

DAY 2

"Women's rights are the edifice on which human rights stand"

– Dr. A. P. J. Abdul Kalam

Note for Facilitators



The Facilitator assigned for the logistical and planning arrangements for the day should ensure that:

- Seating is arranged according to the requirements of the day.
- All materials are ready and essential preparatory work is completed.

Session VI: Reflections and Feedback

Time: 8:30 am – 9:00 am

Objective

To reflect on the training content and processes of the previous day and to provide feedback on this to the Facilitators.

Process

As delineated by the feedback volunteers

1. Begin the day by welcoming all participants and inviting the two participants who volunteered to present their reflections and the group's feedback.
2. Respond to any issues that have come up and ask participants whether there are any questions from the previous day's session.
3. Identify volunteers for reflections for the next day.
4. Check the Question Box for any questions and be prepared to respond to them.



Session VII: Healthy Growing Up – Adolescent Health Issues (AHI)

If required Session VII – Healthy growing up, Adolescent Health Issues (AHI) – can be facilitated separately for men and women for a two-fold purpose:

1. Evaluations have indicated that participants in the initial sessions are more comfortable discussing sensitive issues in same sex groups.
2. Secondly, this mimics the methodology adopted in the classroom where the Healthy growing up and AHI session is conducted separately for boys and girls.

Time: 9:00 am – 1:00 pm

Note : Facilitator/Teacher can choose activities to suit the local cultural context.

Activity 1: Healthy Growing Up



Time: 1 hour and 30 minutes

Objective



To enhance participants knowledge and understanding of AHI and address these concerns with the students

Preparatory work



- Prepare OHP slides to be displayed at the end of the activity.
- Keep relevant reference material at hand.
- Stock few magazines and newspapers that can be distributed to the group for helping them to prepare the presentation.

Life Skills focused

Critical-Thinking, Creative-Thinking, Problem-Solving, Coping with Stress, Decision-Making and Self-Awareness

Process



1. Divide the participants into groups.
2. Give each Group the following case study.



Sunita Case study

16-year-old Sunita studies in class XI. Of late, she gets angry and irritable over every small issue, tends to avoid family members and does not meet her friends. Unable to bear the stress any longer, she breaks down and tells her best friend that her neighbour has recently physically abused her. She fears that abuse may recur. She is hurt, depressed, anxious and fears that she may be put into a very embarrassing situation including pregnancy.

3. Inform the groups that they have 10 minutes for discussion and preparation regarding the reasons and consequences of Sunita's situation. The presentation time allotted to each group is 05 minutes. All the participants will have to contribute while presenting. They are free to use reference material and magazines and newspapers to make their presentations.

Note for Facilitators

- Ensure that each group is guided by you for some time of their discussion.
- The Facilitator has the discretion to discuss the details of the topics depending upon the needs of the participants.

4. After the Group has presented the reasons and consequences of Sunita's situation, initiate a discussion with the participants using the following set of questions.





Discussion Questions

- Why is Sunita moody, Irritable and worried?
- How could Sunita have prevented the abuse?
- How can we help Sunita?
- Who is responsible for the current situation of Sunita?
(Sunita - Lack of knowledge; lack of assertiveness to say 'No'; Neighbour-unaware of legal implications; low empathy; self-gratification; irresponsible sexual behaviour, etc.)
- Could Sunita have identified the danger signals?
- What should be the role of family members in such cases?
(Support and empathise; communicate and discuss; learn about the facts; seek medical help if required).
- What should be the role of community in such cases?



Note for Facilitators

During the discussions ensure that the focus doesn't become judgemental (whether Sunita is a good girl or not; whether she belongs to a good family; whether she has a good moral character or not, etc.).

5. Use the following slide to highlight Sunita's situation.

Consequences of Sunita's situation

Slide 54

- Family problems.
- Social and community problems.
- Education problems.
- Psychological problems.
- Health problems.
- Depression.
- Problems for the baby.
- Associated RTI/STI and HIV/AIDS, if any.
- Effect on future pregnancies.
- Complications of unwanted pregnancy.



Activity 2 : Let's Celebrate Abstinence



Time: 30 minutes

Objectives:



- To make the participants understand the problems associated with teenage pregnancy.
- To make the participants understand that abstinence must be practiced.

Mode:

Group Work in whole class

Life Skills Focused :

Empathy, Critical-Thinking, Communication-Skills, Coping with Stress, Coping with Emotions

Values enhanced:

Courage, Love, Tolerance



Process

1. Divide the class into 5 groups
2. Ask each group to discuss and present their views on the following:
 - The problems faced by a pregnant 16-year-old girl and her baby
 - Additional problems faced if she is unwed.
 - Problems faced by the child of an unwed mother.
 - Options in terms of course of action available to a teenage, unwed mother and their pros and cons
 - Reasons leading to teenage pregnancy

Discussion points

- The problems faced by a pregnant 16-year-old girl and her baby (both physical and medical) are abortion, still birth, under weight, anemia, mental & physical retardation.
- Additional problems if she is unwed - financial and social stigma and discrimination
- Problems faced by the child - abandonment, orphanage, adoption, stigma, discrimination, psychosocial problems etc.
- Options for action; (pros and cons) – MTP (infection, infertility, morbidity and mortality...), adoption (guilt), responsibilities associated with looking after the child as a young single mother.
- Reasons leading to teenage pregnancy (e.g.: Peer pressure, premarital sex, child marriage, rape)

Learning Outcomes:

- One must practice abstinence until marriage
- Problems associated with teenage pregnancy
- One should postpone any kind of physical contact till after marriage.
- One should postpone marriage till after 19 yrs of age and thereafter pregnancy till after 21years of age. This is good for the health of the mother and the baby.

Activity-3 : Menstrual Hygiene



Time: 30 minutes

Objective:



- To clarify the concept of menstruation and focus on menstrual hygiene.

Mode: Separately for girls to be done by lady teachers.

Life Skills Focused:

- Empathy, Critical-Thinking, Decision-Making, Coping with Stress

Values enhanced: Honesty, Tolerance

Process



1. This activity is to be done with girl students only.
2. Get volunteers to do the following scenario as a Role-Play.
3. Later explain the basic facts about menstruation and menstrual hygiene.
4. Follow up with a quiz and a discussion regarding myths and misconceptions about menstruation.

Daughter: Bye Amma! I am going to Usha's house to play."

Mother: (notices blood stains on her daughter's skirt and calls out to her) "Wait Hema, let me see. Come change your clothes. Take this cloth or sanitary napkin and wear it. I'll show you how. Now you have become a big girl. You have got your periods. You must know how to take care of yourself."

(Then the mother and girl go out of the scene and re-enter a few minutes later.

The mother offers the daughter some sweets and applies Kumkum on her forehead.)

Mother: "You will have to sit apart for three days whenever you have your periods."



Hema: “But why Amma?”

Grandmother: “Yes, Why Gayathri? We should change with times. I never went to school. You studied till class 6 only. I’m sure that was because your mother stopped you from going to school after you got your periods. I don’t want Hema to miss out on the opportunity to study and get a good job. If she is absent every month for 3 days her studies will suffer. Having periods is a normal thing. Just teach her all about it.”

Gayathri: “Oh Athay, I’m so glad you said that. I was afraid you would insist on it. Hema, You must change your cloth or sanitary napkin at least 3-4 times a day. If you use cloth, use only cotton cloth otherwise it will not absorb the blood. Wash the cloth with soap and water and dry them in the sunlight.”

Key Messages :

- Menstruation is a normal physiological phenomenon
- A girl can carry on all normal day-to-day activities.
- Menstrual hygiene is important.

Activity 4 : Rights and Responsibilities



Time: 30 minutes

Objective:



- To enhance participants’ awareness of their Reproductive Rights and the Responsibilities thereof.

Level: Class XI

Mode: Separately for boys and girls

Life Skills Focused :

Critical-Thinking, Decision-Making, Self-Awareness, Inter-personal-Skills.

Values Enhanced:

Honesty, Responsibility, Courage, Love, Compassion

Process



1. Divide the class into groups.
2. Write the list of Reproductive Rights on the blackboard.
3. Ask the participants to choose, ‘Whose right’ in each one of the following i.e. - Mother, father, both, family, none, others etc.



4. Discuss Reproductive Rights v/s Responsibilities.
5. Discuss alternate view points.

Statement	Whose Right?	Who is Responsible ?
	Father/Mother Both/Family	Father/Mother Both/Family
To want to have a child	Both	Both/Family
To look after the child	Both (unless one partner is mentally unsound or physically or financially incapable of doing it) /family	Both/family
To decide how many children to have.	Both	Both
To refuse to have a child if you don't want to.	Both	Both
To test the sex of unborn child.	No One	Community and State

6. It is not enough to want to exercise ones Sexual and Reproductive Rights. One has to face up to the resultant actions and Responsibilities.
7. Reproductive responsibilities will involve:
 - To be able to look after the child physically, financially and emotionally.
 - Responsibilities towards ones own health and that of the partner and the child.
 - Awareness about the financial, social, physical (health) and psychological impact of pregnancy and child birth
 - Awareness about problems of teenage pregnancy, single parent...etc
 - Resisting social pressure to have a male child.
 - Both Mother and Father have equal rights and the responsibilities and they should be shared equitably.

- Certain biological responsibilities rest on the mother only. One partner may by choice shoulder some of the responsibilities – financial for example.
 - What happens in the event of disagreement. If for example, one partner does not want a child as yet, while the other does not want to postpone it.
6. Use the slide below to recapitulate the Key Messages

Key Messages

- Indulging in High Risk Behaviours at a young age has a lot of implications, such as early teenage pregnancy, STIs, etc. Thus, **abstinence till marriage must be practised.**
- Information, particularly about subjects such as growing up, contains several misconceptions which can hamper informed decision making.
- Discussion with parents/trusted adults can help adolescents in clarifying their knowledge and values related to this topic.
- Young people should know that each one has control over his/her body. So, one should make decisions and learn to be assertive in such a manner that no harm comes to one's body and self.
- Rights and responsibilities are inseparable facets of the most invaluable gold coin that we have i.e. the human body. These are important factors in the partnership between man and woman. Sharing interests and ideas, mutual acceptance of responsibilities, self-realization, mutual respect, and love are necessary for a happy family life.
- At this time in our lives we are especially susceptible to the ideas of 'Love, Romance' etc. But obviously we may not get the kind of commitment from a boyfriend or girlfriend that we can get from a married partner. So it is absolutely essential and safer to wait until marriage and then remain mutually committed and faithful to each other.

Activity 5: Understanding Relationships and Building on Positive Traits



Time: 40 minutes

Objectives



To make participants understand that there are different kinds of relationships and different expectations from each of them.

To inculcate values of Respect, Responsibility, Compassion, Humility.

Life Skills Focused

Social Skills, Effective-Communication.



Preparatory Work

- Prepare OHP slides to be displayed in the activity.



Process

1. Initiate the activity by explaining to participants that in one's life there are different relationships. There are different expectations from different relationships.
2. Ask participants the following questions about relationships:
3. Ask them what are the various relationships that an adolescent has in his/her life.
4. Explain to participants that a number of social changes take place during adolescence. An adolescent starts giving more importance to his/her friends.

Suggested Questions



- What makes a relationship between two people successful?
Qualities of a successful relationship include: Respect, trust, freedom, love, kindness, understanding etc.
- Which of these qualities will you never give up in a relationship? And why?
- What skills do adolescents require to make a relationship successful?
(Interpersonal relationship skills)

5. Ask them what, in their experience, are the common questions that come up regarding relationships.

Expected Responses

- Friendship with the same gender and with the opposite gender.
- Parent and child. (Father/Mother and Child)
- Brother-sister. (Siblings- sister-sister, brother-brother)

6. Randomly ask participants how they can respond to such queries.
7. Explain that while dealing with such situations, Nodal Teachers should help the students understand the meaning of different types of relationships. Love is experience within the family at this age in the relationships with parents or with siblings.

Activity-6 : The Person I Admire



Time: 20 minutes

Objective:



- To develop the capacity to articulate positive feelings about other people. To develop the capacity to critically analyse human beings and their strengths.

Mode: Individual Work

Life Skills Focused:

Critical-Thinking, Decision-Making, Effective-Communication, Self-Awareness

Values enhanced:

Honesty, Compassion, Kindness, Humility



Process

1. Ask the child to identify a person from his/her immediate surrounding – e.g. parents, teachers and friends and not historical character or eminent leaders and complete the following statements.
 - The person I admire the most
 - The two qualities for which I admire him/her.....



- The person who admires me the most
- The two qualities for which he/she admires me

2. Ask the students:

- Does the person you admire know it? How will they know if you don't tell them?
- How do you know that the person admires you? Has he/she said that to you directly? Would you like them to ?
- How do you know if a person likes you? Has he/she said that to you directly or shown it in other ways? Would you like them to?
- Do people you like know it? How will they know if you don't tell them or show it in other ways?

Discussion Points :

- Very often people do not tell the good things they like about someone.
- We take especially our closest relatives and friends for granted.
- People like to be told positive things.

Key Messages

Children become aware of the importance of articulation of positive feelings to people directly. If you start telling people that you like, love or admire them and showing it. In other ways, they will reciprocate positively.

They will also behave the same way with others.

Activity-7 : Positive Strokes to Create a Zone of Happiness



Time: 30 minutes

Objectives:



- To develop the skill to articulate positive things about another person.
- To enhance awareness about the positive energies that are released while appreciating others

Mode: Whole Class

Life Skills Focused:

Intrapersonal-Relationships, Coping with Emotions, Coping with Stress, Self-Awareness.





Values enhanced:

Kindness, Love, Tolerance, Honesty



Materials Required:

Sheets of Paper, Coloured Markers, Safety Pins

Process

1. Explain about “Positive Strokes” with the following information.

This exercise is called “Positive Strokes” and is based on the ideas of Eric Berne, an American who has written about how people behave and relate to each other. He points out that we all need attention from other people to feel good. If we get plenty of good attention we grow up with a positive image of ourselves. As babies we are held, cuddled, hugged, stroked, patted, talked to and so on. As we get older we probably get less attention. People think we are old enough to look after ourselves. But this is not true. No matter how old we are, we need attention and recognition from other people if we are to keep developing positively; He calls this “stroke hunger”. A ‘stroke’ is not necessarily a physical contact. **In our culture we tend not to come into physical contact too often. A “stroke” is any kind of recognition we give to each other. Words, looks, gestures are all strokes.**

The worst thing that can happen to anyone is not to be recognized, to be ignored. The message is ‘you are a nobody, you don’t count, you don’t exist’. Solitary confinement must be like that. It is better to get bad attention than none at all. We all know people who behave badly because that is their way of getting attention.

But Berne says the best kind of attention is the kind we needed when we were young, positive, warm, approving attention, i.e. ‘Positive strokes’. We do not grow out of that. We can all remember how good it has felt when we have been praised, congratulated, told how well we have done something or how clever, kind, honest we are. ‘Positive strokes’ are good to receive, but for many of us, they probably do not happen often enough.

In our culture there is probably more emphasis on ‘Negative strokes’. We are told very quickly about our faults, our mistakes, the things we did not do very well. People are reluctant to praise us too much in case we get ‘big headed’. Most of us therefore get fewer positive strokes than we need. This exercise is to help correct that.

Giving Positive strokes elevates the level of happiness in an Individual. It Gives a feeling of well being which has positive manifestation for the individual for the family and the society.

Materials

2. Ask the students to pin a sheet of paper to each other’s backs. For the next 10 to 15 minutes they are to talk around the room and write on



the sheets any positive thought or feeling they might have had about each other at any stage i.e. anything good they have noticed about each other.

3. There are two rules about what may be written:
 - a) It must be positive – for this lesson we forget criticism
 - b) It must be genuine and something you have really felt or thought.
4. When the writing is finished ask the students to sit down in their places, remove the paper from their neighbour's back and read aloud to the class what is written on it.
5. Ask students to attempt to relate to each other as positively as possible for a week
6. Review the effects of this in class.
7. If put – down occur it is better to resolve the conflict as soon as possible so that resentment does not build up and the situation does not unnecessarily get out of hand.

Kye Messages :

Positive Strokes make one feel good about one self.

It also makes you feel good when you say nice things to others.

Feeling good makes you behave in a more positive manner in every day situations.

Activity 8 : Johari Window

The 'Johari' Window

American psychologists Joseph Luft and Harry Ingham developed the 'Johari' Window model (named after them) in the 1950's, while researching group dynamics. Today the Johari Window model is especially relevant due to modern emphasis on, and influence of, 'soft' skills, i.e. Behaviour, Empathy, Cooperation and Interpersonal Development.



Time: 40 minutes

Objectives:



- To learn to understand relationships between individuals within a class/group.
- To acquire the skill of Self-Awareness
- To enhance the unique latent potential within oneself.

Mode: Individual

Life Skills Focused:

Self-Awareness, Empathy, Interpersonal-Relationships, Critical-Thinking, Decision-Making, Effective-Communication.



Values enhanced:

Truthfulness, Courage, Kindness, Compassion.



Process

1. Ask students to form pairs with persons well known to them.
2. Ask each pair member to complete columns A, B and C in the work sheet given below. Thus, each student lists out how he/she describes himself / herself under the given headings in column A; in column B how he/she would describe the partner; and column C those qualities written by the partner to describe him/her.

The Johari Window actually represents information about a person in relation to their partner, as described below.

3. Now ask them to transfer the points from the Activity Work Sheet to the Format given below it.
 - (a) Thus the common points listed out by the student (column A) as well as his/her partner (column C) are placed in the **Open Self**.
 - (b) The qualities pointed out by the other person but not by the student himself (from Column C) are placed in the **Blind Self**
 - (c) The qualities pointed out by the students (column A) but unknown to other person is placed in the **Hidden Self**.
4. In this way the **Unknown Self** of the person is revealed.

Teacher's Note

- The **Johari Window** explains how the self can be represented by a window that is divided into four quadrants.
- The aim should always be to develop the 'Open Area' for every person, because when we work in this area with others we are at our most effective and productive.
- The first quadrant is the **Open Self**-an area known to the self as well as others. It is the space where there is good communication, cooperation and no distractions, mistrust, confusion, conflict and misunderstandings. The size of the open area can also be expanded vertically downwards into the hidden space by the person's disclosure of information, feelings, etc about him/herself to the partner or by the partner asking the person about him/herself. The size of the open area can be expanded horizontally into the blind space by seeking and actively listening to feedback from the partner or the partner offering feedback, sensitively of course.
- The **Blind Self** is the window that is unknown to self and known to the others. This blind area is not an effective or productive space for individuals. It could also be referred to as ignorance about oneself. By seeking or soliciting feedback from the partner, the aim should be to



reduce this area and thereby to increase the productive open area, i.e. to increase self-awareness.

- The **Hidden Self** is that area that is known to the self but unknown to others. The hidden area could also include sensitivities, fears, hidden agendas, manipulative intentions, secrets, etc. Typically, a lot of hidden information is not very personal, it is work or performance-related, and so is better positioned in the open area.
- Lastly the **Unknown Self** is unknown to self as well as others. This 'Unexplored Self' can be brought into the **Open Self** area by disclosure, which enables better understanding, cooperation, trust and productivity. Large unknown areas would typically be expected in younger people, and people who lack experience or self-belief.

(E.g. an ability that is under-estimated or un-tried through lack of opportunity, encouragement, confidence or training; a natural ability or aptitude that a person doesn't realise they possess; a fear or aversion that a person does not know they have; repressed or subconscious feelings; conditioned behaviour or attitudes from childhood)

Key Messages :

Students learn to:

- Understand relationships between individuals within a class/ group/ team.
- Realize the unexplored potential in them.

JOHARI WINDOW- WORKSHEET

A	B	C
How I describe myself? _____ _____	How I describe my friend? _____ _____	How my friend describes me? (fill this part from what the friend says about you) _____ _____ _____ _____ _____
<ul style="list-style-type: none"> • Favourites (colour, food, etc) 	<ul style="list-style-type: none"> • Favourites (colour, food, etc) 	
<ul style="list-style-type: none"> • Feelings related to important issues (e.g. subjects, friends, etc) 	<ul style="list-style-type: none"> • Feelings related to important issues (e.g. subjects, friends, etc) 	
<ul style="list-style-type: none"> • Experiences (achievements, failures) 	<ul style="list-style-type: none"> • Experiences (achievements, failures) 	
<ul style="list-style-type: none"> • Views 	<ul style="list-style-type: none"> • Views 	
<ul style="list-style-type: none"> • Attitudes 	<ul style="list-style-type: none"> • Attitudes 	
<ul style="list-style-type: none"> • Skills 	<ul style="list-style-type: none"> • Skills 	
<ul style="list-style-type: none"> • Intentions 	<ul style="list-style-type: none"> • Intentions 	
<ul style="list-style-type: none"> • Motivation 	<ul style="list-style-type: none"> • Motivation 	
<ul style="list-style-type: none"> • My Fear 	<ul style="list-style-type: none"> • Fear 	
<ul style="list-style-type: none"> • My greatest strength 	<ul style="list-style-type: none"> • Greatest strength 	
<ul style="list-style-type: none"> • My weakness 	<ul style="list-style-type: none"> • Weakness 	
		<p>Now ask them to transfer the points from the above activity work sheet to the format given below.</p> <ul style="list-style-type: none"> • Common points listed by student and his partner Column A and C - to be put in Open Self • The qualities pointed out by the other person (not the student himself) – to be put in Blind Self • The qualities pointed out by the students (Column A) but unknown to other person – to be put in Hidden Self

Open Self	Blind Self
Hidden Self	Unknown Self

- To make proper use of the unexplored self.
- Improve self-awareness & personal development.

5. Use the slide below to highlight the Key Messages

Key Messages	Slide 55
<ul style="list-style-type: none"> • As physical changes occur in Adolescents, they also experience changes in their feelings. • The best relationships result from both people contributing to the positive qualities. A good relationship requires mutual trust, commitment, give and take, maturity and adjustment. • Adolescents need to learn to regulate their feelings in a friendship. • It is important to communicate to adolescents that they are responsible for the decisions and actions they take. • A good friend should be trustworthy, reliable, empathetic, caring. 	

Activity 9: Different Roles – Different Expectations



Time: 40 minutes

Objective



To enable participants understand and analyse their own perceptions of gender, and the influence of social norms, media etc.

Life Skills Focused

Self-Awareness, Consensus-Building, Interpersonal-Relationships, Critical-Thinking.



Preparatory work

- Prepare OHP slides to be displayed in the activity.



Process

1. On the blackboard make three columns headed: Female, Male, Both.
2. Ask participants to think about clothing. Which types of clothes do they think are suitable for females to wear, which for males, and which can be worn by both?
3. Next, brainstorm in other categories such as jobs/careers; education; sports; tasks around the house; emotions.
4. Note the responses of participants under the three headings, and ask



the group to reflect on what has influenced their categorisation.

(Expected responses can be family, media, etc.)

5. Initiate a discussion on the following questions:

Suggested Questions



- **How does our community view girls/women?**

(Expected responses: Girls and women are expected to be caring, gentle, passive, respectful and obedient, be responsible for domestic chores and childcare, speak and dress modestly, obey men, behave responsibly and not express their desires).

- **How does our community view boys/men?**

(Expected responses: Boys and men make important family decisions, for example about household expenditure, how many children to have, they marry and provide for the family, are strong and do not show their emotions, take the lead in all relationships).

6. Display slide.

Slide 56

- **Gender** describes whether someone is masculine or feminine according to behavioural differences, for example, how they dress, their work and their designated role in society. These characteristics are defined by each culture so they can be different in different cultures and they can change.
- **Gender roles** are ideas about how men and women should behave. Because gender roles are created by society, it is possible to change them.

7. Use the following questions to generate a group discussion.

Questions



- What are the expectations from males and females in our society?
- Are these expectations realistic?
- Are your views different from those of the community?
- What ideas about males and females would you like to change? How?

8. Generate a debate by randomly asking two participants, to give six points each (for and against) the topic "women's place is at home".

9. Use the slide below to recapitulate and highlight the Key Messages.

Key Messages	Slide 57
<ul style="list-style-type: none"> • No one gender is inferior to the other. • Given a chance, both can perform complementary roles. • Different peoples and cultures have different ideas and beliefs about gender roles and responsibilities. • No single viewpoint is the absolute truth; perceptions change with socio-cultural changes. • Learning to tolerate and respect alternative viewpoints and building a consensus is an important life skill. 	

Activity 10: Let's Clarify – Myths and Misconceptions

Whose Job Is It To.....?



Time: 20 minutes



Objectives:

- To create awareness about gender stereotypes
- To create awareness about the roles taken on by men and women and the fact that they are interchangeable.

Mode: Whole Class

Life Skills Focused:

Critical-Thinking, Communication-Skills, Interpersonal-Relationships, Empathy.

Values enhanced:

Truthfulness, Courage, Compassion, Kindness



Process

1. Divide the class into several groups.
2. Assign each group one of the following situations.
 - a. A busy morning at a Bank,
 - b. A pooja in a temple
 - c. A crowded Bus
 - d. A battle raging between two warring countries
 - e. A Market place with different kinds of shops - vegetable shop, TV & radio shop, tea stall, cycle repair etc.
3. Ask them to enact the Role-Plays. Give them 15 minutes to plan. Tell

them to be sure to give every character a name and not to use any of their own names.

4. As each group does the Role-Play, gender stereotyping will become clear- that even in the plays males and females do certain types of work only and no roles are interchanged. For example.
 - The bank peon, bus driver, surgeon, priests, salesmen, soldiers etc. are usually males and the nurse; people on the bus etc. are usually females.
 - Shoppers - for vegetables are usually women and for TV or cycle, men.
 - For furniture/ vehicles, usually men
5. Ask the students "Are these roles inherent in the person? Can they be interchanged between men and women; or boys and girls?"
6. Explain about Gender, Gender-Identity, Gender-stereotyping, and Gender-exploitation.

Key Messages :

- Roles taken on and work done by men and women are not gender specific- they are interchangeable.
- Gender stereotyping is not good as it limits the opportunities people have in terms of what they are capable of doing.



Activity 11 : Understanding Gender



Time: 20 minutes

Objectives:

- To enhance knowledge, about gender and gender stereotyping.
- To create awareness about myths and misconceptions related to gender

Mode: Pair Work

Life Skills Focused:

Critical-Thinking. Creative-Thinking, Problem-Solving, Decision-Making.

Values enhanced:

Compassion, Tolerance, Courage, Love, Social-Justice.

Material Required:

Cutout Statements

Gender refers to the socially determined personal and psychological characteristics associated with being male or female, viz. masculinity and femininity. It is the different meanings and roles that societies and culture assign to people, which are different in different societies and change with time. For example an increasing number of women now work outside the home and some men have taken on more household responsibilities.

Gender identity is the sense that one is male or female. Gender messages begin at birth with the announcement, “It’s a boy!” or “It’s a girl” and by the time they are 2 ½ or 3 years of age, children have a clear idea what gender they are. It develops through the many messages received from parents and other adults!”.

Gender Stereotype: is any biased generalization according to which people are wrongly assigned traits they do not possess and also extends it to all spheres of activity.

Children develop stereotyping from a young age- gender awareness by two years; value judgments by three; other stereotyped behaviors by four to six; and stereotypes about persons from far- away countries by ten years of age.

Children should learn to identify common stereotypes, their sources and how they adversely impact on our behaviour; fight gender inequality and behave responsibly.

Gender Exploitation: When the sex of the individual is reiterated and used to promote products/ ideas in a gender – irrelevant situation.

MATCH THE FOLLOWING

Process

1. Make the following sets of sentences about people in non- traditional gender roles.
2. Cut each sentence in half, so that one half contains information about the role, and the other indicates the gender of the person.
3. Give a slip of paper with a sentence fragment. Ask them to move around the room and attempt to find another student whose fragment completes the sentence.
4. When all the students have completed their sentences, ask them to read aloud to the rest of the class.
5. Discuss the following points
 - Was this exercise easy or difficult? Why?
 - Was there anything surprising or unexpected about the completed sentences?
 - Definition of prejudice, stereotyping etc.
 - Where do our gender stereotypes come from?

Additional Activities



She liked to	Play cricket after school
The father liked to	Make snack for the children when they came home from school
Before the nurse helped with the operation	He washed his hands
The boy changed his clothes before going	To the dance class
The police officer blew the whistle away	Because she saw the thief running
Before he went home,	the secretary made sure that all the letters were typed
The surgeon put on a mask	Before she began the operation
Before entering the temple the priest	Washed her feet.
The auto rickshaw driver	Re- set her meter when passengers got in
My mother locked the door	Before she left for work
The Saint	Swept the courtyard with her broom.
After he grabbed the ball	The paraplegic shot it through the hoop

1. Ask students to list gender based stereotypical statements like “Don’t cry like a girl”; “All women drive cars badly”; “She wears the pants in the house” and discuss the reasoning behind them
Are these statements true?
Are these justified?
2. Ask them to interview women who are housewives / mothers at home to find out the actual physical work like bending, stretching, lifting weights etc. they do in the course of housework.
3. Ask them to interview men in the same age bracket to find out how much physical strength is involved at work done by them, both occupational and at home.
 - What are the reasons for the persistence of the notion that women constitute the weaker sex?
 - Are these occupations in keeping with stereotypes (men as

managers, doctors or pilots and women as nurses, air- hostesses or teachers)?

- Are the jobs equal with respect to status, power, decision-making, salary and promotions?
 - Can a member of the opposite sex also perform the job? What would happen?
4. Ask the students to watch advertisements / bring in advertisement - What types of stereotypes are most common?
 5. Ask student watch / bring in an advertisement that showed men / women in non- stereotyped roles and their reactions to them? How might other people react to the same situation?

Key Messages

- Many myths and misconceptions about roles and responsibilities in the area of social interaction, gender etc. exists.
- These are usually gender biased and result in unfair disadvantages to girls and women.
- They are outdated and have to be corrected.

Activity 12 : Analyzing Short Stories For Gender Stereotypes

Time: 30 minutes



Objectives:



- To enhance knowledge about gender and gender stereotyping.
- To create awareness about myths and misconceptions related to gender.

Mode: Group Work

Life Skills Focused:

Critical-Thinking, Creative-Thinking, Problem-Solving, Decision-Making.

Values enhanced:

Compassion, Tolerance, Courage, Love, Social-Justice.



Materials

A collection of short stories appropriate for the class level or younger

Process



1. Divide the class into groups of 4 or 5 students each. Assign each group a short story from the class, school, or public library.
2. Ask them to note the following as they read the short story as a group.

- Title
- Author
- How many characters are there?
- How many of the characters are girls or women and what roles do they have most often?
- How many of the characters are boys or men and what roles do they have most often?
- Who is the main character?
- Describe any special concern, problem or issue that the main character has to resolve. How is it resolved?

3. Ask them to report their findings to the whole class.
4. Ask them to compile the quantifiable results into a bar graph.

Discussion points

- Were there more female or male characters in the stories?
- Did females and males have similar roles in the stories or were there noticeable differences in the types of things they did?
- Were most of the main characters male or female?
- Were there gender differences in the types of concerns, problems or issues that the main characters had to resolve? Were they equally serious?
- Who were more often portrayed as the problem- solvers - females or males?
- Were there differences in the ways that females and males resolved their concerns? If so, what were the differences?
- Was there gender stereotyping in this book?
- What comments or reactions do you have about this book?

Additional Activities

Ask the students to attempt to rewrite the stories in a non- biased way.

- Ask the students to identify the types of stereotyping that are commonly seen in their school or community.
 - a. Collect cartoon strips / newspaper articles that they feel strengthen gender stereotypes.
 - b. Analyze television serials / films/ advertisements - difference in portrayal of men and women - how people react to these stereotypes; their reactions to reversals in stereotyping.
 - c. Recognize other stereotyping in the Media / Books
 - d. Compile a list of instances of Gender Exploitation.
- Ask them to consider possible ways to raise the awareness of others

about potential problems by writing articles on bias in the school or local newspaper, for example, or a dramatization to be presented at a school assembly.

Activity 13 : Gender Discrimination

Time: 30 minutes



Objective:



- To enhance knowledge about gender and gender stereotyping.
- To create awareness about myths and misconceptions related to gender.

Mode: Group Work

Life Skills Focused:

Critical-Thinking, Creative-Thinking, Problem-Solving, Decision-Making.

Values enhanced:

Compassion, Tolerance, Courage, Love, Social-Justice.

Materials Required:



Chart paper, magazines, scissors, gum / cello-tape.

Process



1. Divide the class into groups and ask the students to list out as many Gender-Related discriminations and atrocities they can think of against girls and women.
2. Once the students have brainstormed in their groups, instruct them to portray the list in the form of a collage on a chart paper. Give them a week's time to prepare this.
3. Ask the group leaders to present all the discriminations and atrocities they have depicted in the collage and encourage discussion.

Students may list only major atrocities and may overlook subtle day-to-day discrimination against girls and women. They should realize that right from the time of conception the girl child is discriminated against all her life. Explain about Gender Discrimination and also read from the following list.

Some common gender discriminations and atrocities

- Foeticide , Female infanticide
- Sexual abuse
- Girls being weaned early from breast feeds
- Girls receiving smaller portions and poorer quality of food and girls & women eating food only after the entire household has been fed
- Least priority to health & emotional needs of girls

- Girls not sent to school or even if sent, not allowed to complete their education in order to look after siblings or do household work
- Women being poorly paid and not obtaining equal wages for equal work
- Discrimination at their work places
- Poor status in the family where men continue to control decision making, limited family resources, freedom of movement, access to the world outside, etc
- Women not being allowed to make choices or decide on issues regarding pregnancy, abortion, contraception
- Male risk behaviour leading to STDs and HIV/AIDS infection in women.
- Being held responsible for not giving birth to a male child
- Women not allowed to perform religious rites
- Violence against women in the form of sexual violence, sexual harassment, forced prostitution, domestic violence, marital rape, wife battering
- Dowry harassment and deaths, Practice of Sati , Neglect of widows
- Ridicule & marginalization of unmarried women and widows by the society.
- Glorification of subservience to men, martyrdom, Self-Sacrifice etc.

4. Ask students to list what they can do at a personal as well as a community level to discourage and prevent such discrimination.

Key Messages :

- Gender related discrimination against girls and women are deep rooted in our culture and society.
- We can and should all do our best to promote the idea of equity and equality.

Gender Discrimination

From the time of conception the girl child is discriminated against all her life because daughters are perceived as an economic and social burden and also because of the son obsession in our patriarchal society.

Discrimination includes foeticide & infanticide, being weaned from breast feeds earlier than male babies; her nutritional health, emotional, educational and other needs being given the last priority. Girls start working earlier than boys, work longer and harder throughout their lives. The woman is required to meet the needs of her family before her own needs. The woman is blamed for not producing children even if the husband is infertile or for having only girl babies even though it is the father's Y gene that decides the sex of the child.

Men control decisions regarding family resources, women's sexuality, freedom of movement, access to the world outside the home, etc. Women have very little decision-making power and issues concerning her are marginalized.

Violence against women is prevalent among all-social classes and castes in India and take the form of sexual violence, sexual harassment, domestic violence, rape and sexual abuse, marital rape unwanted pregnancy, forced abortion, STDs and HIV /AIDS, forced prostitution; dowry deaths, mental cruelty, neglect of widows and elderly women, etc. Alcoholism has a strong correlation with domestic abuse.

Wage earning empowers women. But this is an additional burden on them and very often they do not have control over their earnings, and face discrimination at the work place such as unequal wages, sexual harassment etc. All the domestic work is unpaid and unappreciated.

The above examples are blatant and offensive but there are many others, which are subliminal. e.g. female models used to sell men's shirts; the 'macho/complete' man used to sell cigarettes.

When gender discrimination has been socialized and internalized, it is no longer visible to the gender insensitive. Unfortunately, religion, health care, education, the legal system, employment and the media, reflect and promote gender discrimination.

Activity 14 : Sexual Abuse : Awareness Building and Sensitising

Time: 20 minutes



Objective:

To raise Awareness about Sexual-Abuse



Mode: Separately for boys and girls by male and female teachers.

Life Skills Focused:

Critical-Thinking, Creative-Thinking, Problem-Solving, Decision-Making.

Values Enhanced:

Compassion, Tolerance, Courage, Love, Social-Justice.

Process



- Divide the class into groups
- Read the following case study and distribute it to the groups.
- Brainstorming about the case study
- Critically analyze the issue
- Comment on the issue

- Sharing experiences

Raghav, a student of Class IX, constantly bunked his class and was always found in the primary block of the school. The disturbing part was his association with boys of classes VI or V, who were always scared of him and reported the same to the principal.

Suggested questions

1. Can you identify the inappropriate behaviour of Raghav?
2. How can Raghav be made to understand the severity of his behaviour?
3. Which Life-Skills can be taught to the younger boys to prevent such a situation?
4. How can these young boys be helped to cope with such a situation?

Key Messages :

- Several instances of Sexual-Abuse and Sexual-Harassment take place around us everyday.
- This is one of the problems in our communities that have to be tackled by us.

Activity 15 : Sexual Abuse : What Can I Do?

Time: 20 minutes



Objective:

To raise Awareness about Sexual-Abuse



Mode: Separately for boys and girls by male and female teachers.

Life Skills Focused:

Critical-Thinking, Creative-Thinking, Problem-Solving, Decision-Making.

Values Enhanced:

Compassion, Tolerance, Courage, Love, Social-Justice.



Process

1. Divide the class into 4 groups.
2. Give each group 10 min. to discuss the following situation and present their decision to the rest of the class.

The school watchman frequently touches and pets girls, sometimes brushes their chest and does other such things that make them uncomfortable and angry.

Discussion Questions

- Should any action be taken and if so what?
- Suppose the abuser is a teacher, parent or the boss at work or senior school mate or a close relative : what action if any, can be taken?

Key Messages :

- Several instances of Sexual-Abuse and Sexual-Harassment take place around us everyday.
- This is one of the problems in our communities that have to be tackled by us.

Homework

List other instances of such Sexual-Abuse or Sexual-Harrasment that you know of. Can anything the done about these and if so what? Is there something that YOU can do in a personal capacity?

Use the slide below to highlight the salient findings of Child Abuse

Salient Findings of Study on CHILD-ABUSE

{Source: Study on Child Abuse: INDIA 2007 – Ministry of Women & Child Development, Govt. of India}

- Two out of every three children were physically abused.
- Out of 69% children physically abused in 13 sample states, 54.86% were boys.
- Over 50% children in all the 13 sample states were being subjected to one or the other form of physical abuse.
- Out of those children physically abused in family situations, 88.6% were physically abused by parents.
- 53.22% children reported having faced one or more forms of sexual abuse.
- Andhra Pradesh, Assam, Bihar and Delhi reported the highest percentage of sexual abuse among both boys and girls.
- 21.90% child respondents reported facing severe forms of sexual abuse and 50.76% other forms of sexual abuse.
- Out of the child respondents, 5.69% reported being sexually assaulted.
- In matters of sexual abuse, 50% abusers are persons known to the child or in a position of trust and responsibility.
- Most children did not report the matter to anyone.

Session VIII : Reproductive Tract Infections (RTIs), Sexually Transmitted Infections (STIs) and HIV/AIDS

Time: 2:00 pm – 4:30 pm

Activity 1: RTI/STI Basic Facts Prevention

Class : XI (Age Appropriate.)



Time: 30 minutes

Objectives



- To provide participants with information on RTIs/STIs.
- To inculcate the value of Cleanness, Responsibility, Determination

Mode : Separately for boys and girls.

Life Skills Focused

Self-Awareness, Critical-Thinking.



Preparatory Work

- Read Section II "RTI/STI and HIV/AIDS" from the Reference Material.
- Prepare OHP slides to be displayed in the activity.



Process

1. Initiate this activity by asking participants whether they have heard of the terms RTIs/STIs. What do they mean, and why is it important to know about them?
2. Write some of the correct responses on the blackboard.
3. Provide accurate information through the slide presentation.
4. At the end of the presentation ask participants the following questions. Encourage them to come up with the answers.

RTIs	STIs Slide 58
<ul style="list-style-type: none"> • These are infections of the reproductive tract in both males and females. • All RTIs are not sexually transmitted. Some may occur due to imbalance of the normal bacteria in the reproductive tract. • Agents of infection are bacteria, viruses or protozoa. 	<ul style="list-style-type: none"> • STIs are RTIs transmitted during sexual activity. • Some of them have no cure.

Common STIs	Slide 59
<ul style="list-style-type: none"> • Chlamydia. • Chancroid. • Genital warts. • Gonorrhoea. • Hepatitis B and C. • Herpes simplex. • Syphilis and HIV which leads to AIDS. <p>The germs or virus that causes these diseases are all very small and cannot be seen with the naked eye. They can be diagnosed through medical examination and various laboratory procedures.</p>	

Consequences of Untreated STIs	Slide 60
<ul style="list-style-type: none"> • Infected persons can transmit STI to their partners. • The reproductive organs of the infected person could get damaged, resulting in infertility or sterility. • A pregnant woman can transmit it to her baby, resulting in the infant suffering from congenital defects/malformations, deafness or blindness. • There is increased vulnerability to HIV. • There are increased chances of cervical cancer. • Repeated abortions or even foetal death could take place. 	

Prevention and Treatment of STIs

Slide 61

- Improving knowledge of RTIs/STIs via adolescent health education.
- Maintaining proper genital hygiene; girls should also maintain good menstrual hygiene.
- Practising abstinence
- Not neglecting any unusual discharge.
- Seeking medical help immediately.
- Avoiding quacks.

Questions



- How can this information about RTIs/STIs help them?
- Why do young people feel shy to talk about such issues?
- What can a young person do if he/she thinks that he/she has an RTI/STI?
- What skills can a young person use to prevent RTIs?

Key Messages

Slide 62

- Both girls and boys should practise proper pubic hygiene to prevent RTIs.
- Girls should follow proper menstrual hygiene to prevent RTIs.
- It is important to remember that the symptoms of RTIs/STIs may go away after some time even without treatment, but the disease remains in the body and causes damage to the reproductive tract. Hence all RTIs/STIs must be treated adequately and early.
- Qualified doctors are the only ones who can give a guarantee of care. Self-medication and quacks do more harm than good and therefore should be avoided.
- STIs increase vulnerability to infections such as HIV.
- Abstinence is the best form of protection from STIs/HIV.

Activity 2: Let's discuss – HIV/AIDS



Time: 60 minutes

Objective



- To enhance the knowledge of participants about HIV transmission, prevention, and the vulnerability of young people to HIV infection.

Life Skills Focused

Critical-Thinking, Cooperation and Teamwork, Self-Awareness.



Preparatory Work

- Prepare OHP slides to be displayed in the activity.



Process

1. Inform participants that there will be a quiz to test their level of awareness of HIV/AIDS.
2. Divide the participants into two teams – Team A and Team B
3. Ask Team A the first question. If they answer it correctly, award them one point or else pass the question to Team B. If Team B is also unable to answer, then provide the correct information. Identify incorrect or incomplete information wherever necessary and provide correct information through slides. Continue the process until all the questions have been discussed.

Suggested Quiz Questions



- What does HIV stand for? Is it an STI?
- How does HIV affect the immune system?
- What are the ways in which HIV can be transmitted?
- Are young people vulnerable to HIV infection? Or, Do you think young people can get HIV infection? Or, In your opinion how many young people are affected by HIV/AIDS in India?
- Why are girls more vulnerable to HIV?
- Can one tell if a person has HIV?
- Can one get tested for the presence of HIV? What are the tests available?
- Where can a person get tested for HIV?
- How does HIV progress into AIDS?
- What is AIDS?
- What is difference between HIV+ and AIDS?
- What are the signs and symptoms of AIDS?
- What are the drugs available for HIV+ people and how do these work?
- How can a person prevent HIV infection?

HIV is

Slide 63

Human

Immunodeficiency

Virus

Hence, HIV is present only in humans.

Immune System

Slide 64

- In healthy individuals, infections are kept at a distance through an array of defenders which constitute the immune system in the body.
- White blood cells are an important part of this defence, which fight and destroy the infection-causing bacteria and viruses. HIV directly attacks, enters and stays inside these white blood cells. Slowly, the number of white blood cells in the body is reduced and the immune system is paralysed.

Modes of HIV Transmission

Slide 65

- Infected blood – blood transfusions with untested blood.
- Infected equipment – needles/instruments/syringes.
- From an infected mother to her unborn child.
- Unprotected sexual activity when one of the partners is infected with HIV. Hence, it is a STI.

HIV and Young People

Slide 66

- Six young people are infected every minute with the HIV virus. Half of all new HIV infections worldwide are among young people aged 15-24 years. Those affected are likely to die of AIDS before they turn 35.
- In some of the hardest-hit countries, adolescent girls are five to six times more likely to be HIV positive than their male counterparts due to various factors.

Factors that put young people at risk

- Curiosity about sex.
- Limited information on growing up and sexuality issue.
- Early marriages.
- Experimentation with alcohol and drugs.

How One Can Tell if a Person is HIV Positive?

Slide 67

- A person living with HIV may not show any external signs of the infection, he/she may continue to be healthy but can infect others.
- The only way to find out if one has HIV is to have an HIV test. This is done at a hospital or clinic and should involve being counselled about HIV infection. The test requires a person to give a sample of blood which is tested for the antibodies produced by the body to fight HIV.

Different Types of Tests Used for HIV Detection

Slide 68

- Rapid Test / Spot Test
- ELISA [Enzyme Linked Immunosorbent Assay]
- Western Blot
- PCR-DNA (Polymerase Chain Reaction - Deoxyribonucleic Acid)

The Elisa/Rapid/Spot Tests are screening tests that need to be confirmed by Western Blot Test. They detect antibodies of HIV. PCR-DNA detects the presence of the virus.

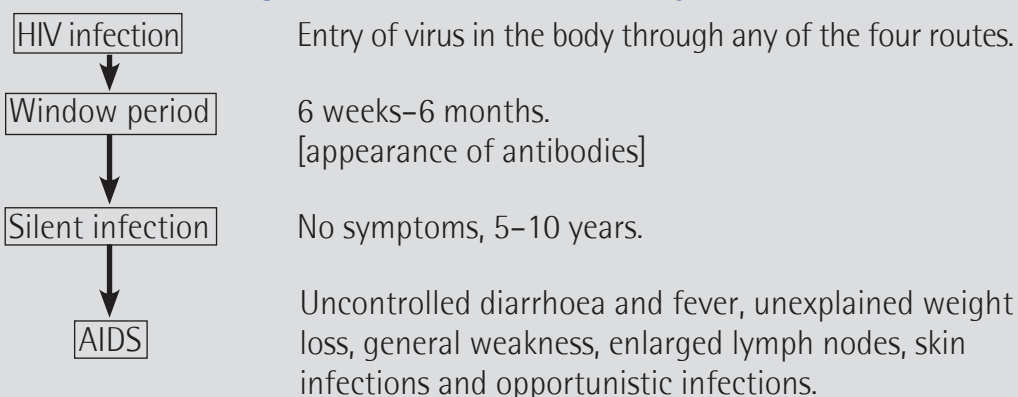
Integrated Counselling and Testing Centres (ICTCs)

Slide 69

- A person can get tested for HIV at a general hospital or Integrated Counselling and Testing Centres (ICTC) or any medical centre that provides these facilities.
- ICTCs provide pre- and post-HIV test counselling to understand the need for testing as well as the test results.
- Counsellors are bound by confidentiality – that means that whatever is disclosed should not be shared or discussed with others.

Progress of HIV in the Body

Slide 70



AIDS Results from Infection from HIV

Slide 71

- Acquired:** Not genetically inherited but contracted from somebody.
- Immune Deficiency:** Inadequacy of the body's main defence mechanism to fight external disease producing organisms.
- Syndrome:** Not just one disease or symptom, a group of diseases or symptoms present in the body.

Difference between HIV and AIDS

Slide 72

- HIV+ means that the person has been infected with HIV.
- Being HIV+ does not mean that a person has AIDS.
- AIDS is the advanced stage of HIV infection.
- A person is said to have AIDS when the immune system is completely destroyed and potentially opportunistic infections invade the body.
- An HIV+ person can appear healthy and carry out most day-to-day activities.

Signs and Symptoms of AIDS

Slide 73

As the person's immune system starts getting weak, signs and symptoms of AIDS develop. These can be:

- Weight loss greater than 10% of previous body weight.
- Fever longer than one month.
- Diarrhoea longer than one month.
- Persistent severe fatigue.
- Repeated infections.

These symptoms can also occur in people who do not have HIV infection.

However, when several of these occur at the same time in the same person and are persistent, they may indicate the development of AIDS and need to be investigated.



Prevention

Slide 74

There is a lot that young people/adults can do to protect themselves from HIV infection:

- Practice abstinence.
- Learn the facts about growing up and HIV/AIDS.
- Clarify doubts and fears.
- Resist peer pressure to engage in sexual activities.
- Avoid substances such as alcohol and drugs, which cloud one's judgement and make one prone to risky behaviour.
- Sterilise any instruments that pierce the skin, such as needles and syringes.
- Test all blood being used before transfusion; it should be certified HIV free.
- Pregnant women should get themselves tested; treatment that will prevent mother to child transmission is now available in all government medical hospitals; if necessary, seek treatment.
- As adolescents: abstinence till marriage.
- As adults: faithfulness to one's partner.

4. Use the slide below to recapitulate and highlight the key messages.

Key Messages

Slide 75

- Everyone is vulnerable – especially young people. Global data shows that 50% of all new infections occur in the 15–24 year age group and 35% of all reported new infections in India are in the 15–29 year age group.
- Young people are at the centre of the epidemic.
- Learn to protect yourself, and dispel myths about HIV. Remember, HIV is preventable.
- A person living with HIV may not show any external signs of the infection, he/she may continue to be healthy but can infect others.
- The only way to find out if a person has HIV is to have an HIV test. This is done at a hospital or clinic and should involve being counselled about HIV infection. The test requires the person to give a sample of blood, which is tested for the antibodies produced by the body to fight HIV.
- For every person with AIDS, there are many more who are infected with HIV but have no visible symptoms.
- There is an important distinction between infection with HIV and AIDS (the late stage of the infection). Being HIV+ does not mean that the person has AIDS.
- Even if the HIV tests are negative, the person should take preventive measures in the future.
- It has been difficult to develop a cure or vaccine, because the HIV virus hides inside the very cells that are supposed to attack such viruses.

Activity 3: Assessing the Risk of HIV Transmission



Time: 30 minutes

Objectives



- To clarify participants' knowledge of risky and safe behaviours related to HIV transmission.
- To inculcate the value of responsibility, determination.

Life Skills Focused

Critical-Thinking, Self-Awareness and Problem-Solving.



Preparatory work

- Prepare OHP slides to be displayed in the activity.



Process

1. Read out the following statements one by one and ask participants whether they represent high risk, low risk or no risk situations for HIV transmission.
2. Check whether the answer given by them is correct or not and give explanations for each of the statements. Clarify any further doubts and questions.

Statements

- (i) Riding on a bus with an HIV infected person (No risk).
- (ii) Sharing a razor to shave (High risk).
- (iii) Cutting the skin with a knife used by others (High risk).
- (iv) Sharing needles for injecting drugs (High risk).
- (v) Sharing needles for getting ear pierced/tattooing (High risk).
- (vi) Donating blood (No risk).
- (vii) Being bitten by a mosquito (No risk).
- (viii) Cleaning up HIV infected blood without wearing gloves (High risk).

3. Ask participants why it is so important to get the facts right. How can one spread the right information about HIV transmission to other people?

Suggested Answers

For statements (i)

HIV does not spread through normal contact with infected people or through daily activities. HIV cannot survive in air, and so is not spread by shaking hands, sharing a towel, sharing combs, going to school with, or touching someone with HIV/AIDS

For statements (ii), (iii), (iv) and (v)

Yes. Any instruments that cut or puncture the skin can collect small amounts of infected blood. Unless the instrument is sterilised, the virus in the infected blood can be passed on to the next person who uses it. That is why it is important to avoid tattooing, ear piercing, acupuncture, blood-letting ceremonies or sharing razors unless one is absolutely sure that the instruments used have been sterilised or boiled in water for half an hour.

For statement (vi)

Donating blood does not cause transmission of HIV if the needle used for drawing blood is sterilised or disposable. The recommended standard practice for all transfusion services is to test and exclude from use all blood and blood products that are "sero positive" i.e., contain antibodies to HIV. However, there is a very small chance that the occasional transfusion may contain the virus since an HIV infected donor might be in the "window period" (test negative) when giving blood.

For statement (vii)

- Evidence clearly shows that HIV is not spread by mosquitoes and other insects. For example, bedbugs, lice and fleas in the households of people infected with HIV do not spread the virus to others in such households.
- If mosquitoes were responsible for spreading HIV, then people of all ages would be infected. In fact, children before puberty are rarely infected, unless they were born to infected mothers or had a transfusion with infected blood.
- We know that HIV lives in some cells of the human body but that it does not live in the cells of insects. Therefore, mosquitoes and other insects are not a suitable home for HIV.
- HIV is not like the malaria parasite which thrives inside the mosquito and spreads to people when mosquitoes bite.

For statement (viii)

Nurses and other health service staff who come in close contact with HIV infected body fluids such as blood, mucus etc., are trained to take precautions as part of the hospital routine.

(Source: School Health Education to Prevent AIDS and STD - WHO, UNESCO, 1994)

4. Use the slide below to recapitulate and highlight the key message.

Key Messages	Slide 76
<p>How HIV is not transmitted</p> <ul style="list-style-type: none"> • The virus can live only inside a living human body and survives for just a few minutes outside it.. Therefore, it is not an air-borne disease. • HIV cannot be transmitted through saliva, tears, vomit, faeces and urine, although very small amounts of the virus have been found in these fluids. HIV has not been found in sweat. • HIV cannot pass through unbroken skin and is not spread through casual contact such as touching someone with HIV, or something they have used; sharing food or drink, using the same utensils; or using the same toilet seats or washing water. • Nursing or caring for someone with HIV is not risky if sensible precautions are followed, such as the safe disposal of sharp needles and keeping cuts covered. • HIV is not transmitted by mosquitoes or other blood-sucking insects because the virus cannot survive in their bodies. 	



Your Notes / Observations

Activity 4 : Crossing The Road



Time: 20 minutes

Objective:



To develop awareness regarding risk taking behaviour

Mode: Group

Life Skills Focused:

Decision-Making, Problem-Solving, Co-operation

Values enhanced:

Responsibility, Courage, Determination

Purpose

It is not enough to give theoretical knowledge about AIDS. The students will have to realize that HIV/ AIDS is something that can affect them and that the responsibility of preventing the infection lies entirely with them.

This Game will bring out the meaning of “risk” and the factors that could lead to risk behaviour

Process



1. Read out the following scenario and give more information in stages.

“You are waiting to cross the road and see a bus coming at high speed. Will you try and run across?”

{Usually the answer is - “No” }

Your friend says, “I bet ten rupees that you cannot cross the road.” “Will you take the bet?”

{Some students may say that they will take the bet.}

Your younger sister also has to cross the road with you. Will you take the bet and run with her across the road?

{Usually nobody will want to take the risk at this point}

Discussion Points

- Peer pressure can make you take risk, which you would not normally take. This is why students experiment with alcohol, smoking, drugs, sex, etc.
- When you feel responsible for someone else (in the above story, your sister), you are less inclined or not at all inclined to take any risks. But you must remember that you have a responsibility not only towards your parents, teachers, friends, etc., but are also responsible for your own health.

- We may think that all the facts about HIV/ AIDS/ Prevention/ Risk Behaviour, etc. are not of relevance to us today. But unless we have the information today, you may not know how to protect yourself in the future.

Key Messages :

Peer pressure along with the freedom away from the parental care, which you may experience a few years hence, can pressurize you into risk activities. Please remember that HIV/ AIDS is one area where there is no looking back and ONLY YOU can take the right decisions in your own interest.

Activity 5 : What If...?

Time: 20 minutes

Objective:



To develop skills to plan for the future to create awareness about risk taking behaviour



Mode: Individual, Group.

Life Skills Focused:

Problem-Solving, Decision-Making, Co-operation, Team-Work, Effective -Communication, Self-Awareness.

Values enhanced:

Courage, Determination, Responsibility.

Purpose:

This game will bring out the fact that many ambitions that the students have will be affected if they are infected with the HIV.

Process

1. Ask the students to do the following:
2. Fold a piece of paper vertically into half. Then make four columns in the second half. In the first half of the paper, list out the following:
 - Two things which you really want to do in the next three weeks
 - Two things which you wish to do in the next 3 years
 - Two things which you would like to accomplish in the next 10 years.
3. Now write, "cost" on the first column and mark anything on your list, which would cost more than Rs. 10,000/-. On the second column write "Travel", and mark on your list anything that requires you to travel a lot to accomplish.
4. Write HIV in the third column. Suppose you get HIV infection today, mark the activities in your list, which you will not be able to do.



5. Write AIDS on the fourth column. Suppose you got HIV infection 10 years ago and now you have AIDS, mark the activities in your list, which you will not be able to do.
6. Preserve this piece of paper; it will help remind you that many of your ambitions and aims in life, which you wish to accomplish, will not be possible, if you were to acquire HIV.

Activity 6 : Social Issues of HIV/AIDS

Time: 30 minutes

Objective:



To develop skills of Social-Awareness and Social-Responsibility.

Mode: Group



Life Skills Focused:

Critical-Thinking, Decision-Making, Problem-Solving.

Values enhanced:

Social Responsibility, Determination.

Purpose:

To explore the ways in which prejudice and discrimination affect options in everyday life. It is used specifically to address issues related to HIV infection, gender, race, and drug use - but it could be adapted to explore other issues.

Suggested roles

- a man who is HIV positive
- a drug addict
- a married man
- an HIV positive pregnant married woman
- an unmarried pregnant 16 year old girl
- a patient with cancer

Process



1. Ask students to volunteer for this game and ask the volunteers to stand in a line
2. Give a role (from the Suggested Roles list given below) to each of the students. It is not necessary to give everybody a different role, it can be valuable to see how two people interpret the same role. Explain that they should not disclose what their role is until the end of the exercise.

Allow a few minutes for students to imagine themselves in the role - to imagine how old they are, where they live, what kind of lifestyle they lead.

Questions:

Are you able to:

- have a full social life?
- tell people what you do for a living?
- travel freely abroad?
- take your partner home to meet your family?
- work in a children's nursery?
- make long term plans?
- get medical help when you need it?
- get sympathy from society if you need it?
- expect sympathy from your family?
- be honest with colleagues?
- have security in your employment
- have children with a partner?
- marry your partner?

3. One by one, starting with the person at the front, ask students to declare their role and make one statement about their experience of the exercise
4. Now read out the List of Questions (given above). If, in their role, they can answer 'yes', they take a small step forward. If, in their role, they answer 'no', they remain where they are. They must make a decision one way or the other.
5. At the end of the game ask students who, in their role, feel good about themselves and their lives to take two steps forward

Review: Discuss with the group

- What were the restrictions imposed on these people by society ?
- What have they learnt about the effect of prejudice and discrimination on people who are HIV infected or have a different sexual orientation. Is this correct?
- What can they do to help?

Key Messages :

- Students realize the stigma & discrimination faced by people, related to HIV infection, gender, race and drug use, because of the judgmental attitude of society.

- Exploring the ways in which prejudice and discrimination affect options in everyday life
- Ways and means of reducing this stigma and discrimination.

Activity 7 : Who Discriminates?



Time: 20 minutes

Objective:



To develop skills to be socially aware and responsibility.

Mode: Group

Life Skills Focused:

Critical-Thinking, Co-operation, Empathy, Self-Awareness

Values enhanced:

Courage, Determination, Kindness, Compassion

Purpose:

People who are HIV +ve or who are living with AIDS are often subject to discrimination. Young people need to be aware of discrimination and how it is expressed.

Definition of Discrimination

When we treat someone unjustly or unfavorably because of his/ her race/ religion, or because we believe he/she is ill, we discriminate against him/ her.

School Discrimination

A person who has HIV is not allowed to attend school.

This is wrong because.....

The village banning

The people will not allow people with AIDS to live in the Village

This is wrong because.....

Work in the fruit stand

Gopal, the owner of the fruit stall, won't allow Hari, who has HIV, to work for him.

This is wrong because

A government decision

The government has decided not to allow people with HIV to enter the country.

This will not stop AIDS because.....



Process

1. Divide students into groups of 5-6 each
2. Provide each group with an activity sheet.
3. Have the group complete the statement.
4. Read the definitions of discrimination. Then read the four quotes and have the groups complete the unfinished sentences on a sheet of paper
5. Then ask
 - a. Why do people discriminate?
 - b. Why is it important not to discriminate?
 - c. What could you do if you heard discriminating remarks about a person with HIV or AIDS from someone in your community?
6. Have the students complete the unfinished sentences. Suggested answers are given below:

School discrimination: A person who has HIV infection is not allowed to attend school.

This is wrong because: a person with HIV/ AIDS can pass the virus to someone else only through sexual intercourse, transfer of blood products, or from mother to child. There is no danger of transmission by day-to-day social contact.

The village banning: The Council will not allow people with AIDS to live in the community.

This is wrong because: It discriminates against a person's rights with no reason as the virus cannot be transmitted through daily activities, or by living next to a person with AIDS.

Work in the fruit stall: Gopal, the owner of the fruit stall, will not allow Hari, who has HIV infection, to work for him.

This is wrong because: Again, this is discrimination. The owner obviously does not know how HIV is transmitted and perhaps he is afraid he won't get business if other people know that Hari has HIV.

A government decision: The government has decided not to allow people with HIV into the country.

This will not stop AIDS because: there are many, many people with HIV who do not know they have the virus and are already in the country. Therefore it discriminates against those who have been tested.

Teacher's Notes:

REMEMBER: testing everybody is not an effective method to stop the infection, and can lead to a sense of false security because:

- * the test would need to be repeated very often for all the population
- * people would find a way to get false certificates

- * one can get infected immediately after obtaining a HIV negative test result.
7. Discuss the questions under “Teacher asks”. Suggested answers are found below:
- a) Why do people discriminate?**
- * They learn from parents, adults and their peers
 - * lack of accurate information
 - * fear of certain kinds of people
 - * dislike of anyone who is different
- b) Why is it important not to discriminate?**
- * it hurts other people
 - * it isn't fair
 - * we wouldn't want to be treated that way
 - * Equality is a fundamental human right
- c) What could you do if you heard discriminating remarks about a person with HIV/ AIDS from someone in your community?**
- * inform the person that they are wrong and tell them why. Be assertive and tell the person that you do not want to hear their comments.
 - * explain why it is important to be compassionate and supportive to someone with HIV/ AIDS.

Key Messages :

- Students will know how PLWHAs are discriminated against in every day life.

Session IX: Living Positively

Time: 4:45 pm – 5:45 pm

Note for Facilitators



The case studies of Aunt Chitti and Sivamma (Appendix 5, 6) should be given to participants on Day 1, so that they read it before the activity. In the Teachers' Workbook for Student Activities, the development of an empathetic attitude towards people living with HIV/AIDS is undertaken through the options of either conducting a role-play or doing a case study analysis. However in the ToT these activities have been combined in order to make Resource Persons/Nodal Teachers familiar with both methodologies.

Activity 1: Learning to be Compassionate



Time: 60 minutes

Objectives



- To help participants understand that people living with HIV/AIDS (PLWHA) should not be ostracised but supported through love and kindness.
- To inculcate values of Optimism, Determination, Compassion.

Life Skills Focused

Critical-Thinking, Empathy, Self-Awareness.



Preparatory Work

- Prepare the reaction cards as mentioned in the activity.
- Write the following messages on two different sheets of paper so that they can be used as face masks
 - (a) I have AIDS
 - (b) I am HIV+
- Prepare OHP slides to be displayed in the activity.
- Keep the case studies of Aunt Chitti and Sivamma at hand (Appendix 5, 6).



Process

1. On four cards, write the following reactions (one reaction per card):
2. Inform the participants that there will be a Role-Play. Ask for six volunteers. Give two volunteers one prepared mask each, and one reaction card to each of the balance four volunteers.

- Reaction #1** You meet one of the volunteers and shake hands without noticing the sign that he/she is wearing; suddenly you read the sign and pull your hand away. Then you run to the restroom and wash your hands. (Pretend you are doing this.)
- Reaction #2** You read the message and say "You're joking, right?" Then you ask the PLWHA how he/ she is even allowed to work here and quickly leave the room.
- Reaction #3** You read the message and say "Oh, you must be a former intravenous drug user. You should be locked up somewhere where you can't hurt the rest of us." Then leave the room.
- Reaction #4** You read the message, shake the PLWHA's hand and say, "It's nice to meet you." Then sit down in the next chair.

3. Ask the four volunteers to read their reaction cards thoroughly as they are required to act their roles according to the reactions written on their respective cards.
4. Ask the larger group to observe the role-play carefully, and note down their reactions.
5. Ask the two volunteers with masks to sit in the middle of the circle.
6. Let each of the four volunteers enact their reactions one by one to the volunteers with masks.
7. Ask the group to reflect for 5 minutes on what happened in the role-play, and the similarity between the role-play and the case study given to them on the previous day.
8. Note some of the responses
(*Expected responses: Felt sorry for the character, one should not discriminate, HIV does not spread through handshakes, etc.*).
9. Ask the volunteers who acted as the PLWHA how they felt in each situation.

Questions for Processing Case Studies (Aunt Chitti, Sivamma)



- What was the first thought that came to your mind when you heard these case studies?
- Why do people behave like this? Do you justify their behaviour?
- Why is it important not to discriminate?
- What are the options? What are the possible consequences of each of these options?
- What could you do to help the two people in the case studies?



10. Use the following questions to stimulate group and individual learning.

Questions for Processing Role-play



- How did the participant feel when she/he was given the message, "I am HIV Positive?" How did the others feel who did not get this message?
- Do you think the situations presented are realistic? Why or why not?
- What are some of the reasons which make us discriminate?
- If you were infected with HIV, would you want society to discriminate against you? Why or why not?
- Do you think that this activity has helped you to understand the feelings of PHLWA? How and why?
- Have you ever met, or do you know, a person with HIV/AIDS? What are they like? Explain. Have you met any individual or family that was discriminated against? Why? Was it a rational reason?
- If a member of your family were infected with HIV, how would you care for him/ her?
- In all honesty, do you despise, or are you afraid of, persons with HIV/AIDS? Why?
- How would you advise others not to discriminate against a person with HIV/AIDS?



Activity 2 : Attitudes – AIDS: Creating Empathy

Time: 20 minutes

Objective:

To develop skills of Empathy

Mode: Group

Life Skills Focused:

Critical-Thinking, Empathy

Values enhanced:

Kindness, Compassion



Process

1. Read out this scenario

One evening a scientist friend of mine rang me up excitedly. He said “Guess what! You are talking to the next Nobel prize winner! I’ve discovered a cure for AIDS. I’m going to present my paper in Geneva tomorrow at the AIDS conference”

I said “Wow! This calls for a celebration. Why don’t you come home for dinner”.

He came and showed me this vial. “This is the medicine I’ve discovered. This injection can cure one person completely.”, he said and placed it carefully on the table. “This is the only sample I have. I have to take it with me tomorrow.”

“So how did you do it?” I asked. “Do you think I’m a fool? That’s a secret and the formula is stored only here” he said, tapping his forehead. We had dinner, I wished him all the best and he left.

The next morning I was shocked to see my friend’s photograph in the newspaper with headlines that said- ‘City scientist dead in fatal road accident’. Suddenly I looked up and saw the vial on the table, where he had forgotten it.

I now had the medicine which could cure HIV completely, but it was enough for one person only. I was faced with a dilemma because there were three HIV infected people that I knew- a two year old child, pregnant mother and a business man. Who and why do you think I should give the medicine to? (The answers are based on reason which include pity for the child who has its whole life ahead, pregnant mother to prevent more children from getting the infection from her, judgmental presumption that the businessmen played around and therefore deserves it and so on).

2. Now give additional information in stages as follow: that the child has cancer and can live only for 6 months more, the pregnant mother will pass the infection again, but she works hard to pay the fees for her 20 year old daughter studying in an Engineering college etc and explore the judgemental attitudes that are sure to come up.
3. End the exercise by saying that this is only a story.

Teacher’s Note

Explore and discuss the attitudes, assumptions and prejudices students had initially which changed with more information.

Learning Outcome

No matter how anyone gets HIV infection, they are all human beings in distress and deserve our empathy and support.

11. Use the slide below to recapitulate and highlight the Key Messages.

Key Messages	Slide 77
<ul style="list-style-type: none">• Individuals living with HIV/AIDS need just as much of our support and understanding as those with any other life threatening illness.• Persons living with HIV/AIDS need to be respected and treated with dignity.• It is possible for them to lead a reasonably normal and healthy life.• They have a right to education, accurate information, friendly health services, along with support and understanding from the community.• They need the following:<ul style="list-style-type: none">- Love and support from family and friends.- Prompt treatment of opportunistic infections.- Healthy life style.- A nutritious diet, sufficient rest and exercise.	

Session X: Advance Preparation for Day 4 Practice Session

Time: 5:45 pm onwards

This is the last session of Day 2, in which participants get together in their respective groups (as given on Day 1) and, with the support of the assigned facilitators, plan for practice sessions in school on day 4.

Key Concepts and Ideas to be Assimilated by the end of Day 2

- a) Understanding of AHL.
- b) Gender sensitisation.
- c) Basic facts on RTIs/STIs and HIV/AIDS.
- d) Clarification of myths and misconceptions about HIV/AIDS transmission.
- e) Developing an empathetic attitude towards people living with HIV/AIDS.