress and cover him lightly.
- Stay close to the child.
- Sponge his face, neck and inside of arms and legs with tap water.
- Check with the doctor and follow the dosage instructions carefully before giving paracetamol/paediatric syrup to bring the fever down.

Vomiting

Vomiting is also not a disease in itself but a symptom. It could be due to:

- Reaction to infection.
- Digestive problems, stress or anxiety.
- Travel sickness



Vomiting in small babies:

- Some babies bring up a portion of almost every feed. This is not true vomiting and is rarely harmful to the baby.
- Projectile vomiting - This is forceful vomiting where the entire feed is forcibly ejected. This kind of vomiting is harmful because it causes dehydration and weight loss.

Seek medical help if:-

- Sick and vomiting does not make him feel better shortly afterwards.
- She/he is has vomited several times in succession; 3 or more times in half a day.
- She/he is sick and also has other symptoms like fever or diarrhoea.
- She/he seems exhausted, pale, not hungry and apathetic.

The younger the child, the more important it is to see a paediatrician quickly when vomiting is combined with fever or diarrhoea, as together they often result in dehydration.

Cold and Cough

- **Cold** is very common. This is mostly caused by viruses and not by catching a chill or not covering oneself properly.
- Low resistance can sometimes cause secondary infections like bronchitis, pneumonia or ear infection. Its time to worry if :
 - Fever is there after the 1st day.
 - There is a thick greenish-yellow nasal discharge.
 - Thick or wheezy cough.
 - Sore throat.
 - Earache or deafness.
 - Seems ill, lethargic and loss of appetite.



Cough - The commonest cause is cold. It could also be caused by asthma, bronchitis or pneumonia so don't try to diagnose and treat a cough yourself. If the coughing is accompanied by fever, noisy, difficult and painful breathing, pain in the chest, distended nostrils, or rapid breathing, consult the doctor immediately.

Precautions during Cold

- Take lots of fluids in small and frequent feeds.
- Don't restrict foods like orange juice, curd or rice unless advised by the doctor.
- Increase humidity with steam or soaked towels in water and hang in the room.
- Nasal drops give short-term relief but end in drying the nostrils even more.





Adolescent Reproductive and Sexual Health (ARSH)



REPRODUCTION CYCLE
AND
MENSTRUAL HYGIENE

REPRODUCTION CYCLE AND MENSTRUAL HYGIENE

SESSION	Reproduction Cycle and Menstrual Hygiene
OBJECTIVE	To impart knowledge about the reproductive system and menstrual hygiene
CONTENT	<ul style="list-style-type: none"> • Physical changes during adolescence • Female reproductive system • Menarche and menstruation • Menstrual hygiene practices • Care during menstruation • Common problems during menstruation • Common beliefs related to menstruation • Management of menstruation
DURATION	1 Hour
RESOURCE PERSON	Master Trainers/ Field NGOs/ MNGOs/ Sakhi Saheli
TRAINING METHOD	Brainstorming, Question and Answer, Role Play and Discussion, Presentations, Flash Cards, Case Study and Discussion
MATERIAL REQUIRED	Flipcharts, Markers
LEARNING OUTCOME	Adolescent girls will be able to understand the various functions of reproduction and importance of menstrual hygiene practices. In addition they will also get to know about the biological cycle behind it





Salient Points

Instructions for Trainers

Perceptions of adolescent girls

Ask adolescent girls about their perceptions of reproductive health including practices during menstruation.

Explain/provide scientific reasoning and knowledge to the girls to change their beliefs and adopt healthy practices.

Adolescent Years: Physical Changes during Adolescence

Adolescence is a period of transition from childhood to adulthood.

Adolescence starts from 10-19 years. The body changes occur during adolescence as follows:

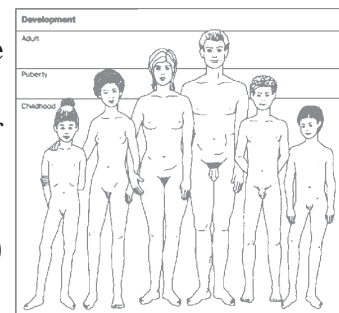
Girls

- Breasts become noticeable (Some girls also experience an ache or even a pain in their breasts at this stage).
- Hips become larger.
- Hair starts growing in the armpits and in the pubic area.
- She feels herself growing taller and bigger.
- Acne



Boys

- Like girls they become taller.
- Hair grows in their armpits and pubic area, chest and legs. Some of them start growing a slight moustache and a goatee beard.
- Their sweat and oil glands become active. Pimples may appear on the face.
- They become more muscular.
- Their genitals or reproductive organs (the penis and the testicles) become bigger.
- Their voice may sound funny because it starts breaking. It then becomes deeper as their vocal chords develop.



Activity: Body Mapping

To understand the process of sexual development, let the adolescent girls go through an activity called “Body Mapping”.

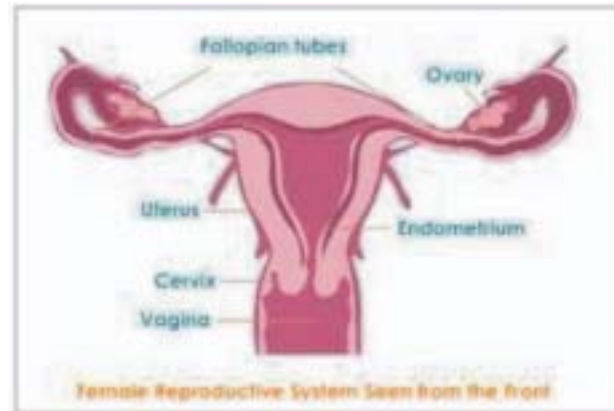
Body mapping can be done on the floor using chalk or on a large sheet of paper spread on the floor, using markers.

The adolescent girls should be instructed to fill in the body parts including the sexual/reproductive organs. The facilitator should encourage all group members to actively participate in this group activity.



Female Reproduction System

In the female reproductive system some parts are present inside the body and some are outside. The parts which can be seen by us on the outer side include inner lips, outer lips, clitoris, vaginal opening and urinary opening. Internal parts include the vagina, fallopian tubes, womb and ovaries (egg sacs). The egg sacs contain eggs which start maturing between 12 to 18 years of age this is known as **menarche**. The fallopian tubes are narrow through which the mature egg passes to reach the womb.



The womb is a pear shaped bag. Its function is to nourish and keep the foetus and give the foetus room for growth for nine months.

The passage which joins the outer reproductive organs to the inner organs is called the vagina (birth canal).

After monthly periods have begun, they are likely to be erratic for the first one year because the body takes time to adjust to this new process.

It takes 1-2 years to get regular periods after menarche.

Menarche and Menstruation



Menstruation (monthly period) starts between 12 and 18 years of age. This is called **menarche**. This age may be different for every girl and by 45 years of age a woman stops having periods. This is called **menopause**. The time of menopause also varies. Every month one egg is released from the egg sac which reaches the womb through the fallopian tubes. At this time if intercourse takes place a woman may conceive i.e., she becomes pregnant.

A thick layer of blood and mucus forms on the wall of the womb to nourish the foetus. If conception takes place then the fertilised egg appears and places itself on the wall of the womb.

If conception has not taken place then the layer of blood and mucus on the womb wall starts breaking and comes out of the vaginal opening. This process is called **menstruation**. The bleeding continues for about 4 to 5 days.

Periods don't start with puberty. If girl's physical development is not as per the age of the girl her family need not worry and can wait till 16 years for periods to start. If they don't start even then, she should consult a doctor.



Activity: Role Play

Instructions for Trainers:

The trainers may explain the script of the Role play to adolescent girls who are willing to do the Role - play. After the Role play the trainers may discuss in detail and summarise the main points.

Two adolescent girls Munni and Kamala, in the age group of 13-15 years visit Priya (15 years), who has come from the city to the village. All of them used to be good friends. Priya went away to the city one year back with her parents. The girls meet in the backyard garden in Priya's house. They decided to play hide and seek game. But Kamala refused to play.

Kamala: I cannot play, because today is second day of my periods. I am not supposed to play.

Priya (laughs): Of course you can play; there is nothing wrong in it. During periods, we should do all normal activities, eat all the normal food, and play and work as usual.

Munni and Kamala: Priya, you have forgotten the village ways or what? We do not enter the temple or kitchen, during periods because we are impure. When we play hide and seek, we may enter one of these place, which is not acceptable.

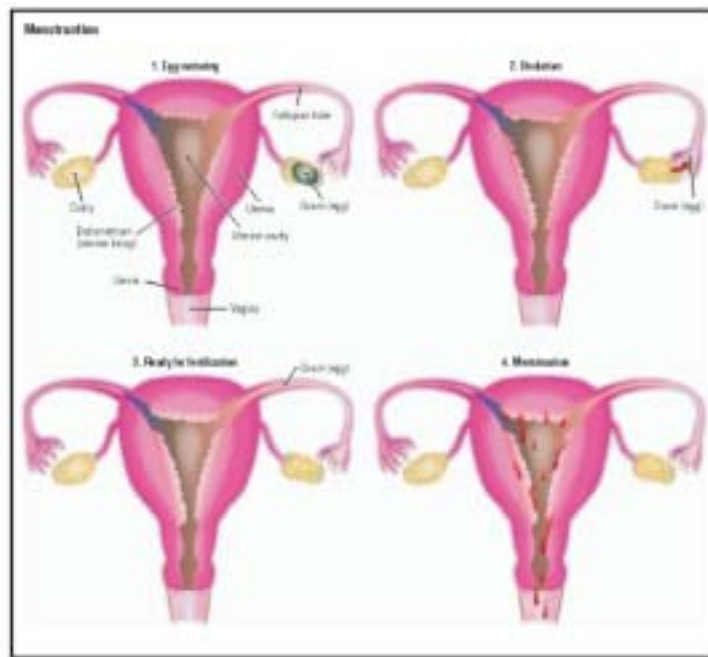
Priya: Listen, Munni and Kamala! In our school, every month the NSS cadre facilitators come and tell us new things about our body, the changes that we all go through during adolescence. I learnt that menstruation is a normal physiological process and there is nothing impure about it. In fact if you do not have regular menstruation it is a problem.

Munni: Why?

Priya: Wait; let me get the picture given to us in the school.

She brings flip chart 1 which shows the female reproductive organs to Kamala and Munni.

Flip chart 1 : Female Reproductive Organs



Munni and Kamala: Oh Ram! Priya, you are showing us these dirty pictures. Is that what they teach you in your school?

Priya: Have patience. These are not dirty pictures. These are female reproductive organs, located inside your body, my body and every woman's body in this world. This is particularly important for you Munni. Are you still taking medicine for the terrible itch in your thighs and burning sensation while passing urine? You told me about it when we met during Diwali holidays.

Munni: Yes, I am still applying the paste that the 'Vaid' has given me. It is so sticky, I sometimes prefer the itching (laughs). It is almost four months now.

Priya: I can explain to you why you got the itch. I will also explain to you why you get periods and how you get. I will tell you some simple ways to protect yourself from the itch.

Kamala: I am also interested. My sister is also suffering like Munni. May be, I can help her.

Priya shows the flip chart and describes the female reproductive organs and explains how and why menstruation occurs.

See these are ovaries (pointing out with stick). Ovaries are oval-shaped glands situated on either side of uterus and contain thousands of immature eggs. Once a girl has reached puberty, every month one egg (ovum) is released from the ovary. If the egg is not fertilised by a sperm, the internal lining of the uterus is not needed and is gradually released during menstruation. This causes contraction and that is why we feel pain.

Flip chart 2: Menstrual Cycle



See this chart. It shows the timings of the whole cycle. First 7 days mark the menstruation. This can vary from 3-7 days from one individual to another. From eighth day the womb thickens in preparation for the egg lasts till the eleventh day. Next five days are for ovulation that means that at this time the fertilisation will take place if the sperm will enter the uterus. From 18 to 25 day, if the fertilisation does not takes place then the lining fades away. After the 26 day, the lining detaches itself, leading to menstruation.

Munni: But Priya, I get periods after 32 days.



Priya: Menstrual cycle varies from person to person. So one need not worry on that account. But in our village, many of the menstrual practices that we follow are not correct and we keep following them blindly. This is the cause of several of the health problems. We need to change the cloth used during monthly periods at least three times a day. Actually, when we do not change the cloth when it is soaked, the sweat and the blood together gives the itch. If you neglect that, the fungal infection can spread further. Do you know if you do not wash and keep you genital areas clean during periods, you can get Reproductive Tract Infection. And if it is not treated, it can even lead to heavy bleeding and sometimes death.

Munni: Oh my God, I did not know it was so serious. Perhaps we should tell our mother and elders the importance of bathing during periods. They keep preventing us from taking bath during periods.

Priya: We also wash the menstrual cloth without soap and dry it inside the house. Infact, we must wash it with soap and rinse it nicely and dry it in the sun, because sunlight kills the germs. Then we need to store the cloth in a clean place.

Kamala: But Priya, my mother says that, it is unclean cloth and should not be seen by outsiders. It will lead to bad health.

Priya: As I explained to you, there is nothing unclean about menstruation. It becomes unclean when the cloth is not washed, dried and stored properly.

Munni: Priya, thanks, I can soon get rid of the horrible paste that the 'Vaid' tells me to put.

Priya: Let us go to the ANM tomorrow and get proper medicine for you. Hereafter follow the simple menstrual hygiene practices. You will be fine. Because we do not have this simple information, many of us unnecessarily suffer and waste our money also.

Kamala: I will tell my sister about this and I will also follow the same.

Priya: I met the Anganwadi didi yesterday. She told me that you both are not members of Kishori Samooh. When I leave for the city I will leave all these pictures at the Anganwadi Centre for everyone to see and learn. I also suggest that you too join the Kishori Samooh. You will learn several good things which we cannot ask our parents or elders. This will help in removing the misconceptions about adolescent reproductive and sexual health.

Kamala: Hey, I am ready for hide and seek. Are you ready?

End the role play with summarisation of the main points.



Flip Chart 3: Hygienic Practices during Menstruation

Hygienic practices during menstruation

- Carry on all the normal activities of the day.
- Keep the area around the genitals clean.
- Bathe every day without fail.
- After excretion clean yourself from front to the back. Do not clean in the reverse direction, as that may give infections.
- Wear clean under clothes.
- Wear cotton cloth/pad/sanitary napkins.
- Whenever the sanitary pad/cloth become wet and feels uncomfortable, change it. One may have to change two to three times a day at least.
- Do not dry the cloth/pad in dark places for it will get fungal infection.
- Wash the cloth in clean water and dry it in the sun. The sunlight kills the germs.
- The cloth needs to be stored in clean bag in a clean place.

Care during Menstruation

Diet



Several beliefs are prevalent about diet during menstruation. In several places milk and fruits are taboo at this time. Girls lose blood every month therefore it is very important for them to consume a balanced and iron-rich diet such as green leafy vegetables to replace this loss.

Mental Tension



A girl/woman may feel tense during menstruation. One of the reasons may be lack of complete information about periods. In several homes, girls are made to sit separately, are not allowed to enter the kitchen and temple due to which they develop a sense of inferiority. Girls need love and sympathy at this time. It is essential to change these beliefs.

Cleanliness

Since the mouth of the womb (cervix) is open during menstruation, any infection can easily reach the womb and egg. It is necessary to bath daily to prevent this. One should also wash the vaginal opening with soap and clean water. A clean cloth should be washed and dried in the sun. If the cloth used during menstruation is unclean there is a possibility of infection in the reproductive organs.


Adolescent girls living in slums in cities do not have place to wash and dry the cloth, so they use any dirty cloth. By doing this there is a possibility of infection in the uterus. Infection may cause itching and boils may be present in the vagina.

Use of Sanitary Pads/Cloth

- It's very important to maintain hygiene and cleanliness when girl has periods. When blood comes out, one should use sanitary pads.
- Make a sanitary pad by folding a clean old piece of cloth a few times or use available sanitary napkin.
- Change the pad every time it gets soaked.
- Wash the cloth properly with soap and dry them in the sun.
- Wash yourself with water every time you go to urinate or you change the pad.
- Store the washed and dry pads in a clean plastic bag till the next menstrual cycle.



Flip Chart 4: Some Common Problems during Menstruation

Common Problems Faced by Girls during Menstruation		
Problem	Symptoms	What can be done
Dysmenorrhea or painful periods caused due to contraction of the uterus to empty itself	Pain in lower abdomen. Muscular cramps and sometimes loose motions	<ul style="list-style-type: none"> • Keeping hot water bottle • Seeking help of ANM/Doctor
Heavy bleeding	Use of more than four/five sanitary pads in a day <ul style="list-style-type: none"> • The flow is over 7 days or the interval between two periods is less than three weeks • Blood clots get released • Symptoms of anemia 	<ul style="list-style-type: none"> • Relax • Eat iron-rich wholesome food to combat anemia and take IFA tablet • Keep the genital area clean • Consult a doctor if the girl cannot carry on routine tasks due to tiredness
Pre menstrual stress	<ul style="list-style-type: none"> • Irritability • Mood swings • Depression • Anxiety 	<ul style="list-style-type: none"> • Try to be active and involve self in some interesting work
Irregular periods or less amount of blood : <ul style="list-style-type: none"> • First menstruation is followed by some irregularity due to hormonal imbalance • The body weight is too low, mental tension • Anemia can cause less bleeding 	The interval between two periods is too long (more than 42 days) <ul style="list-style-type: none"> • Periods last only one or two days and the bleeding is very little • May be symptom of anemia 	<ul style="list-style-type: none"> • Consult a doctor if the irregular period persists or reappear after one year of menarche • If other associated problems are present consult a doctor • Eat iron-rich food and supplement it with IFA
Cessation of menstruation. <ul style="list-style-type: none"> • Menstruation continues till a woman is 45-50 years old and stops only at menopause 	If menstruation stops before menopause it may be due to: Pregnancy, acute emotional stress, malnutrition, diseases or psychiatric problems, or endocrinal disorders	Essential to consult a doctor for checkup and diagnosis 



Salient Points

Delayed Menstruation

The age of menarche varies in all girls. If a girl does not have her periods even after 18 years of age then a doctor should be consulted. Often the reason is malnutrition or hormonal imbalance. Then it becomes necessary to take medical advice and seek proper treatment.

Abdominal Pain during Menstruation

Normally, during menstruation, slight pain is experienced in the abdomen and back. This pain may be reduced by regular bowel movement, balanced diet, adequate rest and light exercise. Some herbal preparations are also beneficial in reducing pain.

Herbal Home Remedy

Prepare Chaturbeej “Churna” by roasting fenugreek seeds, black cumin, ajwain (seeds of Bishop’s weeds) and asadiya (Garden cress seeds) lightly and powdering all of them together. Consume one teaspoon powder of this mixture with warm water eight days before and also during menstruation. Continue treatment for three menstrual cycles.

Excessive Bleeding during Menstruation

A girl may have bleeding for more than 4 to 5 days or have two cycles in a month. In the absence of an adequate diet to replace the losses the girls may become anaemic. The reasons for excessive bleeding may be hormonal imbalance, uterine gland (a gland in the womb) tension or reproductive tract infection.

Some women may also have heavy bleeding due to insertion of Copper-T (for married adolescent girls). The cause should be found out and proper treatment taken.

Common Beliefs Related to Menstruation

The following are some of the common beliefs related to menstruation.

- Menstruation is dirty.
- A woman is unclean during menstruation and cannot go to the temple and kitchen.

Social Perspective

Instruction for Trainers:

Ask the participants about different beliefs. Try to discuss the irrelevant and harmful beliefs by sharing scientific information. At the end of the session ask the participants to practice (role play) given in the book and make them to do role play.

From Childhood, a girl is taught to sacrifice for others, not to think of herself, to feed everyone else in the family first. This is the definition of a ‘good woman’ therefore she is conditioned to neglect herself. Repeated pregnancies, abortion etc., add to her poor nutritional status and she continues to remain anaemic all her life.



Management of Menstruation

- Girl should remember her menstrual cycle.
- Every girl should maintain menstrual calendar to avoid unexpected inconvenience.
- Girl must remember menstrual date.
- Keep one pad in bag to manage menstrual flow and be alert and plan for next menstruation.
- Dispose pad in proper manner – wrap the used pad/cloth in an old newspaper and throw them in dust bin.
- Burning the used pad/cloth is the best method.
- Don't throw used pad/cloth in latrine, they can block them.

Sum up the discussion and invite further comments or suggestions.

Compiled and Adapted from:

- Facilitator's Manual on Adolescent Health and Development 2006.
- Adolescent Health Module for training by Himalayan Institute Hospital Trust.
- Kishori Shakti Yojana (KSY) Orissa, Training Manual for Anganwadi Workers.



SEX EDUCATION, RTI/STI
AND
HIV/AIDS

SEX EDUCATION, RTI/STI AND HIV/AIDS

SESSION	Sex Education, RTI/STI and HIV/AIDS
OBJECTIVE	To inform adolescent girls about reproductive system and various sexually transmitting diseases and how to deal with it
CONTENT	<ul style="list-style-type: none"> • Sex Education and its importance? • What is RTI and STI? • Why are adolescents vulnerable to infections? • Factors that increase the risk of RTI and STI • Symptoms and prevention of RTI and STI • Difference between HIV and AIDS • Ways in which HIV can/cannot be transmitted • Sign and Symptoms of AIDS • Facts and myths about RTIs/HIV/AIDS
DURATION	1 Hour 30 Minutes
RESOURCE PERSON	Field Trainer of Sakhi and Saheli/MNGOs/FNGOs
TRAINING METHOD	Presentations, flash cards, case study and discussion
LEARNING OUTCOME	Adolescent girls will be able to differentiate between RTIs and STIs and know the ways to prevent it. They would also learn how HIV/AIDS can be prevented





Salient Points

- Sex education is a broad term used to describe education about human sexual anatomy, sexual reproduction, sexual intercourse, reproductive health, emotional relations, reproductive rights and responsibilities, abstinence, contraception, and other aspects of human sexual behaviour.
- Sex education may also be described as “sexuality education”, which means that it encompasses education about all aspects of sexuality, including information about family planning, reproduction (fertilisation, conception and development of the embryo and foetus, through to childbirth), plus information about all aspects of one’s sexuality including Sexually Transmitted Infections (STIs) and how to avoid them, and birth control methods.
- The existence of AIDS and RTI has given a new sense of urgency to the topic of sex education. It is believed that sex education programmes have benefits, such as controlling the risk of overpopulation and the advancement of women’s reproductive rights . A good “sex education” serves as a guide for the youth and make them aware of sexually risky behaviours and prevent early pregnancy.

What is RTI/STI?

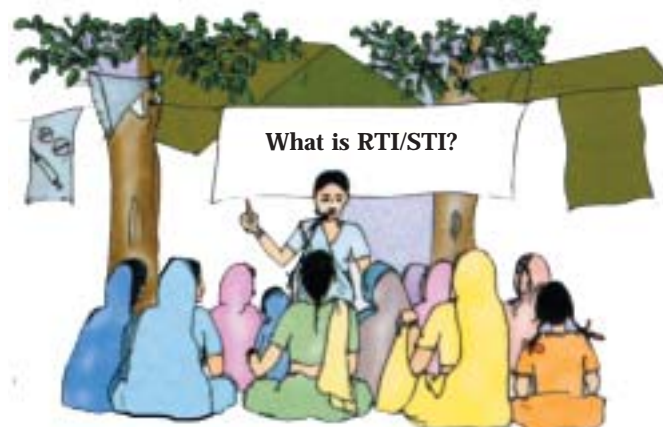
Ask the participants what they understand by RTI/STI. Display flip chart 1.

Flip chart 1

What is RTI/STI

Reproductive Tract Infections (RTIs) or infections of the genital tract are those which can have far reaching effects on reproductive health. It affects unmarried girls also due to unhygienic practices. Infection is transmitted through sexual intercourse with infected person which results in genital ulcer.

Sexually Transmitted Infections (STIs) are those which are transmitted through the sexual route. They are one of the most common infections among sexually active adolescents. STIs results in severe health problem because they give rise to considerable morbidity. STIs including HIV are most common among young people aged 15-24 and more so in young women of that age group.



Flip Chart 2: Why are Adolescents Vulnerable to HIV Infection?

Flip chart 2

Why are Adolescents Vulnerable to Infections

- Adolescents often have the feeling of being invincible (nothing can happen to them). They are willing to take risks.
- Adolescents possess limited knowledge or experience to reduce their risk for exposure to infections.
- Adolescents are less likely to recognise potentially risky situations or negotiate safer sex behaviours.
- Peer pressure, use of drug and alcohol, poverty, exploitation, taboos and other factors may increase adolescent's likelihood of engaging in high-risk behaviours.
- Adolescents hardly have access to information and prevention services or are not able to afford them due to social and economic circumstances.
- Sexually active adolescents do not seek information about protecting themselves and their partners for fear of appearing inexperienced.
- Gender disparities lead to poor access to information, resources and services which increases vulnerability of young girls.
- Young women are particularly vulnerable to biological factors (less mature vaginal tissues may be more readily permeated or damaged), for social reasons, including lack of economic resources, decision-making, power and independence.

Instructions for Trainers

Ask the participants if they have ever heard from their friends complaining about itching or discharge from genital regions? Discuss their answers and explain.

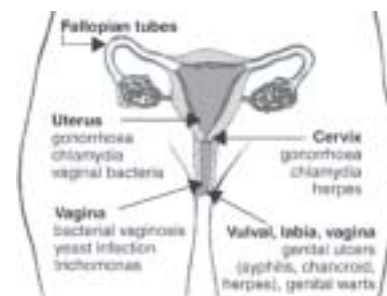
Vaginal Discharge

As secretions of mouth, nose, ears and eyes are common secretions, vaginal discharge is also common. It helps to protect vagina from infection. Thus the discharge is nature's way of keeping the genitals clean. It is quite a normal thing to happen and not symptomatic of disease. Some girls have more of it than others. If the month is divided into three parts, one can see three phases.

1. Pre-Ovulatory (Menstrual Days)
2. Ovulatory Phase
3. Post-Ovulatory Phase. The white discharge is more in Ovulatory phase. During Ovulatory phase discharge would be watery (thin), clear, slippery and stretchy.

Note: Adolescent Girls should be empowered to differentiate this pattern. Due to lack of awareness, they get confused and consider it as a heavy white discharge.

Sometimes girls may have vaginal discharge which smells or stains clothes. In such case she should contact doctor with whom she has confidence.



Personal Hygiene and Menstrual Hygiene

Personal Hygiene is more important to prevent RTIs

- Take bath daily
- Change clothes daily
- Dry the clothes in sun light
- Girls should keep the groin clean and dry otherwise fungal infection will develop leading to itching etc.
- Girls should use clean clothes, pads or sanitary napkins during periods. It should be changed frequently and the part should be kept clean and dry. Adolescent girl may have itching around genitalia and groin after menstruation for which one should not be worried.
- Close to the urethral opening are the vaginal opening and anus. So always wash body parts after passing urine. Washing after passing stool and urine must be from front to back and not reverse, as there is chance of urinary infection.



Flip chart 3: Case Studies

Geeta, a 13 years old girl has itching in the genital region and discharge. She is advised not to take bath during menstruation.

Suman, a 16 years old, girl is having foul smelling discharge from the genital region since 2 weeks. She also has pain in lower abdomen. She is friendly with a boy and loves him a lot.

Instructions for Trainers

Discuss each case with participants and ask the participants the possible reasons for the above problems and display flip chart 4

Flip chart 4

Factors that increase the risk of RTIs

- Poor general health
- Poor genital hygiene
- Poor menstrual hygiene
- Unhygienic practices by service providers during delivery, abortion, IUCD insertion in girls/women

Factors that increase the risk of STIs

- Unprotected sex
- Multiple sexual partners
- Sex with partner having sore on the genital region, urethral discharge or infected vaginal discharge



Now display Flip chart 5: Symptoms of RTIs and STIs

Flip chart 5

Symptoms of RTIs and STIs

In adolescents

- Genital ulcers (sores)
- Burning sensation while passing urine
- Swelling in the groin
- Itching in genital region

In adolescent girls

- Unusual vaginal discharge with or without bleeding
- Pain in lower abdomen
- Pain during sexual intercourse

In adolescent boys

- Discharge from penis



After discussing the possible symptoms display flip chart 6: Prevention of RTIs and STIs.

Flip chart 6

Prevention of RTIs and STIs

- Maintaining proper genital hygiene is important
- Girls should maintain good menstrual hygiene
- Practicing responsible sexual behaviour. Being faithful to one partner
- Practicing safe sex
- Avoiding sexual contact, if either of the partner has an STI
- Do not neglect any unusual discharge
- Ensuring complete treatment of self and sexual partner
- Opting for institutional delivery or home delivery by a trained birth attendant
- Availing safe abortion services



HIV /AIDS

Salient Points

- HIV is an infection, caused by a virus.
- HIV infection can be detected by the blood test. A person having HIV in the blood is considered as HIV positive.
- HIV causes Acquired Immuno Deficiency Syndrome (AIDS), a condition in which the immune system begins to fail, leading to life-threatening infections.

Difference between HIV and AIDS

AIDS (Acquired Immune Deficiency Syndrome) is the late stage of infection with Human Immunodeficiency Virus (HIV). AIDS can take more than 8-10 years to develop after infection with HIV. HIV-infected people can live symptom-free for years; however, most people in developing countries die early.

How do People get Infected with HIV?

HIV is transmitted mostly through semen and vaginal fluids during unprotected sex without the use of condoms. Globally, most cases of **sexual transmission** involve men and women, although in some developed countries homosexual intercourse remains the primary mode of transmission. Besides sexual intercourse, HIV can also be transmitted by the sharing of needles contaminated with infected blood; by the transfusion of infected blood or blood products; and from infected woman to her baby & during pregnancy, during birth, or after delivery through breast milk.

Apart from the above modes of transmission, HIV is not spread in any other way, HIV is not spread through ordinary social contact, e.g. by shaking hands, travelling in the same bus, eating from the same utensils, hugging or kissing. Mosquito and insects do not spread the virus nor is it spread through water or air.



Discuss the routes of transmission and display flip chart 7.

Flip chart 7

HIV is transmitted through

- Unprotected sexual contact with people of same sex or opposite sex (anal, vaginal or oral sex) when one of them is infected
- Transfusion of infected/unsafe blood or blood products
- From an infected mother to child –during pregnancy, delivery or breastfeeding
- Sharing of infected syringes and needles and skin-piercing instruments



HIV is not transmitted through

- Shaking hands with an HIV-infected person
- Touching objects in phone booths or public transport
- Shared use of towels, linen, crockery, utensils and clothes
- Use of common toilets, bathing in a pond/lake/canal or river
- Eating and drinking from the same plate or cup
- Donating blood with new/sterile needles
- Mosquito bites
- Caring for and touching a person infected with HIV
- Hugging and kissing
- Playing or travelling with an HIV infected person
- It does not spread through air, water or food



Now display flip chart 8: Signs and Symptoms of AIDS.

Flip chart 8

Signs and Symptoms of AIDS

- Weight loss greater than 10% of body weight
- Diarrhoea lasting for more than one month
- Intermittent or constant fever for more than one month
- Enlarged glands (lymph nodes) in the neck, armpits, or groin
- Persistent severe fatigue
- Cough for more than a month
- However, when several of these occur at the same time and they are persistent, this may indicate the development of AIDS



Note:

These symptoms are also common in people who do not have HIV infection. HIV positive people may not show any symptoms for many years because there are so many other symptoms



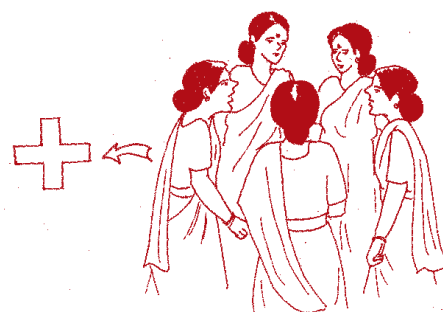
End the session with myths and facts about RTIs/HIV/AIDS.

Myth	Fact
The top partner during vaginal and anal sex is at low risk for HIV.	HIV can enter his body through microscopic cuts/abrasions on the head of his penis that normally occur during intercourse. Having another sexually transmitted disease (like syphilis and herpes) that causes open lesions can further increase this risk. During unprotected intercourse, neither partner is at low risk.
Oral sex has low risk for HIV.	This is only half truth. Receiving oral sex (which would expose you only to saliva) has very low risk for HIV. But giving oral sex is risky for HIV. The more of these body fluids that a person gets into their mouth, the greater is the risk. The risk is less than intercourse, but one can also get other sexually transmitted diseases (like gonorrhoea) by giving someone oral sex.
If you have an STI, you'll see it and know it.	No, many STIs are silent. They don't show any symptoms at all.
Skin to skin contact isn't enough. You can only get an STI from semen.	No, not true. While semen and blood can spread some STIs, but infections like herpes and syphilis can be spread with skin to skin contact. For example, when herpes flares up, an active sore appears. When this sore comes into contact with your skin or other moist areas like the mouth, throat, and areas with cuts or rashes, it can spread. It can also be spread before the blisters actually form.
The pill prevents STIs.	Birth control pills prevent babies, not sexually-transmitted infections.

Sum up the discussion and invite further comments or suggestions.

Compiled and adapted from:

- Facilitator's Manual on Adolescent Health and Development 2006.
- Adolescent Health Module for Training by Himalayan Institute Hospital Trust.
- Kishori Shakti Yojana (KSY) Orissa, Training Manual for Anganwadi Workers.
- Orientation Programme for ANMs/LHVs to provide Adolescent-friendly Reproductive and Sexual Health Services, National Rural Health Mission.



FAMILY PLANNING

FAMILY PLANNING

SESSION	Family Planning
OBJECTIVE	To discuss and make adolescents aware of advantages of a small family for a happy married life and advise them on abstaining from premarital sex
CONTENT	<ul style="list-style-type: none"> • What is family planning? • Implications of early marriage • Different types of contraceptive measures • Emergency contraception • Effectiveness of contraceptive methods
DURATION	1 Hour
RESOURCE PERSON	Master Trainers/MNGOs/FNGOs/Trainers of Sakhi Saheli
TRAINING METHOD	Brain Storming, role play, presentations and discussion
LEARNING OUTCOME	Adolescent girls will be able to understand how to cope up in a family after marriage and appreciate the relevance of family planning measures. They would also be aware of disadvantages of premarital sex





Salient Points

What is family?

Family is the fundamental unit of all societies. It is the major source of love and tenderness; necessities of adequate food, clean water, a place for rest, clothing, and sanitation.

Early marriage – The legal age for marriage is 18 for girls in India. But it is better if marriage is postponed atleast until 21 years. There are various reasons for early marriage of girls which include:

Family Compulsions for Early Marriage

- Fear of girls getting into premarital sex
- A girl child is generally considered as a burden to the family
- Poverty, dowry problem
- Peer pressure leading to unsafe experimentations with sex
- Adolescents subjected to sexual violence



Implications of early conception after marriage

- Delimits educational pursuits and employment prospects
- Limits ability to take decisions
- Adolescent girls/woman can die during delivery
- Changes in body configuration and possible unattractiveness



Activity: Role play/ Discussion

Instructions for Trainers:

In order to explain the disadvantage of early marriage, the trainers may introduce the case study to adolescent girls and discuss through a role play.

15-year old Meenu is 1st child in that family. She has 3 sisters and a brother. She couldn't go to school since she had to take care of her sisters. She attained menarche at 14 years. Her parents were worried that they couldn't find a suitable groom. When a 40-year old widower approached them, they immediately accepted to give away their daughter to him, wanting to reduce the burden. Meenu finds herself among grown up children of her husband's previous marriage. Ten months after marriage, Meenu conceives and gives birth to an underweight child. Husband is least concerned. After a while the child dies due to malnutrition. Meenu too feels weak, but has to submit to the sexual demands of her husband. By age 20 years she becomes mother of two children and looks 30-years old. She feels dejected of her life.



Activity 2:

Family Planning Methods

Ask the adolescent girls what they understand by family planning. Display flip chart 1 after discussion.

Flip chart 1

Family planning means working out a plan, preferably with your partner, on how you want to deal with your sexual life. This covers things as varied as when and why to get pregnant, the number of children that are wanted, how to deal with fertility issues, how to avoid getting pregnant, whether to consider an abortion or adoption if an unwanted pregnancy occurs, etc.



Flip chart 2

Different Types of Contraceptive Measures



Male Condom - A condom is a latex sheath, which is rolled onto the erect penis before sexual intercourse. It averts pregnancy by preventing semen that contains sperms from entering into the vagina. The condom not only prevents pregnancy but also protects the sexual partners from STIs/HIV and thus has dual advantage.

Advantages

- It is effective and easy to use
- Readily available and inexpensive
- It has no side effects
- The male partner gets an opportunity to share responsibilities in safe sex and family planning.

Limitations

- Tearing of condoms can occur especially among new users
- Storage and disposal could be a hindering factors in some communities
- Requires negotiation skills
- Not female controlled

Combined Oral Contraceptive Pills for Women- It prevents ovulation, hence a woman who takes oral pills regularly does not conceive. Proper follow-up, periodical check-up is necessary for adolescents using oral contraceptives.

Advantages

- Highly effective when taken daily
- Convenient and easy to use and can be discontinued when desired
- Easily reversible when stopped. Fertility regained in a few months
- Protects against cancers of the ovary and uterus
- Prevents excessive loss of blood during menstruation



- Regularises the menstrual cycle

Limitations

- Cannot be used by lactating mothers for the first six months as it decreases the amount of the milk produced
- In some conditions it also has side-effects. Like some girls might experience headache, nausea, spotting, breast tenderness

Note: Proper medical checkup is mandatory before prescribing oral contraceptives to adolescent girls.

Intra-Uterine Contraceptive Device (IUCD/IUD/Copper-T) - It is small flexible object (made of plastic and copper) about one and a half inches in length. It is inserted into the woman's uterus by a doctor or a trained health worker. It prevents pregnancy by preventing the implantation of the fertilised ovum.



Advantages

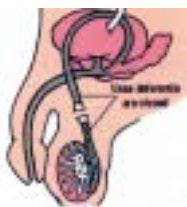
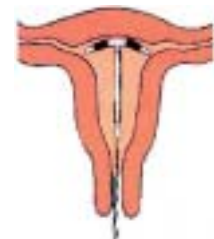
- It can prevent pregnancy for 3 years (or more depending on the type of IUD being used)
- No need to rely on memory as in case of oral pills
- Provides long-term protection
- Can be removed at any time by trained service provider
- Immediate return to fertility upon removal
- Does not affect breastfeeding
- No supplies needed by user

Limitations

- Cannot be used by woman who has not given birth to any child
- Does not prevent from STIs/HIV infection
- A trained person is required to insert or remove it
- Women with pelvic inflammatory diseases/sexually transmitted infections cannot use it
- It has common side effects e.g. some women might experience longer and heavier menstrual periods or cramps during periods for a few months following insertion

Permanent Methods

Female Sterilisation (Tubectomy) – The fallopian tubes are cut and the ends are tied. In the case of laproscopic sterilisation the tubes are blocked with the help of rings. This prevents the sperms from meeting the egg.



Male Sterilisation (Vasectomy) - The Vas Deferens is cut and tied or blocked so that sperms cannot be released into the semen.

Now ask the participants if they have ever heard about emergency contraception and what does it mean. Display flip chart 3.



Flip chart 3: Emergency Contraception

What is Emergency Contraception?

In case of unprotected sex, emergency contraceptives can prevent pregnancy.

Emergency Contraceptive Pills (ECPs) are to be taken within 72 hours of unprotected sex. However, adolescents should not use ECPs as a Contraceptive Method on a regular basis. They should be explained about responsible sexual behaviour. Sexually active adolescents, if any, might at best use other contraceptive methods, especially those that can provide them dual protection.



How does it work?

It may prevent fertilisation or implantation depending on the time at which is taken.

Ask the adolescent girls, what could be the best method to be used by them at this stage.

Display flip chart 4 - **Effectiveness of the Contraceptive Methods**

Flip chart 4

Contraceptive Method	To be used by	Appropriateness for married adolescents	Appropriateness for unmarried adolescents	Protection from STI/HIV Infection
Male Condoms	Man	Appropriate but male-dependent	Must, but male-dependent	Yes when used correctly and consistently
Female Condoms	Woman	Appropriate but not easily available	Appropriate but not easily available	Yes when used correctly and consistently
Spermicides	Woman	Appropriate but not easily available	Appropriate but not easily available	Some what protective
Combined Oral Pills/Mini Pills	Woman	Appropriate	Appropriate	No
IUCD/IUD/Copper-T	Woman	Not very appropriate especially for women who have not given birth to a child	Not Appropriate	No
Vasectomy	Man	Not Appropriate	Not Appropriate	No
Tubectomy	Woman	Not appropriate	Not appropriate	No





Activity: Recapitulation

Ask the adolescent girls, if the following situation arises then what can be done.

- Tearing or slippage of the condom during intercourse.
- A girl has had sex against her will or has been forced to have sex.
- Sexual activity has occurred without contraception and the girl wants to avoid pregnancy.

Summarise the session by asking the importance of family planning methods. Invite further comments or suggestions, if any.

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- Adolescent Health Module for training by Himalayan Institute Hospital Trust.
- Kishori Shakti Yojana (KSY) Orissa, Training Manual for Anganwadi Workers.
- Orientation Programme for ANM's/LHV's to provide Adolescent-friendly Reproductive and Sexual Health Services, National Rural Health Mission.
- http://en.wikipedia.org/wiki/Family_planning
- <http://blog.crjayaprakash.com/?p=609>



PLANNED PARENTHOOD

PLANNED PARENTHOOD

SESSION	Planned Parenthood
OBJECTIVE	To enable adolescent girls to understand the right age for marriage, conception and family planning measures to delay early pregnancy
CONTENT	<ul style="list-style-type: none"> • Age at marriage • Conception • Signs and symptoms of pregnancy • Needs of a pregnant woman • Do's and don'ts during pregnancy • Adverse health implications of teenage pregnancy • Socio-economic consequences of teenage pregnancy • Some myths and facts related to pregnancy
DURATION	1 Hour 30 minutes
RESOURCE PERSON	Master Trainers/FNGOs/MNGOs
TRAINING METHOD	Presentations, case study and discussion
LEARNING OUTCOME	Adolescent girls will be empowered to plan and take care of themselves during pregnancy





Salient Points

The legal age for marriage in India is 18 years for women and 21 years for men. Marriage of a person younger than this is banned in India and any person found guilty of going against this Act is liable to be punished.

Ask if anyone is aware of how the conception takes place.

Now display flip chart 1 and explain how conception takes place?

Flip chart 1: Conception

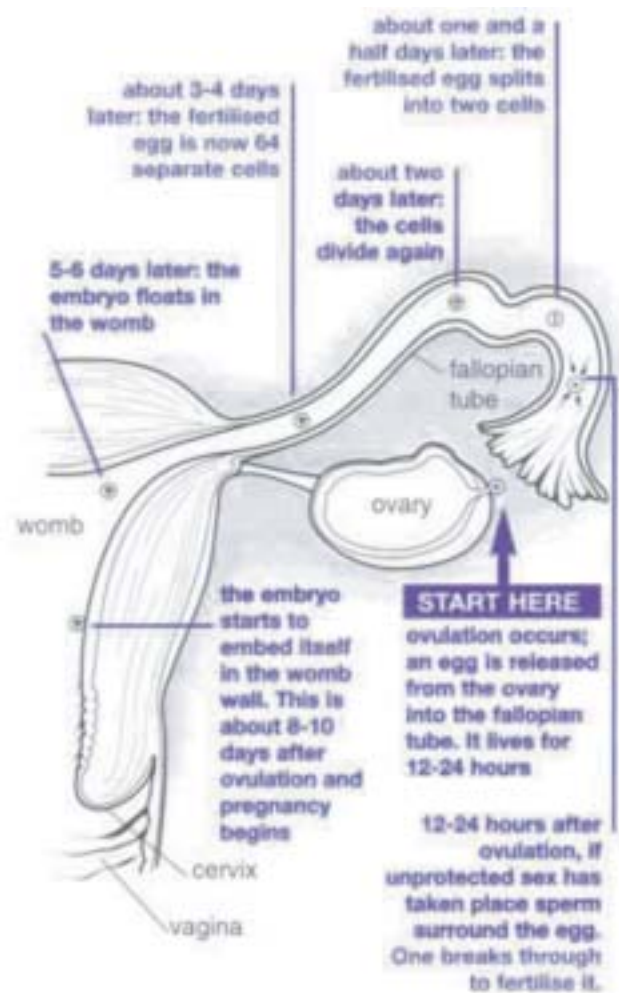
Sexual Intercourse: It is the insertion of an erect penis of a male into the vagina of a female. When a male and a female have intercourse, millions of sperms are ejaculated from the penis into the vagina. The sperms swim up through the cervix and uterus up to the fallopian tube seeking a mature female egg. If an egg is present, fertilisation takes place. Although millions of sperms may be present, only one sperm is enough to fertilise the egg.

Fertilisation/Impregnation: The ripe egg cell of a woman is fertilised by a sperm cell of man. The type of sperm cell –whether it contains ‘X’ or ‘Y’ chromosome – determines the sex of the child at the time of fertilization.

At the moment of fertilisation, a baby’s genetic make-up is complete, including its sex. Since the mother can provide only X chromosomes (she’s XX), if a Y sperm fertilizes the egg, the baby will be a boy (XY); if an X sperm fertilises the egg, the baby will be a girl (XX).

Implantation: The fertilized egg moves through the fallopian tube and implants itself in the uterus, i.e. into the uterine lining which is velvety and is prepared afresh every month. The outer layer of the fertilised egg becomes a sac like structure in which fluid accumulates. The fetus swims in the fluid. The placenta is formed at the site of implantation. The fetus receives the nutrition through the placenta and umbilical cord from the mother’s body. The fetus starts growing in the uterus for months after which it emerges into the world as a newborn baby.

Now ask the adolescent girls, what are the signs and symptoms of pregnancy, also ask if any one know about dangerous signs in pregnancy. After discussion display flip chart 2



Flip chart 2: Signs of Pregnancy

Signs and symptoms during the early stage of pregnancy

- Menstruation stops
- Nausea or vomiting commonly experienced in the morning or in the evening
- Frequent urination
- Enlargement of breasts



Danger signs in Pregnancy

- Bleeding during pregnancy, excessive bleeding during delivery and after delivery
- Severe anaemia with or without breathlessness
- High fever during pregnancy or within one month of delivery
- Convulsions or fits, blurring of vision, headaches, vomiting, sudden swelling of feet
- Labour pain for more than 12 hours
- Bursting of water bag without labour pains



Note: If a pregnant women/girl experiences any of the above symptoms, she should be immediately taken to health care facility.

Now discuss the special needs of the mother due to the changes occurring in the body after pregnancy. After discussion display flip chart 3 – Needs of a Pregnant Woman.

Flip chart 3: Needs of a Pregnant Woman

A pregnant woman needs:

- Nutritious food
- Enough rest, sleep and relaxation
- Good personal hygiene
- Comfortable clothing and footwear
- Emotional support
- Regular visits (at least 3) to an antenatal clinic for check-ups, iron folic acid tablets (at least 100 tablets) and two doses of tetanus toxoid injection
- Safe delivery preferably at a PHC or nursing home
- Training in motherhood and in the care of the new born

Display flip chart 4 - List of Do's and don't for a Pregnant Woman.



Flip chart 4

Do's and Don't for a Pregnant Woman

Do's

- Getting registered with the AWW/ANM/at a PHC/nursing home
- Regular antenatal check-up as soon as she knows about her pregnancy
- Taking two TT injections (4-6) weeks apart and 100 IFA tablets
- Sleeping for 8 hours
- Resting or sleep for 2 hours during the day
- Maintaining personal and genital hygiene
- Regular light exercise, for example by walking for half an hour every day
- Wearing loose, comfortable clothing and low-heeled shoes that support the feet
- Drinking plenty of fluids and eating enough food, especially the right kinds of food (energy-giving, body-building and protective)
- Trianga diet i. e., more green leafy vegetables and fruits and milk should be incorporated in diet
- Visiting the health facility immediately, if danger signs develop
- Going for institutional delivery



Don'ts

- Lifting or carrying heavy loads
- Drinking alcohol – it can cause serious problems for the baby
- Smoking- smoking cigarettes or bidi and chewing tobacco can harm the baby and the mother
- Taking medicine or herbs without a doctors prescription
- Exposure to chemicals such as hair dyes, pesticides to kill insects, or herbicides to destroy weeds
- Ignoring danger signs
- Delivery by untrained persons
- Don't walk without sleeper/shoes



A mother should exclusively breastfeed the child for first six months and should practice positive child care practices (details in module II).

Janani Suraksha Yojana (JSY)

Janani Suraksha Yojana (JSY) is a safe motherhood intervention under the National Rural Health Mission (NRHM) being implemented with the objective of reducing maternal and neo-natal mortality by promoting institutional delivery among the poor pregnant women. JSY is a centrally sponsored scheme and it integrates cash assistance with delivery and post-delivery care.

Each beneficiary registered under this Yojana should have a JSY card along with a MCP card. The Yojana has identified, the Accredited Social Health Activist ASHA as an effective link between the Government and the poor pregnant women in 10 low performing states, namely the 8 EAG states, Assam, J&K and the remaining NE States.

Now display flip chart 5 - Possible health consequences -Teenage pregnancy.

Flip chart 5

Possible Health Consequences -Teenage Pregnancy

Mother Health	New Born Baby's Health
<p><i>During Pregnancy</i></p> <ul style="list-style-type: none"> • Inhibited physical growth • Existing malnutrition and anaemia would aggravate • Possibility of abortion • Arrested uterus development • Bleeding during first 7 months of pregnancy • Pre-term labour • Obstructed labour and its consequences • Complicated delivery 	<ul style="list-style-type: none"> • Pre maturity • Low birth weight • High neonatal mortality • Low birth weight and birth defects • Poor cognitive development leading to morbidity and mortality
<p><i>Post Delivery</i></p> <ul style="list-style-type: none"> • Hypertension • Post partum bleeding • Genital and/or urinary track infections resulting in increased morbidity and mortality 	<ul style="list-style-type: none"> • Inability of mother to provide appropriate care to the new born, leading to higher morbidity and mortality



Now ask the adolescent girls about the impact of adolescent pregnancy on herself, her family and community life.

Display flip chart 6 - Socio-economic Consequences of Teenage Pregnancy.

Flip chart 6

Socio-economic Consequences of Teenage Pregnancy

Adolescent girl	Family and Community life
<ul style="list-style-type: none"> • Denial of childhood and adolescence • Curtailment of personal freedom and mobility • Dropping out of school • Reduced opportunities and scope for livelihood skills and professional development • Denial of psychological and emotional well being • Lack of opportunities to develop a full sense of selfhood • Low self esteem 	<ul style="list-style-type: none"> • Poor motherhood responsibility • Improper child care and services • Increased health expenditure • Reduced income earning potential due to illness • Inability to provide food health and education opportunities • Poor quality of life and stunted community growth • Mental depression and poor quality of life

Now discuss the facts and myths about pregnancy.

Pregnancy –Myths and Facts

Myth: It is bad to talk about pregnancy because it may attract witches or evil people who will harm the baby.

Fact: Pregnancy does not attract witches or evil people. A woman should tell about her pregnancy as soon as she suspects it and seek early antenatal care, in order to fulfill her special needs during pregnancy.

Myth: A pregnant woman should continue performing heavy physical labour.

Fact: Too much heavy work like working in the fields, or picking heavy loads, can cause problems such as miscarriage, premature delivery or underweight babies. Therefore, pregnant women should avoid heavy physical labour.

Myth: A pregnant woman should not do any work at all.

Fact: A pregnant woman should do normal household work, unless advised by the doctor, as it is a form of daily exercise that keeps her healthy and her muscles toned.

Myth: A pregnant woman need not go for antenatal check-up if she does not have any complaint.



Fact: Even if she has no complaint, it is very important and beneficial for her to go for antenatal checkup so as to receive quality care and remain healthy.

Myth: A pregnant woman should remain indoors and should not step out of the house.

Fact: Pregnancy is not an illness. Like other people, she can also go out from time to time. In fact, remaining indoors may deprive her from getting fresh air, exercise, recreation, essential, antenatal check-ups etc. However, she should avoid jerks and heavy strain, if traveling by a vehicle. Walking for some distance is a good exercise for her.

Myth: A man and his family members can do nothing to help a pregnant woman.

Fact: They can give her a lot of emotional support and ensure essential care to her by providing her with nutritious food, sharing her workload, taking her to regular health check-ups, etc.

Myth: Healthy mother's milk comes after 3 days.

Fact: You may say that it actually starts flowing freely by the third day but the yellowish milk (colostrum) starts coming out as early as baby starts sucking and it is sufficient for the baby's demands for the first 3 days. Also, colostrum has many benefits for the baby including providing protection from infections.

Adapted and compiled from:

- Facilitator's Manual on Adolescent Health and Development 2006.
- Adolescent Health Module for Training by Himalayan Institute Hospital Trust.
- Kishori Shakti Yojana (KSY) Orissa, Training Manual for Anganwadi Workers.
- Orientation Programme for ANMs/LHVs to provide Adolescent-friendly Reproductive and Sexual Health Services, National Rural Health Mission.
- <http://abortion-clinics.co.uk/wp-content/uploads/2008/10/conception1.jpg>



LIFE SKILLS



KNOWING MYSELF

KNOWING MYSELF

SESSION	Knowing Myself
OBJECTIVE	To make adolescent girls know both their strengths and weaknesses so as to know their true selves, develop self-esteem and self-confidence
CONTENT	<ul style="list-style-type: none"> • My Abilities, My Skills • My Beliefs and Values • My Life
DURATION	2 Hours 30 minutes
TRAINING METHOD	Activities and Discussion
LEARNING OUTCOME	The adolescent girls will be able to understand their abilities, skills, qualities and what it means to be a girl. They could explore their beliefs and values to shape their behaviour. Also they would understand the importance of planning their life for a better future.



Session 1: My Abilities, My Skills

Objectives

- The adolescent girl will be able to identify their strengths – what they are good at and the positive qualities they possess.
- The adolescent girl will get feedback from their friends in the group about their positive qualities.
- The adolescent girl will be able to say why they are happy to be a girl.
- The adolescent girl will learn to protect themselves from any negative remark about themselves.
- The adolescent girl will be able to decide what quality or skill they would like to strengthen.



Salient Points

- Many children with difficult life experiences have low confidence. Their self assessment of whom and what we are may have many negative aspects. Many times this view of ourselves is shaped by what we are told about ourselves when we are young. The tricky thing about it is that once we have an idea of ourselves fixed in our head we tend to keep strengthening it unknowingly.
- An example of this is the adolescent girl judging herself as being ugly, totally un-attractive, is useless, has no confidence at all and is not that smart. But in reality the teenage girl herself is not really looked upon by others to be of low self worth exhibiting these qualities, it is just what is in the adolescent mind and how they think of themselves.
- It is important for young girls to become aware of their strengths and identify their positive qualities. They can explore their self in relation to physical characteristics, quality they have, hobby or skill they are good in.....
- It is also important that young girls receive positive feedback from others. This positive feedback (affirmation) can bring real change in life as they help in removing old negative thoughts with more helpful positive one.
- In this session girls are given opportunity to reflect on themselves and in that process understand that she is unique and has her own strengths and abilities just like others in the group who may have different strengths and skills. Therefore there is no need to compare oneself with others. Every person can make unique contribution towards work, family and society.
- The session can empower adolescent girls to protect themselves from adverse criticism and to move forward by removing some negative ideas about self. It enables them to move towards developing better self esteem and confidence.



- The atmosphere should be warm and with absolutely no critical comments. After the activity the facilitator can ask the following questions in the group,
 - Was it easy to find something they liked about themselves? Why or why not?
 - Was it easy to find something good about others? Which was easier? Why?
 - How did they feel about all the good things that others had written about them?
 - Why do some people say unkind things to them? How does it feel?
- Through the discussion you can bring out the importance of acknowledging the strengths in oneself and others.

Time Required: Each activity lasts for 40-50 minutes.

Materials

Activity 1: Paper plates, markers, sticking tape.

Activity 2: Paper shields (should be of stiff paper), markers.

Activity 3: Paper body outline of a girl and a boy, cards of three colors, sticking tape or glue.

Activity 1: I Love Myself

Instructions for Instructors

1. Ask the adolescent girls to say, "I love myself." While saying this, girls must use simple gestures, such as smiling, hugging themselves, standing up tall and proud, or any other way that expresses what they wish to say.
2. Give each girl a paper plate and ask her to write on it, "I love myself because ...". (If a girl cannot write, the facilitator or another girl can help or a girl can draw). Encourage each girl to draw any symbol she likes for herself. If the girls are unfamiliar with symbols, introduce some common symbols as a preparatory activity. These may include road signs (one way, no parking), airplane (to show an airport), a handshake (to show friendship), an eye with a teardrop (to show sadness) or the three monkeys that Gandhiji was fond of (one monkey with his eyes closed to symbolically say "see no evil," the other with his hands over his mouth, symbolising "speak no evil," and the third with his hands over the ears, symbolising "hear no evil"). Other symbols may also be used by the facilitator if required.



Ask each girl to write two things she likes about herself or is good at. It could be anything, starting with a physical characteristic, or a quality she has, or behaviour or a skill. Some girls may need help to think of some qualities or skills they are good at. In that case, their friends can help them.

3. Ask the girls to share what they have written with the girl on their right.
4. Next, ask the girls to tape the paper plate on their backs and move about the room. Ask



each girl to write something positive on the plate. Remind each girl to be specific. For example, instead of “nice” or “helpful,” ask them to write, “helps with homework,” “talks to me when I am lonely,” “says good jokes” or “always keeps my secrets.”

5. In a circle, ask each girl to read out “I love myself and others love me. I am...” The girl should read out everything that she and the others have written. This may sound like: “I love myself and others love me. I have a happy smile, good handwriting, look after my little sister, am good sportsperson, do not fight with my friends and have good muscles.”

Questions for Discussion

For Younger Girls

- What did you like about this activity?
- What did you learn about yourself?
- What did you learn about your friends?

For Older Girls

Ask the girls to discuss the activity along the following lines:

- Was it easy to find something they liked about themselves? Why, or why not?
- Was it easy to find something good about others? Which was easier? Why?
- How did they feel about all the good things that others had written about them?
- Why do some people say unkind things to them?



Session 2: My Beliefs and My Values

Objectives

- The adolescent girls will be able to identify and share some of their values.
- The adolescent girls will understand that many intangible things have more value than material and tangible things.
- The adolescent girls will be able to examine the relationship between values and behaviour.
- The adolescent girls will be able to learn how much time and resources are spent doing certain activities and their relationship to the value held by them.

Salient Points

- Behaviour depends on what we value and what we believe.
- Our families, community, society and others that we look up to and accept as role models shape these values and beliefs.
- Values are person's principles or standards of behaviour, one's judgment of what is important in life and the worth, desirability or utility of something.
- Values are known to be a key in determining our success or failure and yet most of us are unaware consciously of them, let alone positively using them for self motivation and to boost self esteem.
- Values can conflict. Many things we think we value do not give us the happiness we want. Many of our values make us behave in ways that harm us as well as others whom we love and care about. That is why it is important to understand what we value and change them if necessary.
- Value for material things may not bring true happiness.
- If we value caring for friends and family, honesty, education, truthfulness and hard work, we often have to give up our immediate needs and wants so that we may enjoy more long-term happiness.
- The activity 'My life auction' would help children reflect that what was their favourite item and why. Through gentle questioning the facilitator must help them to understand that selection of the object will reflect on what they value and consider important.
- Discuss with them
 - what did they value more and what did they value less:
 - Did they choose what they did because they thought it would buy happiness? And why?
 - Do people can value different things and how these values change over time?



Time Required: Each activity lasts 30-45 minutes.

Materials: Many auction cards of same object. Play money, statement cards, card paper and sticking tape.

Activity 1: My Life Auction

Instructions for Instructors

1. Count the number of girls. Make twice as many cards. Ask the girls what people generally value in life. Encourage them to mention material or tangible things as well as abstract things such as a good car, house, having a good friend, honesty, a healthy life, to be famous, to be loved and so on. Write these on the cards, and stick them on the wall. Select a few from each set. Tell the girls that there will now be an auction of these selected items, and each of them can buy whatever they want. Make sure you select both tangible and intangible items.
2. Distribute play money of Rs. 1,000 to each girl in denominations of Rs. 100 and Rs. 50. The play money should preferably look like real money. Tell the girls that this money will help them to “buy happiness.”
3. Inform girls of the rules of the auction. Once the goods are sold, they cannot be returned. The girls are free to buy or save their money. At each auction, two items will go up for sale. A girl can buy only one and does not have to buy both items. Of course, she may decide not to buy anything.
4. Select 10 pairs of items, putting a different value on each. As a rough guide, the sum of the value of all the items should be worth double (or Rs. 2,000) of what each girl has. This forces the girl to choose. Put higher prices on the necessary or valued items, which can be abstract. If possible, draw a picture of the item so that all the girls immediately understand what is going up for auction. Make sure you have several copies of the items going up for sale, so that you can give them to the girls who decide to buy the items.
5. One example of an auction is presented below. Be sure to use the items that girls have listed earlier and adapt to the local conditions. Draw what is written so girls understand better. Some strategies of conducting the auction are in italics. Make sure you use them in the appropriate place no matter what items you choose to auction.



Here are the first two items up for sale. Put the cards up:

Option A	Option B
A nice house (Rs. 100)	A vacation for you and your friend anywhere you like for one month (Rs. 100)
A handsome boyfriend/husband (Rs. 200)	A steady job (Rs. 200)
To be the most popular person in your circle of friends for one year (Rs. 200)	One true friend (Rs. 200)
A chance to go to college and study more (Rs. 200)	To buy a scooter and a dozen new clothes of your choice (Rs. 200)
A healthy family (Rs. 300)	World fame (Rs. 300)
To change any one thing about their physical appearance (Rs. 100)	Looking after a very sick friend (Rs. 200)
Five years of any physical pleasure they want (Rs. 200)	Respect and love of those you care about (Rs. 200)
A chance to appear on your favorite TV show (Rs. 100)	A chance to learn a skill you really want (Rs.200)
The love of a family (Rs. 200)	Five years or more to live (Rs. 200)
Help a friend or a family member in their work (Rs. 100)	Go to a movie (Rs. 100)

Say you cannot buy anything more. Any money you have now is worthless. You have bought all the 'happiness' you can.

6. Make groups of three girls and ask them to discuss:

- What was your favorite purchase item? Why?
- Do you regret buying anything? Why?
- Would you have done something different, if given another chance? Why?



Questions for Discussion

In a circle, discuss:

- What were the most popular purchase items? Why? Was anything not bought?
- Did you take time to choose what you want? Why or why not?
- Did we choose what we did because we thought it would buy 'happiness'?



- What did you value more? What did you value less?
- Can our values change?
- Can you really buy values?

Adaptation

Discuss with the adolescent girls the fact that everyone has their own special likings and things they value above everything else. This could be a special book or a toy or some other object. Other things that are not so tangible are often very real and equally important. These are intangible things like friendship, telling the truth, working hard or going for a vacation. Tell the girls that they are going to a far-away new place to meet other girls and that they can bring only five things they value, or regard as very special, with them. The girls should draw if they cannot write the names of these five things. The facilitator can help the girls in writing or drawing. Each girl then talks about what she thinks is important. The facilitator must help the girls, through gentle questioning, to understand that the selection of the objects will reflect on what they value and consider important. Discuss how different people can value different things and how these values can change over time.

Tips for Instructors

- This activity is for all age groups. With older girls, more details and discussion can take place.
- Read a story or prepare a large book with the story of a freedom fighter or a social reformer.

Ask the girls what these people value.

- Also choose a newspaper article or story on a criminal figure and ask the girls what that person's values are?
- Link the values to their behaviour.



Session 3: My Life Experiences

Objectives

- The adolescent girls will become aware of different life events and influence of these events on behaviour.
- The adolescent girls will be able to discuss what they wish to see happen in their lives when they grow up.

Salient Points

- Recalling past life experience helps us to get in touch with defining moments in our life both the positive experiences (high points) and the negative experiences (low points).
- All of us have been through good times and bad times. Girls understand that good and bad events influence our behavior today.
- This can lead to a discussion on how our friend's life events are different from ours and what is common. Girls understand that many others age mates also had similar experiences and discussion of the same release pent up feelings and emotions.
- When we recall the past after it is over in a relatively safe environment in the present time we can learn new ways of coping by reprocessing the negative experiences.
- Girls also reconstruct their future by defining what happy moments they want to see in 10 years from now.



Time Required: 1 Hour

Materials: Flip chart, paper and markers

Activity 1: The River of Life

Instructions for Instructors

1. Ask the adolescent girls to form pairs. Ask them to discuss the memories of the happy times and the difficult times in their lives.
2. Ask the adolescent girls to draw a "River of Life" for their partner. The River of Life begins when the girl is born. When there is a happy event the river flows upwards, when something sad happens it flows downwards. When an event is neither happy nor sad, the river flows in a straight horizontal line. Encourage the girls to remember as far back as they can and write or draw the events. The events could be marriages, deaths, entering school, meeting your best friend, learning how to cycle, going on a trip for the first time, or anything else that the girl feels is important.



3. The adolescent girl then asks her partner what happy event she would like to see in the river of her life five years from now and 10 years from now. This is drawn using a different marker.
4. The adolescent girl shares the partner's River of Life with the rest of the group. If the adolescent girl has had many traumatic events in life and does not wish to share with her partner or rest of the group, her wishes must be respected.



Note

The River of Life can be used for all ages. Instead of asking young girls to think of five years and 10 years from now to visualise the future, ask them to think of what they would like to see happening to them in the future when they grow up.

Another activity for young girls can also be used. Give each girl a chart paper and instruct them to fold it in half. In the top half the girl should write, "This is ——(name of the girl) now." Give girls magazines to cut pictures or symbols to illustrate anything that describes them now. It could be their physical characteristics, or a special talent they have, or what they like. At the bottom half the girls should write "This is ——(name of the girl) when I grow up." Ask girls to cut pictures from magazines and paste it with all the things they would like to be themselves and what they think would be important in future. Pair girls and ask them to share their pictures with one another.

Questions for Discussion

In a circle, discuss:

- What did they feel when they analysed their life with another girl? Was it helpful? Why or why not?
- Did their friends had lifelines different from theirs?
- Do they think the events they have mentioned are likely to happen in the future?
- What would you need to do now if they want them to happen in the future?

Linking Learning with Life

For Older Girls

Help a friend or family member prepare their own lifeline and gift it to them.

For Younger Girls

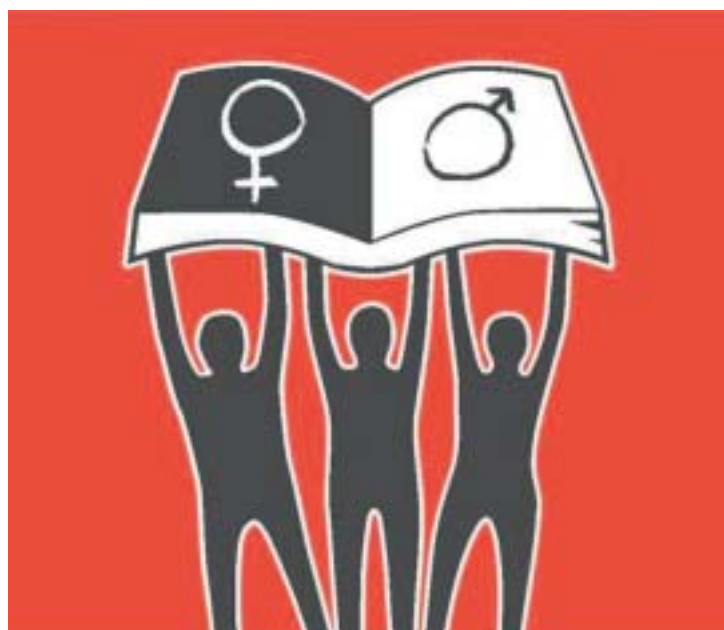
Share lifelines or charts with one another.

Compiled from 'Life Skill Education Toolkit for Orphans & Vulnerable Children in India, FHI in collaboration with NACO 2007



GENDER SENSITIVITY

SESSION	Gender Sensitivity
OBJECTIVES	To make adolescents understand the gender-related issues and overcome gender bias roles
CONTENT	<ul style="list-style-type: none"> • Concept of gender and sex • Difference between sex and gender • Gender-based issues • Gender-based violence and harassment throughout the life cycle
DURATION	1 Hour 30 Minutes
RESOURCE PERSON	Master Trainers/MNGOs/FNGOs
TRAINING METHOD	Presentation, activity and discussion
LEARNING OUTCOME	Adolescents will be able to understand the difference between their biological and socio-cultural roles in society





Salient Points

- Gender is a cultural construct, whereas sex is a physical construct.
- Sex is constant and cannot be changed easily. Men and women in all parts of the world and across different times have similar biological features.
- Gender is socially constructed, which means that it is determined by our social, cultural and psychological surroundings and environments.
- Gender is variable and can change from time to time and culture to culture.
- The way girls and boys socialise to be 'feminine' or 'masculine' is called gendering.
- Different cultures may value girls and boys differently and assign them different gendered roles, responsibilities and attributes.
- Gender norms are common for all men and women in a particular cultural context. All men and women are expected to behave in a similar manner. The difference between men and women are codified at the level of different systems like law, region etc.
- Gender is hierarchical, sex is not. Hierarchy refers to values of superiority and inferiority being attached to things/people. Males and females are different as two sexes, therefore question of hierarchy doesn't arise but in terms of gender men are considered superior to women.
- There is a belief that men are stronger, braver, while women are weaker, the gentle sex, are housewives and so on.
- Sex (female/male) marks a biological fact of life; whereas gender marks the role that the person (female/male) identifies with.

Instructions for Trainers

Make two columns on the flip chart namely Male and Female. Ask adolescents about the characteristics of each group and write it on the chart. Specifying each characteristic, ask adolescents whether these characteristics are interchangeable? Discuss with examples.

Flip chart 1

Difference between Sex and Gender

Sex	Gender
Sex is biological difference between man and woman	Gender is socially constructed by roles and responsibilities, assigned to a woman and man in given culture and location, constructed by society.





Flip chart2

Difference between Sex and Gender Characteristics

Sex	Gender
<ul style="list-style-type: none"> • Biological • Nature made • Constant • Individual • Non-hierarchical • Cannot be changed easily 	<ul style="list-style-type: none"> • Socio-cultural construct • Society-made • Variable • Systematic • Hierarchical • Difficult, but not impossible to change

Display flip chart 3 and ask them to identify each statement as a sex (S) or gender (G) or both.

Flip chart 3

Statement	Answer	
• Women are better at caring for children than men	• G	
• Women breastfeed babies	• S	
• Male voice breaks at puberty	• S	
• Women are better nurses than men	• G	
• Men can become good soldiers	• G	
• Men need more nutritious food	• G	
• Female has to carry out house hold work	• G	
• Male has to earn for the family	• G	

Instructions for Trainers

Ask the adolescents to form four groups. Ask each group to choose a gender bias prevailing in the community. Give them 10 minutes and tell one of the adolescents to describe the effect of gender bias on the girl, family and community in course of time. The effects can be described in form of role play, story, etc.

Each group should depict the effect in a creative way, not exceeding 5-10 minute each.

From the above activity list down the gender issues addressed by the adolescents and ask them what are the other issues prevailing in society. Add to the list and display flip chart 4.



Flip chart 4

Some gender issues

- Prenatal sex selection
- Nutrition
- Health
- Health care
- Mobility/Marriage at young age/Early child-bearing
- Education
- Work participation
- Crime against women



Explain each issue in detail.

Prenatal Sex Selection

- Prenatal sex selection is a process of determining the sex of the unborn child. It is illegal as per PCPNDT Act, 2003.
- Rapid decline in child sex ratio can lead to increased violence against women, rape, abduction, trafficking, and onset of practices such as polyandry.

Nutrition

- According to research evidence, female infants are breastfed less frequently and over a shorter duration than boys.
- Young girls often do not get the required quantities of supplementary food. Discrimination against female children in the quality and quantity of food is prevalent in many parts of the country. Male children are fed with larger quantities of cereals, fats, milk, sugar and fruits than females.
- A higher proportion of girls are found to be moderately/severely malnourished as compared to boys.



Health & Health Care

- Adolescent girls show higher rates of anaemia and stunting than boys of the same age almost all across the country.
- Females are always blamed for infertility, even if the man is the cause.
- Many women suffer from RTIs/STIs but do not get treatment for these due to embarrassment/lack of mobility/lack of services.
- Malnutrition, frequent pregnancies and infections contribute to high maternal mortality



ratio in India. It is an indicator of disparity and inequality in access to appropriate health care and a nutrition services for women.

- Men and boys receive medical attention faster than girls and women. Males also tend to get better quality of care. More money is spent on ailing males than on females.

Mobility Marriage and Early Child-Bearing

- Girls get married at a young age (before 18 years) and become mothers at a tender age. Numerous restrictions on their mobility begin to operate during adolescence.



Education

- Enrolment of girls is poor in schools across the country despite many government incentives. Many girls of poor families are not able to attend school and dropout of school early. Health of women is greatly affected by their poor level of education.

Work Participation

- Girls begin their working life quite early. In rural areas, they are engaged in caring for younger siblings, cooking, cleaning, fetching fodder, fuel, working in fields (sowing, harvesting)



Crime Against Women

- Women are exposed to violence right from the time they are conceived.
- Cases of crime against women– rape, sexual harassment at workplace, domestic violence, eve-teasing are increasing.
- The risk of sexual exploitation is greater for daughters of poor families living in marginal communities, daughters of destitute women and prostitutes.



Now ask the adolescents to list down the examples of gender-based violence visible at different stages throughout the lifecycle. Display flip chart 5.

Flip chart 5

Examples of gender-based violence are visible at different stages throughout the lifecycle.

Pre-natal

- Pre-birth elimination of females

Infancy

- Female infanticide
- Differential access to care, nutrition, health care and education

Childhood

- Child marriage
- Child sexual abuse
- Child prostitution
- Differential access to care, nutrition, health care and education

Adolescence (unmarried)

- Molestation/eve teasing
- Rape
- Sexual harassment at the work place
- Forced prostitution
- Trafficking
- Violence associated with pre-marital pregnancy, abortion
- Access to care, nutrition, health care and education
- Kidnapping and abduction

Youth and Adulthood

- Domestic violence
- Marital rape
- Dowry-related abuse and murder



- Physical battering during pregnancy
- Forced pregnancy
- Homicide
- Sexual harassment at the workplace
- Molestation, sexual abuse, rape
- Differential access to care, nutrition, health care, education
- Desertion

Old Age

- Abuse of the elderly (forms affecting women more than men)
- Abuse of widows
- Threat of sexual violence
- Lack of access to care, nutrition and medical facilities

Adapted and compiled from:

- Facilitator's Manual on Adolescent Health and Development 2006.
- Adolescent Health Module for Training by Himalayan Institute Hospital Trust.
- Kishori Shakti Yojana (KSY) Orissa, Training Manual for Anganwadi Workers.
- Orientation Programme for ANMs/LHVs to provide Adolescent-friendly reproductive and sexual health services National Rural Health Mission.
- Violence against Women in India – A review of trends, patterns and responses.



DECISION MAKING

SESSION	Decision Making
OBJECTIVE	To help the adolescent girls becomes responsible and make sound decisions to ensure a happy and safe life
CONTENT	<ul style="list-style-type: none"> • What Influences our Decision? • How to make Decisions that keep us safe? • Solving Problems • We can Change our Behaviour • My Goals
DURATION	5 Hours 30 Minutes
TRAINING METHOD	Activities and discussion
LEARNING OUTCOME	The adolescent girls will be able to make responsible and sound decisions for setting important goals for life and learn to deal with problems and ways to overcome them



Session 1: What Influences our Decision?

Objectives

- The adolescent girls will understand that each person has a unique pattern of behaviour which adapts to different situations.
- The adolescent girls will learn that determining the risk in any situation is the key to safe behaviour.
- The adolescent girls will understand that girls can choose and are responsible for their behaviour in any situation.

Salient Points

Activity 1: Taking Risks

- If we understand ourselves and our responses to situations, we are better able to control our responses.
- Adolescents can be involved in certain behaviours which are risky. This may include carrying a knife, getting into a fight with a bully, having unprotected sex (for girls 15 years and above), taking help from someone you do not know, walking alone at night, stealing, sniffing type writing fluid, using alcohol, abusing a powerful person, taking money from a stranger, cheating in exam and many more.
- They need to be appraised with the consequences of these risky behaviours.
- Taking decisions involves risks. It is important for young girls to understand the intensity of risks involved and to think through the possible consequences of their decisions. Good decision-making helps girls to think through the possible consequences of their decisions.



Activity 2: Choosing Behaviour

- Girls often do not have a supportive environment to make independent decisions. It is socially approved that they need to behave like puppets where the adults take important decisions for them. Even if adults set the rules, girls have a choice to follow or not. They need to assess if their behaviour is best for themselves and make the right choices.
- This it is very important for the girls to have choices. They need to be equipped to analyze the positive and negative aspects of each choices and accordingly choose the right alternatives.

Time Required: 30-45 minutes for each activity

Materials: Chart paper, cards and markers



Activity 1: Taking Risks

Instructions for Instructors

1. Tell the adolescent girls that we will be looking at some of the risky situations that we face. We encounter some risks in daily living such as when we cross a road or play a difficult game or run to catch a bus. Some risks can harm us and we can choose to reduce them.
2. Ask the adolescent girls to define what they understand by risk. Make the point that some risks are more dangerous than others. Ask the girls to give examples of activities that are less risky and those that are more risky. Draw them into a discussion about why they or their friends may be participating in very risky activities. Ask them to list their feelings while they participate in such activities. The list could run as follows:

- Feels excited
- Feels powerful, can do anything
- Enjoys while it lasts
- Likes to be in the group and/or is scared.



3. List the more risky activities that they or their friends may be involved in. The list could include those used below, and make sure to add some if they have been missed. Some of the risky activities are applicable to older girls and some to the younger ones.

- Carrying a knife
- Getting into a fight with a bully
- Having unprotected sex (for girls 15 years and above)
- Taking help from someone you do not know
- Walking alone at night
- Stealing
- Sniffing type writing fluid
- Using alcohol
- Abusing a powerful person
- Taking money from a stranger
- Cheating in examination.



4. Divide the adolescent girls into groups of three or four. Ask the group to choose one activity from the list and perform a role play for 3-5 minutes. The role play will be only for a few minutes. In one role play the group must show the risky behaviour and how the girls felt. The second role play must show the consequences and what the girls now feel. Other role plays can be added, but two role plays must depict what happened before and after.



If you are short of time, select the role plays that indicate the issue and the feelings well and present two of them to the others for further discussion.

5. Discuss the role play and what they depict with the group.
6. As each group completes its role play, ask the other groups to change something in one or both or all role play scenes to alter the risk situation. The role plays change.
7. Discuss this change with the adolescent girls. Ask them to think if this was possible in real life?

Questions for Discussion

- Why do you think the girls took risks?
- Had the girls looked at the consequences?
- Could they have done it differently?

(This exercise will also help the facilitator get a sense of how well the girls have understood life skills and what life skills need to be introduced in future meetings.)

Linking Learning with Life

Observe what risks your friends take. Was there something common among the risks taken by girls? Why do you think they take these risks? What were the consequences of their actions? Could they have acted differently? In the next session, share with your group what you observed.

Tips for Instructors

- More time might be needed to complete this activity, as girls tend to share their personal experiences.
- The facilitator must be comfortable in dealing with risk issues.

Activity 2: Choosing Behaviour

Instructions for Instructors

1. Discuss with the adolescent girls what puppets are and how they behave. Puppets only follow orders and cannot think for themselves. Do a practice activity. Ask for five volunteers to pretend to be puppets.
2. This activity is fun for the adolescent girls. The facilitator will give commands and the puppets have to do as they are told. The other girls will observe if the puppet are behaving as they have been told to. Some suggestions are:
 - Standup
 - Walk slowly



- Clap hands
 - Smile
 - Jumping
 - Dance
3. Discuss what the observers noted, and ask for five more volunteers to do the following. Give Instruction that they should not copy anyone.
- Act like a well-behaved girls at home
 - Act friendly and polite to a guest
 - Lose your temper
 - Your teacher/mother scolds you and you are upset

Question for Discussion

- Could the puppets have chosen their behaviour? Why?
- Do people have a choice about their behaviour, or do they have to act as someone tells them?
- Did all the puppets act in exactly the same way? Discuss with the girls that in every activity they do, even the most routine ones, there is room to choose how to behave, even when adults or older girls direct them to behave in certain ways. Girls, in reality, have more choices than they think.

Linking Learning with Life

Think of an incident when someone told you to behave in a certain way but you did not. Did that mean that you had a choice about what to do?

If you have a choice, what behaviour would you choose as good for you, and which ones would you reject as not-so-good?



Session 2: How do we make Decisions that are Safe?

Objectives

- The adolescent girls will learn to think through and make decisions carefully
- The adolescent girls will understand that the decisions they make can have many effects on themselves as well as on others
- The adolescent girls will get to know why making a decision to delay sex is safe and learn strategies to do so



Salient Points

- Girls in risky situations need to know how to make safe decisions as they did not have received any opportunity to do so.
- Girls cannot see how their decisions have long-term effects; that is why rash decisions are often made.
- Delaying sex is important if the girls have not yet experimented. They must know why they are saying “no” even though they have developed skills to be assertive, to say “no” and to resist peer and other adult pressures.
- Having unprotected sex may lead to many issues which may include health related problems such as getting pregnant, STI/RTI infections, HIV/AIDS infections etc. Socially these relationships are forbidden. Thus there is no social and family sanction for these relationships.
- However, the adolescent age is such that it always craves for experimentation. They are curious to know what it is.
- Many times the girls are not assertive enough to say ‘no’ to sex as they are in constant threat that the person they love may leave them if they do not agree on sexual relationship. Thus it is very crucial for the adolescent girls to take judicial decision in terms of having and not having sex (both premarital and post marital).
- In this session the facilitator should make sure that the girls are comfortable and feeling free to share about these issues. The session has to be extended and completely non threatening.

Time Required: 30-40 minutes

Materials: Flip chart, cards, markers and cello tape

Activity 1: Delaying Sex

Instructions for Instructors

1. This activity is for older girls 15 years and above: Introduce the idea of delaying sex or abstinence until marriage, when one is older and more responsible.



2. Enact a role play or read a story. Some suggestions are provided below, but feel free to adapt as necessary. Use only one of the role plays given below. Ask the group to think about why this couple should delay having sex.

Smita is 15 and lives next door to Mohan. She likes to see movies and dreams of having a good life. She knows Mohan likes her and they meet. He gives her nice presents. Her parents are aware of all this. Her Kishori Group (Adolescent Girls Group) has talked of STIs and HIV, but if she says no to Mohan, he may leave her.

Samir is going to be married to Renuka in six months. Both parents know about this, and they have agreed. Samir keeps telling Renuka that they can have sex because they are getting married. Sometimes Renuka also feels like having sex.

3. Ask questions to the group to think about what could happen. On a flipchart draw two lists, 'reasons for having sex, and reasons for not having sex.'

Some of the reasons for not having sex could be:

- Not the custom to have sex before marriage (religious/cultural belief)
- My family does not approve
- Scared of getting pregnant
- Scared of HIV/STI
- Not ready
- Not sure she/he is the right person
- We can hug and kiss, so there is no need to have sex
- We are good friends, so we can wait.

Some reasons to have sex could be:

- Everyone is having it
- I love her/him
- Curious what it is
- One partner convinces the other that there is no problem
- The partner will lose interest
- To have a girl (assuming this is after marriage)

4. Explain that delaying sex can be difficult. Ask the girls what they would suggest if they wanted to help some friends. (It is easier to discuss this issue if you say it is for friends rather than for yourself. Make sure everyone understands it is their body, and it is their right what to do with it.)



The list could look something like this:

- Be clear about how far to go. Do not give mixed messages
- Do not accept rides from people you do not know
- Do not remain alone with anyone
- Do not be impressed by romantic words
- Do not accept presents (then you might feel obliged to have sex)
- Be honest, just say no
- Do not drink; then you cannot control yourself

Tips for Instructors

- The activity is very useful for older girls.
- The time may have to be extended because a warm-up and some introduction are needed.
- A baseline or quick assessment of the existing knowledge and comfort level of the girls in relation to this topic would be extremely helpful, as would visual aids and models.
- The facilitator must be careful not to make value judgments and must be comfortable with sex and sexuality issues.

Best Response Game

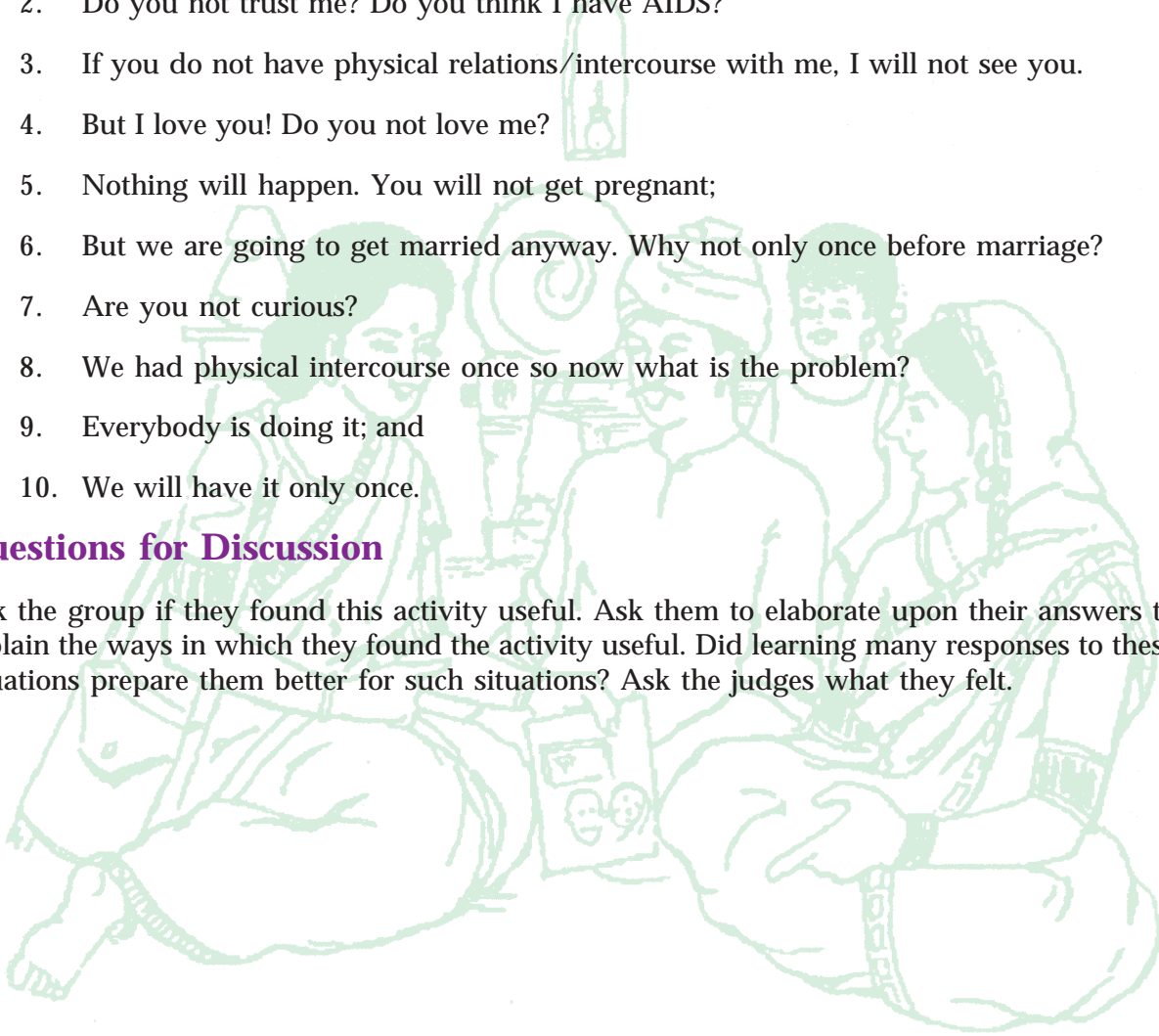
1. Tell the group that we will be practicing some of the skills we have learned about not having sex when we do not want to. Discuss how young people get pressured into having sex. Tell them that the life skills we have learned will help us get out of these situations.
2. Ask for a few volunteers to serve as judges. Divide the rest of the group into two groups. Ask the groups to imagine a name for themselves. Make a scorecard, and write the team names on a chart.
3. Discuss how peer pressure is one of the most difficult problems for young girls. Discuss how it is very difficult to say no when there is pressure between partners.
4. Tell the group that you have a few pressure lines that can be used by a boy or girl to force the other person to have sex. The rules of the game are:
 - A pressure line will be read
 - The groups have one minute to discuss (or two minutes if the group is small) to come up with the best answer to refuse physical relations



- Remind the group that a time limit is being given because we have to come up with quick answers in some of these situations in real life
 - They must discuss in the group and ask one of the girls to speak out or write the answer
 - When the time is up, the chits will be collected or the lines will be spoken. Both teams speak their lines
 - The judges have one minute to choose the winner. The winning team gets 2 points; the other team gets 0
 - Complete as many pressure lines as you want
 - Add up the scores and select the winner. Give the winner a round of applause or some such appreciation.
5. Some pressure lines (these can be adapted or different ones used):
1. I know you want to you are just afraid.
 2. Do you not trust me? Do you think I have AIDS?
 3. If you do not have physical relations/intercourse with me, I will not see you.
 4. But I love you! Do you not love me?
 5. Nothing will happen. You will not get pregnant;
 6. But we are going to get married anyway. Why not only once before marriage?
 7. Are you not curious?
 8. We had physical intercourse once so now what is the problem?
 9. Everybody is doing it; and
 10. We will have it only once.

Questions for Discussion

Ask the group if they found this activity useful. Ask them to elaborate upon their answers to explain the ways in which they found the activity useful. Did learning many responses to these situations prepare them better for such situations? Ask the judges what they felt.



Session 3: Solving Problems

Objectives

- The adolescent girls will be able to identify why problems occur and what steps can be taken to solve them; and learn to choose the most appropriate situation by analysing what could be the consequences.

Salient Points

- In everyday life adolescent girls may face problem situations especially when they try to decipher analytically any situation.
- Creative and critical thinking is required to solve problems.
- Sometimes girls do not identify the various options available to them. Even when they can identify options, they do not weigh them carefully in terms of their long-term consequences.
- Simple five 'why' questions for one problem statement can help to identify the reason for that problem. The series of 'why' questions raise their insight with respect to certain problem. Once they understood the reason for the problem then it is easier to make out how to handle the situation and finding solution. The following examples illustrates the process:

I cheated during the exams

But why?

I was not prepared for it?

But why?

I did not study last night

But why ?

Guests came to my house and I got busy

But why?

I wanted to talk to them and enjoy myself

But why?

Most of the time I am very lonely and I do not know what to do with my time

- Some solutions are adopted without any thought by following someone else blindly. This often leads to new problems. Thus while finding solution they need to try to understand the consequences of the solution as well.

Time Required: 30 to 40 minutes

Materials: A cloth bag with 5 or 6 objects such as a condom (for girls above 15), a thermometer, a pen, a photograph, a greeting card, a match box and/or others



Activity 1: Problems and Solutions

1. Discuss the story of the elephant and the six blind men with one difference. Instead of saying blind, say that they had closed their eyes. In the story, each person touches one part of the elephant and decides what the elephant is like. For example, one person touched the legs and thought they were pillars, another touched the trunk and thought it was a snake, another one touched the tail and thought it was a rope, and so on.
2. Ask the adolescent girls what message they have derived from the story. (The correct answer: that we must study the whole picture and not just a part of it.) Discuss with the girls how they usually solve problems. Do they weigh it from all angles?
3. Explain how problems can be solved using the simple “why” question five times. For example,

I cheated during the exams

But why?

I was not prepared for it?

But why?

I did not study last night

But why ?

My friends called to go out

But why?

There was a party at a friend’s place and alcohol was being served

But why?

They were anti-social men who had money to spend on alcohol and drugs

4. What is interesting about this series of asking “But why” as one goes deeper into the circumstances, is that what appears as a simple problem at first gradually gets complicated and reveals social relations and values figure in our decisions. After the first “why,” one would think that the girls could try and be prepared better. But by the time we are at the third “why,” we understand that friends are creating problems for him. So, the appropriate response for the girls at this stage would be either to say “no” or persuade the friends not to do so. Towards the end of the series, the girls understand that they are all being manipulated by the anti social drug pushers. So, the final understanding is that the friends have as much to gain by saying no.

Once adolescent girls have understood how to solve problems, ask them to think about the solutions.

They may go to whichever level of ‘why’ they want.

5. Divide the group into fours so that each group has a problem card that needs to be solved. The girls can do a role play, tell a story, do frozen pictures or charts to explain what they



are doing and why. They then share with rest of the group. The group comments on whether the solution was appropriate or suggests another way.

Variation

The same card can be given to two groups, and the difference in problem solving noted and discussed. This activity can be used at any time in the other modules as well.

6. Some sample cards are given below. Other problem cards may be added according to needs. There are problem statements below that are suitable for younger girls as well.
 1. Your best friend decides to miss school and asks you to do so also.
 2. Your friend asks you to distract the shopkeeper so that she can steal something from his shop.
 3. A stranger meets you and speaks in a friendly manner. She asks you to come with him.
 4. You are walking on a very hot day and a stranger offers to give you a lift in his vehicle.
 5. You are writing an exam and a friend who has not studied asks you for help.
 6. Your neighbour or someone you know asks you to take a lot of money/stolen goods and keep them for her until she needs them.
 7. Someone offers to sell you a wristwatch for Rs.20.
 8. Your friend asks you to borrow his/her cycle (or some other object) from another friend without telling the person.

Questions for Discussion

Was it easy to solve some problems? Which ones? Which were difficult and why? Did different people have different ways they solved problems? Were some solutions better than others? Why?

Tips for Instructors

Adolescent girls might get tired easily with the repeated questioning. It is therefore advisable to use energisers.



Session 4: We can Change Behaviour

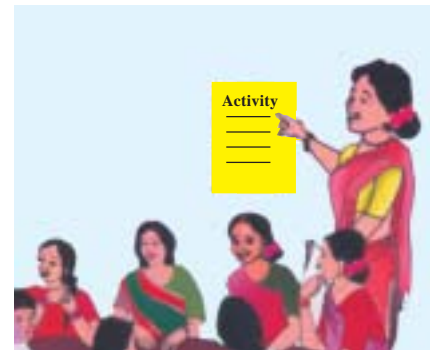
Objectives

- The adolescent girls will get to know that changing behaviour is difficult but not impossible.
- The adolescent girls will understand that how girls unknowingly convince themselves not to change.
- The adolescent girls will be able to learn that they can control of their lives and be responsible for their actions.

Salient Points

Activity 1: Excuses, Excuses

- Excuse making prevents us from improving our behavior.
- Making excuses is common, but one needs to be aware of it happening, especially when the excuses can lead to a continuation of risky behaviour.



Activity 2: Open Door, Closed Door

- Most young people feel that others are to blame for their predicament or that nothing can be done to change it. With such an attitude, motivation to change and retaining the belief that it can make a difference in their lives becomes difficult.
- It is important for girls to know that problems can be solved and behaviours can change. Often, our close friends and family help us in doing so.
- Good decision making depends on understanding the situation when making choices with an open mind as often biases can creep into making decisions. Often friends and family can help in understanding the situation objectively.

Time Required: 30 minutes for each activity

Materials: Cards with problem statements

Activity 1: Excuses Excuses

1. Begin by pointing out that we may know what change is required in our behaviour but still do not put into practice. It is important for us to be open to change. Inform the group that we will look at some of the excuses we make from time to time.
2. Distribute the list of excuses or give one sentence to each girl to read and ask the others to listen. Ask the group to reflect on whether they often have used these excuses. Provided the girls are comfortable, you can make this more interactive by asking the girls to put their hands up if they have used the excuse often.
3. Then have a discussion on the reasons for not acting on what we have learnt or what others may have recommended. For example:



- We do not want to change
- Change is too new
- We are too lazy
- We still do not understand how important it is.

List of Excuses:

- I have tried that before
- It is a good idea but not practical
- They will laugh at me
- I am not ready to do it
- I will do it next time
- I have seen others try it already
- I do not have the time
- I have never done that before
- That is not my problem
- You may be right but ...
- It is too much of a trouble to change
- I will think about it
- I had no problems so far with what I did
- My situation is different



Questions for Discussion

- Did some of the excuses sound familiar?
- Do some of your friends respond like this?
- How did you feel and act when they said this?
- Have you also done the same in the past?

Activity 2: Open Door Closed Door

1. Discuss with the group that even when we think that there is no solution and we can do nothing, there may be many possibilities we may not have explored. Sometimes our friends can help us find solutions.
2. The facilitator stands near the door of the room and tells the girls:

When bad things happen and girls face big problems, they feel angry and sad and do not know what to do. They feel that all the wonderful things that the world can give (point to the open door) are not for them. They feel that the world has shut the door on them (slam the door shut).



The facilitator now puts on a scarf for a dupatta and says, “I am Seema in Standard X. I have just got engaged and my fiancée tells me that I may have to stop my studies once we get married. I clearly indicated to him that I will study at every cost because of which he has refused for the marriage. Breakdown of this marriage would also affect not only my marriage but also the marriage of my younger sister in the future. My family is threatening me to change my decision. Each problem feels like a door closing in my life. Help me find ways to open the door”. Seema says out a statement from the Closed Doors and the group is to suggest ways to open the door.

In pairs, the group discusses what to do, suggest it to the larger group, and if they agree, they tell her the solution and open the door. An example is given below.

Closed Door	Open Door
I may have to discontinue my studies	Discuss with the family that education can improve the quality of life of the entire family
My sister will blame me for upsetting her future	Happy marriage needs mutual respect and understanding
My family will not easily find another match	There are many families who value education so finding a match would not be difficult
My parents will have to face the humiliation	You will have to stand by them in the crisis with the support of your relatives and neighbours

Prepare other examples according to the needs and age of the adolescent girls.

Questions for Discussion

- Was it difficult to open up the door?
- Do you think that the open door helped Seema?
- Can creative thinking help people cope with problems?
- Can girls help others with their problems?
- Can girls help girls living with HIV?

Linking Learning with Life

Ask the adolescent girls if they would like to share any of their problems and if they would like their friends to find possible solutions. Ask the girls to meet one friend who is facing similar problem or is sick or someone who is sad and find out what is bothering them. The information is brought back to the group, and if some of the problems are common, an action plan can be devised. If problems are unique to the person, another strategy may be planned. It is important that the girls discuss the strategy and options with an adult, preferably a project counsellor, before discussing with other girls and community members.



Session 5: My Goals

Objectives

- The adolescent girls will learn to set realistic short and long term goals and think of problems and solutions needed to reach these goals.
- The adolescent girls will learn to make choices carefully as they may change their future life path.
- The adolescent girls will be able to think and feel positive to find solutions and try again.
- The adolescent girls will be responsible so that girls can impact their own and other lives in a positive way.

Salient Points

Activity 1: How do I Set my Goals

- Setting goals is important otherwise one will lead a purposeless life, moving everywhere without direction like the wind or one can get into trouble a lead a destructive life.
- Setting goals is a skill that comprises of the following steps:
 - Choose the goal
(Check is it realistic? Will it benefit me?)
 - Find out what problem may occur in achieving the goal and the possible solutions to these problems, and
 - What are my resources
(Check who will help me? Do I have the money? What skill do I have?)
- Goals can be long term e.g. winning a cricket match
- To achieve a long term goal we need to break them into short term goals for example:
 - the team will be chosen at least two months before the match
 - the team will practice at least six days a week for two months
 - the team will plan their strategies after understanding each other's strengths



Activity 2: A 'Mantra' for Trying

- Setting goals is a skill but it is more important to be able to stick to them despite the obstacles or to change them if they prove to be unhealthy.
- More than important than winning is not to get defeated. If one fails once it is important to get up again and try and to continue this process till n reaches the destination.
- The ability to find positive solutions and make good choices is important.

Time Required: 45-60 minutes per activity

Materials: Flip charts, markers, cards and chalk



Activity 1: How Do I Set My Goals?

1. Give the girls two different coloured cards-one colour for the short-term and another colour for the long-term. Give them markers and ask them to think of a short-term goal (short-term means next day or week) and long-term goals (over a month or a year). Write the goal on the front of the card with one goal on each card. They should also think of problems (and solutions). On the back of the card, write today's date and set a deadline to achieve the goals. For a long-term goal, write the sub-goals on the back of the card that has to be achieved in order to achieve the main goal.

(It would be a good idea to have some assistants in this session, especially if the girls cannot write. They could also help walk girls through the goal setting steps.)

2. Encourage the girls to set up different types of goals - at least two.

Some broad headings could be:

- Health goals
- Emotional goals
- Relationship goals
- Education goals



Examples of short-term goals:

Health	I will give up gutka for a day/two days/a week. I will eat green leafy vegetables.
Relationship	I will meet my friend who gets me in trouble only once this week instead of every day because I want to slowly end the relationship.
Emotional	I will control my anger when my brother troubles me, or I will practice my assertive skills once.
Education	I will finish my homework tonight instead of trying to complete in the morning.

3. Ask the adolescent girls to share one short-term and one long-term goal along with the problems and solutions. Ask for volunteers and discuss two or three goals. If you are going for a sample, choose a variety of goals to discuss. For example if you already have an educational goal, ask for volunteers for a relationship goal.

Questions for Discussion

Ask the adolescent girls what they have learnt from the exercise. Discuss why it is important to have goals. (Otherwise you lead a purpose less life, moving without direction like the wind or you can get into trouble and lead a destructive life.)

Linking Learning with Life

Each adolescent girl should look at her cards and sit with the facilitator if any clarifications are required. Ask girls to keep their cards safe or keep it in at the training centre. These will later move into their magic boxes.



Activity 2: A “Mantra” (according to one’s belief) for Trying

Instructions for Instructors

1. Discuss with the girls that in spite of your best efforts, they will still face many setbacks in life. How would they handle their feelings? Motivate the girls that it is important to have positive thoughts, so that they can feel good and act positively.

2. **Alternative Activity:** The facilitator can read a story of a famous person who never gave up. One example is Gandhiji, who failed as a barrister in India and also in South Africa, but liberated India from British rule. Another well-known story is that Helen Keller.



Positive thoughts → positive feeling → positive action

3. The adolescent girls can think of a “mantra” or a chant that they can say. A chant works because you believe in it. Encourage the girls to compose a mantra when the times are difficult. The mantra can be used by buddies to help one another. You can divide the group into two or three so that they can brainstorm. Bring them back together, and write down the mantras the girls have particularly liked. Ask them to choose one for themselves.

Questions for Discussion

- Ask adolescent girls what they have learnt today.
- Have they stopped trying in the past?
- Do they know of friends who did not give up?
- Why do some people try and some do not?
- How can we help those who fail?

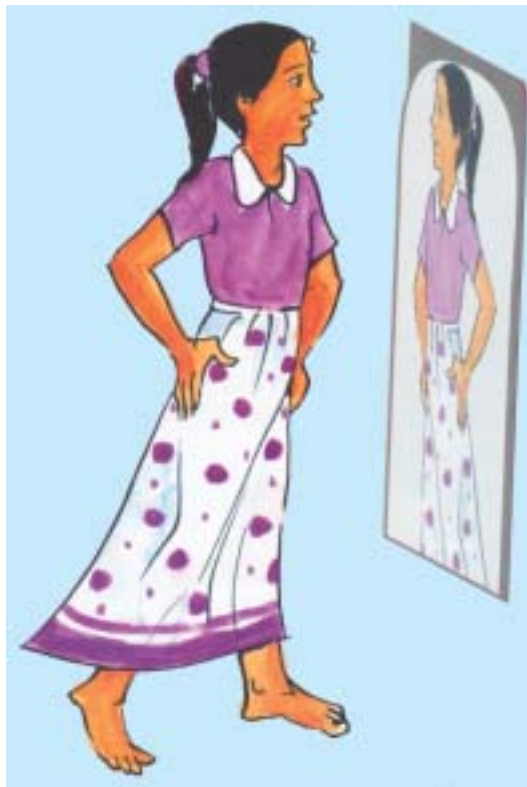


Compiled from ‘Life Skill Education Toolkit for Orphans & Vulnerable Children in India, FHI in collaboration with NACO 2007



COMMUNICATION

SESSION	Communication
OBJECTIVE	To make adolescent girls know the quality of a relationship which is determined largely by the quality of the communication within it
CONTENT	<ul style="list-style-type: none"> • We Speak with our Bodies • Effective Communication
DURATION	1 Hour 25 minutes
TRAINING METHOD	Activities and discussion
LEARNING OUTCOME	The adolescent girls will be able to understand that our verbal and non-verbal behaviour is required to communicate the same message, they will understand that assertiveness is essential for communicating and is different from aggressive and passive behaviour





Session 1: We Speak with our Bodies

Objectives

- To make adolescent girls learn to listen attentively.
- To make them understand that we communicate both verbally and non-verbally.
- To make them learn that our verbal and non-verbal behaviour needs to convey the same message.

Salient Points

Activity 1: Act to Meet

- Communication comprises both verbal and non-verbal language.
- Non verbal communication is a process of conveying meaning in the form of gestures, body language, posture, facial expression and eye contact.
- It also consists of object communication such as clothing, hairstyle, symbols etc.
- Non-verbal communication is called a silent communication and plays a key role in day to day life.
- Since non-verbal communication is as important as verbal, communication can breakdown or lead to problem situation if there is a mismatch between the two. Many girls give mixed messages; they say one thing and their non verbal behaviour conveys a different message. This confusion leads to misinterpretation and listener can exploit the situation to his or her advantage

Activity 2: Choosing Whom to Talk to

- We choose to talk to those people to we can trust and respect. For example: we are comfortable with people who listen carefully, do not judge, who make us comfortable, who respect our feelings, encourages, gives feedback in a nice way, has supportive body language etc.
- One is not comfortable with the person who does not listen, does not look at me, keeps me waiting, does something else when I am there, interrupts, sarcastic, advices and overpowering.

Time Required: 30-40 minutes for each activity

Materials: Cards, marker pens and chart paper

Activity 1: Act to Meet

Instructions for Instructors

1. Prepare three to five word-cards and distribute it to the adolescent girls for acting. They could include words such as shy, flying, crying, angry, swimming. The girls should not read the words until they are told to do so.



2. When the girls hear “start,” they must read the card and not show it to anyone. Then each girl acts out the word they have read.
3. While acting, they have to find a partner who is acting the same word or in a similar way and go and join them.
4. When all have found their partner, they are to share their cards and discuss the accuracy of their acting.
5. If anyone is left out, help him or her find the partner.

Questions for Discussion

Discuss with the adolescent girls how people express their emotions non-verbally. Some examples of questions are:

- Were you surprised to find out that there are different ways in which the same word can be acted out?
- Were some girls, expressions difficult to understand? Why?
- What risk do girls face when their body language creates confusion in understanding?

Activity 2: Choosing Whom to Talk to

Instructions for Instructors

1. Discuss with the adolescent girls what they could contribute to good communication. Ask girls to think of a situation when the communication was really good. Make a list of what made the communication good or use the list from the earlier activity on listening. Add on if necessary.
2. The list may look like this:
 - i. Listens with full attention
 - ii. Encouraging words or sounds
 - iii. Answers & questions
 - iv. Body language is supportive
 - v. Gives feedback in a nice way.

Divide the girls into groups of three to four and ask each group to think of a problem they may have and whom they would approach for help and advice. They do not have to share this with anyone. If the group cannot think of any ideas, give them some problems that you know are common with the girls.

Place a list of people who they go to, such as parents, a friend, a teacher, an NGO worker, AWW, ANM, ASHA or any others.



The groups then discuss whom they go to and why. Ask them to focus on how they listen and talk to them. Ask them to evaluate if they have good listening skills. How do they feel after talking to them?

If the group can write, make a list of the persons on one side and whether they are good and interested listeners on the other. Before rating, there should be an internal discussion within the groups about their opinion on each of these figures with reference to the “Good Listening List.” Place a symbol if girls cannot write to indicate very good, good, or bad listeners. With younger girls stars can be used to indicate who the good listeners are and who are not so good. A gold star may refer to a very good listener, a silver one to a satisfactory one and a bronze or black one to a bad one.

Some comments for a person who listens well could be:

- Listens carefully
- Respects me
- Can reveal my most secret thought.

Some comments that may come for a person who does not listen well could be:

- I go to them with a problem but they do not listen
- Does not look at me
- Keeps me waiting
- Does something else when I am there
- Interrupts me

The facilitator must be ready if adolescent girls want to consult her later after this exercise.

Tips for Instructor

Explain to the girls that waiting is not always an indication that the person does not want to listen or is trying to ignore them.

Questions for Discussion

- What makes it easier to talk to some people, and why is it risky to talk to others?
Give examples.
- Do you think the people whom you consult always give the right advice?

Linking Learning with Life

Think of all the people you know. Observe how they communicate and what they say. Who do you go to for advice? Are they good communicators? Could you go to someone else who can give you better advice? Would you be able to approach the person?



Session 2: Effective Communication

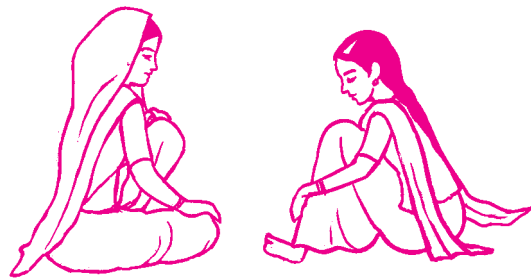
Objectives

- The adolescent girls will be able to understand that people have different positions of power, and this can affect how we communicate.
- The adolescent girls will be able to learn that behaviours that are aggressive or passive can make them vulnerable.
- The adolescent girls will get to know that assertive skills reduce vulnerability; and is essential for communicating in a manner that explains what you want in a clear manner without being aggressive or passive.

Salient Points

Activity 1: Our Behaviour- Passive, Aggressive or Assertive

- Power and status can effect communication. Communication can be Passive, Aggressive or Assertive.
- In passive communication a person is trying to avoid conflict and it leads to allowing others to make choices and take advantage of you.
- During passive communication the person may giggle, fidget, pretend not to hear, have low tone hesitant voice etc.
- Aggressive behaviour is opposite of passive, the person will express his needs and wants freely without giving thoughts to others persons feelings.
- The behaviour during passive communication that of shouting, frowning, speaking ill of someone, complaining about another person, physically showing force etc.
- Assertive communication involves neither being passive, nor being aggressive. It means firmly to ones needs and wants in a constructive manner and also to allow others to express their own.
- The behaviour during assertive communication is stand firm, clear voice, speaking confidently but not rudely, looking up, listening to the other person, replying respectfully but firmly.



Activity 2: I and You: Using “I Feel” Statements

- It is important for girls to understand that if we behave in a passive manner all the time then it is likely that our own needs, feelings and wants will go unmet, unfulfilled and unrecognized.
- On the other hand, if we behave in an aggressive manner we will not have fulfilling relationships that involve genuine communication and respect.



- The girls will practice assertive skills using ‘I feel’ statements. Assertive statements have three parts:
 - I feel...(not “you are”)
 - When or because...
 - What I would like is ...(not “why don’t you” or “you must do”)

Activity 3: Saying “No” and Meaning It (Including Saying “No” to Persuasion)

- Culturally girls are expected to be courteous and respectful in their communication with older people. Girls are expected to be passive rather than assertive. Taken together these two factors can place girls ‘at risk’ if they do not know how to say ‘no’ in an exploitative situation.
- In some situations like stealing, cheating in exams, taking drugs, invitation for going out etc. girls may have to assertively say ‘no’.
- Sometimes they can use delay tactics, let me think about it, I will tell you later, don not have time today etc.
- In other situations they can negotiate or they make alternative suggestions such as let us go here instead or we can do this as well.
- When girls may no know what to do they can seek help from older trusted person.

Duration: 1 Hour 15 minute

Materials: Activity One: Chairs

Other activities: Marker pens, chart paper and cello tape

Activity 1: Our Behaviour – Passive, Aggressive or Assertive

Instructions for Instructors

(This a fairly long activity and may need to be broken up)

1. Ask adolescent girls to pay attention as you role play each behaviour. They have to help you come up with a list of similar behaviour. You may get a lot of passive examples as many girls do not know about assertive behaviour. Help them to define aggressive behaviour. The facilitator can ask them to observe the role play and then make a list of the assertive behaviour.
2. The facilitator says, “Can I go to the movie?” and “Why did you not allow me to go out?” in a very passive manner, looking down, shuffling the feet, and in a low tone. Ask the girls to list what they saw and add to the list. Brainstorm with them what they do when they do not want to do something (they are supposed to do this without confronting the person involved).

The list may look like this:



- Low tone
- Giggling
- Hesitant voice
- Hiding the face in the hands
- Irritable
- Do not talk to anyone
- Pretend you did not hear
- Forget you had to do something
- Fall ill



Tell the girls that this is passive behaviour. Explain that when you act like this, you do not make your own decisions, you wait for someone to make it for you.

3. The facilitator repeats the same questions: “Can I go to the movie (or any other statement or question)?” and “Why did you not allow me to go out?” in an aggressive way. Ask the girls to list what they saw in the way it was said and the action. List what they say. Next ask them to think of a time when they or their friends had to do something they did not like and their reaction was not passive.

The second list may look like this:

- Shouting
- Frowning
- Speaking ill of someone or insulting
- Talking behind their back
- Shaking their fingers and pointing
- Complaining about the other person—does not understand, never lets me do it
- Saying ‘I will show you what I do next time’
- Physically showing force or pushing

Inform the girls what they saw was aggressive behaviour. Explain that in such behaviour, you do not think or care what the other person feels. This is because you do not think it is important.

4. Inform the adolescent girls that those who showed aggressive behaviour should stand in one corner, and those who showed passive behaviour should stand in the opposite corner. Those who have a mix of both passive and aggressive should stand in the middle.
5. In each of the groups, ask some girls to explain why they behaved in the way they did or



if they had some personal reason for their behaviour. Ask them how they would express, in action, the sentence that the facilitator used or any other sentence of their own. Remind them to express the behaviour in both body action and verbal expression.

6. Point out that people will perceive the meaning of what they say based on what they do or by their body language.
7. While the adolescent girls are in the groups, the facilitator expresses the sentence in an assertive way. Suggest that the girls now try to say 'What is the time?' by looking straight up, with shoulders back, confident voice and face. The effect will be quite dramatically different. Ask the group what they felt about the change in tone and body language. Remind the girls that it is important to have the right tone. Ask the girls to help you to complete a list of what assertive behaviour may look like. It is quite possible that the girls do not know this because they have not thought of assertive behaviour as an alternative.

ASSERTIVE BEHAVIOUR

- Stand firm
- Have a clear voice
- Speak confidently but not rudely
- Look up
- Body language must be controlled not challenging
- Listen to the other person
- Reply respectfully but firmly
- Begin with "I" statements

Point out to the group that in this example the girl showed neither passive nor aggressive but assertive behaviour. Experiment with sentences like "Where are you going?"

Questions for Discussion

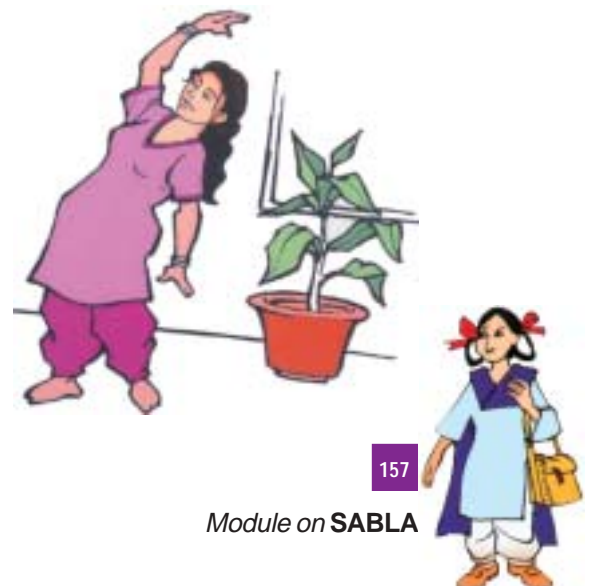
- How did it feel to change the behaviour?
- If someone starts behaving in a passive or aggressive way, will the girls be able to tell the difference?
- Can they spot and change to assertive behaviour themselves?

Tips for Instructors

Pictures of the three expressions (passive, aggressive, assertive) are very useful.

Linking Learning with Life

(This activity can be done in a different session. It will also help to reinforce what is learned.)



If this section is split into multiple sessions, encourage the girls to observe the different types of behaviour in their community between meetings.

Divide the group into three, calling them number 1, 2 and 3. Number 1 plays an assertive character, Number 2 a passive character and Number 3 an aggressive character. Have them act out two different role plays.

- Give information to the other two (facts of HIV transmission, reproductive health) groups.
- Persuade them to do something (using a condom, going to the clinic or giving up smoking).
- Ask them seeking permission for something (taking things from a friend, or to going out).
- To apologize (for a mistake, for lying or for stealing).

The group can interchange the numbers 1, 2, or 3 for each of the role plays. You may invite the girls to enact one role play showing assertive, aggressive and passive behaviour. Ask the group how they would like to help their friends in learning to be assertive. A plan can be made and implemented with the help of the facilitator.

Activity 2: I and You: Using “I Feel” Statements

Instructions for Instructors

1. Remind the group of the exercise on assertive behaviour. Mention that we learned about body language and the tone in which statements should be made. This session will talk about what to say.
2. Explain that assertive statements have three parts:
 - I feel...(not “you are”)
 - When or because ...
 - What I would like is ... (not “why don’t you” or “you must do”).

For example

“I feel upset when you call me names and what I would like is for you to call me by my own name.” This must be said in the assertive manner discussed earlier.

3. Give roles to groups of threes to play. Ask them to think through and present the role play.

One girl plays the role of

- A girl who has just broken a friend’s toy or
- A young person who has lost a friend’s wrist watch he had borrowed or
- A husband comes home drunk.

The second girl plays the friend who reacts to what has happened using the “You” word. For example, “You fool, couldn’t you be careful!” or “You have ruined my day, I do not want to talk to you” or “You do not care about me, and you do not give me money.”



The third girl now substitutes with “I feel ... when/because ... what I would like is”

4. Tell the girls that a new behaviour always takes time to be learnt and may feel strange. Suggest that they could try their newly learned assertive behaviour in simple, positive situations before trying them out in situations where you have to express unhappy or upset feelings.

For example, “I was happy when ... you remembered me on my birthday.”

With more confidence, you could try “I feel upset when you ... take my books without asking. I would like you to ask me next time you want one of my books.”

Later, with even more confidence, you could try, “I feel scared and angry when you come home drunk. I would like you to talk to me about it when you are sober so we can together try to stop this alcoholism.”

5. If you have time, repeat the Status and Power skits, and then modify them by assertive behaviour. You may choose situations featuring a husband and wife or a policeman and a street girl or a bully and a girl. The result is very dramatic for the girls. The facilitator helps the girls to relate the skills learned to the risky situations they face at this stage in their lives.

Questions for Discussion

Ask the adolescent girls how they feel about learning this new skill.

- Do they know anyone, such as a friend, other adults, or someone they admire, who use these skills?

Linking Learning with Life

Ask adolescent girls to use the “I Feel” statement in an assertive manner at least once before they come for the next session.



Activity 3: Saying “No” and Meaning It (Including Saying “No” to Persuasion)

Instructions for Instructors

1. Discuss with the adolescent girls why it is important to just say “No” if you are in a risky situation. Discuss what these risky situations could be. Ask the girls to give you a list of the situations or acts where it is important to say no.

The list may look like this:

- Stealing
- Saying no to sex
- Cheating in an examine
- Taking drugs
- Going out with a stranger or an adult you know but do not feel comfortable with
- Keeping stolen goods
- Marriage.



2. Ask the adolescent girls what they or their friends do in such situations. Do they say “no?” If so, ask them how they say it.
3. Explain that in these situations it is best to say “no” firmly and if necessary leave the place.
4. Make a circle and tell the group to practice saying no. Each girls must use the appropriate voice, body language and expression and say “no” assertively. The group should repeat the exercise several times. Girls have a great time doing this and as they practice a few times, they become more confident of themselves and of being able to say “no”. Remind them how they started and how they are saying “no” now.
5. Call upon individual girls randomly. Ask them to get up and say “no” using the appropriate voice, tone and body language.

Questions for Discussion

Ask the girls how they felt saying “no”

- Was it difficult? Why?
- Are they or anyone they know used to saying “no?”
- What was the reaction to their saying “no?”
- Did it help them? Why and why not?

Remind the group that “no” is used only for undesirable situations and not in every situation.



6. Ask the adolescent girls if there are times when they do not want to do something but are forced to do so. This forcing of behaviour may come from their friends, an older boy or girl who may bully or an adult who may try to persuade them. Discuss the situations for a few minutes. How do the girls generally react to such situations?
7. Remind the group that they have learned how to make assertive responses and how to say “no.” From the suggestions in Review, suggest (if the answers are not forthcoming) or reinforce the following:
 - Saying “No” or “I do not want to do that,” plus walking away if necessary
 - Assertive behaviour

PLUS

- Delaying (Let me think about it, I will tell you later what I want to do, I do not have time today).
 - Negotiate or make alternative suggestions such as “Let us go there instead” or “We can do this as well.” The attempt here is to make a win/win situation from a negative one.
 - You may also seek the help of a trusted older person.
8. Make groups of three to five and give each a role playing scenario. The groups learn to practice the behaviour they have learned. Some suggested role plays are:
 - The husband comes home drunk. He has not given any money to his wife, and the two girls are hungry. When he returns home, he begins to abuse his wife and insists on having sex (for girls 15 years and above).
 - During final exams, a girl asks a friend to pass some answers. The friend has never cheated, but the friendship is a very deep one. Besides, the girl is pestering again and again to pass the answers.
 - The gang of street girls has not eaten the whole day, and the gang leader asks the younger ones to steal some food while they distract the shop-owner. One of the younger ones does not want to get into trouble, but the gang leader coaxes her a lot.
 9. As each role play finishes, ask the audience if it is realistic or if any further changes are necessary.

Linking Learning with Life

Ask the girl to pick a friend or if this is difficult, state that the person on the right is your friend. Before the next session, each will help the other to be assertive and use behaviour that will lessen the risk. When the group meets again ask how it felt to assist another and vice versa.

Compiled from ‘Life Skill Education Toolkit for Orphans & Vulnerable Children in India, FHI in collaboration with NACO 2007

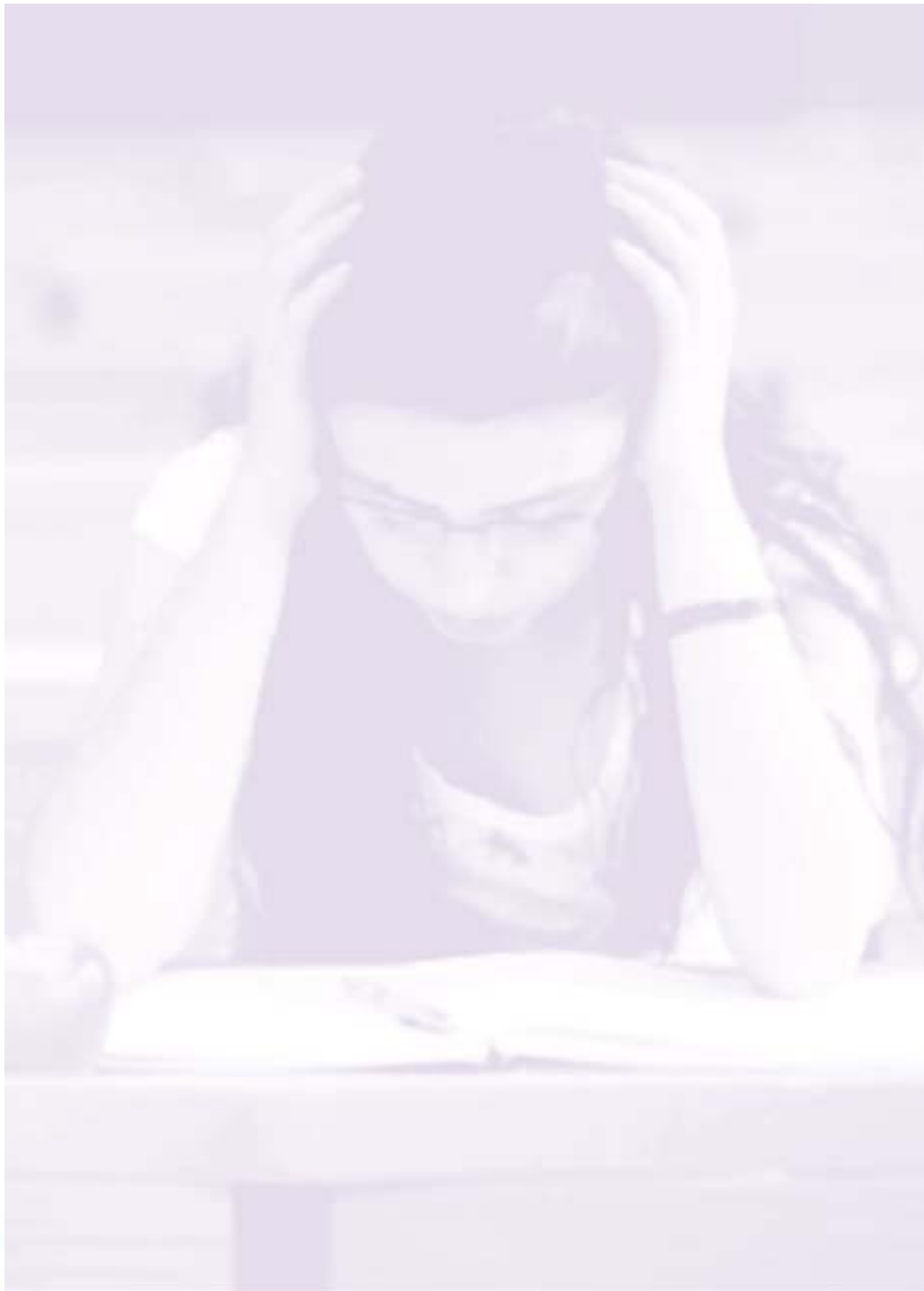




STRESS MANAGEMENT

SESSION	Stress Management
OBJECTIVE	The adolescent girls will be able to recognize their own stresses and their unique ways of responding to stress. They will also identify constructive ways of managing emotions and practice skills of mind and body relaxations.
CONTENT	<ul style="list-style-type: none"> • Stress and Well-Being • Coping with Stress • Sports and Recreation for Better Health
DURATION	4 Hours 50 minutes (3 sessions)
TRAINING METHOD	Activities and discussion
LEARNING OUTCOME	The adolescent girls will be able to identify factors that contribute to stress; clearly recognise the effects of stress on well-being and identify importance of and constructive ways to deal with stress.





Session 1: Stress and Mental Health

Objectives

- The adolescent girls will be able to identify factors that contribute to stress; and
- The adolescent girls will be able to identify importance and ways to deal with stress, for mental health.

Salient Points

Activity 1: Aggression Volcano

- Stress can happen due to internal or external factors. There are several things causing tensions all the time. These can lead to stress overload that can cause a person to behave irrationally or get in to unhealthy things such as discord in interpersonal relationship, using drugs, negative emotional outbursts etc. to cope with stress.
- If the stress is not managed it can lead to emotional outburst (Anger, Depression) or even emotional imbalance. As for example, if we boil water in a tight lidded pan, the steam will burst the lid, spilling the hot water all over.
- Many adolescents face events and factor in lives that lead to stress. It is important that young girls be aware of factors that cause stress in their lives and its effects on body, feelings and behaviour.
- The feeling of the stress is partly due to external factors, but largely under our control. In other words the events that happen may not be under our control but how we react to them is definitely under our control. Skills of critical thinking, self awareness, creative thinking (including humor), problem solving, and interpersonal skills etc. can keep the stress at bay and may even facilitate the person to de stress oneself.

Activity 2: Role Play

- There are two initial options that one feels when stressed is “fight” (fight the problem) or “flight” (run away from the actual situation). We want to often run away or we wish to fight back with the problem. These two options are not often lead to more stress because it does not eradicate the stress from our mind rather it
- It is important for the adolescents to know that there are several other ways to deal with stressful situation. For example, others option could be: Communication, Reflection, Interaction with peer group, involving oneself in any hobby like listening to music, painting, anything else they enjoy doing. If possible, talking and sharing the problem with a friend or family member may also help.
- The facilitator may ask the girls the following questions for discussion
 - What do you think caused the stress in the role plays depicted here?
 - Who was under stress?
 - How did stress affect the person?



- What was the key strategy used to deal with stress?
- Was it realistic?
- What else could have been done to deal with stress?
- The facilitator need to bring out the connections and link it to the real life of the girls by asking them to write to talk about a situation that produces (physical, emotional and behavioral) stress in their life. How would they tackle it now? Ask them to choose one of the practical techniques they learned today and use it the next time they are in a stressful situation.

Time Required: 2 Hours

Materials

- Flip chart, easel, tape, flipcharts pens or pencils
- The “aggression volcano” drawn on a piece of newsprint
- Magazine to cut pictures from (optional)



Activity 1: Aggression Volcano

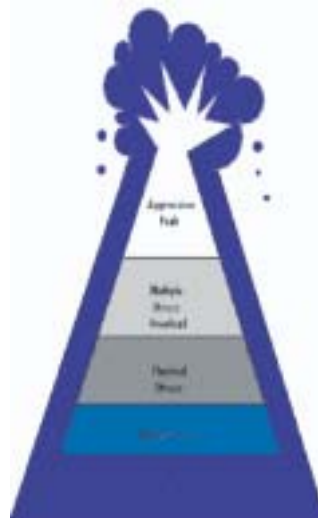
1. Explain this session will be used to explore “stress” and how it impacts on mental health. Ask five volunteers to make faces or poses that portray different expressions of stress. Ask others in the group to express what these different poses convey to them and what they think a stress is. After this discussion, clarify that it is anything that happens in life that causes tension. Stress is the body response to any unpleasant situation. Clarify that stress and tension may be caused by internal or external factors. For example, a girl may feel frustrated because they realise that they have not done enough preparation for exam (internal factor), or because father was drunk, yelling and throwing things (external factor).
2. Distribute three cards, each with one of the titles “Physical”, “Emotional” or “Behavioural” to each young girl. Ask them to identify stressful situation and write responses to the following questions
 - What happens to their body when they are stressed (Physical)?
 - How do they feel when they are stressed (Emotional)?
 - What do they do when they are stressed (Behavioural)?
 Once they finish writing ask each girl to paste the card on the wall or board under each category separately.



Expected responses

- i. Effect on body (Physical) – faster heart beat and breathlessness, not able to sleep, vomiting, trembling etc.
 - ii. Effect on feeling (Emotional) – depressed, angry, tired, anxious, irritated etc.
 - iii. Effect on behaviour (behavioural) – irritability, over eating, aversion for food, over sleeping, fatigue etc.)
3. Display the “Aggression Volcano” on a piece of flipchart. Explain that this picture reveals how stress and tension builds up and eventually impacts on health. Ask for examples of each level. If girls are unsure of the meaning of each level provide the following input:

The Aggression Volcano



Stress: Is a single factor in a person's life causing tension (may be internal or external)

Multiple Stress: Several things that are causing tension all at one time (e.g. a parent died, I did not get my homework done, I copied someone else's and got caught and my friend is now angry with me)

Physical Stress: Health problems that add to stress (a headache, cold).

Overload: Enough cumulative stress to cause a person to behave irrationally (out of the ordinary) and do unhealthy things to cope with the stress (such as use drugs, fight with others).

Aggression Peak: The point when all the stresses have built up to explosion point.

You can give example of boiling water in a tight lid pan. Eventually the steam will burst the lid, spilling the hot water all over. Similarly if the stress is not managed, it can lead to emotional outburst (Anger, Depression) or even emotional imbalance.

Questions for Discussion

Ask the adolescent girls to discuss the following:

- What happens when people reach their aggression peak?
- What signals are there that stress is starting to build up?
- How can you reduce stress when it begins to build up?

Activity 2: Role Play

Instructions for Instructors

1. Ask the adolescent girls to talk about practical techniques that they use themselves or they are aware of that can be used to reduce or deal with stress. Write them on a flipchart. (Some ideas will have come out of the previous questions) Explain that the two initial options that one feels when stressed is "fight" (fight the problem) or "flight" (run away from the actual situation). We want to often run away or we wish to fight the problem. These two options are not often the best ones. What are other options?

For example, others option could be:

Communication, Reflection, Interaction with peer group, involving oneself in any hobby like listening to music, painting, anything else they enjoy doing. If possible, talking and sharing the problem with a friend or family member may also help.

2. Divide the group into smaller groups. Ask each group to do a role play depicting how they would deal with a stressful situation. Give them 10 minutes to prepare and 5-7 minutes each to present the role play.

Questions for Discussion

- What do you think caused the stress in the role plays depicted here?
- Who was under stress?
- How did stress affect the person?
- What was the key strategy used to deal with stress?
- Was it realistic?
- What else could have been done to deal with stress?



Linking Learning with Life

Ask the adolescent girls to write a situation that produces (physical, emotional and behavioural) stress in their life. How would they tackle it now? Ask them to choose one of the practical techniques they learned today and use it the next time they are in a stressful situation.

Session 2: Coping with Stress

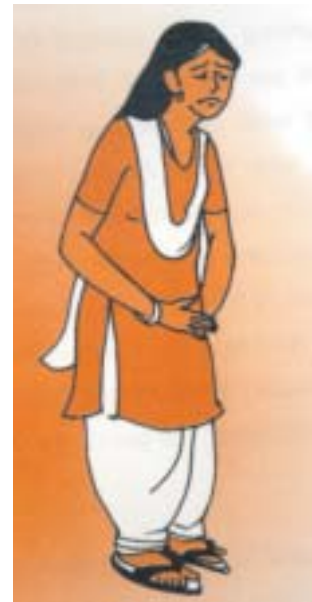
Objectives

- The adolescent girls will be able to describe constructive ways of dealing with emotions and memories that lead to stress.
- The adolescent girls can address stressful emotions through relaxation training.
- The adolescent girls can remove mental blocks and memories of negative experiences in relationships that cause stress.

Salient Points

Activity 1: A Drop in the Bucket

- Stress is a part of daily life and is partly due to external factors but largely under our control. The events that happen may or may not be under our control but how we react to them is definitely under our control.
- The young girls need to realize how bottled up feelings can lead to stress and the safe ways of expressing these emotions to manage stress.
- There are several techniques to de stress. One of such very effective technique is Meditation because it leads to mind body relaxation.



Activity 2: Blow Up the Balloon

- Discuss with the girls that we tend to keep many feelings that hurt locked away inside us. When the accumulated load of hurts become too much to manage, they burst out like a pressure cooker. By then we have no control over them. But if we are more aware of our feelings, we can express them in ways that are safe and do not harm others or us. We do not allow them to build up.
- It is very important to talk about our feelings to the person we are comfortable with. Whenever we are not happy with any situation or person it is recommended to express our feeling there and then before mounting it up to the level of bursting.
- The girls need to understand that focus and awareness of feeling is very important to make ourselves stress free. When we know our level of feeling state it is relatively easier to handle it at proper time.

Time Required: 40-50 minutes for each activity.

Materials: Flip charts, markers, cello tape and drawing paper.



Activity 1: A Drop in the Bucket

Meditation Exercise

Ask the adolescent girls to sit relaxed and close their eyes. Use any yoga exercises for deep breathing and relaxing. The instructions would be as follows:

Take a deep breath; Feel the breath moving in and out of your body; Experience it; Relax your shoulders, arms and legs; Each one is resting and the tiredness is going out; You feel good inside; Feel the goodness and hold it; Now you are slowly waking up; You feel your arms and legs, your neck and face; Slowly open your eyes; You are ready to get up. Give a minute or two for the girls to get up.

Do not hurry. Doing this exercise before the story helps the girls to manage the negative feelings that may arise as the story develops.

1. Discuss with the girls how one feels if we say a good thing about ourselves and how one feels if we criticise ourselves. How does the statement “I am a good person” feel and how does “I am not good at anything” feel? Ask the girls how they feel when they are appreciated and someone says nice things to them. Ask them how they feel when someone is rude and criticises them.
2. Inform the adolescent girls that you will be reading a story. Ask for two volunteers and give each a small bucket. The buckets should be of different colors. On one bucket make a big positive (+) mark and on the other make a negative (-) mark. The +ve bucket will hold all the positive statements and the -ve bucket will hold all the negative statements. Keep a big pile of stones in the middle. Instruct the girls that as the story develops, for every positive remark they must tell the girl standing in front of the +ve bucket to drop a stone into it. The girls must throw the stone from a height so everyone can hear the sound PLONK!! The facilitator must create his or her own story that girls can identify with. It is a good idea to have more positive than negative statements. The following story is only an illustration.



3. The Story

Asha was a young girl of 14 who lived with her mother, father, one brother and two sisters in a small hut in a very crowded slum in the city. Her brother was the eldest, and she was the second girl in the family. Her father ran a small teashop.

Every morning she had to get up early to fetch the water from the common tap. One morning she got up a little late. Her mother shouted at her, “You lazy girl! By the time you go, the water supply will stop. Cannot you be more responsible?” Asha got up and quickly washed her face. Her father said, “Have some tea and go, or you will feel tired and won’t be able to carry the water.” She had some tea and rushed off carrying the water container.

A few older women were waiting in the queue. Asha did not like them because they were often rude. One of them said, “Look at her, she is so dark, who will marry her?” Another said, “She thinks she is very clever because she goes to school. She is too proud.” But the



lady in front of her said, “Do not listen to them. You are an intelligent girl.”

Asha rushed back home with the water. She had to finish her household chores before going to school. Seeing her rushing, her elder brother said, “Do not worry, I will help you wake up the younger two and get them dressed for school.”

Somehow she managed to reach the school. She had forgotten to bring the homework book. Her teacher yelled at her, “You are punished. Go and stand outside the class. You are careless.” Her friend said as she got up, “Do not worry. In the recess, we will have our tiffin together. I will wait for you.” As they sat down to eat, two girls sat next to them and started pointing and laughing at Asha. Asha felt very sad. What were they saying about her? Was she ugly? Her clothes were not as clean as theirs. She felt useless and she went home quite sad.

At home she found that her favourite aunt had come to visit. She worked in the nearby office and had studied up to Standard XII. She was happy to see Asha and said, “I have great plans for you. You are an intelligent, hard-working girl. You must finish your school.” Asha felt very happy and thought, “Yes! I will pass in all my subjects and I can then be what I want.”



Her little sister came up to her and said, “Play with me, I like to play with you.” The neighbour came and said, “Please take my girls also to play with you. You are so kind to these little ones.” Her mother was happy hearing this and forgot her anger and said, “Yes, you are my special girl.”

Adaptation

For Younger Girls:

Make a simpler story based on the girls’ context.

For Older Girls:

Divide the girls into three groups and ask each group to make their own bucket story to present.

Questions for Discussion

- At the end of the story, see which bucket is fuller. If the positive bucket is heavier, how does the girl feel? What would a girl with a heavy negative bucket feel? Did Asha also fill her buckets with her thoughts? What sort of a bucket do you carry?
- If the older girls have made their own bucket story, ask the other groups to ask questions and discuss how positive and negative remarks influence our self-esteem.
- It is a good idea to end on a positive note. Ask the girls to recall all the positive qualities in the bucket, or ask them to state one by one which positive quality they liked for themselves.



Activity 2: Blow up the Balloon

1. Discuss with the girls that we tend to keep many feelings that hurt locked away inside us. When the accumulated load of hurts become too much to manage, they burst out like a pressure cooker. By then we have no control over them. But if we are more aware of our feelings, we can express them in ways that are safe and do not harm others or us. We do not allow them to build up.
2. Take a balloon and blow it up, asking the girls to imagine the balloons as some of the feelings they have. They have not been expressed and they are getting bigger and bigger inside the girl's hearts. Some of the feelings are those of sadness, anger or fear. Ask the girls what would happen if you continued to blow up the balloon (it would burst). Say, you were upset but now you are angry (blow up the balloon more), now you are really mad (blow more), you feel like hitting someone or something and shouting (blow up more, the balloon may burst).



Now, blow up another balloon. Tell the girls to imagine a situation where one of them was upset with her friend because she did not come yesterday as promised and made you wait for hours. The next day you talked to your friend about how upset you were and felt better. The facilitator should symbolize this by not blowing the balloon any further, but letting it stay the size it was. As you talk more and more with your friend, you realize that she had to rush to the hospital because her younger sister had hurt herself badly. The anger goes away. So the facilitator lets the air out of the balloon slowly.

The facilitator can use an example for sadness or fear as well.

3. Ask the girls to close their eyes and imagine the balloon. This is their balloon. It is filled with feelings of sadness, intense anger and fear. These feelings are getting bigger and bigger. But then you find someone to talk to, or you tell yourself you are good. Take a deep breath. Relax. The balloon starts getting smaller because air is slowly going out of it. You relax and talk, you feel good. All the feelings that hurt are becoming smaller. Eventually they become so small that the balloon becomes limp and is blown away by the wind. Feel the balloon blowing away. Feel light as if a weight has been lifted. Relax and open your eyes.

You are feeling so much better.

Questions for Discussion

- What sort of balloons do you have, full ones ready to burst or soft ones?
- Can negative feelings go away if you want them to?
- How do you help yourself, how can others help you?

Linking Learning with Life

Tell the adolescent girls to practice the meditation exercise they have learned and keep a note on how they feel. Ask them to report back next time if it has helped them to manage their feelings better.

For Older Girls

Ask them to keep a diary for recording how they worked with their feelings: How many times did the feeling “balloon” burst? What helped them to ‘deflate’ it? How did others help? What did the girls do for themselves? Were they able to help their friends?

Tips for Instructors

Each adolescent girl can be given a balloon when the story is being told. The facilitator however must make sure that the girl takes her seriously and not just play with the balloons.



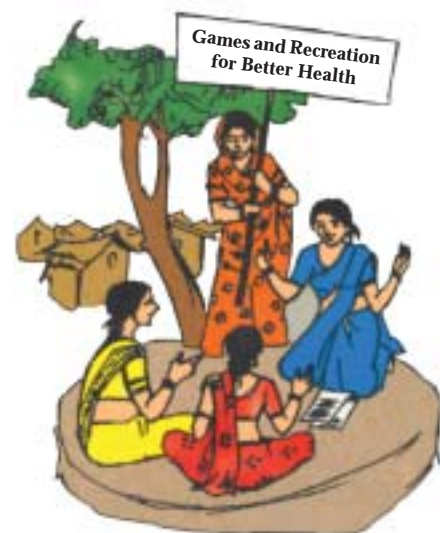
Session 3: Games and Recreation for Better Health

Objectives

- Describe the physiological and psychological impact of games and recreation for health and relaxation
- Take some positive steps forward in improving girls participation in healthy games and recreational activities

Salient Points

- The major coping mechanisms to handle stress include games and recreational exercises and relaxation exercises.
- Exercises through games and recreation can be very enjoyable and increase happiness in our lives, can build and improve our relationship with others, and can increase our confidence and abilities.
- It is important to know for the girls that the international standard is that to benefit from sport or physical recreation we must participate at least 3 times in 20 minutes activities per week to the point where we are slightly out of breath. We apply what is called the “talk test”. If you cannot talk while exercising you are working too hard. Affirm that this is a minimum for fitness.
- The girls should be able to understand that to maintain good health we need to exercise regularly and to improve fitness it is important to progressively work harder over time. This means that they must run a little faster or farther each week, or increase the amount of whatever activity they do.
- The sporting and recreational activities improve physiological health, such as our heart stays healthy and strong, body fat get reduced and maintain a healthy weight; it keeps all organs healthy and strong.
- These activities have a great role on improving our psychological health as exercise releases a natural chemical in our body that relaxes us and reduces stress. The discussion should be done in a manner so that the adolescent girls can understand that exercising through sports and recreation can be very enjoyable increasing happiness in our lives, can build and improve our relationships with others, and can increase our confidence and abilities.
- Facilitator may question the group to elicit responses such as:
 - Are girls excluded or limited from participating in any of these sporting or recreational activities? Why or why not?
 - Does this have any impact on girls’ health?



- What can we do to increase girls' involvement in these activities?
- It is imperative for the adolescent girls to developing a healthy sporting and recreational schedule which is realistic, doable, joyful and creative. For example they can plan it with some friends and mix the activities up and create variety.

Time Required: 2 Hours

Materials

- Flip chart, easel, tape
- A blank time table and pen or pencil for each participant
- Plenty of seeds /beads/leaves/small sticks or slips of paper

Activity I: Seed Technique

1. Explain the group that we would now see how we spend 24 hours a day, doing various activities and the time we spend on each activity.
2. Brainstorm with them the different activities that they do in a day, e.g., cooking, washing, fetching water, time spent at school, sleeping, eating, playing, etc.
3. Divide the girls into two pairs and give each pair 24 seeds/beads/leaves. Explain to them that these 24 pieces represent the 24 hours of the day.
4. They now have to count the number of activities they do and how many hours they spend on each activity. They should make separate piles for each activity and see how many seeds/beads/leaves they put in each. Give them 15 minutes to do this.
5. Then get the whole group together and on a chart note down the average time spent on each activity.



Questions for Discussion

1. Ask the adolescent girls:
 - How many hours do you think we should participate in games/recreation each week to improve our health? Inform the group that we call this “increasing our fitness!”
2. Explain that to benefit from games or physical recreation we must participate at least 3 times in 20 minutes activities per week to the point where we are slightly out of breath. We apply what is called the “talk test”. If you cannot talk while exercising you are working too hard. Affirm that this is a minimum for fitness. It depends on what you want to achieve. If you want to become a great runner like P. T. Usha then obviously you need to do a lot more. The key questions are:
 - Do you want to be fit? Why or why not?
 - According to the table you filled in above – are you doing enough for recreation?
 - What would you like to do during this time?
3. Inform the adolescent girls that to maintain good health we need to exercise regularly. To improve fitness it is important to progressively work harder over time. This means that

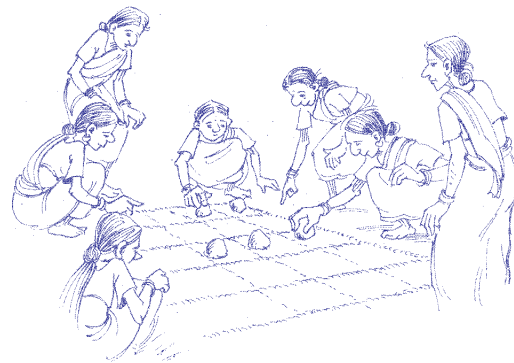


you must run a little faster or farther each week, or increase the amount of whatever activity you do.

- In what ways do the games and recreational activities that we listed above improve physiological health? (Answer can include exercising our heart so it stays healthy and strong, reducing body fat and maintaining a healthy weight, keeping all organs healthy and strong)
- In what ways do these games and recreational activities improve psychological health? (Exercise releases a natural chemical in our body that relaxes us and reduces stress. Exercising through sports and recreation can be very enjoyable increasing happiness in our lives, can build and improve our relationships with others, and can increase our confidence and abilities)
- Are girls excluded or limited from participating in any of these games or recreational activities? Why or why not?
- Does this have any impact on girls' health?
- What can we do to increase girls' involvement in these activities?

Inform the group that the key to develop healthy games and recreational schedule is:

- You develop a realistic schedule
- That is doable
- That you enjoy it
- Maybe do it with someone (a friend)
- Find a time
- Mix the activities up and create variety.



Linking Learning with Life

Ask the girls to think about the following questions for the next meeting:

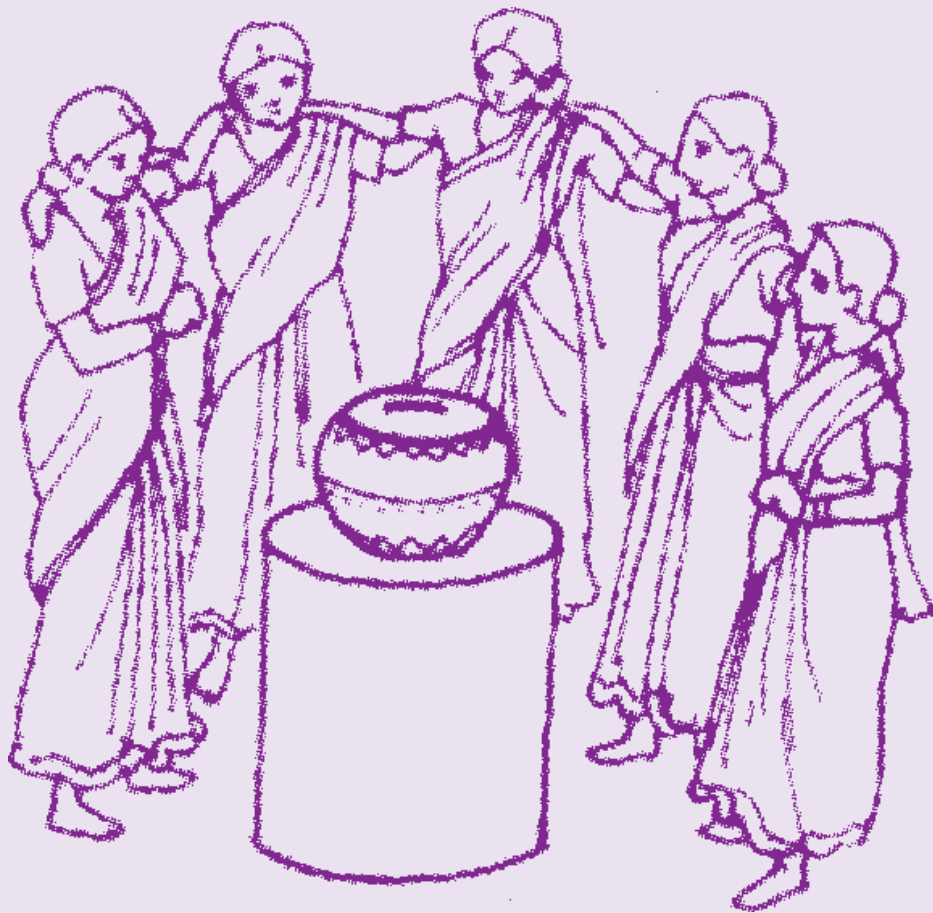
- What changes can you bring to your personal life to improve health enhancing sport and recreational activities? Show the group the timetable again and ask them to include the changes they want to make for themselves.
- How can you involve and increase the participation of girls in your family and community in games and recreational activities? Choose one idea and make a commitment for doing it.



Adapted and compiled from:

1. 'Choose a Future!' Issues and Options for Adolescent Girls in India CEDPA 2003
2. 'Life Skill Education Toolkit for Orphans & Vulnerable Children in India, FHI in collaboration with NACO 2007

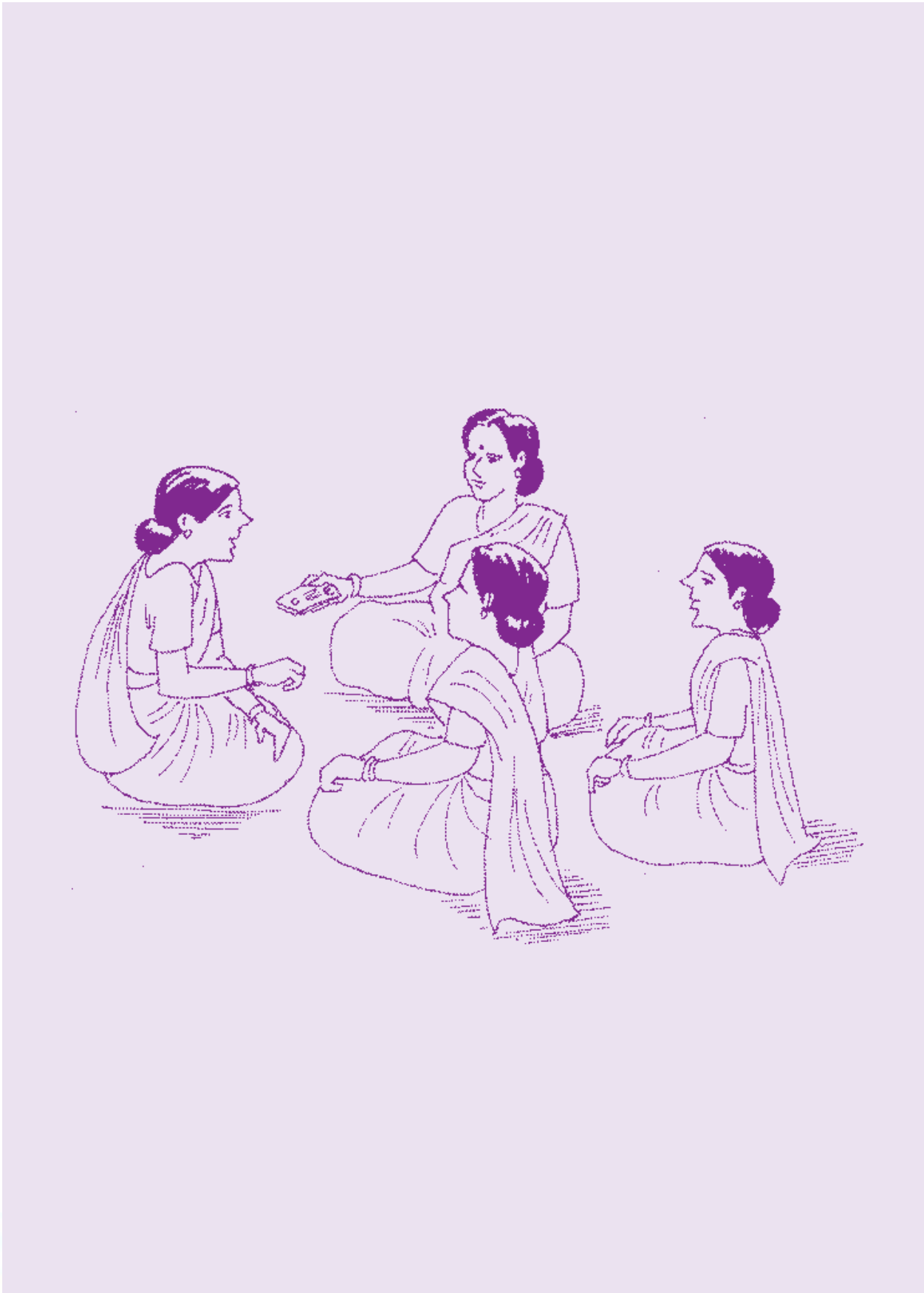




LEADERSHIP

SESSION	Leadership
OBJECTIVE	To help the adolescent girls stand for themselves and harness the opportunities available around them for growing up, living healthier, being happy, capable and strong
CONTENT	<ul style="list-style-type: none"> • Defining leadership, Appreciating self as leaders • Group Behaviour • Handling Conflict
DURATION	2 Hours 30 Minutes
TRAINING METHOD	Activities and discussion
LEARNING OUTCOME	The adolescent girls will be able to identify elements of leadership and cooperative behaviour that makes the group to achieve its goals. They will understand their own behaviour of working in a group along with various elements of leadership





Session 1: Defining leadership, appreciating self as leader

Objectives

- The adolescent girls will be able to know elements of leadership that lead to positive social change
- The adolescent girls will be able to reflect upon and identify their own leadership abilities and strengths

Salient Points

- The simplest way to define a leader is one who:
 - Appreciates the strength, rights and potential in others;
 - Influences social norms, systems, and policies; and
 - Manages resources and benefits
- In other words, leaders are able to appreciate and develop the strengths within others. They understand how to work with others and manage resources for maximum impact.

Time required: 1 Hour

Materials: Flip charts, markers



Activity 1: Group Discussion

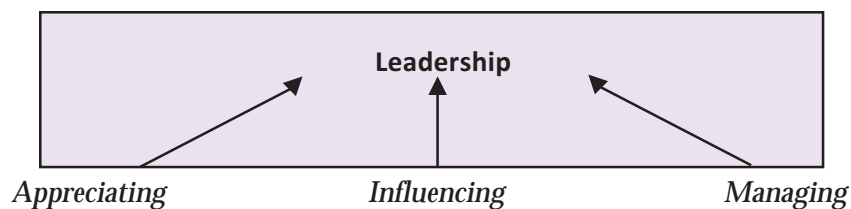
Explain the concept and Types of leadership on the flip chart

There are many ways to define leadership – the simplest way to define a leader is one who:

- Appreciates the strength, rights and potential in others;
- Influences social norms, systems, and policies; and
- Manages resources and benefits

In other words, leaders are able to appreciate and develop the strengths within others. They understand how to work with others and manage resources for maximum impact.

Show the participants the visual of an umbrella and ask them to provide some examples of their own for each category.



Activity 2: Group discussion and presentation - Appreciating Self as leader

- Ask each girl in the group to reflect on the various elements of leadership discussed earlier
- Ask each girl to write down on a flip chart some elements of leadership which they think they have within their ourselves
- Encourage each girl to present her thoughts in front of the group
- Discuss and put forward how each one of us has some inherent elements of leadership which can be enhanced and utilised to bring about positive social change



Session 2: Group Behaviour

Objectives

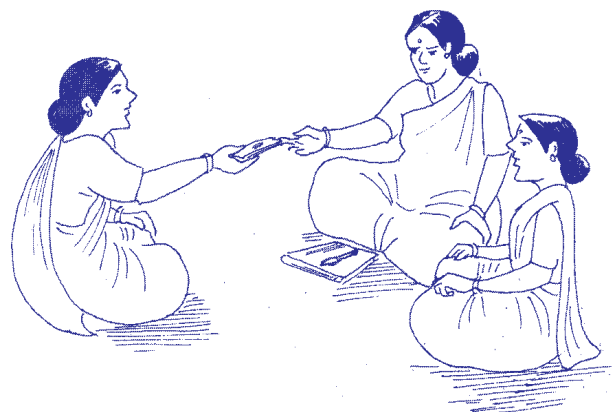
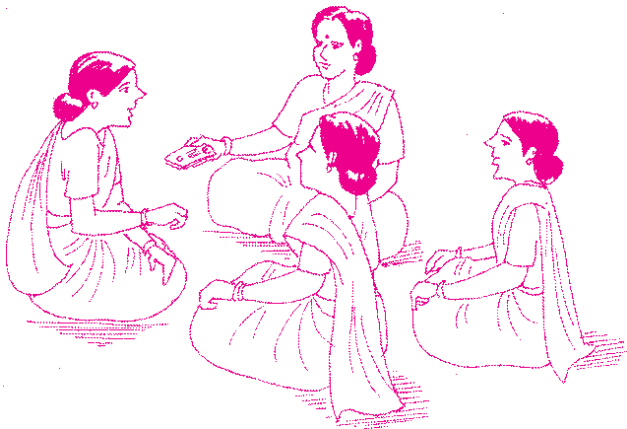
- The adolescent girls will be able to identify their own position in a group with respect to different types of group behaviour.
- The adolescent girls will be able to evaluate their comfort levels with their current positions as Sun, Moon or Star.
- The adolescent girls will be able to explain their responsibility as a Sun, Moon or Star with respect to others in a conflict situation.

Salient Points

- People behave differently in group situations. Suns, Mons and Stars are words that are used to describe them based on their behaviour in a group.
- Sun tends to take the role of a leader. Her opinion hold a lot of importance in decision making process and others admire her. She tends to overshadow others.
- A moon is neither dominating nor quiet. They are usually taken into consideration when sun are quiet. They tend to be dominated and may not get the chance to speak up.
- A star is a good observer and good listener. Their quietness may be taken as lack of opinion. They may feel uncomfortable due to lack of participation and they may not be given importance by others.
- Being a sun, moon or star is an individual p[reference and there is no value judgment associated with either of these. It is not as if there is some sort of hierarchy where the 'Sun' is the best way to be and the 'Star' the worst, with the 'Moon' somewhere in between.
- The orientation also might change according to a situation. E.g. an individual might be sun at home and star among friends or in class or vice versa.
- There are responsibilities ingrained within all styles. A sun need to be sensitive and less dominating and be more encouraging towards others, a moon ought to show more initiative or take up matter on behalf of others in the group. A star needs to be assertive and clearly take a stance in a conflict situation.

Time Required: 1 Hour 30 Minutes

Material: Story cards



Activity 1: Game: Follow me, Follower

1. Ask the adolescent girls to stand in a circle to play a game. Share the following rules of the game:
 - Each adolescent girl is to enter the circle in turn; say her name and make a move, no matter how silly the move is.
 - Everyone else is to repeat the name and copy the action.

Note: if the group is small, have them take two turns each.

 - Begin the game.
 - Once everyone has taken turn/s, ask for a few to volunteers and come forward to make a move.
 - After about 5 minutes, end the game and ask girls to sit in a circle.
2. The aim of this activity is to make the girls conscious about the fact that people behave differently while in a group. Some hesitate, some are confident etc. It further seeks to build awareness that even the shyest ones in a group can contribute (come forward with interesting moves). However, this is not to be explained to the girls at this stage, but is to be brought out later during the discussion.

Questions for Discussion

- Ask the adolescent girls how they felt while in the centre the first time.
- Ask them how they felt the second time around.
- Ask why only some volunteered.

Activity 2: Stories

This session explores behaviours of individuals in a group or conflict situation. It tries to build an understanding around what the responsibility of each individual is, towards each other as group member and as one impacted by a common conflict.

1. Ask adolescent girls to sit in a circle and close their eyes. Inform them that they have to listen very carefully to a story that you narrate. The story will end in a problem for them to resolve.
2. Narrate the story in a relaxed and clear voice. Once the story is over, ask girls to slowly open their eyes. Inform them that they have to resolve the story together as a group. To do so, they will discuss possibilities for an ending, and reach a consensus in 10 minutes.
3. Inform them that from time to time, you may ask some girls to leave the discussion



by tapping them on the shoulder. Whoever receives a tap on the shoulder will have to leave the discussion quietly, without disturbing others. Meanwhile, others will continue the discussion.

4. Ask adolescent girls to initiate the discussion by posing the question, 'Now what should Natasha do?' Allow the discussion to continue for a few minutes before taking out the most vociferous person from the group by tapping her on the shoulder. Allow the discussion to go on while you take out those girls who are actively involved in the discussion one by one by tapping on their shoulders. Terminate the discussion when only a handful of girls remain.

Note: These girls will be those who were silent at the beginning of the discussion.

5. Let the discussion continue and conclude it after the group agrees on a decision.

Note: Only in extreme situations where the discussion turns directionless or you run out of time, close it before a conclusion.

Story 1

Nisha and Natasha were very good friends. They had the same tastes and similar likes and dislikes. They studied in the same school, same class and shared same seat. Of the duo, Nisha was the outgoing kind whereas Natasha was a bit reserved. They trusted each other. Their life was full of Sunshine – sharing tender secrets, helping each other in studies, advising and planning for their careers Oh! Only if the day had 28 hours, for so much they had to share with each other. Such was the friendship which enveloped the two young girls in its glowing warmth.

They say trust is the touchstone of friendship and they had ample between them. One day both of them went to the school stationer's shop, which was bustling with people as usual and there was a long queue. As Nisha's turn came the stationer gave her the registers that she had asked for and before he could take the money, a pile of books kept in the back shelf tumbled down. He turned around to pick them up, and in that commotion Nisha walked off the shop without paying the money, leaving Natasha standing speechless with disbelief. In the chaos the shopkeeper too did not realise and gave Natasha a set of pencil that she had asked for.

Natasha, still shell-shocked at her friend's behaviour, followed Nisha to the canteen and asked her to go and pay the shopkeeper the money, Nisha replied that since the shopkeeper had not realised it, it was ok, and that she did not have any intention of paying the stationer. Natasha left her friend sitting in the canteen. And as for herself, she was caught in a monumental dilemma, whether to tell the stationer or not. On one hand, her friendship was at stake, and on the other, her conscience. More than anything, she felt her trust was betrayed by Nisha. What do you think Natasha should do? Can it be possible that Nisha has so much trust on Natasha that she knows that Natasha would never ever betray her by telling the shopkeeper, and that she was taking advantage of this trust?

Or

Take any current issue or any topic which can generate more than one opinion and can ensure a discussion for some time. Give them the topic and ask them to come to a consensual decision. One such topic could be - 'Given that examinations cause pressure and stress in girls, should we learn to cope with them or should they be done away with completely?'



Questions for Discussion

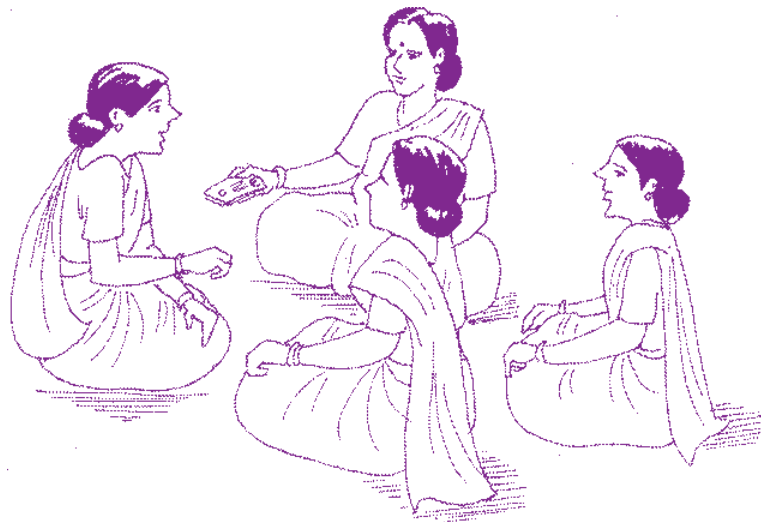
Ask adolescent girls to return to their seats and look at the discussion objectively. Ask them the following questions to analyse the activity:

- How are you all feeling?
- Will you share something about what happened in the entire discussion process?
- Why did I take out a few girls from the discussion?
- What happened after they were taken out?
- As the number of girls changed, what happened in the process of decision making within the group?
- What do the above convey?
- Is it important for all the members of a group to be part of the decision making process and if so, why?

Activity 3: Group Discussion

1. Introduce the concept of Sun, Moon and Stars. Ask girls to identify themselves as a Sun, Moon and Star.
2. Discuss the advantages and disadvantages of being Sun, Moon and Star, while making relevant notes on the blackboard and continue the discussion to arrive at the responsibilities of Sun, Moon and Star within a group.
3. As the girls make observations, collect and publish the relevant ones under the three categories – Advantages, Disadvantages, Responsibilities. Link these with a conflict situation.

Note: Share that being a Star actually exacerbates a conflict as Stars tend not to voice their opinions and go along with the majority viewpoint which may not always be right. This is especially true in case of a group conflict.



	Sun	Moon	Star
ADVANTAGES	<ul style="list-style-type: none"> Opinion holds a lot of importance in the decision making process. Given importance by others Tends to take the role of a leader. Others may look up to/admire her. 	<ul style="list-style-type: none"> Opinion taken into consideration once the Suns are silent. Neither dominating, nor quiet. 	<ul style="list-style-type: none"> Can be a good observer. Can be a good listener.
DISADVANTAGES	<ul style="list-style-type: none"> Tends to overshadow others. May be disliked by some. 	<ul style="list-style-type: none"> Tends to get dominated by the Suns. May not get a chance to speak up. 	<ul style="list-style-type: none"> Opinion not taken into consideration. Others might take her to be disinterested. May not be given any importance by others Non-participation may be misunderstood as agreement or lack of opinion May feel uncomfortable because of non-participation.
RESPONSIBILITY	<ul style="list-style-type: none"> Not to be only one to take decisions. To encourage others to share their views. 	<ul style="list-style-type: none"> Not to let the Suns overshadow. To put across opinion more powerfully. To encourage Stars to share their views. 	<ul style="list-style-type: none"> Not to be overshadowed by the Suns and Moons. To make space for themselves. To be as much a part of the decision making process. To share ideas/opinions with the group. Lack of participation may lead the group to loose out on valuable information/inputs because everyone is equally responsible for the group's achievement of its objectives.



Questions for Discussion

- Ask each girl to share what they consider themselves to be – A Sun, a Moon or a Star in most situations.
- Ask them if their positions remain the same in every group situation/conflict or whether it varies from one situation to another.
- Ask girls to give examples from real life situations, where they have played the roles of Suns, Moons or Stars.
- Encourage them to evaluate themselves and share how effective they have been as Sun, Moon or Star in group situations/conflicts.
- Conclude the session by asking them to think about what they would like to change in their behaviour in group situations.

Linking Learning with Life

Ask adolescent girls to go back and reflect from real life situations where they have played role of a Sun, a Moon or a Star?

Ask them whether their position remains the same in every group situation or it varies?

Ask them to practice change in their behaviour in real life in situation where they were not happy with the roles they usually take up?



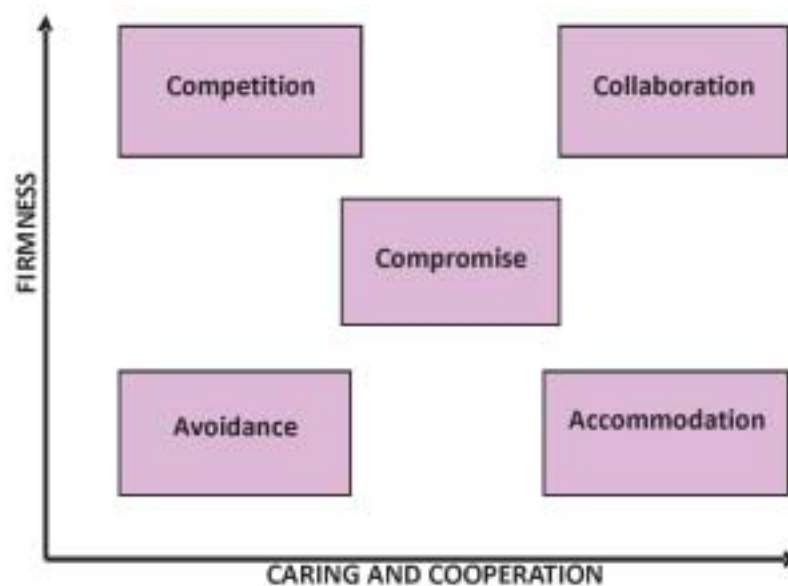
Session 3: Handling Conflicts

Objectives

- The adolescent girls will be able to describe various behaviours that help/hinder a problem solving process/ group tasks elements of cooperation.
- The adolescent girls will be able to explain one of the elements of cooperation identify their own behaviour of working in a group.

Salient Points

- People have different modes of responding to conflicts.
- An individual's conflict handling mode could be any of the following 5 modes – competition, avoidance, collaboration, compromise or accommodation. It could also be a combination of two or more modes depending on the situation. The following diagram shows the conflict modes on the two axis of i) Caring and Cooperation and ii) Firmness.



- Each of the conflict resolution modes is described below:
 - **Accommodation (smoothing)** is unassertive and uncooperative mode. An individual neglects her own concerns out of 'selfless generosity' for other's wishes.
 - **Avoidance (withdrawal)** is also unassertive and uncooperative mode. In this the individual; does not address the conflict and avoids it by postponing, side stepping or simply withdrawing from the situation.
 - **Competition (forcing)** is aggressive and uncooperative mode. In this individual pursues her own concerns at the expense of the other and uses power to win a position. Competing also suggests defending a position, which one believes to be correct.



- **Compromise (sharing)**, falls on middle ground, between competing and accommodating. It addresses an issue more directly than avoiding but does not explore it in as much depth as collaborating. It might mean splitting the difference, exchanging concessions or seeking a quick middle ground position.
 - **Collaboration (problem-solving)** is assertive and cooperative. It means get into the root of the issue, working together, keeping in mind concerns of each other and finding creative solutions which are acceptable to both.
- There is no such thing as a neutral position/approach to a conflict. Even when one is 'uninvolved', it is likely that she is either following avoidance or accommodation.

Time Required: 1 Hour 20 minutes

Material: Paper, pen/pencil and 5 sets of 'Broken Squares'

Activity 1: Game: Knotty Problem

Instructions for Instructors

1. Ask the adolescent girls to stand together.
2. Ask for a volunteer from the group and take her out of the room.
3. Ask the group (in the classroom) to stand in a single file and hold hands.
4. Instruct them now to form a knot by holding hands, and to make it as complicated as possible. Ask them not to talk while making the knot.
5. Ask the volunteer to come in and try to untangle this knot within 2 minutes. To do so, she can give only verbal instructions to the people making the knot. Also she has to keep her hands crossed behind.
6. At the end of 2 minutes, ask her to join the larger group.
7. Ask this group to make another knot and this time open it without any outside help.

Note: It will be seen that the 'outsider' has a tougher time opening the knot (or does not succeed) because she is not perceived to be a part of the group that made the knot.

Activity 2: Self Audit

Instructions for Instructors

- Ask the adolescent girls to think of a few conflicts in their personal lives (big or small) and reflect on how they have typically responded to or dealt with them.
- Ask them to write down their reflections on a piece of paper as they will need to refer to them while discussion.



Activity 3 Game: Jigsaw Puzzle

Instructions for Instructors

- Take five old greeting cards (for a group of 20 – 24 adolescent girls). Cut each card into 12 pieces to make a jigsaw puzzle and keep the pieces in an envelope. You would have 5 envelopes. Take out 5 pieces of cutout from each of the envelopes and mix them in other envelopes. Now, you have 5 sets of jigsaw puzzles but they are not complete as some of the pieces are in other envelopes.
- Divide the adolescent girls into 5 groups. Give each group 1 jigsaw puzzle. Give the following instructions to the adolescent girls. “Open up the envelopes and complete the picture as fast as you can. The group that will complete first will be the winner”. Do not give any other cue or instruction.
- The sub group will start working on their jigsaw puzzle but will soon find they are not complete. There will be some amount of confusion in the groups and members may ask many questions such as ‘This is not complete’, ‘Some pieces are missing’, I can see one of my piece with the other group. Let the confusion prevail for a while. The facilitator should not respond to any of the queries but keep a straight face and repeat the instructions ‘Complete the puzzle and the group that will finish first will be the winner’.
- The group on its own will evolve means to resolve the confusion. You need to sensitively observe the process and interactions to bring out if so required during the discussion.
- Once all the groups complete the puzzle, declare the winners. Ask everyone to give them a big hand and carry forward this activity by processing the experiences of the group members.



Questions for Discussion

1. Ask the adolescent girls of each group how the experience of playing the game was?
2. Ask the observers to share what they observed in the group activity with regard to adolescent girls. Encourage the observers to share objectively.
3. Ask the group that finished first, what facilitated it.
4. Ask the group that completed second and third, what went wrong.
5. Check for the dominant feelings and behaviours in each group and the reasons behind these. Write these feelings and behaviours on the board and group them based on the 5 conflict handling modes

Note: Do not label the behaviours yet. The various styles of conflict handling will emerge from the group’s responses.

Linking Learning with Life

Ask the adolescent girls to reflect on their own roles in real life and correlate the roles with their orientation towards conflict handling. What could they do differently in the future? Why has



their conflict-handling mode worked or not worked? What could she do differently in the future?

Notes for the Facilitator

Tricky situations that could be encountered	Tips to counter the same
The group is not articulate	Ask pointed questions to the direction you want the group to take.
The observer may not be as neutral as she is supposed to be and may get involved in the group's activities.	Clearly give instructions to the observers and emphasise the importance of being the observers.
The issue of sacrifice can come up when the group shares. Do we look at it as an enhancer of teamwork.	Be clear that sacrifice always entails one party becoming the 'martyr'; there is an element of giving with obligations, which does not work in the long run.
Hoarding behaviour might come up in the discussion. It is a difficult situation if the girls consider it as an asset.	Point out that hoarding is very individualistic; emphasise the importance of the involvement of individuals within the team; reason how much of the team's time and heads were used, and that 5 heads are always greater than 1.
There may be confusion about 'communication'. The team may raise the issue that there was not adequate communication, which impacted their group's performance negatively.	Agree that communication was definitely restricted in this game and that it was a part of the construct. Then reason that in real life situations too, we face various constraints.
No team is able to make the square.	Give them more hints and time.
Everyone breaks rules, and even then they win.	Ensure strict following of rules. Appoint observers as rule keepers as well. Even then, if a team cheats and wins, then observe that this happens in real life too. However, these teams eventually get under scrutiny and may even get disqualified for cheating. Also that this team does not acquire the 'skills' for actually winning, and eventually loses in the long run.

Adapted and compiled from 'Walk With Me' – A Guide for Inspiring Citizenship Action PRAVAH, New Delhi 1993; Advancing Women's Leadership – Training of Trainers Guide – CEDPA, Washington DC 2003



HOME MANAGEMENT

SESSION	Home Management
OBJECTIVE	To provide information on proper techniques to run a household effectively
CONTENT	<ul style="list-style-type: none"> • Income • Budgeting • Savings and Investments • Time Management
DURATION	1 Hour
RESOURCE PERSON	Master Trainers/MNGOs/FNGOs
TRAINING METHOD	Presentation, Case study and Discussion
LEARNING OUTCOME	The adolescent girls will be able to understand the concept of home management particularly financial management





Home Management

- Home management is a process of preserving, protecting, improving and maintaining the home.
- Although most of us think of home management as maintenance, but it is a process of making the most of our home.
- Adolescent girls should know about managing their income, time and day to day activities.

Instructions for Trainers

Trainers may initiate the session by asking adolescents what they understand by income. Write their answer on the board and discuss. To substantiate their thinking the adolescent girls may be given a case study to work on.

What is income?

- Income is the earning through an employment or an enterprise/business of a person within a specified time frame, which is generally expressed in monetary terms
- Income is the sum of all the wages, salaries, profits, interest payments, rent and other forms of earnings received in a given period of time

Case Study - 1

Ram is a security guard. He gets a salary of Rs. 5,000 per month and lives in a rented house. Shalu, Ram's wife, looks after household jobs. In her free time, she maintains a kitchen garden. Two years ago they purchased some agricultural land in the village from their savings for which they get Rs. 25,000 annually.

Now ask from the participants

- What is Ram's income?
- What are the sources of income of the family?
- Why we need to supplement income?
- What did Ram and Shalu do to supplement their income?

Ask from participants, what are the benefits of supplementing income. After discussion display flip chart 1.

Flip chart 1

Advantages of Supplementary Income

- Achievement of family goals
- Overcome inflation
- Secure Future
- Catering to large family



Now ask the participants to discuss the other ways to supplement income. Display flip chart 2.

Flip chart 2

<p>Ways of supplementing family income</p> <ul style="list-style-type: none"> • Adopting income-generating activities • Part time jobs • Judicious investment • Savings
--

Budgeting

Budgeting is generally planning of all expenses and revenues. It is a plan for expenditure, spending and saving.

Types of Household Records

There are three types of household records:

- Daily accounts
- Weekly and monthly accounts
- Annual accounts

Advantages of Keeping Record

- Keeps a check on spending behaviour
- Helps in reduction of wasteful expenditure
- Helps in achievement of family goals
- It determines the amount of money that can be spent on various commodities

These accounts can be simply made in any register or notebook. The sample is given below:

Sample of Daily Accounts

Date	Item Purchased	Quantity	Amount spent



Weekly and Monthly Accounts

	Mon	Tue	Wed	Thur	Fri	Sat	Sun	Total
1 st Week								
2 nd Week								
3 rd Week								
4 th Week								
Total								

Annual Accounts

Month	Income	Expenditure	Balance/Savings
Jan			
Feb			
March			
April			
May			
June			
July			
Aug			
Sept			
Oct			
Nov			
Dec			
Total			
Total Savings			

Class Exercise***Instructions for Trainers***

Distribute copies of the sample account – daily, weekly, monthly and annual and ask participants to fill them up based on the information of their own home and discuss.



Savings and Investments

Instructions for Trainers

Ask the participants what do they understand by savings and list down few advantages of savings expressed by adolescent girls and also ask them what would they do to increase their saving.

What are Savings?

Saving is the simple process of putting aside a part of your earnings usually in the form of cash in hand or putting it in a savings account or post office or in any other form which is safe such as governmental bonds.

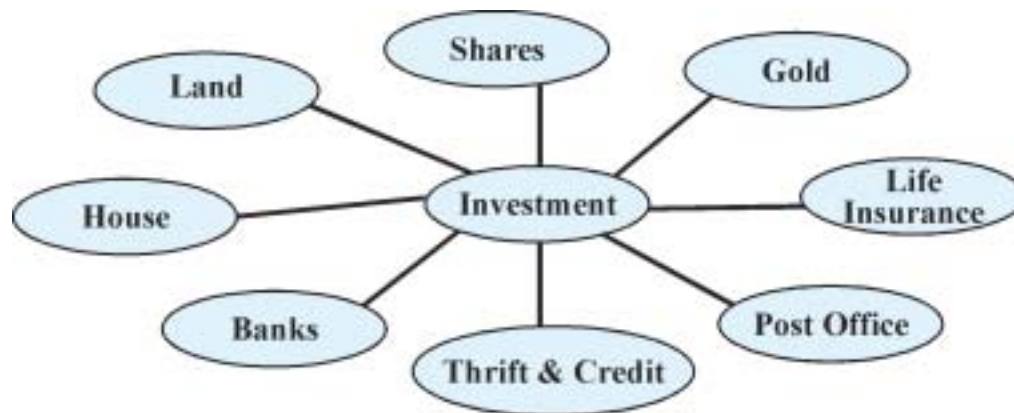
Advantages of Savings

- Helps in fulfilling needs of the family like preparing for child's education
- Meeting emergencies
- Secured old age
- Maintain good standard of living

What is Investment?

Investment is the sum of money that one has paid to an agency for safe keeping and earning interest e.g. bank. Investment can be made in the form of material goods i.e. purchasing land, tractor or even gold. Investments can be made for security reason as well.

Methods of Investments



Investment institutions like bank and post office have been dealt in chapter on Accessing Public Service.



Time Management



Time management is a simple and practical technique of planning and structuring a day. It enables to plan and then devote time to all those things which are necessary and also to those which are of your interest.

Steps in Time Management

- Prioritise
- Plan
- Follow the plan
- Review its effectiveness
- Make necessary changes, if required

Factors to be included in a Time Plan

- Priority
- Relaxation
- Exercise
- Balanced tasks

Summarise the session with main points and invite further comments or suggestions.

Adapted and compiled from:

- Handbook for Teachers and Parents, Department of Education & SCERT Government of NCT of Delhi
- <http://www.themillionairesecrets.net/images/2008/12/time-management.jpg>
- Text book of Home Science, Arya Book Depot.



सर्वजनिक सेवाएं प्राप्त
करणे संबंधी दिशा निर्देश

GUIDANCE ON ACCESSING PUBLIC SERVICES

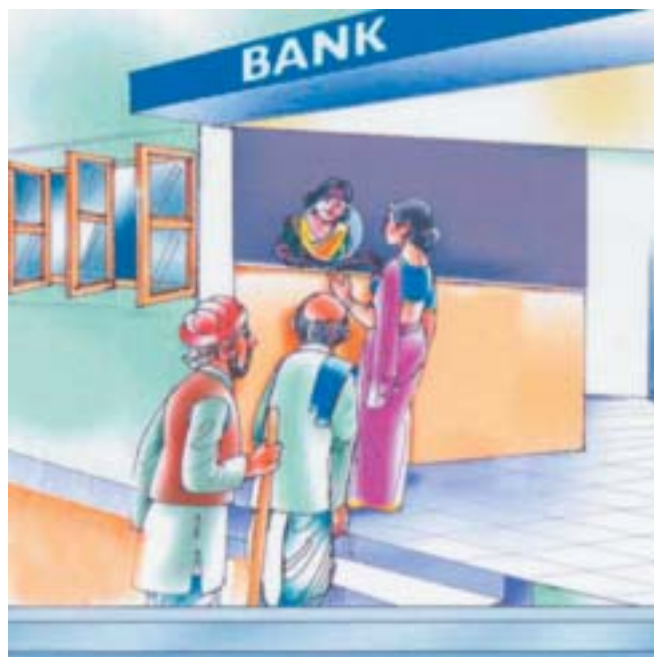
SESSION	Guidance on Accessing Public Services
OBJECTIVE	The objective of the session is to provide appropriate guidance on public services available and how to access them
CONTENT	<ul style="list-style-type: none"> • Opening an account in the bank • Opening an account in the Post Office • Maintenance of banks/Post Office account • Using a Post Office • Filing an FIR at the Police station
DURATION	1 Hour and 30 Minutes
RESOURCE PERSON	Field Trainer/MNGOs/FNGOs
TRAINING METHODS	Presentations, demonstrations and discussion
LEARNING OUTCOME	Adolescent girls will be able to avail public facilities in the community





Session- Opening and Managing Bank Accounts

Objectives	At the end of the session trainees will:
	<ul style="list-style-type: none"> • Know the importance of opening a bank account
	<ul style="list-style-type: none"> • Know about the steps and documentation involved in opening a bank account
Contents	<ul style="list-style-type: none"> • Introduction about various types of bank accounts
	<ul style="list-style-type: none"> • Documents required for opening a bank account
	<ul style="list-style-type: none"> • The procedure for opening and managing a bank account
Training Methods	<ul style="list-style-type: none"> • Lecture-cum-discussion
	<ul style="list-style-type: none"> • Demonstration
Class Activity	Sample of account opening forms will be given to each participant, and they will be asked to fill in the complete form and give their forms to the trainer. Then the trainer will check those forms for any mistake. At the end, queries will be taken up by the trainer.
Training Aids/materials	Sample of bank account opening forms, flash cards, etc.



Salient Points

- Bank account is not only a safe way of keeping your money but it also provides easy access to money
- These days carrying a lot of cash is not advisable. Therefore it is best to keep one's money in the bank, which will provide access to services like debit cards and ATMs, so that one may carry one's money in the form of a debit card all the time, without fear of losing the money.
- Various types of bank accounts are available. One needs to collect information about these various kinds of accounts that are available, and then decide which one is best suited to one's needs.
- To open bank account, one should do a brief survey of all the banks available and the schemes that they are offering. While choosing a bank, one should keep in mind the feasibility of commuting to the bank from one's home or place of work.
- After choosing the bank, one should gather information about various types of services provided by it and choose the account / services, keeping needs in mind.
- In order to open an account, one has to provide some basic information to the bank, like name, date of birth, address and some identification details.
- The account holder has to agree to abide by certain rules and accept responsibility for certain actions. While opening a bank account, one forms a relationship based on a very sensitive subject- money. Therefore one should know very well what one is getting into.
- After the account is open, one can easily deposit or withdraw money with ease. With an ATM, it becomes even simpler.
- Opening and managing a bank account is really easy as long as one knows what to expect.



Session- Opening and operating an Account in the Post Office

Duration	40 minutes
Objectives	At the end of the session trainees will:
	<ul style="list-style-type: none"> • Know the importance of opening an account in the Post Office.
	<ul style="list-style-type: none"> • Know about various schemes available in the Post Office for saving money.
Contents	<ul style="list-style-type: none"> • Introduction about various types of Post Office accounts
	<ul style="list-style-type: none"> • Documents required for opening an account in the Post Office
	<ul style="list-style-type: none"> • The procedure for opening and managing one's account in the Post Office
Training Method	Lecture-cum-discussion
Class Activity	Sample of account opening forms will be given to each participant, and they will be asked to fill in the complete form and give it to the trainer. The trainer will check the forms for mistakes. At the end, queries will be taken up by the trainer.
Training Aids/material	Sample of account opening forms, flash cards, etc.

Salient Points

Post Offices have the largest service network in India. Postal personnel provide services even in remote regions of the country. There are places where one may see an old postman riding a bicycle, distributing letters, awaited eagerly by the kith and kin of the people who are far from their families and friends. The reach of Post Offices is greater than that of banks and this is the reason why the Government has introduced monthly income accounts and savings accounts through Post Offices. These take the benefit of having a savings account right to the people who need them the most. If one is living in a remote corner, sometimes it is better to have a savings account in a Post Office rather than a bank, since the Post Office and postman are nearerby.

There are two types of Post Office accounts –

- (1) Post Office Monthly Income Account
- (2) Post Office Savings Account



• Post Office Monthly Income Account

This is meant for those who want to invest a lump sum and earn interest on a monthly basis for their livelihood. The scheme is, therefore, a boon for retired or handicapped persons. They can just deposit an amount and rest assured of a regular flow of money. They would get an amount every month and can live on it. A fair number of people opt for this scheme on reaching retirement age. They put their savings in a Post Office under this head and enjoy their life with family and friends, while the Post Office, takes care of their monthly income with their deposited money.

How to Invest

One can invest in any Head Post Office/Sub- Post Office by cash, demand draft or local cheque. One will need to fill up a prescribed form and submit it with the amount. It would entitle one to withdraw an amount every month.

Who can Invest

- * An adult
- * 2 - 3 adults jointly
- * A minor of minimum ten years
- * A guardian on behalf of a minor or a person of unstable mind

Maturity and Rate of Interest

- * It is a six year account with 8 % interest per annum payable monthly.
- * Premature encashment facility is available after one year.
- * There is a facility of premature closure of the account after 1 year upto 3 years @2 % discount.
- * There is deduction of 1 % if account is closed prematurely at any time after 3 years.
- * Facility of reinvestment on maturity of account.
- * Maturity proceeds that have not been withdrawn are eligible for earning savings interest rate for a maximum period of two years.
- * Minor's investment is not clubbed with the guardian.
- * Account is transferable to any Post Office in India, free of cost.
- * Nomination facility is available.
- * Monthly interest can be credited to the savings bank account in the same Post Office.
- * 5 % maturity bonus is also given.

Amount of Investment

Minimum invested amount has to be Rs. 1500. Maximum amount can be Rs. 4.5 lakh for a single account and Rs. 9 lakh for a joint account. Minors have a separate limit of investment of Rs. 3 lakh and the same is not clubbed with the limit of guardian.



Tax benefits

- * Deposits are not eligible for rebate under section 80 c.
- * Deposits are exempt from wealth tax.
- * No Tax Deduction at Source (TDS) is applicable.

• Post Office Saving Account

Post Office saving account is similar to a person's savings account in a bank. It is a safe instrument to park one's funds, which one might need to liquidate fully or partially at a very short notice. Post Office savings accounts are more suited for people living in rural and semi rural areas where the reach of the banks is limited.

How to open Account

The account can be opened at any Post Office with a minimum balance of Rs. 20. Maximum of Rs. 1 lakh for single account holder and Rs. 2 lakh for joint account holders can be deposited. There is no lock-in or maturity period. One can just go to a Post Office, meet the clerk, complete the formalities and open the account.

Who can open Account

Single account can be opened by an adult, a minor with minimum age of 10 years, or a guardian on behalf of a minor or person of unsound mind. Joint account can be opened by two or three adults.

Withdrawal of money

The amount can be withdrawn anytime, subject to keeping a minimum balance of Rs. 50 in simple account and Rs. 500 for cheque facility accounts.

Interest Paid

Rate of interest is decided by the Reserve Bank of India from time to time. Interest is calculated on monthly balances and credited annually. It is typically around between four percent.

The account also has other facilities like nomination, tax benefits, etc.



Session- Lodging an First Information Report or FIR

Objective	By the end of the session, the participants will be
	<ul style="list-style-type: none"> • Aware of the importance of FIR
	<ul style="list-style-type: none"> • If required, be able to file an FIR
Training Content	<ul style="list-style-type: none"> • Be aware that if the FIR is not registered, what can be done against it.
	<ul style="list-style-type: none"> • Introduction about FIR and its importance.
	<ul style="list-style-type: none"> • Details like who can lodge an FIR, procedure of filing an FIR
Training Method:	<ul style="list-style-type: none"> • Things to keep in mind while filing an FIR.
	Lecture cum group discussion and activity
Class Activity	The whole group will be divided in pairs and one person will act as Police Officer, who will file the FIR and one person will act as the person who files the FIR.
	One by one all the pairs will be given different situations by the trainer and they will file the FIR.
	By using different situations, participants will be able to know the difference between cognizable and non-cognizable offences, situations in which the Police Officer may not investigate a complaint even after filing an FIR, the procedure for filing an FIR, and what all should be mentioned in the FIR.

Salient Points

- FIR is a report that reaches the Police first in point of time and that is why it is called so. It is a written document prepared by the Police when they receive information about the commission of a cognizable offence (a cognizable offence is one wherein the Police may arrest a person without warrant. They are authorized to start investigation into a cognizable case on their own and do not require orders from the court to do so. On the other hand, in a non- cognizable offence, the Police has no authority to arrest without warrant. The Police cannot investigate such an offence without the Court's permission).
- It is generally lodged with the Police by the victim of a cognizable offence or by someone on his/her behalf. It can be reported either orally or in writing to the police. Even a telephonic message can be treated as FIR.
- FIR is an important document as it sets the process of criminal justice in motion. It is only after the FIR is registered in the Police station that the Police takes up investigation of the case.



- Anyone who knows about the commission of a cognizable offence can file an FIR. It is not necessary that only the victim of the crime should file an FIR. A Police Officer who comes to know about a cognizable offence can file an FIR himself/herself.
- One can file an FIR if:
 - * One is the person against whom the offence has been committed.
 - * One has seen the offence being committed.
- The procedure of filing an FIR as prescribed in Section 154, of the criminal procedure code, 1973, is as follows:
 - * When information about the commission of a cognizable offence is given orally, the Police must write it down.
 - * It is your right as a person giving information or making a complaint to demand that the information recorded by the Police is read over to you.
 - * Once the information has been recorded by the police, it must be signed by the person giving the information.
 - * One should sign the report only after verifying that the information recorded by the Police is as per the details given.
 - * People who cannot read or write must put their left thumb impression on the document after being satisfied that it is a correct record.
 - * Always ask for a copy of the FIR, if the Police does not give it. It is one's right to get it free of cost.
- It is given in section 157, criminal procedure code, 1973, that the Police may not investigate a complaint even if an FIR is filed if;
 - * They find the case is not serious in nature.
 - * They feel that there is not enough ground to investigate.

However, the Police must record the reasons for not conducting an investigation and in the latter case must inform the person filing the FIR.

- Things to be mentioned in FIR;
 - * Name and address of the person filing the FIR.
 - * Date, time and location of the incident being reported;
 - * True facts of the incident as they occurred;
 - * Names and descriptions of the persons involved in the incidents;
 - * Witnesses, if any.
- One should never file a false complaint or give wrong information to the police; one can be prosecuted under law for giving wrong information or for misleading the police.
- Never make vague or unclear statements and never exaggerate or distort facts.
- If one's FIR is not registered, one can meet the Superintendent of Police or other higher officers like Deputy Inspector General of Police and Inspector General of Police and bring one's complaint to their notice, one can also send the complaint in writing and by post to the Superintendent of Police concerned.

In case the FIR is not registered a private complaint before the court having jurisdiction may also be complained, or the complaint may be made to the Human Rights Commission at the State or National level.



AWARENESS ABOUT LEGAL RIGHTS

SESSION	Awareness About Legal Rights
OBJECTIVE	To make adolescent girls aware about their rights and different laws that are being unplanned for their protection
AGE GROUP	14 to 18 years
CONTENT	<ul style="list-style-type: none"> • Cultural and educational rights • Right to Equality • Right to Freedom • Right to Information • Right to Education • Right to Vote • Prohibition of Child Marriage Act • Child Labour Act • Immoral Traffic (Prevention) Act • Dowry Prohibition Act • Domestic Violence Act • Preconception and Prenatal Diagnostic Techniques Act (PCPNDT)
DURATION	50 minutes
RESOURCE PERSON	Master Trainers/MNGOs/ Field Trainer
TRAINING METHOD	Presentation and discussion
LEARNING OUTCOME	After the session, adolescent girls will be enabled to demand their rights and would be able to ask for protection under law



Cultural and Educational Rights

- Our Constitution gives every citizen the fundamental right to conserve language, script and culture.
- Our Constitution gives every citizen the fundamental right to get admission to any government or government-aided educational institution without discrimination on grounds of religion, race, caste or language.
- Our Constitution gives religious and linguistic minorities the fundamental right to establish and administer educational institutions of their choice.
- Our Constitution gives the fundamental right to free and compulsory elementary education for all children in the age-group of 6 to 14 years.

Right to Equality

- Our Constitution gives every citizen the fundamental right to equality before law and equal protection of laws. This means that all citizens are equal in law, irrespective of religion, race, caste, sex or place of birth.
- Our Constitution gives all citizens the fundamental right to equal opportunity in employment under the government.

Right to Freedom

- Our Constitution gives the following fundamental rights to freedom:
 - Right to freedom of speech and expression
 - Right to assemble peacefully and without arms
 - Right to form associations and unions
 - Right to move freely throughout India
 - Right to practice any profession or occupation or to carry on any trade and business

Right to Life and Personal Liberty

- Our Constitution gives every citizen the fundamental right to protection against arrest and detention. This means that arrest and detention can only be in accordance with the procedure laid down by law.

To enforce a fundamental right you can file a petition in the Supreme Court or in the High Court.

Right to Vote

- Every citizen of India who is 18 years or more of age can vote in elections.
- In case your name is not registered as a voter, or you have shifted to a new place, you can apply to the Electoral Registration Officer to get your name registered.



Right to Information

The Right to Information Act, 2005 gives all citizens the right to access information held by any government, municipal body, panchayat or government-aided body by paying a fee of Rs. 10/- per request and giving an application addressed to the Public Information Officer of the office concerned. No fee is required to be paid by persons who lives below the poverty line and furnish certificate for the same.

Right to Education

- Is recognised as a human right and is understood to establish the right to free, compulsory primary education for all children, an obligation to develop secondary education accessible to all children, as well as equitable access to higher education, and a responsibility to provide basic education for individuals who have not completed primary education.
- In addition to this the right to education encompasses the obligation to eliminate discrimination at all levels of the educational system, to set minimum standards and to improve quality.
- The right to education may also include the right to freedom of education.



Prohibition of Child Marriage Act

- A child marriage is a marriage where either the girl is below 18 years of age or the boy is below 21 years of age.
- Any man who is older than 21 years of age and who marries a girl who is less than 18 years old is punishable under law with imprisonment up to two years and/or fine up to Rupees one lakh. For this, an FIR can be lodged with the police against the man. If the parents or guardians of the girl have helped organise or permitted such a marriage, or have failed to prevent it, and if any priest or other person has helped solemnise such a marriage, then they are also punishable. Any other person taking part in such a marriage can also be punished.
- A girl who at the time of marriage is younger than the ages mentioned above and, if she wishes can ask the family court (or district court) to declare her marriage a nullity, which means that her marriage never took place. If she is still under 18, she could also get this done through her parents or guardians. She can get this done till the age of 20. In case she does so, she will still have the right to get maintenance for herself and also for any children from the man to whom she had been married or from his parents if the man is under 18 years of age. Any children that may have been born will be treated as legitimate children from the marriage.



- Any person can make a complaint to Judicial Magistrate/District Magistrate of the First Class (or a Metropolitan Magistrate, in case of metropolises) for stopping a child marriage from taking place. State Governments have appointed Child Marriage Prevention Officers for this purpose and they can also be approached.

Child Labour Act

- Employment of a child below 14 years of age is banned in 13 occupations and 57 processes and any person employing a child in the banned occupations/processes is punishable by law with imprisonment for between three months to a year and/or with fine between Rs 10,000 to Rs 20,000.
- The conditions of work of children in employments that are not banned are regulated under the law to protect them. A child cannot work for more than six hours in a day, including the time spent in waiting for work, and must be given at least one hour of rest after three hours of work. No child can work between 7 O' clock in the evening and 8 O'clock in morning. Every child employed is allowed one holiday per week. Failure to meet with these conditions is punishable with up to one-month's imprisonment and/or fine up to Rs. 10,000.
- Action can be taken on the basis of a complaint filed with the court of Judicial Magistrate First Class (or, the Metropolitan Magistrate, in case of metropolises) by any person, or by the police, or by a labour inspector.
- Children should not be employed in such hazardous occupations which can endanger the physical, mental and social health of the child.

Immoral Traffic (Prevention) Act

- Under this law, procuring, inducting, taking, recruiting, transporting, transferring, harbouring or receiving a person for prostitution is punishable.
- Any person can inform the District Magistrate (also called District Collector or Deputy Commissioner), a Sub-Divisional Magistrate (also called Sub-Divisional Officer) or a Judicial Magistrate of the First Class (a Metropolitan Magistrate in case of metropolises) about person who is being made to carry on prostitution in a brothel. The magistrate has the power to direct a police officer to enter such brothel, and to remove such person and produce her before him, after which the magistrate can give orders for her safe custody.

Domestic Violence Act

This law is for protecting and giving relief to women who are victims of domestic violence. Any such woman can file a complaint in the court of a Judicial Magistrate of the First Class (or a Metropolitan Magistrate, in case of metropolises). The law offers protection against—

- (a) threat of harm or actual harm, injury or danger to her health, safety, life, limb, mental or physical well-being, including protection against physical, sexual verbal, emotional or economic abuse, and
- (b) threat of actual harassment, harm, injury or danger for forcing her or her relatives to meet demand for dowry or other property.

The above gives her protection against humiliation, name-calling and insults or ridicule, especially for not giving birth to a child or a male child. It also includes protection against threats to cause



pain to any person in whom she is interested. It further includes protection against taking away or giving away or preventing use of necessary resources, including household necessities, stree-dhan, property, payment of house rent and maintenance.

The court can give orders for—

- (a) protecting the complainant from the person complained against,
- (b) ensuring her continued stay at home or other similar place as residence,
- (c) payment to her of money for the maintenance of herself and her children, medical expenses, loss of income, compensation for property lost or damaged, etc., and
- (d) giving her temporary custody of children.

Besides married women, women who have been in a relationship in the nature of marriage can seek protection. Married women can also seek protection against any relative of the husband.

Dowry Prohibition Act

- Giving and taking dowry is punishable under law.
- Asking for or helping giving/taking dowry is also punishable under law.
- Punishment can be up to five years of jail and / or fine up to Rs. 15,000/-.
- A demand for dowry can be reported to the police even if marriage has not taken place.

Preconception and Prenatal Diagnostic Techniques Act (PC-PNDT)

- Determining the sex of the unborn child is punishable under law with imprisonment up to three years and / or fine up to Rs. 10,000.
- Any member of the family, including the father, the mother and the in-laws, can be punished if they seek to break this law.
- Even a doctor/assistant who leaks the sex determination report can be punished.
- For enforcing the law, the Health Department of each State has appointed an “Appropriate Authority”, which can file complaints with courts against persons who break this law. Any other person can also file a complaint with the court of Judicial Magistrate of the First Class (or a Metropolitan Magistrate, in case of metropolises). However, before doing so, he must give a written notice to the “Appropriate Authority” of his intention to file such a complaint, at least 30 days before filing the complaint with the court.

Sub-section 4 in Section 46 of the Code of Criminal Procedure, 1973:

“Save in exceptional circumstances, no women shall be arrested after sunset and before sunrise, and where such exceptional circumstances exist, the woman police officer shall, by making a written report, obtain the prior permission of the judicial magistrate of the first class within whose local jurisdiction the offence is committed or the arrest is to be made.”

Law on arrest, under the Code of Criminal Procedure:

A woman cannot ordinarily be arrested by the police between sunset and sunrise. If the police wants to arrest a woman during this period, it has to first obtain prior permission of Judicial Magistrate of the First Class, and the arrest can only be made by a woman police officer.



Module for Trainers

Module for Trainers



DEVELOPMENT OF MODULES

- ✍ Modules have been developed by GOI & NIPCCD
- ✍ Existing relevant modules being used by the states under different programmes have been consulted

The module is divided into four sections:

- ❖ Health
- ❖ Nutrition
- ❖ Adolescent Reproductive and Sexual Health (ARSH)
- ❖ Life Skills



GROUP I: HEALTH

The topics covered under the module include:

- ✍ Personal Hygiene and Sanitation
- ✍ Physical Exercise
- ✍ First Aid
- ✍ Safe Drinking Water
- ✍ Diarrhoea Management



Personal hygiene and sanitation

- ✍ More than half of all the illnesses and death among children and adolescents are caused by germs
- ✍ They enter the body through contaminated food, water and dirty hands
- ✍ Germs can be spread through flies, cockroaches and rats which thrive in refuse such as food scraps and peelings from fruits and vegetables
- ✍ Keeping the household and nearby areas clean and free from faeces, refuse and waste water can help prevent diseases



Contd..

- ✍ Always use sanitary toilets for defecation
- ✍ Many illnesses, especially diarrhoea can be prevented by good hygienic practices
- ✍ It is important to wash hands with soap and water after defecation
- ✍ Hands should always be washed before preparing, serving and eating food
- ✍ Adolescent girls should take bath at least once a day and wear clean clothes
- ✍ Brush your teeth regularly and rinse your mouth with water after each meal

**Contd..**

- ✍ The hair should be kept clean to avoid infestation of head louse
- ✍ Adolescents should cut their nails regularly and keep them clean
- ✍ A clean cloth or sanitary pads should be used during menstruation (the period of their monthly cycle)
- ✍ Don't walk barefoot; always use a foot wear



Environmental Sanitation

- ✍ Latrines and toilets should be cleaned regularly
- ✍ Household waste water can be disposed safely by making a soak pit or a channel to kitchen garden or to the field
- ✍ Household garbage should be collected in a garbage bin and disposed into a compost pit or in to community bin if available
- ✍ Prevent stagnation of water around houses and hand pumps to prevent breeding of mosquitoes
- ✍ Chemicals such as pesticides, fertilizers/ insecticides and herbicides can be very dangerous if they get into the water supply or food so they should not be used around household or near a water source



Physical exercise

- ✍ Physical exercise is any bodily activity that enhances or maintains physical fitness and overall health
- ✍ It helps in reducing day-to-day stress
- ✍ Frequent and regular physical exercise helps prevent the life style diseases such as heart disorder, diabetes and obesity
- ✍ Adolescent girls can practice games with a physical activity component



Contd..


- ✍ The games help in team building and co-operation
- ✍ Simple physical exercises like walking and cycling should be encouraged
- ✍ **Yoga** is a form of exercise which is highly therapeutic; the practice of yoga can help in reducing both physical and mental problems
- ✍ **Meditation** is a mental discipline by which the practitioner attempts to get beyond the reflexive, “thinking” mind into a deeper state of relaxation or awareness

**First Aid**


- ✍ First Aid is providing initial care for an illness or injury
- ✍ It is usually performed by a non-expert person to a sick or injured until medical help can be given
- ✍ Burns, electric shocks, road accidents, drowning and snake bite are some of the common situations in which First Aid can be provided
- ✍ Standard First Aid kits should be provided in all Anganwadi centres throughout the country. They should have all the necessary consumables and tools




BURNS

Do's	Don'ts
<ul style="list-style-type: none"> ✍ Use plenty of cold water to cool the burned area ✍ The person should be taken to the nearest referral / health centre ✍ If the person's clothing catches fire, quickly wrap the person in a blanket to stop the fire 	<ul style="list-style-type: none"> ✍ Remove any thing that is sticking to the burnt area ✍ Do not immerse large serious burns in cold water as this could cause shock 


ELECTRIC SHOCK

<ul style="list-style-type: none"> ✍ Electrical appliances, electric wires, plug points, etc. should be used carefully ✍ Immediately switch off the main switch for electricity supply before touching the person ✍ If the person is restless or unconscious, immediately take him/her to the nearest doctor/health centre 	<ul style="list-style-type: none"> ✍ Do not touch the person directly while rescuing the person of electric shock 
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ROAD ACCIDENTS

<ul style="list-style-type: none"> ✍ Walk on the side of the road facing traffic ✍ Use pedestrian crossing for crossing the road ✍ In case of bruises/sprains immerse the injured part in cold water 	<ul style="list-style-type: none"> ✍ Do not play near the road ✍ If the injury is on head or back bone area do not move head and neck 
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POISONING

<ul style="list-style-type: none"> ✍ If the poison is on the person's skin or clothes, remove the clothing and pour large amounts of water ✍ Wash the skin thoroughly several times with soap and water ✍ Take the person immediately to a health centre or hospital along with the sample of poison and/or its container 	<ul style="list-style-type: none"> ✍ In case a person had swallow poison, do not try to make the person vomit as it may result in greater illness 
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SNAKE BITE

- ✍ Tie a cloth tightly a little above the snake bite and give a cut on the bitten area to squeeze out blood to remove the poison
- ✍ Take the person immediately to a health centre or hospital

- ✍ Do not let the person sleep
- ✍ Do not consult snake charmers, ojhas & traditional healers



BRUISES, BROKEN BONES

- ✍ Limit movement of head and back and avoid twisting of spine
- ✍ An abnormal posture of arms or legs may be due to a fracture; immobilise the limb with the help of a sling or a wooden log tied to the limb

- ✍ Do not move the injured area, instead provide support and get medical help immediately



CUTS AND WOUNDS

- ✍ For a minor cut, wash the wound with clean (boiled & cooled) water, dry and then cover with a clean cloth or bandage
- ✍ In case of heavy bleeding, raise the injured area and press firmly until bleeding stops
- ✍ If medically advised, take the person to health centre to get a Tetanus Toxoid injection

- ✍ Do not put any plant or animal material on the wound, as this could cause infection



CHOKING

- ✍ If an person has put some small object in the mouth and is coughing, do not interfere; let the person try to cough up the object
- ✍ If the person is unable to release the object immediately take him/her to the nearest health centre

- ✍ Avoid eating food which is hard to cut such as small bones etc



DROWNING

- ✍ Clean the face and mouth with a cloth available if it is blocked with mud or froth
- ✍ Make the person lie down and press the stomach. Then turn the person and press back of stomach to take out water from the body
- ✍ If the person is having difficulty in breathing, make the person lie flat on the back and tilt his/her head back slightly; hold the person's nostrils close and blow into mouth; blow hard enough to make the person's chest rise; count up to three and blow again and continue till the person begins breathing
- ✍ After giving First Aid, immediately take the person to the nearest health centre



Safe Drinking Water

- ✍ Water is an essential component of our body
- ✍ Contaminated water can be dangerous to our life
- ✍ Water should be free from any kind of pollutants
- ✍ We can easily purify water at home without any expensive equipments
- ✍ Simple methods for purification of water are:
 - ❖ Boiling and filtration
 - ❖ Chlorination



Storage of Water

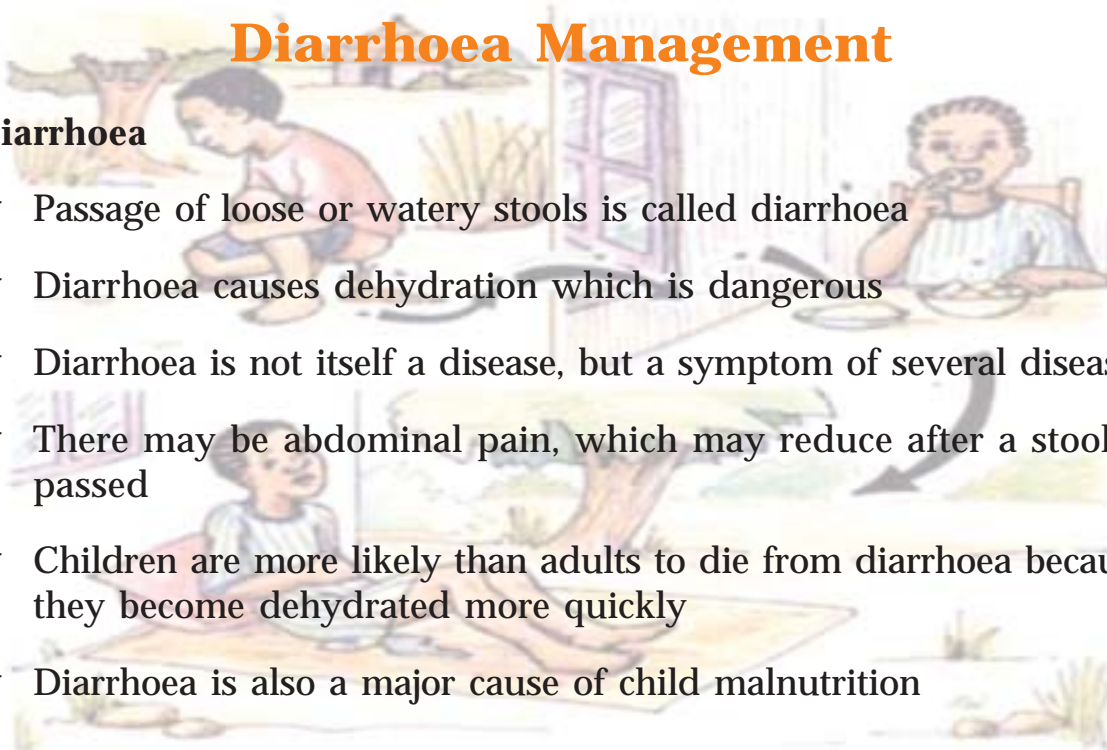
- ✍ Water should be stored in a container with a tight lid
- ✍ If a container with lid is not available, tie a clean muslin cloth on the mouth of the container and cover with a plate
- ✍ Never dip hands in the container, use a ladle to take out water
- ✍ Wash containers daily to avoid contamination
- ✍ Processes like boiling of water and filtration can provide safe drinking water



Diarrhoea Management

Diarrhoea

- ✍ Passage of loose or watery stools is called diarrhoea
- ✍ Diarrhoea causes dehydration which is dangerous
- ✍ Diarrhoea is not itself a disease, but a symptom of several diseases
- ✍ There may be abdominal pain, which may reduce after a stool is passed
- ✍ Children are more likely than adults to die from diarrhoea because they become dehydrated more quickly
- ✍ Diarrhoea is also a major cause of child malnutrition



Causes of Diarrhoea

- ✍ Bacterial/Viral Infections: Several types of bacteria/virus which get into our body through contaminated food or water are the main causes of diarrhoea
- ✍ Unhygienic habits and consumption of stale food may also cause diarrhoea
- ✍ Parasitic infections are also a cause for diarrhoea
- ✍ Food intolerance - Some people are unable to digest specific component of food properly, such as lactose, the sugar found in milk - which ultimately leads to diarrhoea



Home treatment for Diarrhoea

- ✍ Intake of home available fluids
- ✍ Oral Rehydration Solution (ORS)
- ✍ Continued feeding
- ✍ Continued breastfeeding

What is ORS?

ORS (oral rehydration salts) is a special combination of dry salts that is mixed with safe water; it can help replace the fluids lost due to diarrhoea



How is the ORS drink prepared?

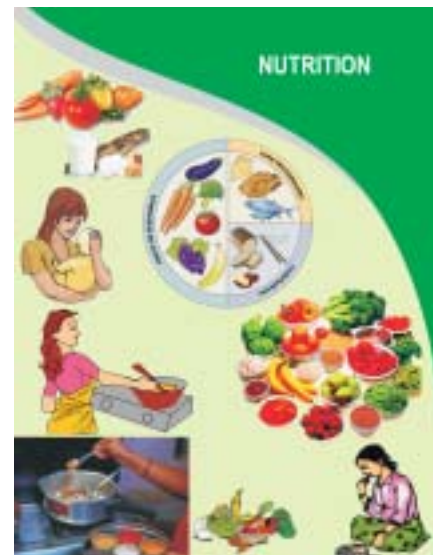
- ✍ Put the contents of the ORS packet in a clean container. Check the packet for directions and add the correct amount of clean water; too little water could make the diarrhoea worse
- ✍ Add water only, do not add ORS to milk, soup, fruit juice or soft drinks; do not add sugar
- ✍ Stir well, and feed it to the child from a clean cup; do not use a bottle



GROUP II: NUTRITION

The topics covered under the module include:

- ✍ Basics of nutrition
- ✍ Healthy cooking and eating habits
- ✍ Nutrition during pregnancy and lactation
- ✍ Breastfeeding
- ✍ Complementary feeding and child care practices



Basics of Nutrition

- ✍ Nutrition is essential for good health
- ✍ Food helps in physical growth, mental development and maintenance of the body at all developmental stages of life.
- ✍ Balanced diets are those which contain different types of food in such quantities and proportions that the daily needs for energy, protein, minerals are met for proper growth, development and maintenance of the body processes.
- ✍ Adolescence is a phase of rapid and continuous physical, mental and sexual growth and development. The quality of food consumed by adolescents during this phase will help them in their adult life too.



Sources and Functions of Essential Nutrients

Nutrients	Source	Functions
<ul style="list-style-type: none"> • Carbohydrates 	<ul style="list-style-type: none"> • Cereals, millets, roots and tubers, such as potatoes, sweet potatoes, yam, tapioca, colocasia (arbi) sugar and jaggery (Gur). 	<ul style="list-style-type: none"> • Supply energy to the body.
<ul style="list-style-type: none"> • Proteins 	<ul style="list-style-type: none"> • Pulses and legumes, milk, cheese, curd, oilseeds and nuts, meat, liver, fish and egg. 	<ul style="list-style-type: none"> • Builds and repair body tissues, muscles and vital fluids like blood.
<ul style="list-style-type: none"> • Fats 	<ul style="list-style-type: none"> • Butter, ghee, vegetable oils and fat, oilseeds, nuts and soya bean. 	<ul style="list-style-type: none"> • Help in formation of substances that help in digestion and fight infection.
<ul style="list-style-type: none"> • Vitamins and Minerals 	<ul style="list-style-type: none"> • Fish liver oil, liver, milk, and milk products (curds, butter, ghee), yellow and red fruits, green leafy and yellow vegetables (carrots, pumpkins) and fortified foods. 	<ul style="list-style-type: none"> • Serve as a concentrated source of energy and provide essential fatty acids. • Helps keeping the body healthy.



Healthy Cooking and Eating Habits

- ✍ Sprouting is the process of soaking, draining and then hanging seeds in a wet cloth until they germinate, or sprout.
- ✍ Consumption of sprouted food helps in preventing constipation and gas formation. They are rich in vitamin C and B complex.
- ✍ Fermentation is done by grinding cereals and pulses, mixing and keeping it at room temperature overnight. It helps in increasing vitamin C and B complex content of food.
- ✍ Food enrichment is a method when we mix two or more type of food items so as to improve nutritive value.



Nutrient Losses During Cooking

- ✍ Vitamins are lost during washing of cut vegetables and cooking.
- ✍ Cooking at high temperature leads to destruction of nutrients.
- ✍ The most easily destroyed nutrients are the water soluble ones e.g. vitamin B complex and C. These are lost by exposure to excess water, air, heat and light.
- ✍ Fat soluble vitamins such as A, D,E and K are more stable.
- ✍ Cooking in acidic media has a protective effect against vitamins.



Useful Cooking Tips

- ✍ Proper cooking methods can reduce the loss of important nutrients.
- ✍ Wash rice in cold water for a minimum number of times.
- ✍ The amount of water used to cook rice and vegetables should be so adjusted that it is absorbed.
- ✍ Cook cereals and pulses together to increase nutrient content.
- ✍ Cooking time should be short.
- ✍ While boiling any vegetable or dal, minimum amount of water should be used.



Nutrition During Pregnancy

- ✍ Eat balanced diet and variety of foods, so that all nutritional needs are fulfilled.
- ✍ Eat small frequent meals four to five times a day.
- ✍ Increase intake of cereals, pulses, milk and milk products and green leafy vegetables.
- ✍ No food should be avoided during pregnancy.
- ✍ Intake of tobacco, alcohol and caffeine should be avoided.
- ✍ Drink plenty of water.
- ✍ Consume iodized salt.
- ✍ Ignore harmful beliefs and food practices during pregnancy.



Nutrition during Lactation

- ✍ A nursing mother should continue to take sufficient amount of nourishing and wholesome food to meet her nutritional requirements to have sufficient milk for her child.
- ✍ A nursing mother needs more proteins (high quality) for milk production. She should have more of whole grain cereals, pulses/dals, milk, curd. Green leafy vegetables and fruits.
- ✍ Iodized salt should be used.
- ✍ If a nursing mother does not consume nutritious diet, her own body stores will be used up for production of milk, thus affecting her health.



Breastfeeding

National Guidelines on Infant and Young Child Feeding

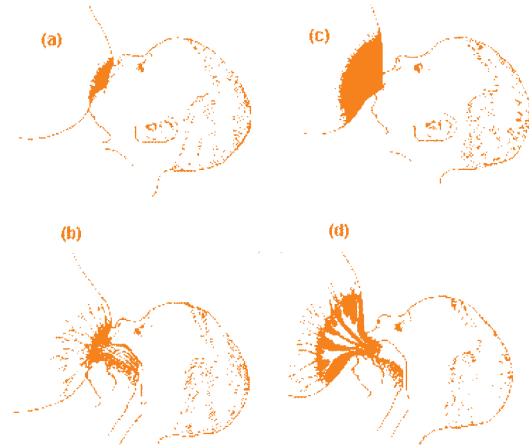
Optimal feeding includes:

- ✍ Early Initiation of breastfeeding preferably within first hour.
- ✍ Exclusive breastfeeding from birth to six months of age.
- ✍ Continued breastfeeding for two years or beyond with adequate, safe and proper additional foods and liquids to meet nutritional needs.



Colostrum and its Importance

- ✍ Colostrum is the first milk for the child.
- ✍ Colostrum is a thick yellow coloured secretion and is rich in proteins and vitamins.
- ✍ This is the source of fats, proteins, sugar, vitamin and minerals for the child.
- ✍ It gives protection from various infections in the new born.



WHO Recommendations for Feeding Young Children

At Birth:

- Initiate breastfeeding as early as possible, preferably within first hour.
- Do not give pre-lacteals such as water, honey or any milk, other than breast milk.
- Do not discard first secretion of breast i.e. colostrum.



Infants from Birth to 6 Months

- ✍ 'Exclusive' breastfeeding until the child is 6 months old. Not to give the child anything other than breast milk, not even water.
- ✍ Breastfeed as frequently as the child wants during day and night, atleast 8 times in 24 hours.
- ✍ When a child begins to fuss, sucks fingers or moves lips, it indicate that he/she is hungry.
- ✍ Ensure that one breast is emptied completely, before shifting to the other.
- ✍ The child does not require water or any other fluids, as breast milk quenches 'thirst' as well as 'hunger'.

6 Months to 1 Year

General

- ✍ Continue breastfeeding as often and as long as the child wants.
- ✍ At 6 months age, initiate complementary feeding by giving 'other foods' in small quantities, in semi solid form.
- ✍ Start with one type of food, wait for a few days to be sure that the child tolerates the same before introducing another type of food.



Contd.

- ✍ Give food that has cereals, pulses, fruits, green leafy vegetables and yellow coloured vegetables, oils & fats, groundnut paste, and animal foods such as meat, fish, liver, egg, milk products such as curd, cheese, etc. wherever culturally acceptable.
- ✍ Feed from a cup with spoon, both of which are thoroughly cleaned.
- ✍ Do not give left over foods, milk and milk products.



At 6-9 Months

- ✍ Start by offering 2-3 tablespoons of thick porridge/ mashed food 2-3 times a day.
- ✍ Gradually increase the quantity to ½ cup (125 ml)
- ✍ At 8 months help the child to feed him/herself with his/her fingers.
- ✍ Avoid foods, such as nuts, grapes, raw carrots etc., as they can cause 'choking'.
- ✍ Give 1-2 snack foods in between meals, depending on the appetite.



At 9-12 Months

- ✍ Offer finely chopped or mashed foods that child can pick up about $\frac{1}{2}$ cup, 3-4 times a day.
- ✍ Give 1-2 snacks in between meals depending on his/her appetite.
- ✍ Feed him/her from his/her own bowl patiently, talking to him/her and looking into his/her eyes, lovingly.
- ✍ Remove distractions, if any, to keep the child interested in meals.
- ✍ Do not force feed. Do not feed left-overs.
- ✍ To increase energy density of foods, add 1-2 tsp of ghee/oil to the food supplement. If the preparation is thin, then $\frac{2}{3}$ to $\frac{3}{4}$ cup should be given each time.

1-2 Years

- ✍ Breastfeed as often as the child wants, upto the age of 2 years or beyond.
- ✍ Continue to give 3-4 meals of nutritious foods chopped/ mashed if necessary, $\frac{3}{4}$ - 1 cup (250 ml) at each meal. Also give 1-2 snacks per day in between meals.
- ✍ Give variety of foods.
- ✍ Actively help the child to eat.. .



2- 5 Years

- ✍ Give family food, 3 meals each day. Also give nutritious snacks, twice daily, in between meals.
- ✍ Give variety of foods, if the child refuses, offer him/her 'tastes' of the food several times.
- ✍ Do not force feed the child. Give realistic portions depending on his age, size and activity.
- ✍ Increase the quantity of food as child grows older.



Key Messages to Mother about Care of Young Child at All Times

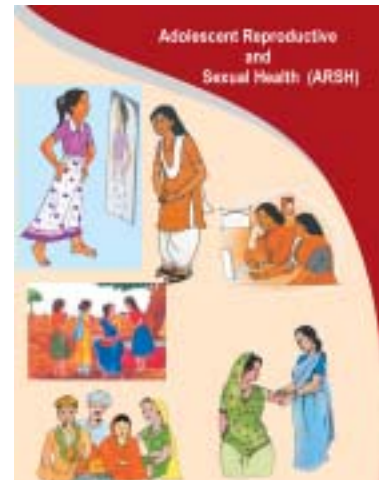
- ✍ Brain development is most rapid during first two years of life. So young children need to be stimulated by playing with others, moving around, hearing sounds, having things to see, touch and explore.
- ✍ Teach the child to communicate by speaking, listening and playing with him/her.
- ✍ Illness interferes with normal growth and development. To prevent illness, immunize the child, when sick, take to the nearest health care provider for treatment.
- ✍ Protecting children from physical and emotional distress helps them gain confidence to explore and learn



GROUP III

Adolescent Reproductive and Sexual Health (ARSH)

- ✍ Reproductive Cycle and Menstrual Hygiene
- ✍ Sex Education, RTI/STI and HIV/AIDS
- ✍ Family Planning
- ✍ Planned Parenthood



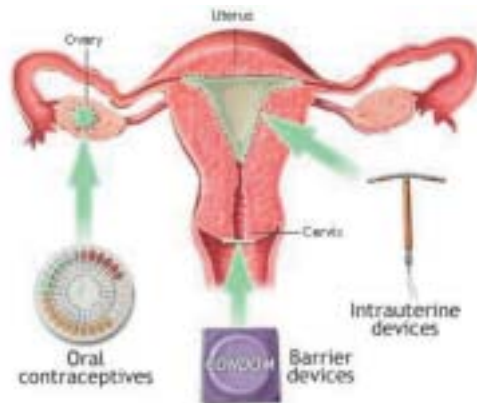
Adolescent Years: Physical Changes during Adolescence

Girls	Boys
<ul style="list-style-type: none"> • Breasts becomes noticeable • Hips become larger • Hair starts growing in the armpits and pubic area • Feels herself growing taller and bigger • Seems to sweat a lot more • Acne 	<ul style="list-style-type: none"> • They become taller • Hair grows in armpits and pubic area, chest and legs. Some of them start growing a slight moustache • Sweat and oil glands become active. Pimples may appear on the face • Become more muscular • Genitals or reproductive organs become bigger • Voice starts breaking and then becomes deeper as their vocal chords develop



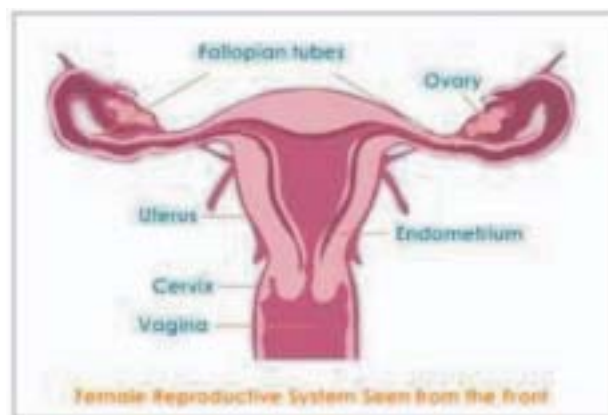
Female Reproduction System

In the female reproductive system some parts are present inside the body and some are outside. The parts which can be seen by us include inner lips, outer lips, clitoris, vaginal opening and urinary opening. Internal parts include the vagina, fallopian tubes, womb and ovaries. The egg sacs contain eggs which start maturing between 12 to 18 years of age this is known as **menarche**. The fallopian egg tubes are narrow through which the mature egg passes to reach the womb.



Contd..

- ✍ The womb is a pear shaped bag. Its function is to nourish and keep the fetus and give the fetus room for growth for nine months.



- ✍ The passage which joins the outer reproductive organs to the inner organs is called the vagina (birth canal).



Menarche and Menstruation

- ✍ Menstruation (monthly periods) starts between 12 and 18 years of age. This is called **menarche**. Every month one egg is released from the egg sac which reaches the womb through the fallopian egg tubes. At this time if intercourse takes place a woman may conceive i.e., she becomes pregnant.
- ✍ A thick layer of blood and mucus forms on the wall of the womb to nourish the fetus. If conception takes place then the fertilised egg comes and places itself on the wall of the womb.
- ✍ If conception has not taken place then the layer of blood and mucus on the womb wall starts breaking and comes out of the vaginal opening. This process is called **menstruation**. The bleeding continues for about 4 to 5 days.

Hygienic Practices during Menstruation

- ✍ Keep the area around the genitals clean.
- ✍ Bath every day without fail.
- ✍ After excretion clean yourself from front to the back. Do not clean in the reverse direction, as that may give infections.
- ✍ Wear clean under clothes.
- ✍ Wear cotton cloth/pad/sanitary napkins.
- ✍ Whenever the sanitary pad/cloth become wet and feels uncomfortable, change it. One may have to change two to three times a day at least.
- ✍ Do not dry the cloth/pad in dark places for it will get fungal infection.
- ✍ Wash the cloth in clean water and dry it in the sun. The sunlight kills the germs.
- ✍ The cloth needs to be stored in clean bag in a clean place.



Some Common Problems during Menstruation

Problem	Symptoms	What can be done
Dysmenorrheal or painful periods caused due to contraction of the uterus to empty itself	Pain in lower abdomen. Muscular cramps and sometimes lose motions.	<ul style="list-style-type: none"> • Keeping hot water bottle. • Seeking help of ANM/ Doctor.
Heavy bleeding	<ul style="list-style-type: none"> • Use of more than four/ five sanitary pads in a day. • The flow is over 7 days • The interval between two periods is less than three weeks • Blood clots get released. • Symptoms of anemia. 	<ul style="list-style-type: none"> • Relax. • Eat iron rich wholesome food to combat anemia and take IFA tablet. • Keep the genital area clean. • Consult a doctor if the girl cannot carry on routine tasks due to tiredness.

Contd..

Problem	Symptoms	What can be done
Pre Menstrual Stress	<ul style="list-style-type: none"> • Irritability • Mood swings • Depression • Anxiety 	<ul style="list-style-type: none"> • Try to be active and involve self in some interesting work.
Irregular periods or less amount of blood : <ul style="list-style-type: none"> • First menstruation is followed by some irregularity due to hormonal imbalance • The body weight is too low, mental tension. • Anemia can cause less bleeding. 	The interval between two periods is too long (more than 42 days) <ul style="list-style-type: none"> • Periods last only one or two days and the bleeding is very little. • May be symptom of anemia. 	<ul style="list-style-type: none"> • Consult a doctor if the irregular period persists or reappear after one year of menarche. • If other associated problems are present consult a doctor. • Eat iron rich food and supplement it with IFA.



Contd..

Problem	Symptoms	What can be done
<p>Cessation of Menstruation.</p> <ul style="list-style-type: none"> Menstruation continues till a woman is 45-50 years old and stops only at menopause. 	<p>If menstruation stops before menopause it may be due to: Pregnancy, acute emotional stress, malnutrition, diseases or psychiatric problems, or endocrinal disorders.</p>	<p>Essential to consult a doctor for checkup and diagnosis.</p>



Sex Education and its Importance

- ✍ Sex education is a broad term used to describe education about human sexual anatomy, sexual reproduction, sexual intercourse, reproductive health, emotional relations, reproductive rights and responsibilities, abstinence, contraception and other aspects of human sexual behaviour.
- ✍ Sex education may also be described as “sexuality education”, which means that it encompasses education about all aspects of sexuality, including information about family planning, reproduction, plus information about all aspects of one’s sexuality including Sexually Transmitted Infections (STIs) and how to avoid them and birth control methods.



What is RTI/STI?

Reproductive Tract Infections (RTIs) or infections of the genital tract are those which can have far reaching effects on reproductive health. Sexually Transmitted Infections (STIs) are those which are transmitted through the sexual route. They are one of the most common infections among sexually active adolescents. STIs are severe health problem because they give rise to considerable morbidity. STIs including HIV are most common among young people aged 15-24 and more so in young women of that age group.



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✍ Factors that increase the risk of RTIs

- ❖ Poor general health
- ❖ Poor genital hygiene
- ❖ Poor menstrual hygiene
- ❖ Unhygienic practices by service providers during delivery, abortion, IUCD insertion in girls/women



✍ Factors that increase the risk of STIs

- ❖ Unprotected sex
- ❖ Multiple partners
- ❖ Sex with partner having sore on the genital region, urethral discharge or infected vaginal discharge



Contd..

- ✍ **Prevention of RTIs and STIs**
- ❖ Maintaining proper genital hygiene is important
- ❖ Practicing safe sex
- ❖ By not neglecting any unusual discharge
- ❖ Opting for institutional delivery or home delivery by a trained birth attendant
- ❖ Avoiding sexual contact, if either of the partner has an STI

**HIV/AIDS****What is HIV/AIDS**

- ✍ HIV is an infection caused by a virus
- ✍ HIV may result in Acquired Immuno Deficiency Syndrome (AIDS), a condition in which the immune system begins to fail leading to life threatening infections

**Difference between HIV/AIDS**

AIDS (acquired immune deficiency syndrome) is the late stage of infection with human immunodeficiency virus (HIV). AIDS can take more than 8-10 years to develop after infection with HIV. HIV-infected people can live symptom-free lives for years; however, most people in developing countries die within three years of being diagnosed with AIDS.



Contd..

<u>HIV is transmitted through</u>	<u>HIV is not transmitted through</u>
<ul style="list-style-type: none"> • Unprotected sexual contact with people of same sex or opposite sex (anal, vaginal or oral sex) when one of them is infected. • Transfusion of infected/unsafe blood or blood products. • From an infected parent to child – during pregnancy, delivery or breastfeeding. • Sharing of infected syringes and needles and skin-piercing instruments. 	<ul style="list-style-type: none"> • Shaking hands with an HIV infected person, Hugging and kissing • Touching objects in phone booths or public transport • Shared use of towels, linen, crockery, utensils and clothes, Mosquito bites • Use of common toilets, bathing in a pond/lake/canal or river • Donating blood with new/sterile needles • Caring for and touching a person infected with HIV

Family Planning

Marriage: The legal age for marriage is 18 for girls in India. But it is better if marriage is postponed until 21 years.

Implications of early conception after marriage

- ✍ Delimits educational pursuits and employment prospects
- ✍ Limits ability to take decisions
- ✍ Mother can die during delivery
- ✍ Changes in body configuration and possible unattractiveness



Importance/Relevance of Family Planning

- ✍ Situations where adolescents are forced to early marriage
- ✍ Peer pressure leading to unsafe experimentation of sex
- ✍ Adolescents subjected to sexual violence (emergency contraception)
- ✍ The different types of contraceptive measures are:
 - ❖ Male Condom
 - ❖ Combined Oral Contraceptive Pills
 - ❖ Spermicides
 - ❖ Intra-Uterine Contraceptive Device (IUCD/IUD/Copper-T)
- ✍ Emergency Contraceptive Pills (ECPs) are taken within 72 hours of unprotected sex to prevent pregnancy

Planned Parenthood

Signs and symptoms during the early stage of pregnancy

- ✍ Menstruation stops
- ✍ Nausea or vomiting commonly experienced in the morning or in the evening
- ✍ Frequent urination
- ✍ Enlargement of breasts

Danger signs in Pregnancy

- ✍ Bleeding during pregnancy, excessive bleeding during delivery and after delivery.
- ✍ Severe anaemia with or without breathlessness.
- ✍ High fever during pregnancy or within one month of delivery.
- ✍ Convulsions or fits, blurring of vision, headaches, vomiting, sudden swelling of feet.
- ✍ Labour pain for more than 12 hours.
- ✍ Bursting of water bag without labour pains.



Health Consequences of Teenage Pregnancy

Mother Health	New Born Baby's Health
During Pregnancy	
<ul style="list-style-type: none"> • Inhibited physical growth • Existing malnutrition and anaemia would aggravate • Possibility of abortion • Arrested uterus development • Obstructed labour 	<ul style="list-style-type: none"> • Pre maturity • High neonatal mortality • Low birth weight and birth defects • Poor cognitive development • Complicate delivery
Post Delivery:	
<ul style="list-style-type: none"> • Hyper tension • Post partum bleeding • Genital and/or urinary track infections resulting in increased morbidity and mortality 	<ul style="list-style-type: none"> • Inability of mother to provide appropriate care to the new born, leading to higher morbidity and mortality

Do's and Don'ts during Pregnancy

✍ A pregnant women should:

- ❖ Get registered with a PHC/nursing home
- ❖ Go for antenatal check-ups
- ❖ Maintain personal and genital hygiene
- ❖ Take right kind of fluids and foods (energy giving, body-building and protective)



✍ A pregnant women should not:

- ❖ Lift/ carry heavy loads
- ❖ Drink alcohol or smoke cigarettes
- ❖ Take medicines or herbs without doctors' prescription
- ❖ Engage with untrained person for delivery



Content

- ✍ Each person is unique and has her own strengths and abilities.
- ✍ There is no need to compare oneself with others it will lead to no value.
- ✍ There are many life events which can effect our self esteem negatively and make us apprehensive about trying new things.
- ✍ Knowing our strengths and using them help in receiving positive feedback and would enhance self esteem.
- ✍ Self esteem and self confidence is the key factor to try out new skills.
- ✍ Values result in shaping one's behaviour towards family, community and society. Therefore it is necessary to understand what we value and what changes would be required in our values to enjoy long term happiness.

The Module comprises three sessions and following activities

Sl. No.	Name of session	Activities
1	My Abilities and Skills (2 Hrs.)	<ul style="list-style-type: none"> ▪ I Love Myself ▪ My Protective Shield ▪ I Am Happy to be a Girl
2	My Beliefs and Values (2 Hrs.)	<ul style="list-style-type: none"> ▪ I Want I Need ▪ My Life Auction ▪ Value Voting
3	My Life (1 Hr.)	<ul style="list-style-type: none"> ▪ The River of Life



Gender Sensitivity

Difference between Sex and Gender

Sex	Gender
✍ Biological	✍ Socio-cultural construct
✍ Nature made	✍ Society-made
✍ Constant	✍ Variable
✍ Individual	✍ Systematic
✍ Non-hierarchical	✍ Hierarchical
✍ Cannot be changed easily	✍ Difficult, but not impossible to change

Some Gender Issues

Prenatal Sex Selection

- ✍ Prenatal sex selection is a process of determining the sex of the unborn child. It is illegal as per PNDT Act
- ✍ Rapid decline in child sex ratio can lead to increased violence against women, rape, abduction, trafficking, and onset of practices such as polyandry.

Nutrition

- ✍ According to research evidence, female infants are breastfed less frequently and over a shorter duration than boys.
- ✍ Young girls often do not get the required quantities of supplementary food. Discrimination against female children in the quality and quantity of food is prevalent in many parts of the country. Male children are fed with larger quantities of cereals, fats, milk, sugar and fruit.



Health Care

- ✍ Malnutrition, frequent pregnancies and infections contribute to high maternal mortality ratio in India. It is an indicator of disparity and inequality in access to appropriate health care and a nutrition services for women.
- ✍ Men and boys receive medical attention faster than girls and women. Males also tend to get better quality of care. More money tends to be spent on ailing males than on females.

Mobility and Marriage at young age, early child-bearing

- ✍ Girls get married at a young age (before 18 years) and become mothers at a tender age. Numerous restrictions on their mobility begin to operate during adolescence.

Education

- ✍ Enrolment of girls is poor in schools across the country despite many government incentives. Many girls of poor families are not able to attend school. Health of women is greatly affected by their poor level of education.

Work Participation

- ✍ Girls begin their working life quite early. In rural areas, they are engaged in caring for younger siblings, cooking, cleaning, fetching fodder, fuel, working in fields (sowing, harvesting).

Crime against women

- ✍ Women are exposed to violence right from the time they are conceived.
- ✍ Cases of crime against women –rape, sexual harassment at workplace, domestic violence, eve-teasing are increasing.
- ✍ The risk of sexual exploitation is greater for daughters of poor families living in marginal communities, daughters of destitute women and prostitutes.



Decision Making

Premise

- ✍ Good decision making depends on understanding the situation well, being aware of our choices and, most importantly, seeing the consequences of our choices. It involves both critical and creative thinking.
- ✍ Girls are neither expected to make decisions nor are they consulted before decisions are made they are expected to abide by the decisions made by others. Girls do not get opportunity to make decisions that affect their bodies and their lives.

Objectives

The exercises and activities would enable the young girls to:

- ✍ Make responsible and sound decisions and to ensure a happy and safe life
- ✍ To face dilemmas and problematic situations that arise in the course of life
- ✍ To learn to deal with problems and overcoming them.

Content

- ✍ Taking decisions involves risks. It is important for young girls to understand the intensity of risks involved and to think through the possible consequences of their decisions.
- ✍ Even if adults set rules young girls have a choice to follow or not depending on whether the consequences are not safe in the long run.
- ✍ Problems can be solved using the simple 'why' question five times. The series of why questions help the one go deeper in the circumstances and show how social relations and values figure in our decisions.
- ✍ Sometimes solutions are adopted without any thought by following someone else blindly and this leads to further problems. It is important to weigh the consequences of the solutions.
- ✍ Most young people feel that others are to blame for their predicament or that nothing can be done to change it. With such belief young people lose their motivation to change. It is important for them to know that problems can be solved and behaviour can be changed. Often close friends and family helps us to do so.



The Module comprises five sessions and following activities

S.No	Name of the Session	Activities
1	<i>What influences our Decisions? (2 Hrs.)</i>	<ul style="list-style-type: none"> ▪ Testing the Waters ▪ Taking Risks ▪ Choosing Behaviour
2	<i>How to Make Decisions that Keep Us Safe (2 Hrs.)</i>	<ul style="list-style-type: none"> ▪ Three Cs (Challenges, Choices and Consequences) in Decision Making ▪ Making Ripples: Decision-Making ▪ Delaying Sex
3	<i>Solving Problems (1 Hr. 30 Min.)</i>	<ul style="list-style-type: none"> ▪ Problems and Situations, ▪ What Should I Do?
4	<i>We can Change our Behaviour (1 Hr. 30 Min.)</i>	<ul style="list-style-type: none"> ▪ Excuse Us, Excuse Us ▪ We are in the Drivers Seat ▪ Open Door, Closed Door
5	<i>My Goals (2 Hr. 30 Min.)</i>	<ul style="list-style-type: none"> ▪ How do I Set my Goals ▪ A 'Mantra' for Trying ▪ Being Responsible

Communication

Premise

- ✍ The quality of a relationship is determined largely by the quality of the communication within it. Good communication leads to trust and respect in relationships.
- ✍ Culturally young girls are expected to be courteous and respectful in their communication with older people. They are also expected to be passive rather than assertive. These two factors make them vulnerable to exploitative situations.

Objectives

The exercises and activities would enable the young girls to learn:

- ✍ That our verbal and non-verbal behaviour need to communicate the same message
- ✍ Assertiveness is essential for communicating and it reduces vulnerability



Content

- ✍ Good communication comprise listening skills. Poor listening often means that messages are distorted, nor heard or heard only partially and misinterpreted
- ✍ Communication comprises both verbal and non-verbal communication. It is important that verbal and non-verbal behaviour need to convey the same message, otherwise the listener can exploit the situation to his/her advantage
- ✍ Assertiveness is different from aggressive and passive behaviour. It is more balanced response
- ✍ Powerlessness and low status can be barriers to being assertive
- ✍ Both in speaking and body language we can show we are assertive
- ✍ It is important to be able to say 'no' assertively in certain situations

The Module comprises two sessions and following activities

Sl. No.	Name of the Session	Activities
1	We Speak with our Bodies (3 Hrs.)	<ul style="list-style-type: none"> ▪ Act to Meet ▪ Listening ▪ More Listening Skills ▪ Mixed Messages ▪ Choosing Whom to Talk to
2	Effective Communication (3 Hrs.)	<ul style="list-style-type: none"> ▪ Status and Power ▪ The chaser ▪ Our Behaviour- Passive, Aggressive or Assertive ▪ I and You: Using "I Feel" Statements ▪ Saying "No" and Meaning It (Including Saying "No" to Persuasion)



Stress Management

Premise

- ✍ Adolescents face a variety of situations in their daily lives that can cause them stress and anxiety.
- ✍ Adolescents react to stress in different ways. Some of the common reactions are excitement, fear, anxiety, sadness and anger. Since stress can have disastrous consequences hence arises the need for its management.

Objectives

- ✍ Identify factor that contribute to stress
- ✍ Clearly recognize the effects of stress on well being
- ✍ Identify importance and constructive ways to deal with stress

Content

- ✍ Stress can happen due to internal or external factors.
- ✍ There are several things causing tensions all the time and health problems can add to stress. These can lead to stress overload that can cause a person to behave irrationally or to do unhealthy things such as use drugs, fight with others etc. to cope with stress.
- ✍ Stress that is not managed can lead to emotional outburst or even emotional imbalance.
- ✍ Feelings that hurt, need to be expressed in ways that do not harm but instead lead to positive behaviour. Keeping them bottled up will lead to physical and emotional problems and volcanic outburst.
- ✍ The major coping mechanism to handle stress include sports and recreational exercises and relaxation exercises.



The Module comprises three sessions and following activities

Sl. No.	Name of the Session	Activities
1	Stress and Well Being (2 Hrs.)	<ul style="list-style-type: none"> ▪ Aggression Volcano ▪ Role Play
2	Coping with Stress (2 Hrs.)	<ul style="list-style-type: none"> ▪ A Drop in the Bucket ▪ Blow Up the Balloon
3	Sports and Recreation for Better Health (2 Hrs.)	<ul style="list-style-type: none"> ▪ Discussion on Sports and Recreation ▪ Seed Technique to See How We Spend Our Day

Leadership

Premise

- ✍ Leadership skills facilitate young girls to stand for themselves and harness the opportunities available around them for growing up, living healthier and being happy, capable and strong.
- ✍ These skills enable young girls to be contributing meaningfully to the family as a daughter, wife and mother.

Objectives

The exercises and activities would enable the young girls to:

- Discuss their own behaviours of working in a group
- Identify elements of cooperative behaviour that makes the group to achieve its goals
- Understand different 'Leadership Styles'



Content

- ✍ Each one may have their own unique way of contributing to a group. Broadly there are three types of responses each having its own advantages and disadvantages – i. those who tend to take a lead role in decision making process and dominate the group ii. those who only give opinion when the ‘leaders’ are quiet and iii. those who are good observers and good listeners.
- ✍ There are five different ways responding to conflict – **i. accommodation** – very accommodating but unassertive **ii. avoidance** – avoid the conflict by not acknowledging it **iii. compromising** – they are less assertive, willing to work solutions that pleases other persons but also expects others to relinquish something **iv. competitive** – take assertive stance, knows what they want and does not care for others **v. collaborative** – they are very assertive yet very respectful to others needs. They find best solutions with everyone’s interest in mind.
- ✍ There are three styles of leadership towards conflict resolution – **i. autocratic** – where leader takes decision irrespective of group consensus **ii. democratic** – leader takes decision with group consensus **iii. laissez faire** – where leader does not take decision and let the group function the way it wants.

The Module comprises three sessions and following activities

Sl. No.	Name of the Session	Activities
1	Sun, Moon and Star (1 Hr. 30 min.)	<ul style="list-style-type: none"> ▪ Game: Follow me, Follower ▪ Stories ▪ Group Activity
2	<i>Broken Squares</i> (1 Hr. 30 min.)	<ul style="list-style-type: none"> ▪ Game: Knotty Problem ▪ Self Audit ▪ Broken Squares
3	<i>Pins and Straws</i> (1 Hr. 30 min.)	<ul style="list-style-type: none"> ▪ Mirror game ▪ Personal reflection on own leadership styles ▪ Pins and straws



Home Management

- ✍ Home management is the process of preserving, protecting, improving and maintaining your home
- ✍ Although most of us think of home management as maintenance, but it is a process of making the most out of your home

Income

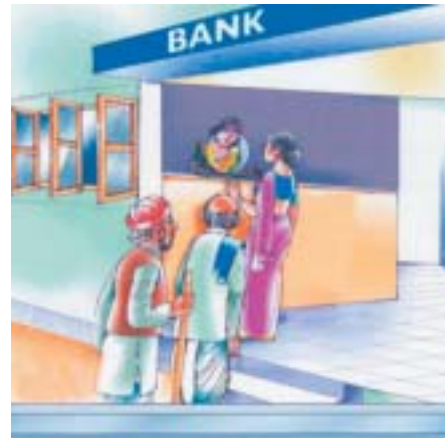
- ✍ Income is the earnings through an employment or an enterprise/business of a person within a specified time frame, which is generally expressed in monetary terms
- ✍ Income is the sum of all the wages, salaries, profits, interest payments, rents and other forms of earnings received in a given period of time

Budget

- ✍ Budgeting is generally planning of all expenses and revenues. It is a plan for expenditure, spending and saving

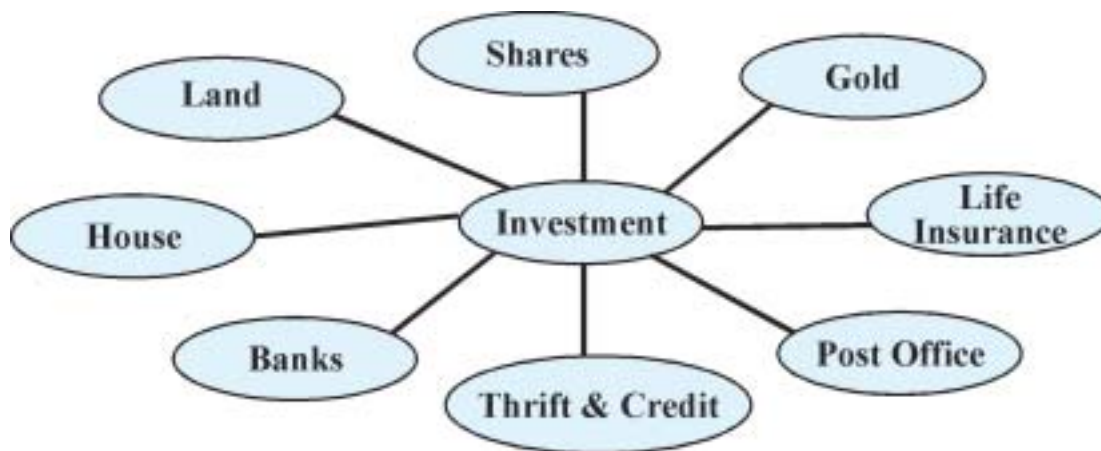
Savings

- ✍ Saving is the simple process of putting aside a part of your earnings usually in the form of cash in hand or putting it in a savings account or post office or in any other form which is safe such as governmental bonds



Investment

- ✍ Investment is the commitment of money or capital to purchase financial instruments or other assets in order to gain profitable returns in the form of interest, income or appreciation



Time Management

- ✍ Time management is a simple and practical technique of planning and structuring one's day
- ✍ There are some simple practices that can help to manage time in a little better way

Steps in Time Management

- ❖ Prioritise
- ❖ Plan
- ❖ Follow the plan
- ❖ Review its effectiveness
- ❖ Make necessary changes if required

Factors included in a Time Plan

- ❖ Priority
- ❖ Relaxation
- ❖ Exercise
- ❖ Balanced tasks



Guidance on Accessing Public Services

Opening and managing Bank Accounts

- ✍ Bank account is not only a safe way of keeping your money but it also provides easy access to money
- ✍ In order to open an account, one has to provide some basic information to the bank, like name, date of birth, address and some identification details.
- ✍ The account holder has to agree to abide by certain rules and accept responsibility for certain actions. While opening a bank account, one forms a relationship based on a very sensitive subject- one's money. Therefore one should know very well what one is getting into.



Opening and Operating an Account in the Post Office

There are two types of Post Office accounts –

- ✍ Post Office Monthly Income Account
- ✍ Post Office Savings Account

Who can invest

- ✍ An adult
- ✍ 2 - 3 adults jointly
- ✍ A minor of minimum ten years
- ✍ A guardian on behalf of a minor or a person of unstable mind



Lodging an First Information Report or FIR

One can file an FIR if:

- ✍ One is the person against whom the offence has been committed
- ✍ One has seen the offence being committed

Things to be mentioned in FIR;

- ✍ Name and address of the person filing the FIR;
- ✍ Date, time and location of the incident being reported;
- ✍ True facts of the incident as they occurred;
- ✍ Names and descriptions of the persons involved in the incidents;
- ✍ Witnesses, if any.

Awareness about Legal Rights

Our Constitution gives every citizen the fundamental right to conserve her language, script and culture.

Cultural and educational rights

- ✍ Our Constitution gives every citizen the fundamental right to get admission to any government or government-aided educational institution without discrimination on grounds of religion, race, caste or language.
- ✍ Our Constitution gives religious and linguistic minorities the fundamental right to establish and administer educational institutions of their choice



Right to Equality

- ✍ Our Constitution gives every citizen the fundamental right to equality before law and equal protection of laws. This means that all citizens are equal in law, irrespective of religion, race, caste, sex or place of birth.
- ✍ Our Constitution gives all citizens the fundamental right to equal opportunity in employment under the government.

Right to life and personal liberty

- ✍ Our Constitution gives every citizen the fundamental right to protection against arrest and detention. This means that arrest and detention can only be in accordance with the procedure laid down by law.

Our Constitution gives the following fundamental rights to freedom:

- ☞ Right to freedom of speech and expression
- ☞ Right to assemble peacefully and without arms
- ☞ Right to form associations and unions
- ☞ Right to move freely throughout India
- ☞ Right to practice any profession or occupation or to carry on any trade and business

Right to Vote

- ☞ Every citizen of India who is 18 years or more of age can vote at elections.
- ☞ In case your name is not registered as a voter, or you have shifted to a new place, you can apply to the Electoral Registration Officer to get your name registered.



Right to Information

- ☞ The Right to Information Act gives all citizens the right to access information held by any government, municipal body, panchayat or government-aided body by paying a fee of Rs. 10/- per request and giving an application addressed to the Public Information Officer of the office concerned. No fee is required to be paid by persons who live below the poverty line and furnish certificate for the same.

Right to Education

- ☞ The Right to Education is understood to establish the right to free, compulsory primary education for all children, an obligation to develop secondary education accessible to all children as well as equitable access to higher education.

Prohibition of Child Marriage Act

- A child marriage is a marriage where either the girl is below 18 years of age or the boy is below 21 years of age.
- Any man who is older than 21 years of age and who marries a girl who is less than 18 years old is punishable under law with imprisonment up to two years and/or fine up to Rupees one lakh.

Child Labour Act

- Employment of a child below 14 years of age is banned in 13 occupations and 57 processes and any person employing a child in the banned occupations/processes is punishable by law with imprisonment for between three months to a year and/or with fine between Rs. 10,000 to Rs. 20,000.
- Children should not be employed in such hazardous occupations which can endanger the physical, mental and social health of the child.



Immoral Traffic (Prevention) Act

- Under this law, procuring, inducting, taking, recruiting, transporting, transferring, harbouring or receiving a person for prostitution is punishable.

Domestic Violence Act

This law is for protecting and giving relief to women who are victims of domestic violence. Any such woman can file a complaint in the court of a Judicial Magistrate of the First Class (or a Metropolitan Magistrate, in case of metropolises). The law offers protection against—

- Threat of harm or actual harm, injury or danger to her health, safety, life, limb, mental or physical well-being, including protection against physical, sexual verbal, emotional or economic abuse, and
- Threat of actual harassment, harm, injury or danger for forcing her or her relatives to meet demand for dowry or other property.

Dowry Prohibition Act

- Giving and taking dowry is punishable under law.
- Asking for or helping giving/taking dowry is also punishable under law.
- Punishment can be up to five years of jail and / or fine up to Rs. 15,000/-.

Preconception and Prenatal Diagnostic Techniques Act (PC-PNDT)

- Determining the sex of the unborn child is punishable under law with imprisonment up to three years and / or fine up to Rs. 10,000.
- Any member of the family, including the father, the mother and the in-laws, can be punished if they seek to break this law.
- Even a doctor/assistant who leaks the sex determination report can be punished.



TRANSACTION OF MODULES

Training Methods include:

- ✍ Presentations
- ✍ Demonstrations
- ✍ Discussion
- ✍ Role play
- ✍ Case study
- ✍ Activities

