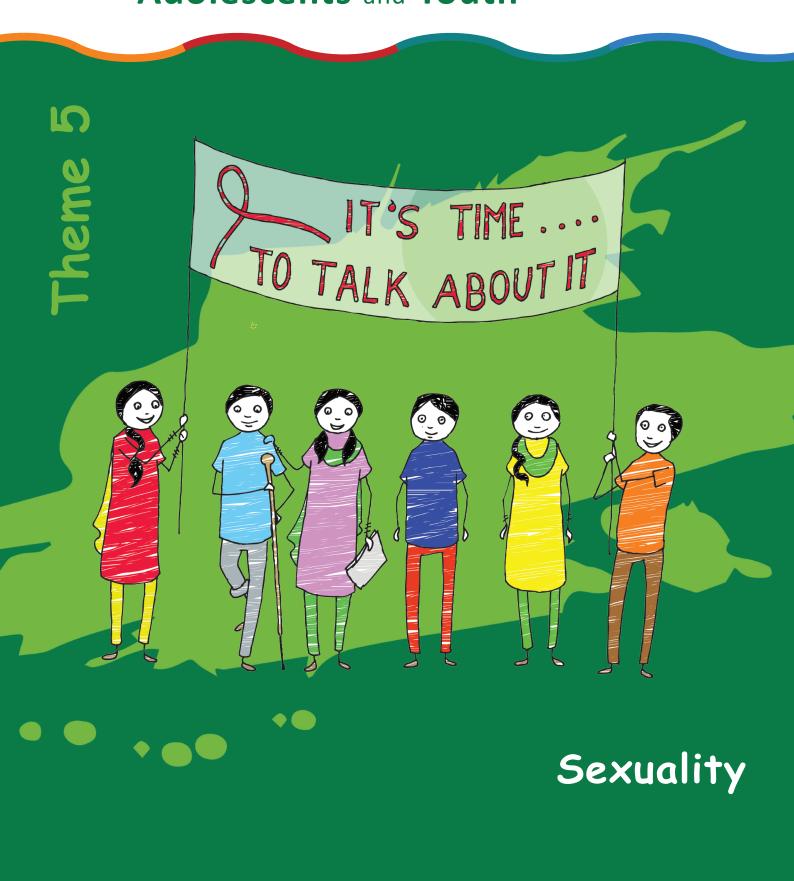
Curriculum on Life Skills for **Adolescents** and **Youth**





Theme 5

Sexuality

Lesson 38

Sex and Gender

Lesson 39

Reproductive Health

Lesson 40

Healthy practices in relationships (understanding infatuation, lust, love)

Lesson 41

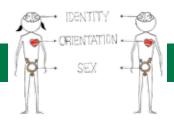
Sexually Transmitted Infections& HIV

Lesson 42

Effective Parenting



Sex and Gender





Lesson objectives

- To develop a healthy attitude towards sexuality,
- To understand how sexual health and reproductive health are a part of being healthy, and
- To be able to develop an understanding of sex and gender.



Duration: 90 minutes

Time break-up

15 minutes	30 minutes	15 minutes	30 minutes
Activity 1	Discussions on Activity 1	Activity 2	Discussions on Activity 2

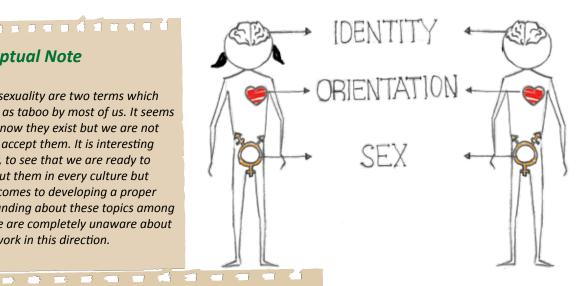


Training materials required

Black board, chalk, sheets of A4 sized paper, and colour pencils/sketch pens for participants, pictures of boy and girl (given in the annexure at the end), tennis ball.

Conceptual Note

Sex and sexuality are two terms which are seen as taboo by most of us. It seems like we know they exist but we are not ready to accept them. It is interesting however, to see that we are ready to joke about them in every culture but when it comes to developing a proper understanding about these topics among youth we are completely unaware about how to work in this direction.



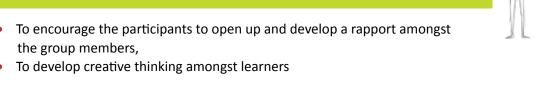
This lesson is the first step in the series of sexuality and therefore its importance cannot be undermined. The facilitator needs to focus on developing a rapport with the group and make them comfortable so that they can discuss various issues related to this topic openly. Keeping a non-judgmental and positive approach towards learners will help in going a long way in dealing with this topic. Please re-look at certain important tips suggested in the introduction and the facilitator's guide for this section specifically. Some people will be able to talk openly while some will need some time to open up. Respect the learner's space and encourage him/ her to open up. The aim should be to make the group comfortable so that a pace is set for this and the coming sessions.

Before starting any discussion about this lesson, the given below activity can be used as an ice breaker to help everyone open up and get comfortable with the group.

Activity 1: Ice breaker

Objectives

- the group members,





The facilitator divides the learners into two groups. The groups are asked to stand in a circle. One member of each group is given a tennis ball. Each group has to pass the tennis ball to the person standing next to him and so on. They will only stop once the ball reaches back to the same member after being passed in the group. The only thing they need to take care of is that they are not allowed to touch the ball with their hands or on the floor with their foot. The team which passes the ball first wins. The facilitator has to take care that none of them touch the ball with their hands. If that happens, the ball is given back to the first member.

ointers to be discussed

- The facilitator should encourage the groups to enjoy the game and open up. She can encourage the group to try new ways of passing the ball.
- Make sure both the groups have both boys and girls so that they start feeling comfortable with each other and are able to break their inhibitions.

Conceptual Note

Sexuality encompasses our sexual feelings (who we are emotionally and sexually attracted to), our sexual behaviour (how we express our sexual feelings) and sexual identity (who we say we are to ourselves and others based on our internal beliefs). In short, sexuality is an integral part of who we are, what we believe, what we feel, and how we respond to others.

"Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviors, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical and religious and spiritual factors."(WHO, 2006)

This definition of sexuality examines the broadness with which we need to look at sexuality. Sexuality involves emotions, experiences, thoughts and issues related to sex, gender, growing up and experiencing one self. It is influenced by our cultural beliefs and practices, family, such as in certain families, when the girl attains menarche, a special ritual is performed, legal systems such as whether homosexuality is acceptable or not, or ethical and moral beliefs such as beliefs regarding pre-marital relationship.

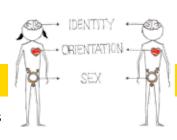
Let us try and understand the difference between the terms sex and gender, in order to lay a better foundation of the concept of reproductive and sexual health.



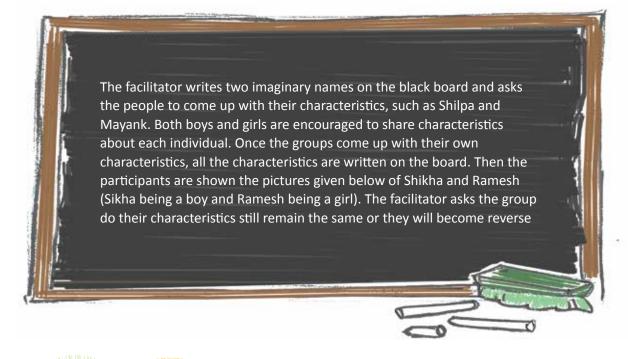
Activity 2

Objectives

- To enable the participants to be able to understand the concepts of sex and gender
- To encourage the participants to open up and share their views about the concept of sex and gender, and
- To develop critical thinking amongst learners.





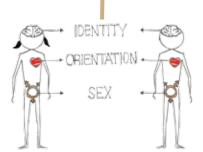


Review Questions

- Why did you associate these characteristics with the given names?
- How did you feel when you realized that they were not the names of same gender but the opposite gender?
- Will your response be any different if I only write 18 year old girl and boy rather than names?
- Do the characteristics you had thought of apply to all girls and boys or only these names?

Pointers to be discussed

- The facilitator discusses how the group's responses are conditioned and are determined by how they are brought up.
- The facilitator helps the participants differentiate between sex and gender. Sex is the biological orientation the child is born with, such as boy or girl. Though earlier it was unchangeable, now sex can be changed through medical intervention. Gender is the cultural orientation associated with the sex of the child, such as, when we say girls should stay quiet, warm, take care of the family, should help their brothers study, should always stay covered or play with dolls or boys should be brave, strong, bread-winner, tall, etc. These are the characteristics they had written on the board. The gender helps you understand what is masculine and what is feminine.



- Gender is determined by culture and time, how with changing times and culture, the role of women has changed in the families, where women are doing all kinds of jobs, such as working as a pilot, running an auto-rickshaw or men are also cooking and taking care of children.
- It is the way gender roles are defined in each culture that would determine who takes the decision, who has the authority in a marital relationship about when to have children and how many children.
- The facilitator also stresses how important it is for us to be sensitive to these roles and think rationally beyond these confinements created by our culture.

The facilitator should feel free to carry out the discussion beyond the time limit and should try to address various questions put up by the learners, as calmly as possible.



Tasks for the learner

You have seen "Hijras" eunuchs around you. Think about which gender do they belong to and is your society treating them in the right manner? What should be their rights? How should they be treated by the society? We will discuss your responses in the next lesson.

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Reflections: (to	be written by th	e facilitator abo	out the session,		
iviy Learnings:	to be written by	the facilitator a	bout what did h	e/she learn from t	ne session)



Reproductive Health





Lesson objectives

- To help adolescents understand the concept of 'reproductive health',
- To explain the female and male reproductive systems to adolescents,
- To deal with the shame and hesitation adolescents face while discussing reproductive health issues,
- To encourage adolescents to demystify the concept of reproductive health, and
- To clear any myths and misconceptions around reproductive health issues.



Duration: 90 minutes

Time break-up

10 minutes	15 minutes	25 minutes	10 minutes	15 minutes	15 minutes
Discussion	Activity 1	Discussions on Activity 1	Discussion on menstruation	Activity 2	Discussions on Activity 2



Training materials required

Black board, chalk, sheets of paper, colours, worksheets and scissors, puzzle

Conceptual note

The facilitator needs to pick up threads from where they left it in the first session. Thus, it is very important that the facilitator makes the group very comfortable with the discussion and treats the concept with comfort and ease.



Why do we need to talk about reproductive health?

Poonam is a 16 year old girl from Odisha. She studies in Class X and has been doing well in studies. Her neighbour, Ramesh likes the way Poonam looks and wants to talk to her. He has been pestering her and has been taking help from her friends in trying to make Poonam his girlfriend.

Poonam also likes the attention she gets from Ramesh but is scared of her community. She has now started talking to him but has clearly told him that they need to maintain a safe distance because she wants to complete her studies. She has also told him that his sexual advances are unacceptable for she knows that she is not biologically ready for any physical relationship and to deal with the consequences that follow.





Ramesh doesn't like her responses but one of his friends told him that she is saying the right thing. Only if both of them complete their studies and grow up to become independent and responsible adults, they will be able to live a healthy and happy independent life. Having unprotected sex can actually cause them lot of infections and it may lead to consequences which they are not capable of dealing.

Here is a case study of a girl called Poonam who made right choices in her life because she was aware of what she was doing and the consequences it might have. She was aware of what reproductive health means and how we need to take care of this aspect just like any other aspect of health.

Health, as defined by WHO, is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. When we talk about being healthy and describe the characteristics of healthy people, most of us will talk about someone who eats healthy food and does exercise. We tend to ignore reproductive health completely, neither do we talk about it nor do we explain about the reproductive systems to our children. As a result, lots of adolescents suffer from (Sexually Transmitted Infections)STI's and (Reproductive Tract Infections)RTI's which go untreated for long intervals and leads to other serious health problems. Because of the lack of knowledge and awareness on reproductive health, the girls and boys tend to become parents at an early age where they are incapable of dealing with the responsibility of becoming parent. They don't even realize that they have an option in choosing when they want to become parents.



Reproductive and sexual health gives us an option of choosing when we want to become parents, to make a choice about having a safe and healthy sexual life. It helps us make informed choices about life and to understand our body – physiological and psychological processes.

What is reproductive health?

Reproductive health has been defined as "understanding and addressing the reproductive processes, functions and system at all stages of life. It aims at ensuring that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide, if when and how often they do so."

The foundation of reproductive health lies in first developing an understanding of anatomy and physiology of reproductive organs. Let us try to do this through an activity.

Activity 1

Objectives

- To help the adolescents understand the reproductive system of both males and females.
- To sensitize adolescents towards opposite sex and issues faced by them.
- To empower the adolescents by providing them correct information.

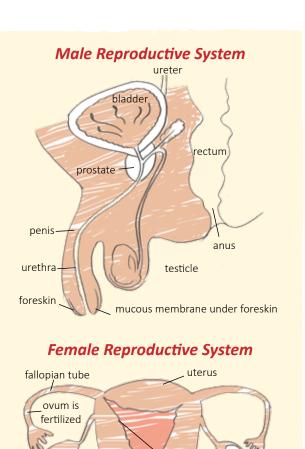


The facilitator gives the participants pieces of a puzzle given in the trainer's kit. The puzzle consists of the reproductive system and name of each part. The participants are divided into four groups. Each group is given one puzzle and they all start at the same time. Once they have completed the puzzle they have to clap once. While the group is solving their puzzle, the facilitator keeps creating excitement about solving the puzzle and telling them to do it first. Once a group is done, they are handed over the second part of the puzzle. In the second part, they are given a worksheet where the functions of each part are given. The group has to discuss these functions of each part.

Once all the groups have completed their task 2, the facilitator discusses how the group felt while doing the puzzle and worksheet. The facilitator tells them how they have done giving them encouraging comments. The facilitator then asks the group members to explain the function of each part and clears out any doubts the group has about any of these parts.

The facilitator needs to encourage the participants to share their views and doubts with the group. She needs to ensure that the group is also supportive of the speaker and has a meaningful discussion.

The facilitator should encourage the participants to collect the information from the right sources and always check the information from other sources for their authenticity.





ovum is shed from the ovary

Ovulation and fertilisation

How do you think this activity helped you?

implantation of

fertilized ovum

vagina

- Can you tell me about the new things that you learnt about yourself?
- How was it finding about the opposite sex?
- Have you ever tried to find out about the reproductive system?
- Where did you try finding out about this information?



Pubertal changes in adolescents

The reproductive system matures around the age of 13 before which you start noticing a lot of changes happening in your body and thoughts. It is around this age, that the sex hormones (fluids present in body responsible for the maturity and functioning of reproductive organs) are released in the body – estrogen and progesterone in females and testosterone in males. These hormones are responsible for bringing about lot of changes that you may have experienced in your body.

In adolescent boys, the following changes can be seen:

- Changes in voice
- Boys gain weight
- Shoulders become wider
- Facial hair develop
- Testes develop and get larger
- Neck, chest and leg muscles get bigger and stronger
- Hair growth over the body, underarms and around penis
- Erections in your penis when you get excited or feels nervous
- Getting 'wet dreams' or 'nocturnal emissions'





In adolescent girls, the following changes take place:

- Growth spurt
- Development of breasts
- Body becomes curvy and hips widen
- Weight gain on hips
- Growth of hair in under-arms and vaginal area
- White colour vaginal discharge before or in-between periods
- Skin may get oilier
- Menstruation starts

Peer pressure

Desire to experiment with new things as a result they start trying out alcohol, drugs, or sex

Developing sense of identity

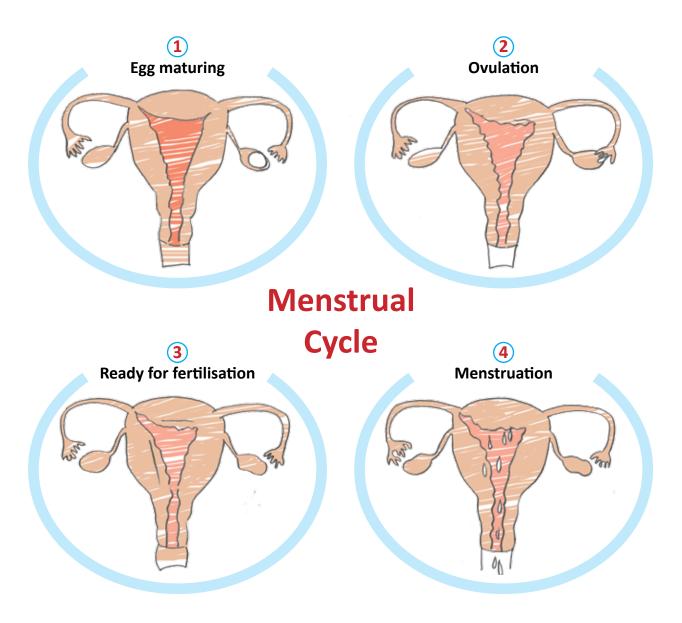
Emotional outbursts or less control over emotions

Feeling attracted to opposite sex

Become conscious of their physical appearance

Menstruation

The facilitator explains the process of menstruation with the help of diagram given below:



The facilitator discusses with the group how menstruation and physical changes are associated with lot of myths and beliefs in each community. For example, in some communities, you are not allowed to go in the kitchen or play outside. The facilitator carries out the second activity to clarify the myths that are present within their local communities and to help the adolescents develop a more scientific understanding of the processes.

Activity 2: Myth v/s Reality

Objectives

- To help the adolescents clarify the myths around menstruation and pubertal changes.
- To encourage the adolescents to spread awareness about reproductive health.
- To develop confidence among adolescents and sense of positive body image.



The facilitator discusses some common beliefs present in various communities such as a woman is considered 'dirty' when she is menstruating, she should not touch any food because the food will get spoilt, the boys penis size can be increased by massage or medicine. The facilitator then hands over one chit to each participant and asks them to write common beliefs or their own beliefs regarding menstruation and other changes during puberty on the chit of paper. They are told that they don't have to write their names. Once they have written their beliefs, they put all those chits in a box.

The facilitator then draws a line called 'line of reality' in the middle of the room. Each participant is asked to pick up a chit and read it out loudly. The group then discusses whether that belief is a myth or reality. The facilitator can take up discussions around the belief. If it is a myth then you keep it on one side and if it is a reality then it can cross the line of reality and be kept on the other side.

The facilitator can also add some from her/his side if the group is not coming up with lot of myths/beliefs.

Myths Reality

Some of the myths/beliefs are given below as an example:

- When a girl has sex for the first time she will have to bleed
- If your breasts have developed you are ready to have sex
- If you've had a wet dream you're ready to have sex
- You can't get pregnant during your period
- One cannot engage in sports and playing games during menstruation
- Massaging regularly can increase women's breast size.
- The girl should not wash her hair when she is menstruating.
- When the boys penis gets erect, that means he is ready for sexual activity.
- The man should always have a penis of big size otherwise he cannot be a father.
- The girl's body is ready for sexual activity when she gets her periods.
- Some vaginal fluid is released by women and it is not healthy.



The facilitator should emphasize the given learning with the participants of the group:

- The facilitator should clarify the myths and try to develop a rational basis for all the practices that should be followed during menstruation. The facilitator should encourage them to discuss any belief or thought they have even if they think that it is childish.
- The facilitator can also introduce hygienic practices that should be followed during menstruation such as taking bath regularly, cleaning the pubic area properly with water, using sanitary pads and changing them after 6 hours, disposing them properly, marking their menstrual date.
- The facilitator should also stress on how certain practices were developed as a result of the requirement of time or social and cultural surroundings such as not taking bath was spread because there were no personal bathrooms and women used to take bath in common places. But now with changing times, we cannot stick to these beliefs and need to change them.
- The facilitator should have a discussion about how even though adolescents feel that they are mature, they are not physically or psychologically ready to get involved in active sexual life for how they can develop various infections in their vagina or penis if they don't take proper care.

Tasks for the learner

 The learners need to discuss about hygienic practices with two of their friends and come and tell the group about how did their friends react to the information and how did they deal with it.

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Reflections: (to be written by the facilitator about the session)
My Learnings: (to be written by the facilitator about what did he/she learn from the session)
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Healthy Practices in Relationships





Lesson objectives

- To create awareness amongst the participants about the concept of healthy relationships and its influence in their lives,
- To create awareness about conception and contraception,
- To help them understand the importance and use of effective contraception
- To discuss different methods of contraception with the participants,
- To give them clarity on the myths related to contraception, and
- To develop critical thinking and decision making skills of the participants.



Duration: 105 minutes

Time break-up

15 minutes	20 minutes	10 minutes	40 minutes	20 minutes
Activity 1	Discussion for	Activity 2	Discussion for	Case study and
	Activity 1		Activity 2	its discussion



Training materials required

Blackboard/white board, markers/chalks, worksheets, sketchpens, projector, laptop (if available) or charts to demonstrate diagrams, images etc.

Activity 1

Objectives

- To develop a warm rapport with the participants, and
- To encourage the participants to have an open communication and develop comfort level amongst the group members and the facilitator.





The facilitator asks the learners to draw a picture of a person they would like to have as an ideal girlfriend/boyfriend/husband/wife for themselves. They need to think about how they want her/him to look like. Once they have all drawn a picture, they can be asked to share it with the group. The next task is to think about the characteristics they would like their special friend to have. They are encouraged to think about all the strengths they would want their partner to possess. They are given around 10 minutes to think and write on the portrait they have drawn.

The participants are then encouraged to share the characteristics with the group members. The facilitator should encourage the group to share the characteristics without passing any moral judgments. The facilitator holds the discussion with the group using the given below review questions.



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Review Questions

- Is it possible to have all these characteristics in a person?
- Do you think you possess all these characteristics in yourself that you desire in your ideal mate?
- Are there any similarities in the characteristics of the group members?
- Why do you think these similarities exist?
- How will you know that the person you are meeting possesses all these characteristics?
- Are your relationships always based on rational thought or other things always influence your thought?

Pointers to be discussed: The facilitator

- Discusses how we have different views when we are thinking about a partner but when it actually comes to choosing one, we get carried away by looks, or charms and do not actually rationally think about the person. The tendency to get carried away is very high which tends to influence our decision. As a result, some of us land up with teenage pregnancies or STI's or HIVs. We might even get married without being mentally and physically prepared for it.
- Should further discuss with learners that the youth are particularly vulnerable and that when they do get physically, emotionally attracted to another person, they don't think much and can fall into intimacy without giving much thought to the consequences associated with it.
- Encourages them to critically analyze how the idea of falling in love and marriage is romanticized by films and media and how it would help if we rationally think about such decisions before taking them, rather than facing the music later.

Conceptual Note

Relationships: When we talk about relationships amongst youngsters, the ones particularly romantic and intimate relationships are of critical importance. Most of us get attracted to the opposite sex and do get involved in relationships that include risky sexual activity. Lack of awareness and hesitation leads to increased risk amongst the youth. As a result, large number of our youth population is suffering from HIV/AIDS and other STI's. The number of people getting married at an early age is also very high leading to early parenthood for which they are not prepared at all.



Healthy relationships vs Unhealthy relationships

Healthy relationships may have potential benefits for youth as they help in creating a sense of identity through open communication and trust. They also help in developing strong interpersonal skills and provide emotional support which an adolescent may need at that time whereas unhealthy relationships can pose negative consequences such as violence, abuse(verbal, physical and emotional), unsafe sexual activities thereby resulting in unwanted pregnancies and sexually transmitted diseases.

Young girls especially below the age of 20 years are likely to suffer the most when it comes to getting pregnant i.e conceiving. Most of the young boys and girls do not even realize what they are heading for when they get involved in relationships. The lesson is intended to help them make informed decisions about their life.

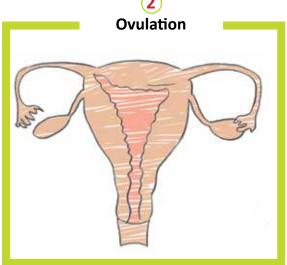


Conception

Conception, is basically, the process of becoming pregnant. It occurs when the sperm of a man fertilizes the egg of a woman after sexual intercourse. Pregnancy can occur anytime after the sexual intercourse.

Fertilisation Process







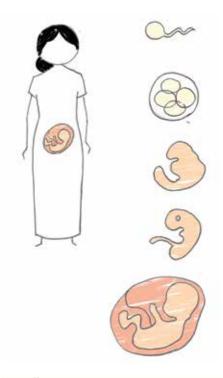


Common perceptions and misperceptions about pregnancy

- Once the sperm enters the female body it stays alive for 6 days and therefore, it is not necessary that woman gets pregnant immediately.
- A common notion is that it is a safe period immediately after periods i.e. a woman will not get pregnant even if she has sex after her periods. This is false for the women have two ovaries and it is possible that the other ovary may release an egg at that time.
- A woman cannot get pregnant if the penis doesn't ejaculates inside. This is
 a myth and an age old ineffective technique to avoid pregnancy. Before the
 ejaculation, a fluid is released which also carries some sperms. Therefore, any
 kind of sexual contact can lead to pregnancy and should be avoided without
 protection.

What are the general symptoms to know if a woman has become pregnant?

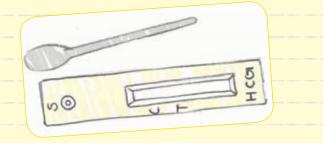
It is difficult to notice any changes during the process of conception or when the pregnancy has occurred. The symptoms vary from woman to woman. The primary symptom is missing your menstrual periods. Though in certain cases, some women keep getting their periods in first three months, though the bleeding might be less.



Some of the early pregnancy symptoms after 5-6 weeks of conception are:

- No period or slight bleeding
- Breast and nipple changes
- **3** Urge to go to toilet more frequently
- 4 Morning sickness
- **6** Bloating, cramps and backache
- 6 Dizziness and fainting
- Vomiting
- Tiredness and headaches

The best way to find out whether a lady is pregnant or not is to get a urine test done, in case you miss your menstrual cycle or you have been sexually active.



Problems with teenage pregnancy: Many health problems are particularly associated with pregnancy during adolescence.

These include:

- Anaemia,
- High risk of HIV and other sexually transmitted infections,
- postpartum haemorrhage/bleeding and
- Mental disorders, such as depression.

Stillbirths and death in the first week of life are 50% higher among babies born to mothers younger than 20 years than among babies born to mothers 20–29 years old. (WHO)

All these problems occur because most adolescents are not mentally, socially and emotionally ready and mature enough when it comes to becoming pregnant and dealing with it. Thus, avoiding sexual contact at an early age is a good idea. If one cannot do that, then use of contraceptive methods is imperative for the youth to avoid pregnancy and any other health problems.

Contraception: It is the use of any temporary, long term or permanent methods to prevent the process of pregnancy.

While conception is the process of becoming pregnant, **contraception** is any method that prevents the process of becoming pregnant.

Importance: Contraception provides people the ability to plan their families. It helps the couple in delaying the first child, and birth spacing which is very necessary for the health of both the mother and infants. The youth has the power to decide when to have a child and the contraceptive methods give them that power.

They can also protect themselves from STIs and HIV/AIDS.

Some of the methods for contraception are:

- Condoms: is a temporary and most commonly known method for birth control. Condoms are the only ways to provide protection against HIV and other sexually transmitted diseases.
- **2** Sterilization (male/female): it's a permanent method for birth control
- (3) Implantable devices: Copper T is most common and effective and long term method to prevent pregnancies temporarily.
- Oral contraceptive pills: these are medicines that are taken orally by women. Though they are very effective, they should be taken only after consulting the doctor.
- **Emergency contraception:** These are also like oral contraceptive pills but much stronger than OCPs, meant to be used in case of emergencies. Such as after you have had unprotected sex, you may take it to avoid pregnancy. Their regular use can harm the women's reproductive system.
- **6 Rhythm method:** it is based on calculating safe days (when pregnancy can't happen) but they are not effective, as chances of getting pregnant are never nill.
- **6 Abstinence:** it is basically refraining from all aspects of sexual activity
- Withdrawal and traditional methods: not that effective for the preejaculatory fluid also contains sperms and can get an individual pregnant.







MYTHS ASSOCIATED WITH CONTRACEPTIVE METHODS

- Use of contraceptive method causes infertility: some women believe that taking medicines OCPs/ECPs will stop them from becoming pregnant again. It is a myth. Though, we should take OCPs after consulting the doctor. ECPs, if taken regularly can affect the women's health.
- 2. Use of contraceptive methods can cause cancer: some women believe that OCPs can cause cancers such as breast cancer, uterine cancer and ovarian cancer which is not true.
- 3. Weight changes: weight increases or decreases on consuming the pills.
- 4. Health risks and side effects: pills may cause headaches and nausea to some women but they don't pose adverse health risks.
- Promiscuity: some people wrongly believe that contraception encourages infidelity, promiscuity, or prostitution in women, which is not true.
 Contraception only helps in having safe sex and does not encourage any such behavior.
- 6. Birth defects: some women believe that methods can cause serious birth defects in their babies which are also a myth. Birth defects are caused due to various reasons such as genetic, complications during pregnancy or child birth.
- 7. Reduced sexual desire and pleasure: Contraception does not reduce sexual desire and pleasure. It is only a way to have safe sex.

Activity 2

Objectives

- To share with the learners the purpose and importance of a condom and other contraceptive methods,
- To encourage the learners to make informed choices, and
- To empower the learners to take charge of their lives.





The facilitator shows the learners samples of various contraceptive methods and discusses the pro's and con's of each method. Each learner is then given a condom. They are asked to wear condom in their hand. They are asked to share how do they feel and what are the thoughts come to their mind after wearing it. The facilitator encourages them to share their views.



Review Questions

- What thoughts come to your mind after wearing it?
- Do you know that it is used as a form of contraception?
- Have you ever seen a condom or tried wearing it before or is this the first time?

Pointers to be discussed: The facilitator

- Should stress on the correct and proper usage of the condom and why it is important.
- Discusses the importance of contraception, especially temporary methods for youth. She needs to stress on the use of condoms as only method that helps in transfer of STI from one partner to another.
- Encourages the group to take rational decisions rather than get carried away emotionally, for eg. When your boyfriend forces or emotionally coerces you or abuses you and threatens you that he will leave you, then this relationship is not a healthy relationship, for there is no trust and respect for the other person. It will be a good idea to think and reflect on whether you really want to continue with this relationship or not. Any relationship is healthy if it gives respect and space to both people involved in the relationship.
- Encourages the participants to think about how the decisions should be based on rational thoughts and not emotional impulses, for decisions taken emotionally may lead to consequences such as early parenthood, or STI or HIV, which may be difficult to deal with throughout life.

Tasks for the learner

The learners need to discuss about consequences of risky sexual relationships and use of contraceptive measures with at least three of their friends and come and tell the group in the next class about how did their friends respond to it.

Marie Marie





Shalu is studying in class 9. She is a very good student and her teachers always praise her. She gets good marks and plans to become a teacher. Recently, there has been a drop in her grades. She is unable to focus. When her friend asked her, she said that she has a boyfriend who has recently been forcing her to get involved with him physically. She doesn't feel comfortable doing that and has tried to refuse. But he has been telling her that she is behaving like a small girl and if she really loves him, then she should have no problems. She doesn't know what to do.

Questions for discussions (after reading the case study)

What should Shalu do?

How can her friend help her?

Can both of them together take help from someone?

Can Shalu talk to her boyfriend about contraception? Why or why not?

How can you work in dealing with this problem in your community?

Reflections: (to be written by the facilitator about the session)	
My Learnings: (to be written by the facilitator about what did he/she learn from the	session)



Sexually Transmitted Infections & HIV







Lesson objectives

- To spread awareness regarding sexually transmitted infections and HIV, and
- To encourage the adolescents to make informed decisions.



Duration: 60 minutes

Time break-up

25 minutes	15 minutes	20 minutes	
Activity 1 and discussions	Activity 2	Discussions	



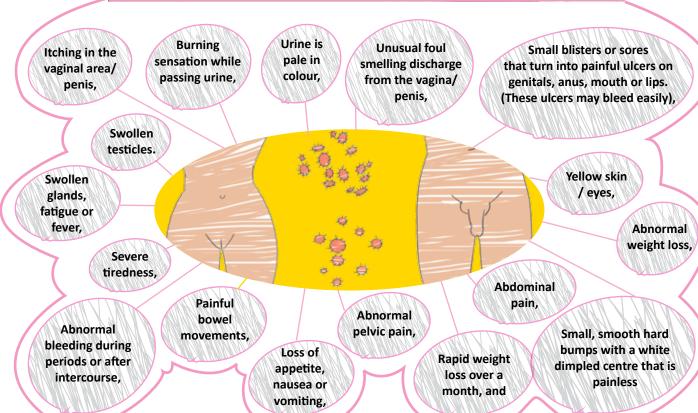
Training materials required

A4 size paper, electronic device to play music

Conceptual Note

Sexually transmitted infections (STIs) and Reproductive tract infections (RTIs) are different kinds of infections – bacterial, fungal or viral, that affect the reproductive system of the individuals. This can happen to anyone of us – both boys and girls. However, they are more common in people who are sexually active.

The facilitator should discuss the symptoms of STIs and explain each one of them to the participant. Remember, most of the infections are treatable.



25

The list should be given to the participants - which can be kept with themselves as a ready reckoner.

Most of the times, STIs are left untreated due to the shame associated with these infections. In certain communities, people feel that they might experience discrimination from the community. Some communities associate shame and unclean behavior with STIs. The facilitator should stress that these infections are just like any other infections and can be treated easily if reported to the doctor. In case of STIs both the partners need to be treated at the same time. They should be advised to use condoms during intercourse.

HIV: HIV stands for Human Immunodeficiency Virus. 'H' stands for human and it can affect humans only. I stand for Immuno-deficiency because it weakens the body's immunity system and makes it prone to other infections and diseases. V stands for virus because it is a form of virus so it takes over the healthy cells and has the ability to multiply itself and affect other healthy cells. HIV itself does not cause any disease, but it weakens the body of the individual so much that he/she becomes vulnerable to any infection from the outside world. An HIV infected person can stay healthy for years. Now a days, treatment is being provided to delay the onset of AIDS.



HIV/ AIDS has affected millions of people. The most dangerous part is that HIV/AIDS effects the young population more. Lack of awareness and indifference/discomfort of people in addressing this issue is a major reason for its spread.

Once the person has been infected with HIV, it takes around 3 months for the body to produce anti-bodies to fight the virus. This period is called the window period. When we test the body for HIV during this time, the test may come negative, because the antibodies have not been formed yet. This doesn't mean that the person is not infected with HIV. If these antibodies are detected in a person's body, the person is said to be HIV positive. This doesn't mean that the person has AIDS. The only way to find out if the person is HIV positive is by getting a blood test meant for HIV.

A person suffering from HIV can stay healthy for long years and avoid AIDS by taking proper diet, avoiding harmful substances such as drugs or alcohol and using proper treatment called Anti Retro-viral therapy.

AIDS stands for Acquired Immuno-Deficiency Syndrome, and it happens when HIV has damaged the immunity system, and the person is now vulnerable to infections and other diseases.



Transmission of HIV

There are four major ways through which HIV gets transmitted:

Unprotected sex with an infected partner – vaginal, oral or anal.





2 From infected mother to child, either during pregnancy or childbirth or breastfeeding

3 Through contaminated blood and blood products such as using blood of a HIV infected person



Through unsterilized needles, syringes and medical equipment.

Prevention of HIV

Various ways in which HIV can be prevented are:

- 1) Proper and consistent use of condoms
- 2) Using sterilized needles and other medical equipment
- 3) Using only the blood which has been tested for HIV. Conducting a HIV test on the blood before storing it is mandatory for all the blood banks.
- 4) Being loyal to your partner

Myths about HIV

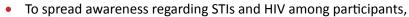
- HIV spreads through mosquito bite. No, it cannot happen through a mosquito bite.
- HIV spreads through hand shake. No, there are only four routes for transmission of HIV. Handshake only helps others greet other people.
- HIV spreads through hugging or kissing a person. No
- HIV/AIDS cannot happen to people who are married. There are four methods
 of transmission and being married may not protect you from HIV, if you get
 involved in unprotected sex or if one of the partners is not loyal and has
 multiple partners.
- HIV/AIDS can be detected by looking at the person. No, it can only be detected through blood test.
- HIV infected person is a sick person just waiting to die. No, he can live a
 perfectly healthy and active life, as long as he takes care of his diet and follows
 his treatment regularly.

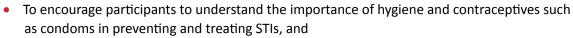


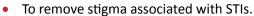
The best way to prevent HIV from spreading and affecting our population is to be aware about it and spread information to people around you. We need to remove stigma associated with HIV and help the people suffering from it with a normal and socially active life. We should make sure that there is no discrimination made against people suffering from STIs or HIV and they are treated like any other person suffering from an infection.

Activity 1

Objectives









The facilitator shares the information given above with the group. The participants are then divided into 2 groups. Each group is asked to choose a name for themselves. The facilitator then carries out a quiz with the group based on STIs, RTIs and HIV. Each group that gives a correct answer gets 10 points, otherwise the question is passed to the other group. At the end of the quiz, the total is done and the winning group may be given toffees.

The following questions may be asked to the group:

- 1. What is the full form of HIV?
- 1. How is HIV different from AIDS?
- 2. How do STIs spread?
- 3. Can RTIs and STIs happen only to married people?
- 4. Are women responsible for the spread of HIV?
- 5. What are the ways through which HIV spreads?
- 6. Does HIV spread through shaking hands, using common shaving razors, or common utensils?
- 7. What is a window period?
- 8. Can a mosquito bite spread HIV?
- 9. Can HIV be treated?
- 10. What are the precautions that can be taken to avoid spread of STIs, RTIs and HIV?
- 11. How can a person find out if he/she is infected with STI, RTI or HIV?
- 12. HIV spreads by talking to HIV infected people. True or false?

The facilitator is free to ask questions on his own depending on the needs of the group.



Learnings to be carried forward

The facilitator discusses various symptoms of STIs and RTIs that might be present in individuals, and shares the checklist with the group. She also tries to clarify doubts participants may have about STIs and RTIs, and should stress the use of various hygienic practices such as:

- Using enough water to wash the genitals,
- Wearing a clean and sun-dried underwear,
- Using sanitary napkins during menstruation and changing them after every 6 hours,
- Disposing off the napkins properly after wrapping them in a newspaper and throwing them in the dustbin, and
- Using condoms in order to avoid any transfer of STIs.

The facilitator should also discuss various questions in the quiz to provide information about HIV and STIsto the participants and try to dispel all the myths around STIs and HIV.

Activity 2:

Objectives





- To motivate the participants to make informed choices in life, and
- To develop analytical skills of the participants.



The facilitator instructs the group that he/she is going to play music. While the music is on, the participants have to go and say hello to other participants and shake hands with them. Before starting the game the facilitator puts a black mark with the help of sketch pen on any two participant's hands. They may do that with as many participants they want to. It is their choice as to how many participants do they say hello to. The music is played for around 3-4 minutes. The facilitator switches off the music after 4 minutes or when she sees the group has nearly finished shaking hands and saying hello to others. The facilitator asks the person whose hand has been marked that how many people he shook hands with. Those people are asked to stand up and asked to mark the people they shake hands with after saying hello to this person.

Review Questions

- How did you feel while shaking hands and saying hello to others?
- Was it a pleasant experience or was there any difference with each individual?
- How many people did you shake hands with?
- Why did you shake hands with these people? Was it a conscious choice or just because they came your way?
- Can you draw any similarity between shaking hands and spreading of AIDS or STIs?
- Did you analyze the other person before you did a handshake with them or said hello?

Learnings to be carried forward

- The facilitator tells the participants that imagine his hand shake like a sexual contact. Just like
 they kept shaking hands without even thinking about it and only busy enjoying it, when we have
 a sexual contact without taking precautions, we may land up suffering from STIs and HIV without
 even realizing it.
- The facilitator asks the participant whose hand he had marked to stand up. He/she asks him to identify the participants he had said hello to or did a handshake with them. Those participants are then asked to stand up and further identify those people whom they said hello to after meeting this person. The process continues. Now, the facilitator asks the group to imagine if this person was suffering from HIV, then how this whole process has changed the lives of all the others even though he has not done it consciously. He was not even aware of it.
- The facilitator encourages discussion on how as adolescents need to be conscious of every decision they take and how it is important to clarify your doubts from a credible source.
- The facilitator also shares how peers or adults in the family may not be a reliable source of
 information always and sometimes taking information from an educated adult or a book is a
 better option.
- MOST IMPORTANT: HIV/AIDS DOES NOT spread through a hand shake (Facilitator to emphasise this point)

Marin Marin

Tasks for the learner

The facilitator gives each person a sheet of newspaper and asked to make a bag out of the paper. All the participants are given ten minutes to do what they want to with the paper while taking care that it is not torn. The facilitator may guide them with the process of making a small bag.

The facilitator shares the experience with the group and tells them how they can use this paper bag to dispose of used sanitary napkins or used condoms.



Renu is a 23 year old. She has been getting a lot of white, foul smelling discharge from her private parts every day. She gets a burning sensation whenever she passes urine. She has been losing weight for some time. She has been trying to tell her husband that she constantly feels tired and needs to meet the doctor. Her husband keeps ignoring her. He is scared that the doctor might like to test him also and that would be a question on his manhood.

Renu spoke to her nurse didi and she has suggested that both of them come and meet the doctor.

Questions for Discussions:

- Do you think Renu is suffering from a STI?
- What should Renu do now?
- Do you think Renu should meet the doctor alone?
- How can you help her convince her husband?
- What are the other precautions Renu should take to treat herself completely?

Reflections: (to be written by the facilitator about the session)	
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My Learnings: (to be written by the facilitator about what did he/she learn from the se	ession)

Effective Parenting





Lesson objectives

- To make the participants understand the concept of parenting and importance of family planning with parenting.
- To help the learners understand the process and changes that take place during pregnancy.
- To develop an understanding of care during pregnancy and post-pregnancy.
- To empower the learners to realize how becoming a parent is a conscious decision, and
- To realize the responsibilities an individual has as a parent.



Duration: 90 minutes

Time break-up

25 minutes	15 minutes	15 minutes	20 minutes	15 minutes
Activity 1	Discussion for Activity 1	Activity 2	Discussion for Activity 2	Case study and its discussion



Training materials required

Blackboard/white board, markers/chalks, worksheets, sketch pens, projector, laptop (if available) or charts to demonstrate diagrams, images etc.

Activity 1: Ice breaker

Objectives

- To develop a warm rapport amongst the group members and the facilitator.
- To encourage them to understand parenting as a conscious decision.



The facilitator asks the learners to go back to their childhood and think of some happy childhood memories they still will like to relive. They are asked to hare those memories with the group. Once they have done they are asked to write on a paper the qualities their parents or guardians have/had which they admire most and/or certain qualities they will like to develop in themselves as parents (father/mother) when they will become parents.

The learners will be given 10 minutes for this activity and a discussion can be held around what is the role of parents in a child's life.







Pointers to be discussed: The facilitator

- Should encourage the participants to think about various circumstances under which a child birth will be appreciated and can be enjoyed by the parents. She can stress on situations such as when both the girl and boy are mature and financially, emotionally and physically ready to take care of the child, or when it is their first or second child. Thus, how when becoming a parent is a conscious decision after taking care of various aspects of your life, you can enjoy the parenthood more and give your child more patience, time, love and care which is required for his/her healthy development.
- Can talk about the importance of parent's role in a child's life. She may discuss how we remember even smallest of the token/gestures of love, sacrifice and care shown to us by our parents and how a parent should thrive to inculcate the best in their children. She may also discuss how all these are more important than providing material care to the child

Conceptual Note

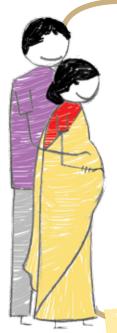
Becoming a parent is a beautiful feeling, but only when it comes at a right age and stage of life. Parenthood comes up with its own sets of joys and surprises, and also responsibilities if taken seriously. Bringing a life in this world needs to be a conscious decision and not to be thought of as God's will. Parenting means providing the ongoing care and support a child needs in order to survive and flourish in this world. A parent needs to promote and support the physical, social, emotional and intellectual development of a child.

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Most of the pregnancies specially the first ones generally go unplanned. As result, some of the young parents are unable to live their responsibility properly and live a strained relationship amongst themselves and with the child. Family planning means to plan and decide when one wants to become a parent. It is important to see whether parents are emotionally, physically, mentally and financially ready to go through the process of pregnancy to childbirth to rearing newborn and take care of a lifelong responsibility and family planning is a good way to empower oneself to take the right decision at the right time.



Parenting does not begin with child birth but the mother begins raising and nurturing a child well before birth i.e. during pregnancy. Lot of studies have proven that mother's mental, emotional and physical condition during pregnancy have a huge impact on the child at later stages. Let us first try and understand the first stage of child's entry into this world, called pregnancy.



Pregnancy and child birth

Pregnancy is approximately a 9 month process of developing one or more baby's in the woman's uterus. The baby in the woman's uterus is called an 'embryo' or a 'fetus'. The average duration of pregnancy is 280 days or 40 weeks from the first day of a woman's last menstrual period or 38 weeks after the conception. Conception can only happen after unprotected sexual intercourse.

Pregnancy is generally divided into three trimesters of three months each.

The learners can be shown the pictures of week wise developing fetus to explain them more how the fetus grows inside the womb.

The first trimester

- Carries the highest risk of miscarriage (natural death of fetus).
- The development of fetus in first trimester is not easily diagnosed and monitored.
- Many symptoms like morning sickness and discomfort occur during first trimester.

Second trimester is

- When the development of fetus is easily monitored and diagnosed.
- The size of the uterus expands greatly.
- The movement of the fetus can be felt in the second trimester.

Third trimester marks

- The further growth and development of the fetus.
- Fetal movements become very strong and regular.
- The woman's abdomen drops down as the fetus takes downward position to get itself ready for the birth.

Some of the symptoms and discomforts during pregnancy

- Tiredness
- Constipation
- Low back pain
- Occasional irregular painless contractions

- **Swelling**
- **Increased** frequency of urination
- **Anaemia**
- Increase in blood pressure

During pregnancy, the unborn baby is affected by many decisions his or her parents make specially the ones that are linked to their lifestyle. The health of the mother and the diet she takes can have a huge positive or a negative impact on the developing fetus.

Not just health and diet management but it is also important to gather knowledge regarding health facilities to go for regular checkups. Prenatal medical care is most important during pregnancy. The purpose of good prenatal care is to identify any potential complications early, to prevent them if possible (through recommendations on adequate nutrition, exercise, vitamin intake etc.), and to manage problems, possibly by directing the woman to appropriate specialists, hospitals, etc. if necessary.

The mother should try and stay happy and stress-free during pregnancy.



- Eat five or six well-balanced meals each day. Lot of ironrich and calcium rich food such as green, leafy vegetables, fruits, milk and milk products, should be taken during pregnancy
- Drink plenty of fluids -- at least eight to 10 glasses a day
 -- avoiding caffeine and artificial coloring.
- On't drink alcohol.
- On't smoke or allow yourself to be exposed to secondhand smoke.
- Exercise -- it's important for your general health and also can help reduce stress. Walk at least fifteen to twenty minutes every day at a moderate pace. Walk in cool, shaded areas or indoors in order to prevent overheating.
- **6** Get adequate sleep -- at least eight hours a night. If you're suffering from sleep disturbances, take naps during the day.
- Wear comfortable, non restricting shoes and put your feet up several times a day to prevent fatigue and swelling of the feet, legs, and ankles.
- 3 Don't take over-the-counter medications or herbal remedies without first consulting your doctor or midwife.
- Above all, stay happy and in a stress-free environment.

Child Birth

When the baby is born preterm (before 32 weeks) or post term (after 40 weeks), the chances of severe health complications can arise and can even lead to the death of baby, mother or both.

Child birth is the process whereby an infant is born. Before the childbirth the woman begins to experience labour. The labour is when the woman experiences uterine contractions and dilations in the stomach. The labours are generally very painful but some women don't experience much of pain. Lot of misconceptions around pain woman goes through during labour. Though it may be an intensive pain, it is bearable.

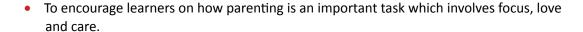
Most births are generally successful normal births but when doctors or delivery staff find any complications then they may perform a cesarean section. Therefore, it is important to go to a doctor for child birth.

Postnatal period (Period after the child birth)

The postnatal period begins immediately after the birth of a child and then extends for about six weeks. During this period, the mother's body begins the return to pre-pregnancy conditions that includes changes in hormone levels and uterus size. The baby should be immediately given the mother's milk after it is born. The mother's milk is the most nutritious food for the baby.

Activity 2:

Objectives







The learners are divided in two groups. Each group is given a spoon and a lemon. The group members are asked to make a line. A spoon with a lemon resting on it will be given to the first person in each line. The task of the group is to take the spoon with the lemon on it to the ending line and bring it back. They then hand it over to the next person in the line who again does the same. Each person must go to a designated point and return, passing the spoon and egg to the next person. The group which finishes it first with minimum falls and lemon in a good condition wins.

At the end of the activity, the facilitator holds a discussion of how the lemon may represent a child and how taking her from one place to another required lot of patience and care.

Review Questions

- Did you enjoy the game or you were completely stressed out?
- Did the game require you to play with full attention and focus?
- How can you relate this game with parenting?



Pointers to be discussed: The facilitator

- Can compare the game and the way it was played to real life parenting. She may stress on how the lemon may represent the child in the real life and how while playing the role of parent we make mistakes and the child falls. She may also discuss how we need to be patient and careful while taking responsibility of the child.
- May discuss important qualities an individual needs to develop to take care of the child. She may also talk about how the responsibility continues throughout life and requires lot of patience, love and care. She can share how for children, parents are their role models. She can share a story with the group, "Once there was a journalist. He went to interview a very famous lawyer at his house. While the journalist was waiting for the lawyer to come in his drawing room, he saw a middle aged drunkard man sitting in one corner of the room and drinking early morning. He thought he will have an interesting story to write about the lawyer so he started talking to this man. The man's name was Ramesh and he was lawyer's elder brother. Ramesh also told him that he had learnt the habit of drinking from his father. His father was a drunkard and would sit all day and keep drinking. He would even abuse their mother. Meanwhile, the lawyer arrived and the journalist thanked Ramesh and went on to interview the lawyer. After asking a lot of questions, he asked the lawyer, who was his role model? The lawyer said his role model was his father. The journalist was shocked. He asked the lawyer that his brother Ramesh had just told him that his father was a drunkard. The lawyer said, "That's true! My father was a drunkard and used to abuse my mother. So I decided I am never going to do any of these things. I am going to live a happy life and be a good parent for my children." The facilitator may discuss how what we learn from life is in our hands and therefore it is important to be positive and teach our children to also learn the right things.

Conceptual Note

Newborns and effective Parenting

Just after the child birth, our role as a parent begins. An infant's only form of communication is crying so therefore the role of parents is to be attentive and start identifying the types of crying representing different types of indications like hunger, uneasiness, need to be hugged, loved, etc. They respond enthusiastically to soft stroking, cuddling and caressing. Loving and holding the newborn is as important as taking care of the physical needs of the baby.

Newborns require feedings at regular intervals. Exclusive breastfeeding is recommended for 6months is compulsorily recommended by all the health organizations around the world. The first milk which is produced after the birth is called as colostrum which is little yellowish in colour. It has many health benefits for the baby. It provides immunity and many nutritious elements which are essential for both the physical and brain development of the baby. Thus, feeding the baby mother's milk is very important. Mother should also take care of her diet and have a healthy diet, in order to provide proper nutrition to the child.

Infants and the benefits of touch

Human infants have a primal need to be carried close to their mother's body. They need constant physical contact for their first few weeks or months of life.

It is observed that the infants who have been the recipients of positive touch experience more benefits as they develop emotionally and socially. Experiments have been done with infants up to four months of age using both positive touch (stroking or cuddling) and negative touch (poking, pinching or tickling). The infants who received the positive touch cried less often and also vocalized and smiled more than the infants who were touched negatively. Infants who were the recipients of negative touching have been linked with emotional and behavioral problems later in life.

Some tips for effective parenting of newborns:

- Go for regular checkups of the child and get all the immunizations done.
- Picking up and holding the baby: There are several safe, comfortable ways to carry a baby. Whatever position you choose, always support your newborn's head and neck. One hand can be used to support the neck and the other hand to support the bottom.
- 3 Feeding the baby: The newborn requires feeding every 2-3 hours. Breastfeed is very important as mentioned earlier

also (atleast for 6 months). After 6 months other light meals can be added like boiled daal ka pani, mashed paste of soft fruits etc. The baby initially in 6 months usually don't get dehydrated so giving water or any juice isn't recommended as the breast milk itself suffices the required quantity of water.

- 4 Burping the baby: Babies tend to swallow air during feeding, causing them to spit up or become fussy if they're not burped frequently. Burping after every feed should be considered as an important practice. Try these common burping methods.
 - Using one arm, hold your baby upright against your shoulder. Gently pat his back with your other hand.
 - Sit the baby upright on your lap, support his chest and head and pat his back.
- Galming a cry baby: If you have changed and fed your baby and she is still crying, give these methods a try.
 - Burp your baby frequently, even if she/he shows no discomfort.
 - If you nurse, burp her/him each time after you switch breasts.
 - If you bottle-feed, burp him/her after he/she consumes two or three ounces of formula.
 - Stop feeding if he/she's fussy or turns her head away from the nipple or bottle.
 - Rock or sway your baby in your arms from side to side.
- 6 Talk to your baby. She will find your voice calming.
- Answer when your baby makes sounds by repeating the sounds and adding words. This will help him learn to use language.
- **(3)** Reading to your baby will help her develop and understand language and sounds.
- Sing to your baby and play music. This will help your baby develop a love for music and will help his brain development.

Early childhood and Parenting

Early childhood generally includes toddlerhood and some years after that (till the age of 6 to 7 years).

A toddler is a child between the ages of one and three. The toddler years are a time of great mental, emotional and social development. The word is derived from "to toddle", which means to walk unsteadily, like a child of this age.

Toddlers are much more active than infants and are challenged with learning how to do simple tasks by themselves. At this stage, parents' responsibility is to get heavily involved in showing the child how to do things rather than just doing things for them, and the child will often mimic the parents. Toddlers need help to build their vocabulary, increase their communication skills, and manage their emotions.

It is also normal for toddlers to be frequently frustrated. It is an essential step to their development. They will learn through experience; trial and error. This means that they need to experience being frustrated when something does not work for them, in order to move on to the next stage. When the toddler is frustrated, they will often behave badly with actions like screaming, hitting or biting. Parents need to be careful when reacting to such behaviours, giving threats or punishments is not helpful and will only make the situation worse.

Toddlers are prone to accidents as they love experimenting, so being alert and aware as a parent is an important task to avoid any accidents.

Love, affection, encouragement and mental stimulation from the parents or guardians of these young children aid in development. During this stage, children need vital nutrients and personal interaction for their brain to grow properly. Children's brains will expand and become more developed in these early years. Although adults play a huge part in early childhood development, the most important way children develop is interaction with other children. Let them play with other children but monitor them.

Some basic tips of effective parenting for toddlers

- 1. Get all the immunizations done and go for regular checkup of the child.
- Give your child water and plain milk instead of sugary drinks. After the first year, when your nursing toddler is eating more and different solid foods, breast milk is still an ideal addition to his diet.
- 3. Toddlers need less food because they don't grow as fast. It's best not to battle with him over this. Offer a selection of healthy foods and let him choose what she wants. Keep trying new foods; it might take time for him to learn to like them.
- 4. Your toddler will seem to be moving continually—running, kicking, climbing, or jumping. Let him be active—he's developing his coordination and becoming strong. Be alert as a parent to avoid any accidents.
- 5. Encourage him to explore and try new things.
- 6. Encourage your child's growing independence by letting him help with dressing himself and feeding himself.
- 7. Encourage your toddler's curiosity and ability to recognize common objects by talking to him, taking him out and playing with him.
- 8. Do NOT leave your toddler near or around water without someone watching her. Drowning is the leading cause of injury and death among this age group.
- Keep kitchen appliances and any object with which a toddler can hurt himself out of reach of your toddler.
- 10. Keep sharp objects such as scissors, knives, and pens in a safe place.

All these aspects of bringing up an infant and toddler can be addressed with the help of the activity given below.

Activity 3

Objectives

- To create awareness regarding ways of taking care of a new born and toddler.
- To empower the learners to take care of the responsibilities they are ready to take up.





The facilitator may divide the group in two sub-groups. Each group has to mark out the changes that take place during first year of birth and from 2-6 years. They need to present these changes pictorially. They can be asked to think of a child in their vicinity or their house and think about what are the changes the child has gone through in these stages. Once the groups have made their pictorial representations, the facilitator discusses their presentations along with ways of carrying out their responsibility as a parent.

Review Questions

Pointers to be discussed: The facilitator

- Discusses the needs and changes that a newborn goes through while growing up in toddler and early childhood stage. She also stresses on how their role as a parent is important at each stage and changes with the changing needs of the child, though love and care stay common across the board.
- May share the tips for bringing up the child properly with the participants to help them get an idea of what they are expected to do as a parent.
- Stresses that it is not only the mother but the child needs both mother and father, to be able to have a healthy and happy childhood. An equal responsibility is shared by the father and he should also make an effort to hold, care and love the child as much as the mother.
- Can discuss about breaking the traditional stereotype of the role of the father where he is supposed to only provide food and clothing and rest all is the mother's responsibility. The father needs to be proactive in taking care of the child and should make an effort to talk to their child as much as possible.

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Tasks for the learner

The learners need to reflect on what are the things they will take care of before becoming a parent and discuss it in the next class.



Reflections: (to be written by the facilitator about the session)	
NA. Lagrain and As has written by the facilitation about what did by John Lagran from the co	
My Learnings: (to be written by the facilitator about what did he/she learn from the se	ession)