

Ministry of Human
Resource Development
Government of India



Ministry of Health
and Family Welfare
Government of India

Health and Wellness of School-going Children



Training and Resource material

Health and Wellness of School-going Children

Under the Aegis of School Health Programme of
Ayushman Bharat

NCERT

UN84

विद्यया ऽ मृतमश्नुते



एन सी ई आर टी
NCERT

राष्ट्रीय शैक्षिक अनुसंधान और प्रशिक्षण परिषद्
NATIONAL COUNCIL OF EDUCATIONAL RESEARCH AND TRAINING

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FOREWORD

The health and wellness of school going students is of paramount significance as it affects their learning and development. The National Council of Education Research and Training (NCERT) has already developed the curriculum framework for school health and wellness from pre-primary to secondary stage. The present document contains Training and Resource Material prepared for teachers and teacher educators from upper primary to senior secondary stage. The development of this Curriculum and Training Material has been undertaken under the aegis of the Ministry of Human Resource and Development and Ministry of Health and Family Welfare as a part of Ayushman Bharat, a flagship programme of the Government of India, with the objective to provide comprehensive knowledge, psychological support and services to school going children related to health and well-being.

The Training and Resource Material covers 11 themes: growing up healthy; emotional well-being and mental health; interpersonal relationships; values and citizenship; gender equality; nutrition, health and sanitation; prevention and management of substance misuse; promotion of healthy lifestyle; reproductive health and HIV prevention; safety and security against violence and injuries; and promotion of safe use of internet and social media behaviour. It also weaves the concern of health and well-being as reflected in National Curriculum Framework 2005 and is designed to equip teachers and teacher educators to help promote healthy behaviour among children for their overall development.

The development of this material is the result of several consultations and reviews at the national level, with officials of government agencies, educationists, civil society, health professionals, school principals, teachers and UN agencies. This material also draws substantively from NCERT's published and unpublished documents. The efforts made by Professor Saroj Yadav, Dean (Academics) and her colleagues of the National Population Education Project is appreciated. Thanks are also due to members of the Review Committee for meticulously going through the modules and giving their valuable suggestions for enriching the themes.

It is expected that this training material will be useful in enabling teachers to effectively respond to the health and well-being of children in the classroom setting. NCERT welcomes comments and suggestions, which will enable us to bring out further improvement in the document.

New Delhi,
February 2020

Hrushikesh Senapaty
Director
National Council of Educational
Research and Training

ACKNOWLEDGEMENTS

The Training and Resource Material of Health and Wellness of School-going Children, is based on the Health and Wellness Curriculum Framework developed by NCERT. The philosophy of the National Curriculum Framework 2005 has been woven into different thematic areas. To begin with, the present training and resource material is a collaborative endeavour of the Ministry of Human Resource Development (MHRD) and Ministry of Health and Family Welfare (MoHFW). We are grateful to Rina Ray, Secretary, School Education and Literacy, MHRD and Preeti Sudan, Secretary, MoHFW, under whose guidance this material was developed.

This material focuses on the students of the upper primary to senior secondary level with a thrust on seeing health and well-being as an important investment in children for their overall development. The themes that form the part of the training and resource material are: growing up healthy; emotional well-being and mental health; interpersonal relationships; values and citizenship; gender equality; nutrition, health and sanitation; prevention and management of substance misuse; promotion of healthy lifestyle; reproductive health and HIV prevention; safety and security against violence and injuries; and promotion of safe use of internet and social media behaviour. These themes may be treated as a continuum for both the stages of education. Several rounds of discussions were held with resource persons drawn from MHRD, MoHFW, United Nations Organisations like—United Nations Population Fund, United Nations Educational, Scientific and Cultural Organisation, United Nations Children’s Fund, and non-governmental organisations and faculty members of NCERT.

We gratefully acknowledge the generous support received from all the agencies that have participated in several workshops and given inputs on each theme for transaction with the schooling system. The list is placed at Appendix II.

We acknowledge the contributions of Medha Kulshreshtha and Hafida Begum, *Junior Project Fellows* for reviewing this material. Thanks are due to Soumma Chandra, *Assistant Editor* (contractual) and Surender Kumar, *DTP Operator*, Bittoo, Mohammad Atir, Sachin Tanwar, Masihuddin, Sanju Sharma, *DTP Operators* (contractual) as the training and resource material would not have taken this shape without their contribution. Thanks are also due to the secretarial staff Rani Devi Sharma, Pramod Kumar and Ruby Malik without whose help the document would not have began to take shape. The Council is grateful to its Publication Division and the secretarial staff for their assistance.

Professor Saroj Yadav *Dean (A)*
Dr. Bijay Malik
Mr. Harish Meena

ABOUT THE MATERIAL

The Training and Resource Material has been developed for resource persons and teachers from upper primary to senior secondary stage as part of the school health component of Ayushman Bharat. The process of developing the training and resource material has been coordinated by NCERT in collaboration with MHRD and MOHFW, its Technical Support Unit (TSU). Generous inputs have been provided by the representatives from UN agencies, National agencies, Governmental and Non-Governmental organisations, students, teachers and independent consultants.

The essence of joyful learning comes through these materials. Several participatory learner-centric activities including games, quizzes, case studies and role plays that can be transacted in school spaces are included. Further, comics have been introduced as a tool for developing thematic exhibitions, discussions on different aspects of a theme as well as encouraging the learners to develop comics to highlight their concerns.

The Material contains 11 themes: growing up healthy; emotional well-being and mental health; interpersonal relationships; values and citizenship; gender equality; nutrition, health and sanitation; prevention and management of substance misuse; promotion of healthy lifestyle; reproductive health and HIV prevention; safety and security against violence and injuries; and promotion of safe use of internet and social media behaviour.

This material can be used for a range of facilitators, including, officials in the education and health departments, school administrators, principals, master trainers, and nodal teachers. The activities pertain to different themes organised according to different stages as upper primary, secondary and senior secondary.

We hope that the training and resource material will be useful and effective in enabling the facilitators to transact this curriculum.

Professor Saroj Yadav, Dean (A)
Dr. Bijaya Kumar Malik
Mr. Harish Kumar Meena



Educate her, as She will Spread the Light of Knowledge

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*I am uncompromising
in the matter of
woman's rights. In
my opinion, she
should labour under
no legal disability not
suffered by man. I
should treat the
daughters and sons
on a footing of perfect
equality.*

INTRODUCTION

The Training and Resource Material meant for teachers from upper primary to secondary stages, as part of the school health component, was launched by the Honourable Prime Minister on 14 April 2018. This is a joint programme of the Ministry of Human Resource Development (MHRD) and Ministry of Health and Family Welfare (MoHFW) to enhance the health and well-being of school-going children.

The Training and Resource Material on Health and Wellness of School-going children is based on the school health and wellness initiatives, which harmonises diverse programmes such as Adolescence Education Programme, Life skills, Value Education, National Population Education Project and Yoga with the common objective of promoting holistic development, health and well-being. The school health component will provide an excellent and much needed opportunity to leverage existing life skills and harmonise with the existing initiatives of weekly iron and folic acid supplementation, menstrual hygiene management, referral to Adolescent Friendly Health Clinics (AFHCs)¹, access to counsellors working in these clinics to provide a continuum of care of information, psychological support, commodities and services to children under *Rashtriya Kishor Swasthya Karyakram* along with health screening by *Rashtriya Bal Swasthya Karyakram* (RBSK).

Some of the parameters of school health initiatives are reflected in the National Curriculum Framework 2005, wherein it is stated that health is influenced by biological, social, economic, cultural and political forces. Health is a critical input for the overall development of a child. The document further elaborates that this curriculum adopts a holistic definition of health. Undernourishment and communicable diseases are the major health problems faced by a majority of children in India, studying in the pre-primary to the secondary school stages. Therefore, there is a need to address this aspect at all levels of schooling, with special attention to vulnerable social groups and girl children. It is proposed that the midday meal programme and medical check-ups be made a part of the curriculum. Education about health should also be provided that address age specific concerns at different stages of development. The idea of a comprehensive school health programme, conceived in the 1940s, included five major components, viz., medical care, hygienic school environment, and school lunch, health and physical education. These components are important for the overall development of the child, and hence, need to be included in the curriculum.

In continuation, the document mentions the growing realisation that health of children in this impressionable age group needs to be addressed since they relate predominantly to bodily changes as well as behavioural

¹ Child includes every human being below the age of 18 years (Convention of the Rights of Child, UN General Assembly, 1989). However, for the purpose of this document, children refer to the age group of 6-18 years and adolescents refer to the age group of 10-19 years.

and attitudinal changes that vary from culture to culture and is often a very sensitive area. Many times such changes are not easily comprehended by children and their peers and they are guided predominantly by myths and misconceptions, making them vulnerable to risky situations, such as drug/substance abuse, HIV transmission and so on. Therefore, age-appropriate and context-specific interventions should focus on adolescent health concerns that are required to provide children with opportunities to construct knowledge and acquire life skills, so that they can cope with the process of growing up. This will help them to face challenges and develop a positive attitude towards life.

Health and well-being are universal pursuits at individual, community, national and global levels. World Health Organisation (WHO) defines health as a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity. Well-being is a combination of physical, mental, emotional and social health factors and is strongly linked to happiness and life satisfaction.

It is the right of every child to be provided opportunities for all round growth and development to realise his/her potential. The early years are the most significant years for human growth and development. Researches from neuro-sciences has also highlighted that this is the stage for extensive brain development.

While health is an important goal for all age groups, investments in health and well-being of children are particularly cost effective and yield multiple benefits. The early childhood years are of critical importance for laying the foundation for optimal, physical, psychological health and well-being of children. These include improvement in the health of current cohorts of children, their future adult health trajectories, as well as the health of the next generation of children. India is home to 47.3 crore children (0-18 years) comprising 39 per cent of the total population (Census 2011). If India has to achieve the sustainable development goals (SDGs) of good health and well-being for everyone at all ages, the unique needs of this substantive proportion of the population cannot be ignored. These investments will not only have an immediate and positive impact on India's health goals, but will also help the country to realise its demographic dividend², support effective social functioning and inclusive development, including economic development.

Childhood and adolescence are critical life stages that are developmentally primed to absorb and process new information and ideas that make it easier for them to modify their behaviour. Hence, it is extremely rewarding to work with these age groups and huge public health gains can be realised by investing in them.

² Demographic dividend refers to the accelerated economic growth that a country can achieve when it has a low dependency ratio. Dependency ratio is an age-population ratio of those typically not in the labour force (considered as age groups 0-14 and 65+) and those typically in the work force (age group 15-64).

HEALTH AND WELL-BEING OF CHILDREN

Investment in the health of children is an important priority for health programmes supported by the government. In comparison to National Family Health Survey (NFHS-3, 2005-06), data from the recent survey (NFHS-4, 2015-16) demonstrate promising trends such as decline in the prevalence of stunting (low height for age) and underweight (low weight for age) from 48 per cent to 38 per cent and 43 per cent to 36 per cent, respectively, for children under the age of five years. However, these numbers remain unacceptably high and suggest that a large proportion of children are malnourished as they start school. These children are also more prone to infections and are likely to get trapped in a vicious cycle of disease and malnutrition that interferes with their ability to learn and has far reaching negative consequences for individuals, their families, and the country at large. Findings from the Study on Child Abuse commissioned by the Ministry of Women and Child Development in 2007 indicate that in the age group of 5-12 years, 69 per cent reported physical abuse; of these 55 per cent were boys. More than 50 per cent children also reported some form of sexual abuse. These findings are worrisome and challenge the notion that boys are safer than girls.

The age group of 10-19 years is commonly considered as a relatively healthy phase of life. However, during this period, children have unique health needs and concerns that have not received adequate attention in policies and programmes, until recently. Global evidence suggests that mental health disorders and road injuries are the major contributors to morbidity and mortality among young people. As per the Lancet Commission Report on Adolescents, 2016, suicides, road injuries, tuberculosis and depressive disorders were among the top four causes for 'health loss' among young people (age group of 10-24 years) in the country. While the increasing burden of non-communicable diseases is a serious concern for India, the country still needs to tackle the burden of communicable diseases and ill-health related to malnutrition. Approximately 54 per cent of girls and 29 per cent of boys in the age group of 15-19 years are anaemic in India. Only 58 per cent girls in the age group of 15-24 years use hygienic methods during menstruation (NFHS-4, 2015-16). Substance misuse among children is an emerging problem that needs urgent attention. Findings from Global Youth Tobacco Survey-India (2009) show that 19 per cent adolescent boys and 8 per cent adolescent girls in the age group of 13-15 are currently using tobacco products.

The Indian society is in transition—globalisation, urbanisation, rapid economic growth and the ever expanding reach of the media and technology have created tensions in the process of social change and vastly changed the realities of young people as compared to the previous generation. However, social norms have not kept pace with the changing circumstances. Discrimination and neglect of the girl child manifests in compromised educational opportunities (61.5 per cent boys as compared to 52.8 per cent girls in the age group of 15-19 years are in educational institutions, NSSO, 66th Round, 2013) and harmful practices such

as gender-biased sex selection, early marriage and dowry. A little over one-fourth (26.8%) of the girls in the country are still getting married below the legal age of 18 years. Findings from NFHS-4 also show that 35 per cent females and 32 per cent males in the age group of 15-24 years reported that wife beating was justified under specific circumstances, suggesting gender-discriminatory attitudes with high levels of acceptance of gender-based violence. Such attitudes among the youth of a country are a matter of concern.

Findings from Youth in India: Situation and Needs (2006-07) survey show that 82 per cent young men and 78 per cent young women in the age group of 15-24 years reported that family life education was important but only 15 per cent had received these inputs formally. These findings indicate the vulnerability of a large proportion of children in India. The reasons could be manifold. They may be poorly informed on several issues related to their health and well-being, or may lack the necessary skills, support and access to youth friendly services to translate their knowledge into safe and responsible behaviour.

SCHOOLS TO ENHANCE HEALTH AND WELL-BEING OF CHILDREN

The findings from Census 2011 suggest that 84 per cent girls and 86 per cent boys in the age group of 12-14 years and 70 per cent girls and 73 per cent boys in the age group of 15-16 years are in schools. In terms of absolute numbers, these translate into 40.7 crore school-going children. The Government of India recognises the centrality of education in enabling children to realise their true potential. With the focus on school enrollment as well as retention, these numbers will consistently increase, making schools a critical venue for promoting health and well-being.

It is noteworthy that National Council of Educational Research and Training (NCERT) has been invested in the idea of adolescent health in secondary schools via the National Population Education Programme (NPEP) from as early as 1980. In the mid-1990s, after the National Seminar on Adolescence Education organised by NCERT in 1993, the framework broadened from a preoccupation with demographic issues, to include adolescent sexual and reproductive health, gender equity, substance abuse, and HIV-AIDS education. A general framework of adolescence education was, thereafter, finalised through nationwide consultations. Adolescence Education was widely popularised and accepted as the core component of the NPEP. In 2002, NPEP³ became a part of Quality

³NCERT implements the National Population Education Project (NPEP) in 33 states and UTs. This initiative works through theme-based activities such as role plays, folk dances, poster making, quizzes and other participatory events such as observation of certain days such as World AIDS Day, International Women's Day, etc. AEP themes are a major focus of NPEP activities besides other relevant themes such as care and respect of elderly or clean India campaign. In 2015, these events were organised in state board schools across approximately 480 districts.

Improvement Scheme in schools (QIS)⁴. In 2005, government initiatives on Adolescence Education were harmonised by the Ministry of Human Resource Development (MHRD) under the umbrella term, Adolescence Education Programme (AEP).

Across India, several entities, including government departments of education and health (specifically National AIDS Control Organisation) at the national and state levels and civil society organisations (CSOs), have been implementing different versions of the AEP to enable school going children to be better informed on issues related to their health and well-being and take responsible decisions. An important purpose of several of these programmes was to make the school system more responsive to the needs and concerns of children, and co-create schools as increasingly vibrant and positive learning spaces. A majority of these initiatives reach out to students of secondary stage and include components of teacher training and classroom-based activities.

In 2016-17, an assessment of select Adolescence Education Programmes was undertaken across 100 schools in the country (fielded by NCERT and the regional and country offices of UNFPA and UNESCO). The findings clearly showed that adolescence education is recognised as an important priority in school education. A majority of the teachers found the AEP training useful for improvement of teaching methods as well as in the relationship with students. The key stakeholders, namely, students, teachers and principals, were in favour of universalising the programme and initiating it in upper primary classes.

In this context, the school health and wellness component launched in April 2018 is envisaged as an educational initiative that builds on experiences of children to enhance their health and support their holistic development to enable them to respond to real-life situations effectively.

A joint initiative of the Ministry of Human Resource Development (MHRD)⁵ and Ministry of Health and Family Welfare (MoHFW), this programme is uniquely positioned to provide a comprehensive package of information, psychological support, commodities and services to school going children. It is noteworthy, that the programme is envisaged for all school going children from pre-primary to senior secondary. However, to begin with, it will be initiated from upper primary stage (age 11 years

⁴During the 10th Five Year Plan, the Government of India decided to introduce a composite centrally sponsored scheme of 'Quality Improvement in Schools' by merging the following five existing schemes: (i) Improvement of Science Education in Schools; (ii) Promotion of Yoga in Schools; (iii) Environmental Orientation to School Education; (iv) National Population Education Project; and (v) International Science Olympiads. The improvement of science education in schools has since been transferred to the state governments as state sector scheme and the remaining four components are being implemented by the NCERT. (Report of the Steering Committee Secondary, Higher and Technical Education for the 11th Five Year Plan (2007-2012) Retrieved from. http://planningcommission.nic.in/aboutus/committee/strgrp11/str_hsedu.pdf

⁵Life skills are psycho-social abilities that enable individuals to optimise on opportunities and deal effectively with demands and challenges.

onwards) and will be expanded to earlier years of schooling in a phased manner. Based on learnings from implementing large scale AEP/life skills programmes, a growing understanding of developmental needs of school going children in the current context, the scope of the programme has been expanded to include the following themes:



Growing Up Healthy



Emotional Well-being and Mental Health



Interpersonal Relationships



Values and Responsible Citizenship



Gender Equality



Nutrition, Health and Sanitation



Prevention and Management of Substance Misuse



Promotion of Healthy Life Style



Reproductive Health and HIV Prevention



Safety and Security Against Violence and Injuries



Promotion of safe use of Internet and Social Media Behaviors

The programme will be delivered through two trained teachers in every school designated as Health and Wellness Ambassadors. The programme is scheduled to roll out in aspirational districts with a potential for upscaling throughout the country. The key provisions include:

- School Health Promotion Activities
 - Age appropriate learning for promotion of healthy behavior and prevention of various diseases
 - Delivered through school teachers trained as Health and Wellness Ambassadors
 - Reinforce key learnings through existing school spaces and forums such as assembly, PTA meetings, Adolescent health days.
 - Access to psychological support.
- Health Screening and Services
 - The screening of children will be continued for 30 identified health conditions for early detection, free treatment and management through dedicated Rashtriya Bal Swasthya Karyakram (RBSK) mobile health teams
 - Iron Folic Acid (IFA) tablets
 - Albendazole administration
 - Provision of Sanitary Napkins
 - Access to counselors, helplines and adolescent friendly health clinics
- Electronic Health Records
 - Electronic health record for each child

VISION OF THE PROGRAMME

The school health programme, envisions to equip, motivate and support children to actively contribute towards the development of self and society.

OBJECTIVES OF THE PROGRAMME

The objectives of the programme are to increase knowledge, inculcate positive attitudes and enhance life skills in order to promote informed, responsible and healthy behaviour among school going children.

The curriculum framework is focused on enhancement of life skills to actualise behavioural change. It underscores the importance of engaging the learners to co-create knowledge that is relevant to their experiences, promote healthy attitudes thus enabling them to connect with self and others, think critically, and communicate effectively. Life skills development is a life-long process that helps individuals grow and mature, discover sources of strength within and outside, and take decisions on the basis of adequate information and thought. While life skills are relevant for everyone, these are especially relevant for children as they are developing a sense of identity in an environment that bombards them with numerous and often contradictory stimuli with very few reliable resources that they could seek clarifications from. Education, and particularly school education, plays a vital role in life skills development among individuals, as it exposes them to varied experiences in their formative years and has abundant potential to provide them with relevant simulated situations to learn and practice from.

GUIDING PRINCIPLES OF THE PROGRAMME

- Uphold that children are a positive resource and are trusted, appreciated, and respected.
- Anchor in a rights-based perspective. Recognise that children are heterogeneous. There is diversity in terms of urban, rural, caste, class, religion, region, language, cultural beliefs, disability, gender, marital status, working status, and so on.
- Leverage transformational potential of education, based on principles of equity and social justice.
- Respond to diverse and dynamic needs of the learners at every stage of development through flexibility in terms of content, context, and processes.
- Create an open, non-threatening, and nurturing environment to facilitate joyful learning.
- Enable the learners to understand, adapt, and negotiate existing and constantly changing realities.
- Empower the learners through participatory and non-judgmental approaches.
- Build on the learners' experiences and provide them with opportunities to think critically, analyse, and draw inferences.

- Contribute towards enhancing the physical, mental, emotional, and social well-being of the learners that takes a strength-based approach rather than a deficit perspective.
- Integrate with the content and process of school and teacher education.
- Support educational functionaries, school administrators and teachers to unlearn and learn with respect to content, attitudes, and pedagogy.
- Partner with different stakeholders, particularly parents, community and media to enable them to understand and respond to needs and concerns of children in positive ways.

SUGGESTED METHODS AND ACTIVITIES

Transaction approaches *primarily* focussing on experiential modes of learning are considered effective for life skills development. Hence, the curriculum framework recommends participatory, learner-centric methods rather than didactic, non-interactive ones that focus mainly on transmission of information and imparting knowledge to the learners. Some of the recommended participatory methods are briefly described below. A combination of these methods will help to improve knowledge and attitudes, and enhance life skills. You may take special care of children with special needs while using these methods so that they may be included in the process of transaction of this module.

Case Studies/Situational Analysis allow students to analyse situations drawn from real life from different perspectives and enable them to provide context-specific recommendations to manage each situation. It is expected that this simulation will enable the learners to deal with similar situations in their own lives.

Brainstorming is generating multiple ideas to solve a given problem. It is especially useful in getting diverse opinions on value laden issues.

Audio Visual is an interesting tool because children learn best when sensory experiences, like senses of hearing and sight are stimulated. These include pictures, slides, radios, videos and other audio-visual tools.

Social Action Projects engage students as volunteers in activities, groups, or on individual basis. These prepare students to identify, plan and work towards solutions to problems within their school, community and beyond. These projects help in building active citizenship.

Role Plays help students to understand real life situations by engaging with other participants while enacting these situations. They help in developing diverse perspectives regarding any situation and also in understanding alternate ways to deal with it.

Guided Group Discussions allow students to share their perspectives on significant topics with others and also to appreciate others' point of view. These discussions encourage students to become more confident about asking questions and speaking up.

Comics, Stories and Picture Books Comics as a transacting methodology assist in the development of innovation and flexibility. Stories and picture

books enable students to learn complex issues in an interesting and engaging manner. When images are paired with text, it leads to better learning and retention.

Yoga and Meditation is highly beneficial as the learners derive many benefits from age appropriate yoga activities. Yogic activities help to enhance concentration, relaxation, reflection and calmness, making them more self-aware.

Sports help in building physical strength, stamina and flexibility. It also helps in developing the abilities to get along with others, accept failure, while building confidence and team spirit.

Theatre is a powerful method to teach life skills and prepare students to face real life challenges. Students learn to think creatively and behave confidently by enacting different roles, script-writing, and collaborating with others.

Art—Self Expression activities enable students to deep dive and understand nature and humanity better by taking a deeper look at the scenery, person or a situation. A work of art can be extremely engaging and interesting in helping students to learn how things look from others' perspective.

Interactive Games is a teaching method that allows the learners to explore different issues, and their own selves, in playful, enjoyable, and interactive ways. Games as a form of learning also help to build interpersonal skills through teamwork.

Quizzes validate students' information, understanding, and knowledge of various issues, including those related to their health and wellness.

Puppetry can be a powerful way to stimulate imagination, encourage creative play and bring interesting stories to life in an engaging manner. Puppetry helps in positively building students' confidence and critical thinking ability while learning complex topics.

Expert Talks, is an effective way to impart knowledge, by inviting experts who can engage with the students on various themes like growing up healthy, sexual and reproductive health, emotional well-being and mental health, value education, safety and security, etc.

Exposure Visits are an effective method to introduce the learners to a variety of different places and situations. These enable the learners to understand and build diverse perspectives around situations and people.

Reflective Exercises enable the learners to critically examine their own thoughts, emotions and actions. This is a very important learning, leading to improved understanding, attitudes and behavioural modifications.

Parent Engagement in various activities to build their understanding of the needs and concerns of children to respond in a responsible and positive manner is important.

Debates help in analysing different perspectives on the same themes. The learners build their skills of critical thinking, and ways to deal with different points of view, through reasoned discussion.

Demonstration and Practice help in learning by doing.

Observation of Special Days with participatory activities add to the focus on the objective of a particular theme. It helps bring collective attention to the theme, and its various manifestations.

A BRIEF DESCRIPTION ABOUT THE CONTENT

The Training and Resource Material is meant for teachers from upper primary to senior secondary stage as part of the school health component of *Ayushman Bharat* launched by the Honourable Prime Minister on 14 April 2018. This is a joint programme of the MHRD and MoHFW to enhance the health and well-being of school going children.

In order to achieve the objectives of school health and wellness programme, a curriculum framework with focus on life skills enhancement with relevant themes, learning outcomes, content outline and a roadmap for implementing the initiative has been developed for all stages of school education beginning with pre-primary to senior secondary stages. The present training and resource material has been developed for resource persons and teachers from upper primary to senior secondary stages. The training and resource material for primary stage will be taken up shortly.

The process of developing the curriculum framework and the training and resource material has been coordinated by NCERT in collaboration with MHRD and MOHFW, its Technical Support Unit (TSU). Generous inputs have been provided by representatives from UN agencies such as United Nations Population Fund (UNFPA), United Nations Educational, Scientific and Cultural Organization (UNESCO), World Health Organization (WHO) and also from United Nations Children's Fund (UNICEF), National Aids Control Organization (NACO), National Institute of Health & Family Welfare (NIHFW), Population Council, Tata Institute of Social Sciences (TISS), Public Health Foundation of India (PHFI), Expressions India, Arpan, TARSHI, Pratham, Nirantar, The International Center for Research on Women (ICRW), Pravah, John's Research Institute (SJRI), Kaivalya Education Foundation, Kendriya Vidyalaya Sangathan (KVS), Navodaya Vidyalaya Samiti (NVS), several students and teachers and independent consultants.

The material used, like the comic strips, are contributions made by students and teachers who had participated in the material development workshops organised by NCERT across the country. The essence of joyful learning comes through these materials. Several participatory learner-centric activities including games, quizzes, case studies and role plays that can be transacted in school spaces are included. Further, comics have been introduced as a medium to enable the students and facilitators to express their issues and concerns as well as to find solutions. The comics are a powerful communication tool that lends to teaching and learning in several formats like, developing thematic exhibitions, organising rallies and discussions on different aspects of a theme as well as encouraging the learners to develop comics to highlight their concerns. It is noteworthy that

the students and teachers were encouraged to express themselves without language and/or grammar barriers. Hence, the comics may have minor language issues but communicate effectively. These material can also be used for a range of facilitators, including, officials in the education and health departments, school administrators, principals, master trainers, and nodal teachers. The activities pertain to different themes organised according to different stages of growing up such as upper primary, secondary and senior secondary.

We hope that the training and resource material will be useful and effective in enabling the facilitators to transact this curriculum.

THEMES OF THE MATERIAL

The material is organised in 11 modules on the theme that deal with needs and concerns of the different age groups.

1. Growing Up Healthy
2. Emotional Well-being and Mental Health
3. Interpersonal Relationships
4. Values and Citizenship
5. Gender Equality
6. Nutrition, Health and Sanitation
7. Prevention and Management of Substance Misuse
8. Promotion of Healthy lifestyle
9. Reproductive Health and HIV Prevention
10. Safety and Security Against Violence and Injuries
11. Promotion of Safe Use of Internet and Social Media Behaviour

Keeping the learners in mind, each theme has been treated meticulously and has sub-themes with activities for transaction in the classroom. Every activity has clearly defined learning outcomes, instructions for the facilitator to run the activity, resources required, and summary and take away messages that help reinforce the learning. You may contextualise the themes as per your context and audience and be sensitive to cultural and social context. Further, gender concerns may be taken into consideration along with all the themes. Children with special needs may face difficulty to understand many things, it is necessary to explain them separately in detail (if required).

Keeping in view that the learners have different learning styles, each theme has a maximum of 4-5 activities. Care has been taken to keep the duration of each activity to 60 minutes and depending on additional time available, the facilitator has the flexibility of clubbing 2-3 activities and conduct it in a workshop mode. These activities can also be organised as a part of teaching different subject areas.

As all schools may not be endowed with a computer or have good internet connectivity to enable the use of technology, the resources proposed in each activity are kept to a minimum that are easily available, for example, paper, blackboard, chalk, and pens. When there

are case studies to facilitate learning, the facilitator is encouraged to write on the blackboard, instruct the learners to read aloud and seek help from the learners to prepare permanent charts/cards that can subsequently be used as a resource. There are activities that make reference to resources like PPTs, films, whiteboard, markers etc., but are introduced as 'optional resources'.

The guidance to the facilitator indicates that the module should begin with the conceptual understanding of the topic (not every activity may require this). The facilitator should then focus on mind set and attitudes, if needed (some activities may require reiteration). The facilitator is advised to cover all the pre-preparations including logistics instructions required before transacting the activity.

While beginning transaction, the facilitator is expected to recap the earlier conducted activity or the message/s or suggested activities in five minutes. For the learner to retain the learning objective and the activities undertaken, a brief summary by the facilitator is recommended.

GUIDELINES FOR THE FACILITATORS

These training materials are designed to be used for training different stakeholders from both the health and education sectors. Eventually, this training package will be used to organise learning experiences for the final target audience—the children. To ensure that this package is appropriately and adequately used, it is necessary to articulate certain essential guidelines for the facilitator.

Recently, the Government of India has enacted a central scheme to designate teachers as Health and Wellness Ambassadors in every government school across the country. Under this project, teachers would be trained to educate children on preventive healthcare.

WHO IS A FACILITATOR?

A facilitator may be perceived in a variety of ways. The dictionary states that a facilitator is a person or object that helps to bring about an outcome by providing indirect or unassuming assistance. Generally, a facilitator is regarded as a person/object that contributes to the fulfillment of a need or furtherance of an effort or purpose, and enables something to happen efficiently and systematically. In the context of education, a facilitator is a person who is proficient in the concerned educational area and makes it easier for the learners to develop needed competencies through activities of the educational programme. The person is willing to be challenged, has interpersonal skills and is able to encourage and communicate a sense of self-confidence, enthusiasm, responsiveness and creativity.

Under the school health and wellness initiative, the term 'Facilitator' may be used for persons performing the roles that contribute to effective organisation of various kinds of activities. The success of the programme is heavily dependent on the different facilitators who transact the material

with young people. Hence, it is important that these individuals are chosen carefully. These facilitators could be grouped under two categories:

1. Master Trainer (Teacher educators and teacher, educationist and health professionals)
2. Nodal Trainers (Teachers and health workers in education and health departments) who are Health and Wellness Ambassadors.

SELECTION CRITERIA FOR MASTER TRAINERS

The following criteria are recommended for the selection of master trainers:

- Sensitive to concerns of children
- Non-judgmental
- Experienced in imparting participatory training in education and development related issues. Comprehensive experience of school education is a bonus.
- Sensitive to cultural sensibilities
- Excellent communication skills (English and Hindi) both written as well as verbal
- Graduates/postgraduates in any discipline
- Should be able to attend residential training programmes
- Willingness to travel, as per requirement for any state/district level training
- Should have the time and commitment to be associated with various activities of the programme
- Preferably below 50 years of age

ROLE OF MASTER TRAINERS

Master Trainers are considered experts who engage the learners in sessions on topics of their interest and specialisation. They should be able to train the next level of facilitators (these could include teachers, principals, officials from the education department, peer educators and officials from the health department at state and district levels, service providers at the various levels). Generally, health and wellness curriculum addresses the concerns of children that also includes those issues of development that are easily subject to misinterpretation. Often, this happens as the adults perceive these themes based on their experiences and concerns that are very different from those of the children. Hence, the importance of sensitising the various stakeholders, including all the school teachers, school officials, health officials, parents, people from the media, and the political leadership cannot be overemphasised. Master Trainers, therefore, have an important role to contribute to advocacy-related activities for a proper appreciation of the needs of children and the significance of AEP.

Master Trainers have an important role in planning, organising training programmes, mentoring Health and Wellness Ambassadors and monitoring the programme.

HEALTH AND WELLNESS AMBASSADORS

Health and Wellness Ambassadors constitute the second layer of resource persons, who are key to effective implementation of the school health component.

SELECTION CRITERIA FOR HEALTH AND WELLNESS AMBASSADORS

The following criteria are recommended for the selection of Health and Wellness Ambassadors.

- Interested in such subjects and sensitive to issues related to children
- Non-judgmental
- Amiable with students
- Should have good rapport with the students
- Should be aware of local culture
- Can be from any discipline
- Should be able to attend residential training programme
- At least one male and female Health and Wellness Teacher should be deputed from each school
- Should be able to understand and speak the local language
- Preferably below 50 years of age

ROLE OF HEALTH AND WELLNESS AMBASSADORS

After receiving training from the Master Trainer, the Health and Wellness Ambassadors will transact the activities in the classroom, which are participatory in nature. They play an important role in planning and organising training programmes for other teachers in the school.

TIPS FOR FACILITATORS

For smooth and effective conduct of activities during the training programme and classroom transactions, the facilitators could keep the following tips in mind.

BEFORE THE SESSION

1. Read the reference material before conducting the training programme/ classroom transaction.
2. Get to know about your learners.
3. For the training programmes for Master Trainers, it is recommended that three resource persons facilitate the training programme. For Health and Wellness Ambassadors, it is recommended that two facilitators should conduct the training.

4. Adequate representation of women should be ensured, both at the facilitator and the learner level.
5. For familiarisation and successful implementation of the residential training programme, facilitators and teachers should be at the venue a day in advance.
6. The identified training centre should have separate residential arrangements for male and female participants.
7. For smooth running of the sessions, the hall or room should be clean, well-ventilated and should comfortably accommodate 40 participants.
8. All facilitators need to be prepared and be familiar with the day's agenda and the resource material required for it.
9. The facilitator will try to integrate the relevant content and interactive activities of this material in the scholastic subjects wherever feasible.
10. It is recommended that two periods per week be allocated to the programme in the school timetable for approximately 24 weeks in an academic year.
11. The facilitator may organise age-appropriate and context-specific activities for transaction from this material.
12. The facilitators can prepare relevant power points and arrange for AV clips from movies, commercials, story books, you tube etc. that may be relevant and appropriate for the students to make learning more meaningful and interesting.

DURING THE SESSION

1. Rapport with participants is critical.
2. Make a separate flip chart to write down issues not pertaining to the sessions. If important, ensure that all those issues are discussed before the end of the day.
3. Facilitators should use the same type of material and language, which they expect the participants to use.
4. Throughout the training, impress upon learners that the eventual target audience is the adolescent students for whom the curriculum has been designed.
5. Maintain a good rapport with the co-facilitator. Facilitators should have periodic eye-contact between themselves throughout the sessions.
6. Have the contact telephone number of a senior/technical resource person for advice on any issues during the training.

AFTER THE SESSION

1. If something specific has not been understood by the majority, then that section should be repeated.
2. Summarise each session and ensure that the objectives are achieved and the contents are covered.
3. Carefully consider any suggestions made by the participants and try to incorporate them, if possible, into subsequent sessions.

Essentials of Facilitation: While interacting with the learners, the following points should be kept in mind.

1. Non-judgmental: Don't be judgmental on the differing views of the participants. Participants neither want nor need moralising or accusing. What they do want and need is a compassionate and empathetic facilitator.
2. Non-verbal communication: This is very important in dealing effectively with others. The facilitator should be able to use non-verbal communication, or body language, as it is a powerful tool to connect with others, express what one means, and build better relationships.
3. What to do and when: Using observation skills, one can assess the effectiveness of one's session and how well information is being received. Based on these observations, one can adjust one's questions, introduce a new activity or procedure, call for a break or deal with whatever is interfering with the success of the group. Observations collected over time can help decide whether to continue with a particular process or to modify it to respond better to the needs of the participants.

COMMON PROBLEMS A FACILITATOR MAY FACE

1. Someone disagrees and wants to argue with you: Welcome disagreements, hear them with total attention and find common ground. Start further discussion from this common ground, elaborate on the points where disagreement exists.
2. Everyone looks bored: Encourage participation and discussion from the group.
3. Some people monopolise the discussion: Give recognition to their knowledge and enthusiasm and control them diplomatically.
4. Private conversation erupts: Encourage them to share with everyone what they are talking about. In most of these situations, participants talk about the issues being discussed, but may hesitate to voice opinions openly.
5. Two participants start arguing with each other: Do not take sides. Verbalise the positions of the participants and ask others in the group to give their opinion on the issue. Then objectively summarise the discussion.
6. Controversial topic: If any controversial topic is brought up, it should be left to the group to sort out or be answered collectively.
7. Personal questions: If personal questions are asked, the facilitator should use discretion in answering. If the question is unanswerable, just convey the difficulty calmly.

FEEDBACK AND COMMENTS

This training material is a growing and evolving process. NCERT welcomes your comments and suggestions, which will enable us to undertake further revision and refinement for finalisation. A feedback form is attached at the end of Appendix - II.



GROWING UP HEALTHY

Health refers to a state of physical, social, emotional and spiritual well-being. However, growing up healthy is a conscious effort towards making health a priority for individuals. This is true for all life stages but especially true for age group of 10-19 years marked by rapid physical, cognitive, and socio-emotional changes. Adolescence refers to a period of transition between childhood and adulthood. For healthy transition to adulthood, children need to understand and manage changes within them as well as changing expectations from the outside world.

This theme deals with development of awareness around changes that take place during adolescence and to build skills such as critical thinking, problem solving, and decision-making to manage the changes, and counter myths and misconceptions associated with adolescence. In this module, we focus on building knowledge on the various changes that take place during adolescence and social taboos associated with these changes. We also build their skills on critically questioning social taboos associated with adolescence. This module also focuses on building a positive self-concept and skills to counter stigmas and stereotypes that children may encounter during this period. The sessions also attempt to promote an attitude of sensitivity towards peers when there are concerns about changes in their bodies during adolescence and knowledge and skills to access youth friendly services that are available.

Activity 1.1 **I am changing**

LEARNING OUTCOMES

The learner

- Describes the changes (mainly physical) that occur during adolescence.
- Recognises adolescence and the process of growing up as a positive phase.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, critical thinking, decision-making, managing emotions, effective communication

RESOURCES

- Multiple copies of case studies along with the accompanying questions, paper and pen.

Guidance for the facilitators

Get prepared for the session to discuss the changes that commonly occur during adolescence. The chart below is for your reference:

Changes During Adolescence

- Physical changes in body
- Improved gross and fine motor skills
- Eagerness to experiment and learn new things
- Increased attention towards own appearance and looks
- Trying to build independent identity and be treated with respect by parents, other adults, and peers
- Desire to make new friends and to socialise
- Increasingly influenced by peers
- Energetic and enthusiastic with increased spirit of fun and adventure
- Mood swings and emotional instability—frequent changes in emotions like anger, love and feelings towards friends; impulsive behaviour
- Development of aspirations for future; increased concern about career
- Begins taking decisions about self
- Need for appreciation and recognition

Step 1: Changes in oneself since childhood; celebrating adolescence

- Ask learners to think and write about all the changes that they have noticed in themselves since their childhood (when they were 6-8 years old).
- Tell them that these changes could include physical and emotional changes, shifting interests, changing relationships, new preferences in—games, TV programmes, etc.
- If learners do not understand the instructions, give examples of changes such as a “you find that you have suddenly become self-conscious” or “you enjoy different types of music” or “you have more interest in making new friends”, etc.
- Give them ten minutes to write/draw. Ask 8-10 learners to share. Summarise this activity by explaining that although

we change throughout our life, adolescence is a period of rapid changes, this is a natural part of growing up.

- Explain that some of the changes may be unique to us and some may be common to many of us; such as building deep relationships outside our family or with our peer group may be a trait in many children, but a recent interest in spending time with an older person may be unique to a specific person.

Step 2: Manage the change to your advantage

- Divide learners into groups of 5-6 and give each group a copy of one case study along with its questions. Give instructions for group works—
 - One of the learners in their group can read the case study aloud for all to listen.
 - The identified learner will then ask the questions and everyone will share their thoughts on the questions including the readers.
 - This will be presented before the larger group.
- Give them 10 minutes for the group discussion. Ask each group to read out their case study and questions to the bigger group and share their responses to the questions.
- In the end summarise the various traits that the groups highlighted and the impact of the changes on the characters in the case studies.
- Inform learners that apart from the physical changes that take their experience they will find a number of other changes as mentioned earlier in ‘Changes in adolescence’ the chart.
- Highlight that adolescence is a period of rapid changes. We should be prepared for these changes without getting worried. It is part of growing up.
- Tell learners that the purpose of School Health Programme under Ayushman Bharat is to ensure a joyful, enriching time in this phase and a healthy and safe transition to adulthood. Over time, the curriculum will address many themes relevant to adolescence.

Case-1: The Tri-cleaners

Three friends (13-14 years old) on completing their studies, return to their village. They are very sad to see the lack of cleanliness in their village. They plan and divide responsibilities to improve their village, such as increasing awareness among villagers about health, hygiene and wellness; ensuring re-cycling; and bringing children together to clean the village. When they approach the villagers for joining hands with them, they do not get their support. The three friends decide to take forward the work and their actions inspire the villagers to join them.

Points for discussion

1. Which traits of the three young people make them up take responsibility for improving cleanliness in the village even though others did not support them initially?
2. How can these traits be used by children for their own and their community's benefit?
3. Can there be any negative effects of these traits? If yes, how can these be reduced?

Note: There may be Children with Special Needs (CWSN) who may not be able to understand these changes without being told or factually or visually shown as per requirement. The facilitator may consider take these important factors when they will carry out the activities.

Case-2: Ayush and his experiment

Ayush is not 15 years old yet. He is very good at sports and adventure activities. He is keen on trying out new things. He recently saw an advertisement on television that showed a boy performing high jump on a motor bike. Ayush was thrilled to see this and decided to imitate the same. Fortunately, one of his relatives overheard Ayush's plan, and forcefully stopped him.

Points for discussion

1. Why did Ayush decide to take the plunge?
2. What would you call this trait that Ayush has?
3. What could have been probable consequences of the act?
4. Is it common at this age to get influenced by what is seen in media?

Case-3: Rebati feels caged

Rebati is a 13-year-old girl. She studies in a Government Girls Senior Secondary school. She lives with her parents. Rebati's mother often tells her not to talk for very long on the phone, to spend more time studying rather than watching TV. Rebati feels that her mother treats her like a small child and does not respect her ability to take good decisions. Rebati feels very restricted and angry.

Points for discussion

1. Is the conflict between Rebati and her mother a common occurrence? If yes, what are the reasons for these conflicts between parents and children?
2. What can Rebati and her mother do to resolve this conflict?

Reflection questions

- What are some of the traits of adolescence that should be managed to prevent young people from committing harm?

Take-home messages

- Change is a hallmark of adolescence.
- Changes occur in the body, in the way children feel and think which in turn, impacts their behaviour.
- Adolescence is phase in life when individuals develop a unique identity and independent thoughts, relationships, interests and opinions which is vital to the process of growing up.
- Adolescence is a time for new explorations and fun, new hopes and excitements but also a time to know oneself and learn to better manage one's emotions and behaviour.

Suggested additional activity

- Ask learners to classify all the changes listed by them at the beginning of the session into two categories –
 1. changes they feel happy about, and
 2. changes that they are concerned about.Ask them to identify one trait that needs to be managed wisely so that it does not lead to unhealthy behaviour. Ask them to think about what they can do to manage that?

Activity 1.2 Physical Changes during Adolescence

LEARNING OUTCOMES

The learner

- Identifies physical changes occurring during adolescence and demonstrates comfort with them.
- Recognises that changes during adolescence can occur at a different pace and timing in different individuals.
- Develops a positive acceptance of self.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, empathy, problem solving, effective communication, critical thinking

RESOURCES

- Multiple copies of case studies and comics, paper, and Pen

Guidance for the facilitators

The following activity delineates the physical changes occurring during adolescence in both girls and boys. Knowing about physical changes taking place within their bodies, will make learners aware and better informed and also help in developing a positive self-concept.

Step 1: Discussing physical changes on growing up

- Write 'girls' and 'boys' on two sides of the board and ask learners to share all the physical changes that happen during adolescence among girls and boys. Note down their responses on board. *

*Note: Please refer to your science textbooks for listing the physical changes in boys and girls occurring during Adolescence.

Step 2: Discussion on case studies

- Divide the class into groups of 5-6 learners each and give each group copies of the case studies.
- Give the group 10 minutes to read the case study, discuss and write answers for the questions given below the case.
- Ask each group reporter to read out the case and share the responses/make the presentation for each question given with their story.
- If two groups have the same comic/case they should make their presentations one after the other, the second group adding anything new that the first group has missed out.
- After each story, the facilitator should emphasise that while everyone matures and goes through changes in adolescence, this does not take place at the same time and in the same way for everyone

Case-1: My father calls me 'Sher'

Rakesh and Mihir, students of Class IX, are walking home together from school. Rakesh begins to tease Mihir, saying that he speaks in a girl's voice. He also laughs at the fact that Mihir has got no hair on his upper lip. "Look at me," Rakesh says, "I am a real man. My voice is strong and my face is manly—I have so much facial hair. My father calls me *sher*." Mihir wonders what is wrong with him. He recalls that his mother still calls him 'my sweet boy'. He decides to go home and ask his mother why he is so different from Rakesh and whether something is wrong with him.

Points for discussion

1. What do you think Mihir felt with Rakesh's remarks?
2. Do you think that there is something wrong with Mihir? Why?

3. What should Mihir's mother tell him?
4. Do you think it is important to prepare children regarding the changes likely to occur in them? Why?

Case-2: Each one is unique

Pooja, Sujatha, Abida and Radha are good friends. All of them are 13 years old and love to spend time with one another. They have so much to talk about, the new film, the new dress, homework, the boys in the class and just about everything

Yesterday, Radha seemed uncomfortable. She was having her periods and was concerned about staining her uniform. Last month, Sujatha's family had organised a big celebration in her honour as she had started her periods. Pooja recalled that three months ago, Abida had started her periods in school and had to borrow a sanitary napkin from her older cousin. Except Pooja, all her friends have started their periods. Is there something wrong with her?

Points for discussion

1. What do you think Pooja felt when she realised that she is the only one who had not started her periods?
2. Do you think there is something wrong with Pooja?
3. If Pooja came to you for advice, what would you tell her as a peer?
4. Do you think it is important to prepare children regarding the changes likely to occur in them? Why?

Summarise

Sum up the discussions by emphasising the following messages:

- Adolescence is a period of physical and emotional changes which are triggered by a set of hormones. These changes are part of growing up.
- These changes occur at different times for different individuals.
- You should not compare your physical changes with others – the pace at which changes take place differ from person to person.
- It is natural to feel awkward or conscious of the changes that occur but try to support each other by accepting these as part of a natural process and don't let these decrease your self-confidence.
- If you have any doubts or concerns about changes that are occurring to you reach out to a trusted adult or you can talk to a counselor in the Adolescent Friendly Health Clinic near where you live.

Suggested additional activity

- Look at yourself for 2-3 minutes in the mirror and pen down the first few thoughts that come to your mind. Discuss these thoughts with any of your peers/ parent/ teacher.

Activity 1.3 Attaining Puberty

LEARNING OUTCOMES

The learner

- Describes physical changes during puberty.
- Describes basic understanding of menstrual cycle and nocturnal emission.
- Describes ways to maintain personal hygiene especially during menstruation and nocturnal emission.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

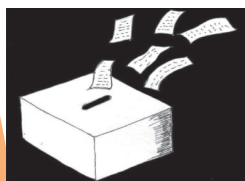
- Self-awareness, empathy, decision-making, communication skills, effective communication

RESOURCES

- Copies of case studies and Discussion questions, sheets of paper and pens.

Guidance for the facilitators

- To begin with, this activity can be done separately for girls and boys as the content and methodology for each is different.
- The previous activity focused on overall physical changes during adolescence. This activity dwells specifically on changes in the reproductive system and ways of maintaining hygiene.
- It is important to work on overcoming your own inhibition in talking about reproductive health or else girls will not open up during the activity.
- Learners may be hesitant to ask certain questions openly. Question box helps them to ask questions and get responses anonymously. (see figure below for reference)
- Learners may have questions for which you do not know the answer. You can tell them that they will be answered in the next session.
- Explain that because of social taboos around these topics, it is often difficult to get correct information. This class is an opportunity to clarify doubts. So, do not hesitate to share and ask questions.



How to make a question box?

Take any cardboard box and make a slit in it, big enough to put a slip of paper. Make sure you keep it in a discrete place

Step 1: Story and discussion about menstruation

Story 1: Reena's Story

Reena is a 13-year-old girl studying in Class VII. Her menstrual periods started for the first time while sitting in the class. She was totally unprepared for the situation and hence she panicked and thought she had some major illness. She shared her situation with Jyoti, her good friend.

Read out Reena's story to the learners.

After reading out the story generate a discussion based on the following questions:

- What is 'periods' or menstruation?
- If you were Reena's friend what would you tell her?

Explain the following facts about menstruation—

- Menstruation is the regular flow of blood and tissues from girls' uterus in a monthly cycle.
- It usually continues for three to five days in each cycle. However individual variations may occur and if the bleeding continues for more than seven days regularly, consult a doctor.
- Should not interfere with the daily routine or anything they may want to do.
- Some girls and women feel energetic during their periods. Some experience low energy, or have backache, abdominal pain, headache, etc.
- Some experience anxiety or feel emotional or/and some discomforts due to hormonal fluctuations in the body.
- It usually begins in girls anytime between the ages of 9-16 years (menarche) and stops (menopause) around 45-55 years. Length of cycle varies from 21 to 45 days.
- If a girl does not begin her periods until the age of 16, it is advisable to consult a qualified doctor.

Maintaining personal hygiene

Discuss the following facts about maintaining good personal hygiene—

- Regular bath and washing self properly are important for avoiding infections, especially during menstruation.
- Change undergarments regularly (at least once a day) and avoid synthetic cloth.
- During menstruation, cloth, cloth pads, or napkins should be changed after every four to six hours to avoid infection.
- We can also use sanitary napkins to manage menstrual hygiene. Many girls and women also make sanitary napkins at home with old cloth and cotton. If you make a sanitary napkin at home, use only clean, soft cotton cloth.

Do not use old cloth that may have any metal or plastic parts in it like glitter, 'gota' or hooks and buttons. This may hurt or cause infection.

- If a cloth must be used again as pad, it should be washed thoroughly with soap and dried in sun before next use as sunlight is an excellent disinfectant. Do not use dirty or damp cloth as it causes infections.
- CWSN should be shown the process of maintaining hygiene or explained in detail if necessary.
- Sanitary pads should be wrapped in paper and disposed in trash bins or buried deep in a pit. Some schools have incinerators which offer another safe way to dispose sanitary pads. There should be no shame associated with in the process of disposing sanitary pads.

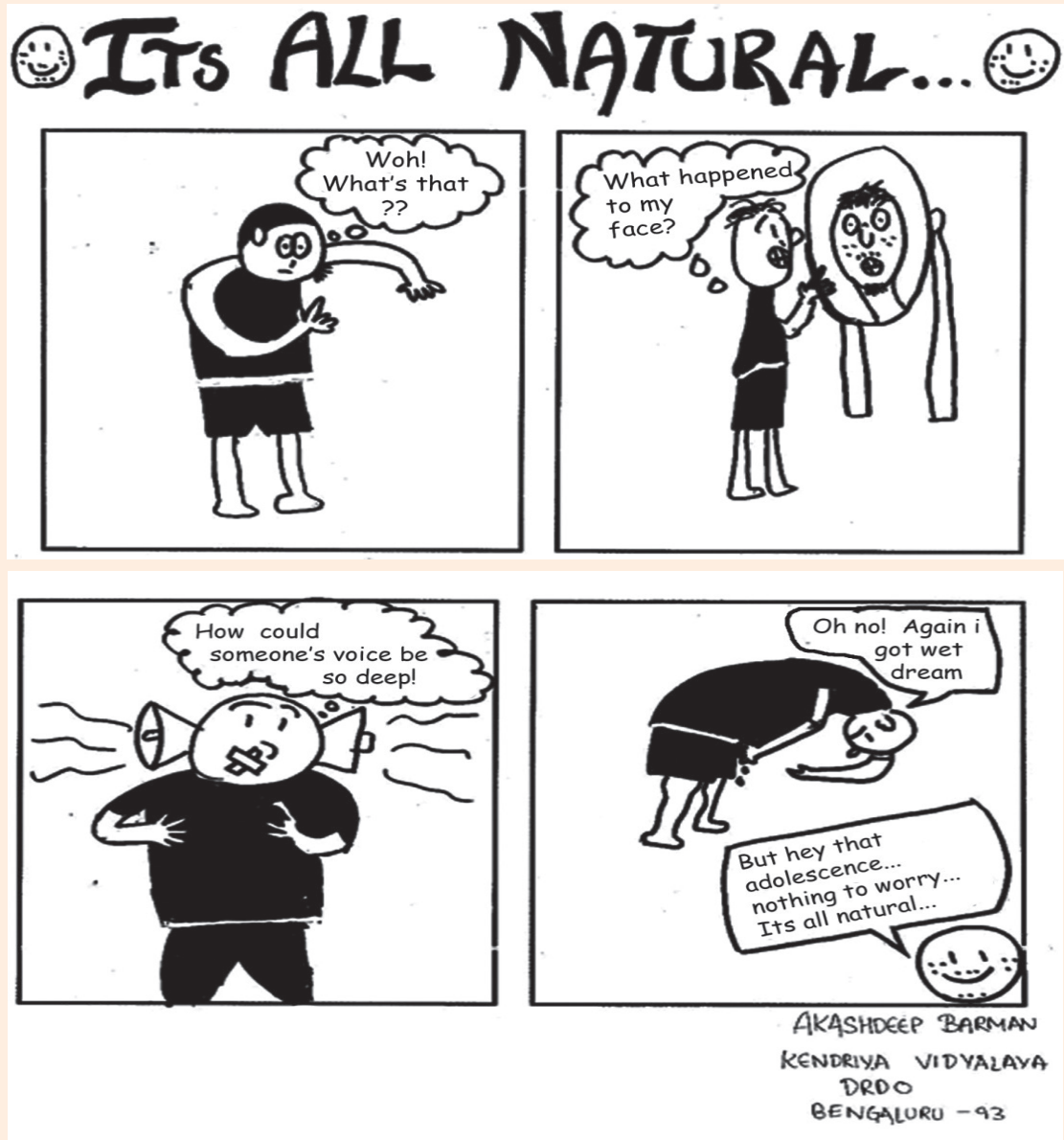
Government is supporting schemes for promoting menstrual hygiene among adolescent girls (10-19 years). Sanitary napkins are made available free in schools or by (ASHA) Accredited Social Health Activists at a subsidised rate.

Discussion on comic

- Divide learners into groups of 5-6 each. Hand out the first comic to half the number of groups, and the second comic to the remaining. As there will be more than 2 groups, these comics can be repeated.
- Ask both sets of groups to exchange their comics and read them so that everyone understands the story depicted in both comics and can participate in the discussion. Give the groups five minutes to read the comics.
- Discussion on both the comics: **'It's All Natural'**
- Ask one of the groups to share their responses to the three questions. Ask other groups with the same comic to add their responses.
- Acknowledge correct information given by the groups.
 - Reinstate the facts by explaining the frames.
 - During adolescence hair starts to grow in the armpits, on the face, chest, arms and legs of boys. Pubic hair also starts to grow.
 - Skin thickness increases and oil glands become more active under the influence of hormones. Excess oil can block pores in the skin and cause pimples and acne.
 - Voice may start to crack and deepen.
 - Wet dream is the release of semen during sleep, it is also known as night fall or wet dreams.

- Many adolescent boys experience wet dream, but it is not necessary that everyone should experience it.
- Wet dream is a normal occurrence among boys during adolescence.

Case-1: Its all natural

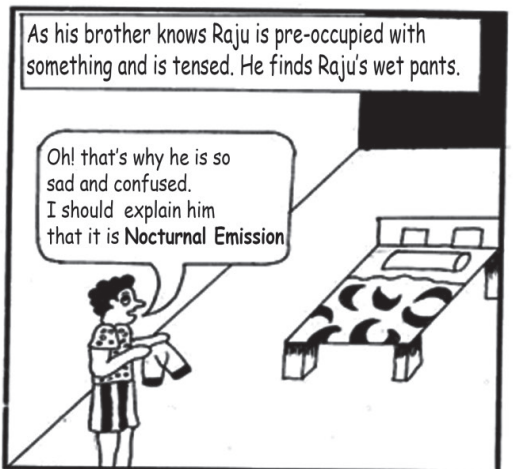
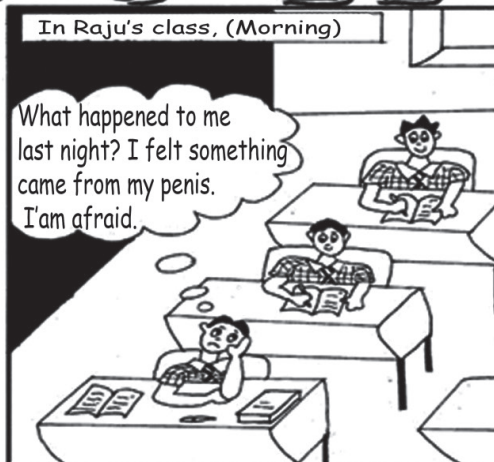
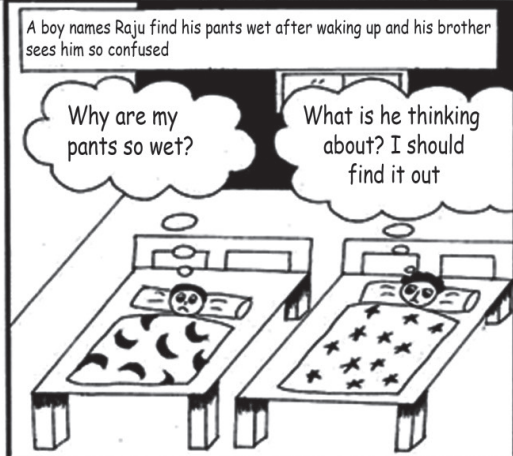


Points for discussion

1. What is being shown in the comic?
2. What are the boy's feelings?
3. What would be your advice to the boy?

Case-2: Its all natural

IT'S NATURAL



Prathamesh:J
J.N.V Valpoi
North Goa

Points for discussion

1. Why is Raju worried?
2. What did Raju's brother explain to Raju?
3. What do you understand by Nocturnal Emission from this comic?

Reflection questions

- Who should we approach to clarify the doubts related to puberty?

Take-home messages

- Wet dream is a natural process that many boys (but not all) may experience during adolescence. It has no negative influence on the body.
- Menstruation is a natural process that begins during puberty in adolescent girls.
- We should take special care and maintain personal hygiene to stay healthy.

Having correct information about our body is very important. We should not be embarrassed to ask questions.

Suggested additional activities

- Find out ways of helping Children with Special Need (CWSN) regarding their personal hygiene.

Activity 1.4 **Myths about Growing up and Other Changes**

LEARNING OUTCOMES

The learner

- Questions social taboos associated with changes during adolescence

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, critical thinking, problem-solving, decision-making, effective communication

RESOURCES

- Multiple copies of case studies along with Discussion questions, board, chalk/marker

Guidance for the facilitators

This activity should be conducted only after transacting Activity 3 among girls and boys. The activity can be conducted in a co-gendered group. However, if you feel that the learners will not be comfortable, in that case, organise it separately for boys and girls.

While discussing misconceptions relating to menstruation, you may get some tricky responses. See guidance on how to respond below:

Challenges	Possible Responses in the Situation
Learners may challenge facilitator regarding entering religious places, kitchens, etc., during menstruation. Some communities may say that this is forbidden in their religious texts	Tell them that there are many practices we follow because they are part of our culture even if others may not believe. We may ask our elders and make informed choices.
Learners may say that the comics show ideal situations and that parents may not accept them if they tried to challenge these norms. Learners may narrate an instance when they touched pickle during menstruation and it did actually get spoilt! or when they challenged social taboos, something untoward happened.	Trying to change a tradition overnight may not work. You may talk to a trusted person in the family. Convey your thoughts while understanding their fears and values. Pickle getting spoilt or untoward incident may be coincidence too. There is no scientific basis for pickles to get spoilt if a girl touches it during her periods. These beliefs are followed in some communities only; girls around the world do not even know of these taboos. Dialogue may result in gradual change.
Some learners may not get convinced, and may continue to believe that social taboos related to menstruation are true.	It may be unreal to expect that learners may change the practices and beliefs which they may have observed and followed for many years in one hour. The purpose of the discussion is to raise doubts in their mind so they perspective immediately. It is important that scientific and accurate information is shared with them.

Answer any other questions from the question box that were not addressed in the session but is related. Some examples are given below.

No.	Belief Statement	True /False	Explanation
1.	Having a wet dream in adolescence is a medical problem.	False	Wet dreams are natural phenomena that occur during adolescence in many boys. It is a part of normal growing up.
2.	Nocturnal emission causes physical weakness	False	When there is an excess of semen, the body releases it. Semen is continuously produced in the male body throughout this lifetime. Release of semen does not cause any kind of weakness.
3.	All boys must have beard to become a man.	False	Growth of body or facial hair depends on our genes and hormones and there is no set pattern in which they may appear. This differs from person to person and some men may not develop lot of body hair while others may have a dense growth. This has no connection with being a 'man'.
4.	It is not right to seek information about reproductive organs at this age.	False	During adolescence, rapid changes take place in bodies which include changes in our reproductive organs. It is absolutely right to seek information from the right source such as teachers, parents, counselors, and trusted adults.

5.	Nightfall or nightmare in teenage boys is a common procedure and not a medical problem.	True	It is true that during adolescence, the secretion of fluid from the penis can occur in boys' sleep. It is common. Although many boys experience it, it is not necessary that all boys experience it. Nocturnal emission is not a problem that requires treatment. It is a regular physical process of growing up, it does not harm the body.
6.	Girls can start menstruating anywhere from 9 to 16 years of age.	True	Menstruation usually begins in girls between the ages of 9-16 years and stops (menopause) around 45-55 years. The onset differs from one girl to another. If a girl does not begin her periods until the age of 16, it is advisable to consult a qualified doctor.
7.	Women are responsible for determining sex of the baby.	False	The determination of sex of the baby is dependent on the man's sperm. However, men cannot control or decide sex of the baby through their sperm. Nature determines sex of the baby and women should not be held responsible for it.
8.	An adolescent girl's body may not be fully prepared to bear and nurture a child even though she may have started menstruating	True	While menstruation is a sign that a girl can reproduce, it does not mean that her body is fully prepared to bear a child. It is after 20 years of age that a girl may be better prepared to become a mother mentally and physically. If a girl gets pregnant when she is not prepared for child birth it can have adverse effect on both the mother and the baby.
9.	A menstruating girl should not enter the kitchen	False	This is a common myth and many people believe that menstrual blood is dirty and so a menstruating woman can pollute food. But there is no scientific basis of this belief. A girl can go wherever she likes during her periods.

Reflection questions

- What are the common misconceptions about issues regarding growing up?

Take-home messages

- There are a number of beliefs around what girls can or cannot do during menstruation—it is important for everyone to evaluate them and check if they are accurate.

Suggested additional activity

- Talk to your parents/peers about some of the common beliefs related to growing up that occurs during adolescence. Are these influenced by some cultural/religious views?

Activity 1.5 Beauty that Matters

LEARNING OUTCOMES

The learner

- Recognises that the qualities which matter most in life are beyond physical appearance
- Recognises and expresses qualities and attributes, beyond physical appearance that are admirable.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, creative thinking, decision-making, critical thinking

RESOURCES

- Paper, Pen

Guidance for the facilitators

- Children often tend to focus a lot on physical appearance and ignore unique aspects of their personality often resulting in a poor sense of self-worth.
- While it is alright to appreciate aspects of physical appearance the focus of this activity is to get learners to look beyond, recognise and take pride in the range of personal attributes or qualities that they possess.

Read the following story

There was a man who made a living selling balloons at a fair. He had all colours of balloons, including red, yellow, blue, and green. Whenever business was slow, he would release a helium-filled balloon into the air and when the children saw it go up, they all wanted to buy one. They would come up to him, buy a balloon, and his sales would go up again. He continued this process all day. One day, he felt someone tugging at his jacket. He turned around and saw a little boy who asked, "If you release a black balloon, would that also fly?" Moved by the boy's concern, the man replied with empathy, "Son, it is not the colour of the balloon; it is what is inside, that makes it go up."

Generate a discussion around the story by asking the following questions:

1. What is this story trying to tell us?
2. How does this story relate to our real life?
3. If we compare the balloons to human beings, what qualities are there within us that make us distinct from each other?

- You may ask learners to think of any friend/person, especially CWSN, who has overcome challenges and has contributed as peers, family and society.
- Summarise the discussion by highlighting the different attributes or qualities that make a person beautiful; thus, when we think of people we look up to, their appearance is not the primary factor that influences us.

Case Study-1: I am Happy with My Complexion

Shalini and her friends in Class VIII were preparing for the school's annual function. All of them were very excited. Shalini was taking part in classical dance, while her classmates Anita and Farah were in the play. One day Anita said mockingly to Shalini, "You are so dark. We will need additional light to be able to see you on stage." Shalini did not reply to her. Farah felt bad for Shalini and said, "You dance so well. Why don't you use a fairness cream, to get a fair complexion? Can you imagine how nice you will look on the stage if you had a lighter complexion?" Shalini smiled and said, "Thank you, Farah. I appreciate your concern, but I am happy with my complexion as it is. My teacher and I are working hard on my dance practice and are confident that our efforts and your good wishes will lead to a good performance".

Points for discussion

1. What do you think of Anita's remark about Shalini?
2. What do you think of Farah's remark? Explain your answer.
3. What do you think of Shalini's response? How does she see herself? Give reasons for your answer.
4. If you were in Shalini's place, what would you have done and why?

Case Study-2: Krishnan and the Magic Drug

Krishnan is in Class VII. He is short and slim, the shortest boy in his class. Although he likes to play football, he is never selected for his school team. He is quite swift and skillful, but the coach always rejects him saying that he will get pushed around by the other players, who are much bigger than him. One day, on the roadside, Krishnan sees an advertisement outside the tent of a travelling medicine-man. It shows a thin, weak looking boy in one picture and a muscular glowing man in another. The advertisement claims that a magic drug can bring about this transformation. Krishnan wants to try this drug but is scared.

Points for Discussion

1. Why do you think Krishnan looks different from the other boys in his class?
2. Can Krishnan become a good football player?

3. What do you think of the coach's behaviour?
4. What do you think about the drug that is being advertised? Should he take it?
5. If you were in Krishnan's place, what would you do?

Summarise

- It is normal for a person to think about their appearance at this age. There is nothing wrong in making efforts to improve our appearance, such as trying a new hairstyle, eating healthy food, doing exercises.
- Each of us is unique. We all have strengths and areas that may need to be improved but improvement can only be made when we accept who we are.
- Acceptance of our body and recognition of our unique qualities will build our confidence and help us move ahead in life. Feeling negatively about our own bodies or making people feel negatively about their bodies can have adverse effects on individuals.
- A negative image of oneself can make people do things that can harm their body and mind, such as excessive dieting, trying beauty products that may be harmful, etc.
- Write on the board "I am beautiful because..." Ask each one of them to complete the sentence in their notepad. If required, clarify that they should complete the sentence by mentioning their attributes which they are proud of. Give them five minutes to write.

Some Attributes

Confident
Hard working
Obedient
Respectful
Caring
Helpful
Loving
Intelligent
Trustworthy
Faithful

Reflection questions

- What qualities make us admirable and beautiful?
- How can a negative image on one's body harm a person?
- Why is it important to identify our positive qualities?
- How can we boost our own self-confidence?
- How can we build self-confidence of our peers?

Take-home messages

- Positive thoughts about oneself and a greater focus on positive qualities will help in boosting self-confidence and enable us in living a fulfilling life.

Suggested additional activities

- Identify and write your top three positive qualities in your note book. At the end of every day think of how you used these qualities during the day and note it down. Reflect on any new qualities that you discovered in yourself and add them to the list in your note book.
- Write about the attributes and qualities that you value the most in a person known to you, and which you would like to imbibe in yourself.

Activity 1.6

Skills to counter Stigmas and Stereotypes during Adolescence

LEARNING OUTCOMES

The learner

- Displays sensitivity towards variations in developmental milestones among peers.
- Demonstrates how to counter stigmas and stereotypes related to adolescence.
- Describes youth friendly services that can support children during the growing up process.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Problem-solving, interpersonal skills and effective communication, empathy, critical thinking, decision-making

RESOURCES

- Copies of situations for groups, pen/pencil, paper, board, chalk/marker

Guidance for the facilitators

- The purpose of this activity is for the learners to apply their knowledge about changes during adolescence and misconceptions related to puberty to support their peers in enjoying a comfortable and stress-free growing up process.
- Prepare for the activity by writing down each situation on a separate piece of paper/card for each group. Behind the paper/card note the Discussion questions.
- Share that the role play would enable them to practice how they can apply this knowledge in countering stigmas and misconceptions in real life situations.
- Next, divide the class into four or five groups and give the following instructions:
 - Each group will have to come up with a role play to demonstrate a helpful way of dealing with that situation. Each group will have 10 minutes to prepare the role play.

Situation-1

Rongden and Sara are childhood friends and now study in the tenth grade. Since last month, Sara has become very irritable as she is always conscious and concerned about the grains appearing on her face as they do not go away even after a face wash three to four times a day. Yesterday, a girl in her class jokingly asked Sara if she was having 'dirty thoughts', which led to a rash. The next day, Sara does not come to the school.

Points for Discussion

- Do you think she understands the changes Sara is going through?
- What misconceptions are clear in this situation?
- If you were Rongden, what would you do?

Situation-2

Kalai and his friend (class IX) were discussing the hairstyle and beard of an actor in a film when a friend of his joked about a classmate boy who has no hair on his face. Other people in the group also began to speculate about what his problem might be.

Points for Discussion

- Do you think that Kalai's friends understand the changes in adolescence that boys go through?
- What misconception do you have in this situation?
- What would you have done if you were a curse?

Situation-3

Rajesh, Sonia and Robin (class IX) are friends. Rajesh has always been good in basketball, but recently he has started missing his practice. One day Rajesh tells Sonia that two years ago he used to be a tall boy in the classroom, but suddenly he finds that all his friends including Robin have attained heights, but he has not. He feels that he will always be small and, therefore, is losing interest in basketball. He is taking several pills to increase his height, but nothing works.

Points for Discussion

- Do you think Rajesh understands the changes happening in adolescence?
- What misconception do you have in this situation?
- If you were Sonia, what would you do?

Situation-4

Silla and Ruchika were talking during the lunch break. Silla mentioned that her menstruation was going on. Ruchika tells her that her menstruation is irregular for the last four months and she feels that something is wrong with her. She feels that she cannot talk to her mother about this and does not know what to do.

Points for Discussion

- Do you think Ruchika understands the changes she is going through?
- What misconception do you identify in this situation?
- If you were sewed, what would you do?

After each role play highlight, the misconceptions that need to be countered.

- Case 1: Rongden needs to convince Sarah that rash is common at this age. Any kind of thought has nothing to do with rashes. They are caused by hormonal changes at this age and go away over time. She can seek some treatment from a physician if needed.
- Case 2: Kalai should tell his friends that like physical changes, the growth of facial hair also happens at different speeds for different people.
- Case 3: Sonia should tell Rajesh that the pace of development during adolescence varies from person to person. He does not need to compare himself to others.
- Case 4: Silla needs to tell Ruchika that she should not hesitate to discuss menstrual problems with her mother. If that is not possible, she can talk to her teacher. She must understand that menstruation is often irregular in the early stages of menstruation.

Next ask learners if they know about any services or institutions which can offer help in such situations?

Give information about—

- Counsellor in Schools
- Adolescent Friendly Health Clinics
- Phone Helplines

Adolescent Friendly Health Clinics: A whole gamut of clinical and counselling services on diverse adolescent health issues ranging from Sexual and Reproductive Health (SRH) to Nutrition, Substance abuse, Injuries and Violence (including gender based violence), Non-Communicable Diseases (NCD) and Mental Health issues are available to adolescents through more than 7500 Adolescent Friendly Health Clinics (AFHC) at various levels of health care facilities. Commodities available at AFHCs include Weekly Iron and Folic Acid supplementation and Albendazole tablets, sanitary napkins, contraceptives, basic medicines. Services include blood pressure measurement, weighing machine, to name a few.

Phone Helpline

1098: Child Helpline number

104/108: This Government helpline also extends services to adolescents in many states.

Different state governments have also launched helplines for adolescents and it is important that this information is shared with the teachers and students.

Take-home messages

- The pace of physical change varies across individuals. It is important to be sensitive towards peers who may be experiencing these changes faster or slower than others. Accurate knowledge can equip us to counter some of the myths and stigmas related to puberty.
- Youth friendly services can be accessed by children to deal with growing up issues.

Suggested additional activity

- Ask some learners to volunteer to find out about Youth and Adolescent Friendly Health Services. They can look up online, call the services or visit them to gather information. These can include visiting an Adolescent Friendly Health Clinic (AFHC) at a public health facility.



EMOTIONAL WELL-BEING AND MENTAL HEALTH

An individual, in a state of well-being at one point of time, may be pushed into distress by an event or situation but may be able to bounce back to a state of well-being again. For example, after being isolated from a peer group, a child might initially feel low and experience distress. The child might not be able to concentrate on studies or interact with others, but over a period of time may bounce back and find ways to deal with the problem and get back to doing things the child enjoys. However, if the child is not able to function for a prolonged period of time and continues feeling distressed most of the time, it may be important to seek professional help to rule out an illness and seek timely help. The focus of this theme is to develop in the learner, awareness about mental health skills, developing emotional well-being in self, and fostering and supporting one another in developing positive attitudes and accessing help when required. The emphasis is also on building awareness around various emotions and expressions, identifying their own and their peers' personal strengths and skills to reach out for help, if and when required. The knowledge about mental health helps in identifying and using their strengths to cope with stressful situations and seek help when required. In this module, some activities have been discussed to develop emotional well-being and mental health.

Activity 2.1 Knowing my Emotions

LEARNING OUTCOMES

The learner

- demonstrates the ability to identify various emotions in different situations.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, Managing emotions, Creative thinking

RESOURCES

- Whiteboard/Blackboard, Marker/Chalk, Duster, Chart with a table listing emotions

Guidance for the facilitators

- The purpose of this activity is for the learners to build awareness about the range of emotions they experience in their lives.
- Be familiar with emotions listed in the activity and examples that can explain them as well as a larger pool of emotion-words that exist (see below table for reference).
- Encourage the learners to come up with as many emotions as possible.

Emotions that an adolescent feels on different occasions			
Happy	Shy	Surprised	Scared
Angry	Joyful	Sad	Puzzled
Content	Hurt	Confused	Hopeful
Loved	Jealous	Frustrated	Guilty
Excited	Worried	Irritated	Silly
Disappointed	Proud	Tensed	Embarrassed

Step 1

Ask the learners to name some emotions that they experience in their everyday lives and write them on the blackboard. Ask them to think about what happens to their bodies when they feel these different emotions.

Step 2

Ask the following questions and write their responses on the board: What happens to our body when:

- we are angry?
- we are happy?
- we are sad?
- we are excited?
- we are scared?

Step 3

Use the information below to add to the responses from the learners:

- Angry—we may begin to feel hot, start sweating or get a headache.
- Happy—we may feel energised, our body may feel light.
- Sad—we may feel lethargic.
- Excited—our heartbeat may become fast.
- Scared—we may start sweating, experience goose bumps on the skin.

Tell the learners that there are many more emotions than what has been listed above.

Discuss the following situations. Emotions written in the bracket are for your reference.

Situations	
1. It is your birthday and all your friends are about to come to your place for a party.	(Happy, Excited)
2. Your examination results have just been announced and your marks are much lower than what you had expected.	(Sad, Disappointed)
3. Your little brother has not come home from tuition and it is getting dark.	(Worried)
4. You heard your close friend saying something bad about you to another friend.	(Sad, Hurt)
5. The teacher scolded you in front of the whole class.	(Upset, Sad, Embarrassed, Angry)
6. You saved a little puppy from being hit by a vehicle.	(Proud, Happy)
7. You were trying to set the time on the wall clock at home, but it fell down and broke.	(Scared)
8. You got hurt in school, your friends came to pick you up and then sat by you to take care of you.	(Loved, Happy)
9. You participated in a singing competition, your name has been announced as the winner and you are going towards the stage to receive your prize.	(Proud, Happy, Excited)
10. Your little sister scribbled in your school notebook with a crayon.	(Angry)
11. When you opened your school bag at the end of the term, you found a beautiful card made for you by your friend.	(Surprised, Happy, Loved)
12. You are not sure which chapters are included for the test to be held tomorrow.	(Confused, Scared)

- The learners may call out more than one emotion for a situation.
- Summarise by telling the learners that it is very important to be aware of our emotions. Becoming aware of our emotions and labeling them, is the first step in managing challenging emotions.

Reflective questions

- How can knowing our emotions be helpful to us?

Take-home messages

- Emotions are a part of everyone's lives. They are neither good nor bad but how they are expressed is more important.
- Developing awareness of emotions is a skill that builds over time and needs to be practiced.

Additional suggested activity

- The learners may be asked to draw a poster to show different emoticons like being sad, happy, angry, excited, exhausted, etc.

Activity 2.2 Managing Challenging Emotions

LEARNING OUTCOMES

The learner

- Expresses how emotions are expressed in healthy and unhealthy ways.
- Demonstrates skills to express emotions in healthy ways.
- Identifies and describes weaknesses and strengths in self.
- Demonstrates an understanding of how one can use one's strengths to overcome.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, Critical thinking, Decision-making, Managing emotions, Effective communication

RESOURCES

- List of emotions/Feelings, Whiteboard/Blackboard, Markers, Chalks, Duster

Guidance for the facilitators

- Before transacting the activity, the facilitators should understand that there is nothing healthy or unhealthy about feelings/emotions. However, the ways in which they are expressed can be healthy or unhealthy.
- Tell the learners that today we are going to focus on feelings like anger, disappointment, hurt, sadness and fear.
- Make a table on the board or on a chart with the five emotions given below, in each column.

Anger	Disappointment	Hurt	Sadness	Fear/Scared

- Instruct the students to make a similar table in their notebook and say that you would be reading out situations. They have to identify one of the five emotions (written on the board) and make a note below that as to how they would react if the situation happened to them.
- Give them one example—the situation is “I was expecting to get selected for the annual day drama/play but I did not get selected. I was very disappointed. I reacted by crying and then got irritated with my sister.” Show them how you would write your reaction below the emotion ‘disappointment’.

Situations

1. My classmate tells the teacher that I broke the bench in the classroom though I did not, and the teacher believes him.
2. I was keen on being on the school cricket team, but I did not get selected.
3. I missed school for three days and my friend would not give me her notes.
4. I am not prepared for the exam. I studied only half the portion.
5. I lost the money that my mother gave me to buy a compass box.

- Ask the learners which of these are healthy reactions and which are unhealthy.
- Put an 'H' next to each healthy reaction and 'U' next to each unhealthy reaction.
- Divide the class into three or four groups. Each group will perform role play.
- Each group will have 10 minutes to prepare the role play and three minutes to present it in front of the class by displaying a healthy strategy to deal with the situation.

Situation-1

Malavika is an excellent Kabaddi player. However, her name did not appear this time in the Kabaddi tournament to be held in the village. When Malavika heard about this, she went to the village headman and fought with him.

Points for discussion

- What was Malavika feeling?
- What did Malavika want from the situation?
- Would you consider her response healthy/unhealthy?
- Would she be able to achieve what she wanted with her response?
- What could have been a healthy response in this situation?

Situation-2

Anima cleared the Class VIII examination yesterday. Suddenly, her parents informed her that she will not go to school from the next day instead, she will go to work. Anima was very upset but she did not utter a word. She regretted all the time she dreamt of going to college and blamed her parents for not understanding her desires. She decided she will never again tell them her wishes again.

Points for discussion

- What was Anima feeling?
- What did Anima want from the situation?
- Would you consider her response healthy/unhealthy?
- Would she be able to achieve what she wanted with her response?
- What could have been a healthy response in this situation?

Situation-3

Tomtsa is very fond of music and loves to sing. Yesterday when the class teacher announced an inter-class singing competition, Tomtsa's eyes gleamed with excitement. Today his expression was different. Just before the performance, Tomtsa's hands became sweaty, his heart beat went up, and he started feeling confused. He kept going to the washroom as he was very uncomfortable. As he stood waiting for his turn he started thinking he would forget the lyrics of the song he had prepared. He decided to withdraw his name from the performance list and did not sing in the competition.

Points for discussion

- What was Tomtsa feeling? (Nervous, anxious)
- What did Tomtsa want from the situation?
- Would you consider his response healthy/unhealthy?
- Would he be able to achieve what he wanted with his response?
- What could have been a healthy response in this situation?

Situation-4

Manju was studying in Class VIII. The teacher announced that three girls who top the class in the upcoming examination would receive a special award and scholarship in Class IX. Manju worked very hard and was confident that she would be one of the top three. When she got her results she was very surprised that she had just missed the third rank. She had already told her parents and grandmother about her expectation.

Points for discussion

- What should Manju tell them?
- What should Manju do?
- What do you think Manju felt when she saw the results?

After role plays, generate a discussion based on the following questions.

- How easy or difficult is it to use healthy reactions to challenging emotions?
- What would you do differently when you feel any of these emotions in the future?

Tell students that sometimes they may find the situation too difficult to tackle on their own and may want to seek help. They can approach counsellors in the AFHCs. Add some suggestions from the reference list below.

Reference list

- Go for a walk, listen to music, play games, go cycling.
- Talk to a friend, spend time in the midst of nature.

- Take deep breaths or meditate when nervous.
- Write on a piece of paper or in a personal diary when angry.
- Spend time with a pet/domestic animal.

Reflective questions

- What will you do if you are unable to manage the emotion on your own?

Take-home messages

- Emotions are a natural response to situations in life.
- Emotions are neither good nor bad. How they get expressed is important.
- Managing emotions is the ability to identify, label, and express them appropriately.
- Managing emotions is an important skill that one needs to practice.

Additional suggested activity

Students can complete the ‘Story Starters’ in their notebooks, for example:

- Next time when things don’t go my way, instead of getting angry I will...

Activity 2.3 **SWOT – Identifying Strength**

LEARNING OUTCOMES

The learner

- Identifies and describes own weaknesses and strengths.
- Demonstrates an understanding of how one can use one’s strengths to overcome challenging situations.
- Identifies and describes areas for improvement.
Identifies people who can support in developing one’s strengths further.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, Critical thinking, Problem solving, Emotional awareness, Creative thinking

RESOURCES

- Blackboard and chalk or chart paper and colour pens

Guidance for the facilitators

- The purpose of this activity is to facilitate an understanding of personal strengths, weaknesses, opportunities and threats amongst the learners so they can use their strengths to overcome challenging situations.
- Prepare the following figure on a chart paper or on the blackboard.
- Encourage every learner to identify and share at least one each – strength, weakness, opportunity and threat.



- Reinforce the importance of confidentiality during discussions.
- Ensure that other learners listen respectfully and do not interrupt, laugh at, make fun of or ignore each other.
- Ask the learners to refer to the SWOT chart on the chart paper or the blackboard, while you explain the concept of strengths, weaknesses, opportunities and threats. Use the explanation below for your reference.

- *Strengths* are internal resources that you have and things that you do very well. They can be a specific skill or ability that you are born with or that you learn such as singing, playing music, swimming, drawing, etc.
- *Weaknesses* are specific skills or abilities, which you need to improve upon or are currently lacking.
- *Opportunities* are favourable external factors that are available for your support and growth. They could be people or situations that help you recognise your strengths, use them and learn new skills.
- *Threats* are obstacles that come in your way, or external factors, that have the potential to block your growth or harm you.

Write the list of questions relevant for each quadrant on the blackboard or on a chart for the learners to refer to.

Strengths

- What do I do very well?
- What feedback have others given me about my strengths?
- What achievements am I most proud of?
- What are the things I do that help me stay happy and deal with challenging situations?

Weaknesses

- What learning or skills am I lacking or need to improve upon?
- What do my teachers or classmates/friends or parents say are my weaknesses?

- What are the things I need to do more of to stay happy and deal with difficult situations?

Opportunities

- What are the opportunities available for me to learn new skills?
- Who are the people who can support me to achieve success in work and relationships?
- Who are the people who can support me to stay happy and deal with difficult situations?

Threats

- What external resources do I lack (guidance/peer support/parental support, etc.), which inhibit my progress?
- What external factors (demands made by friends/teachers/parents, bullying, conflicts) block me from achieving success in work and relationships?
- What external factors (demands made by friends/teachers/parents, bullying, conflicts) block me from staying happy and dealing with stress?

Reflective questions

- What strengths did I realise I have that I could use to deal with challenging situations?

Take-home messages

- Identifying and using one's strengths can promote well being.
- Strengths can also be applied to manage personal challenges as well as make good use of available opportunities.
- It is important that one identifies people who can support them to learn new skills and abilities. This can help create opportunities for new learning and personal growth.

Additional suggested activity

- The learners can make efforts to use their strengths and opportunities and note them in their notebooks and keep expanding the matrix.

Activity 2.4

My Core Strength - 'I have, I am, I can'

LEARNING OUTCOMES

The learner

- Identifies personal strengths and resources.
- Expresses recognition of support systems to avail when faced with challenges.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, Critical thinking, Decision-making, Creative thinking

RESOURCES

- Blackboard, Chalk, Paper, Pen

Guidance for the facilitators

- The focus of this activity is to help the learners identify different core strengths and encourage them to list down as many personal core strengths as possible—be it values, traits, dispositions, characteristics, attitudes, beliefs or resources.
- The facilitators should try to become familiar with basic core strengths or positive traits such as forgiveness, kindness, teamwork, athletic ability, musical talent, humility, creativity, curiosity, courage, kindness, team work, humor and so on.
- The facilitators should explain resilience. Resilience is the ability of an individual, family or community to manage challenges or adversities so as to maintain mental well-being. Resilience is particularly important for young people. It is not static but is something that can change over time due to experiences and circumstances. Being aware of one's strengths and consciously using them helps build resilience.
- Ask them to think of a challenging situation that they have overcome in the past.
- Write their responses on the blackboard for all the learners to see.
- Relate it to their core strengths and see how these strengths can be used to develop their ability to overcome challenges or difficulties in life (resilience).
- Explain to the learners that all the strategies or factors that helped them overcome the challenging situations are their core strengths. These can help in promoting resilience.
- Draw a table with three column headings on the blackboard – 'I Am', 'I Have', 'I Can'. In the column 'I Am', ask the learners to write their internal strengths that they have identified. In the column 'I Have', tell them to mention external support and resources such as good friends, an approachable teacher, a caring adult, a counselor who can help them when they face challenges. Under 'I Can', ask them to write the various skills that they have.
- Explain the meaning of core strengths and list a few under each column as an example. Responses are also to be taken from the learners to build on the list.

I Am	I Have	I Can
(Internal personal strengths – feelings, attitudes and beliefs that can be strengthened by support) For example: I am honest, and I believe that we should work hard if we want to achieve our dreams.	(External support, resources, help that promotes resilience and well-being) For example: I have a loving aunt who supports and guides me. I have two close friends with whom I share everything.	(Social and interpersonal skills – learnt or acquired by interacting with others) For example: I am able to express my feelings and needs with people around me. Most of my peers trust me.

- Encourage to create a list of their own core strengths.
- Ask the learners to get into smaller groups of 5-7 learners each and then think of a situation in the school, which might promote the use of their core strengths.
- The facilitator can write responses on the board and compliment the learners for active participation.
- The activity can be summarised by asking the following Reflective questions followed by discussing the concept of resilience. The learners can be encouraged to keep building resilience in their lives using core strengths and positive qualities.

Reflective questions

- What do you understand by the term resilience?
- How can people in our lives help us when we face difficulties?

Take-home messages

- Core strengths or positive traits can come from within or can be developed with the help of people and resources around us.
- As time passes, new strengths can be added to the list of individual resources.
- Knowing our strengths and people who we can reach out to when faced with challenges, can help individuals deal with situations better.

Additional suggested activity

- *Group's Core Strengths:* The facilitators can encourage the learners to come up with a combined document, where they jot down their strengths as a class group and write some of the strengths that they derive from the group itself. The learners fill up the similar columns but as 'We Are', 'We Have' and 'We Can' in their notebooks, using the table as shown earlier.

Activity 2.5

Understanding Mental Health

LEARNING OUTCOMES

The learner

- Recognises that ‘mental health and well-being’ exists along a continuum.
- Identifies signs of distress in self and others.
- Accesses and provides timely support to maintain or restore well-being.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, Managing emotions, Decision-making, Problem solving.

RESOURCES

- Blackboard and chalk, copies of statements.

Guidance for the facilitators

- The purpose of this activity is to facilitate an understanding of the concept of ‘mental health and well-being’. It is important for the facilitator to recognise that the categories of well-being and distress are not fixed.
- If there are any disclosures of mental health concerns/distress, self-harm or abuse, then the facilitator would need to break confidentiality and inform the school counsellor/a trusted adult related to the learner about the same and ensure that the child receives adequate professional help, if necessary.
- Write the word ‘mental health’ on the board and ask the learners what it means. (The learners might say being ‘mental’, mad, depressed, etc.)
- Explain mental health.
 - Being mentally healthy or mental well-being means being aware of our strengths and limitations, being able to use our strengths to deal with challenging emotions and situations, lead a healthy lifestyle, be productive so we can reach our goals and have meaningful relationships.
 - Draw a rule on the blackboard and write mental health on one side, distress in the middle and mental illness at the end.

Explain distress and illness

- Tell the learners that we all face challenging situations in our lives. We experience feelings of fear, guilt, shame, anger, sadness.
- Most often we are able to cope with difficult situations using our own strengths or with support from friends and/or family.
- However, sometimes the situation may be so difficult or we may feel so sad or fearful that for some time we may stop interacting with people, or cry a lot or get irritated with our family and friends. This is a state of distress.
- Often, as the situation changes or with support from friends, we are able to get over our distress and move to a state of well-being.
- However, a few times, one is not able to cope with the situation. For example, one feels low or nervous all the time, is not able to function, has difficulty falling asleep, concentrating on studies and making decisions, does not talk to anyone, loses interest in having fun and, at times feels life is not worth living.

When this happens for a prolonged period (more than two weeks), the person needs help. The person could be experiencing 'depression' or 'anxiety' (illness). Divide the learners into groups and write the following statements on the board. Do not reveal what is in the brackets.

Statements

- I did badly in my exam and have been feeling like a failure recently (distress).
- I keep thinking that life is not worth living (illness).
- I know my strengths and limitations (well-being).
- Since last month, I find that I have lost interest in everything (illness).
- I can adjust to any new situation (well-being).
- I sometimes feel very confused about what to do (distress).
- I hurt myself when I feel sad or anxious (illness).
- I am able to face challenges (well-being).
- I have been feeling sad for the last two days as I miss my sister who has gone to a different city to study (distress).
- I feel so nervous that I have stopped going to school (illness).

- Ask the learners to discuss in their groups and identify which of these expressions indicate a state of **well-being**, which indicate **distress**, and which indicate a possible **illness**.
- Correct the group if they have a different answer and explain it.
- At the end of the activity summarise the difference between a state of well-being, distress and illness.

- Explain that seeking support is very important when one cannot deal with the situation that is causing one distress. Inform that counselling services are available in the AFHCs.

Reflective questions

- How can we move from a state of distress to a state of well-being?
- What can I do to help someone experiencing distress or mental illness?

Take-home messages

- The state of mental health and well-being can keep changing along a continuum.
- When faced with everyday challenges, a person could move along the continuum from a state of well-being to distress. However, if one has the skills or the right support the person can move out of this state and this may not affect the person's ability to work productively over a long period of time.
- Some people in the state of distress might require timely help and support from family to return to the state of well-being while others might require professional help.
- On a personal level, one should not hesitate in seeking professional help and should not make fun of someone who is seeking help for a mental health concern.

Additional suggested activity

- The learners can list strategies they use to manage distress and promote their well-being and practice them regularly.

Activity 2.6 **Mindfulness – Mindful Being Mindful Living**

LEARNING OUTCOMES

The learner

- Demonstrates strategies to overcome challenging emotions

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, managing emotions

RESOURCES

- Calm and soothing Instrumental music, Music player, or Recorded music on phone, A quiet room, Yoga mats or Durries (if available).

Guidance for the facilitators

- The facilitators can choose to transact any one activity from the two formats of the activity given below, or transact both at a particular point of time or one earlier and the other later.
- If music player is not available, the facilitator can still transact the activity by asking the learners to maintain silence in the room to avoid/control any distractions.

‘My Three Senses’ Exercise

Ask all the learners to:

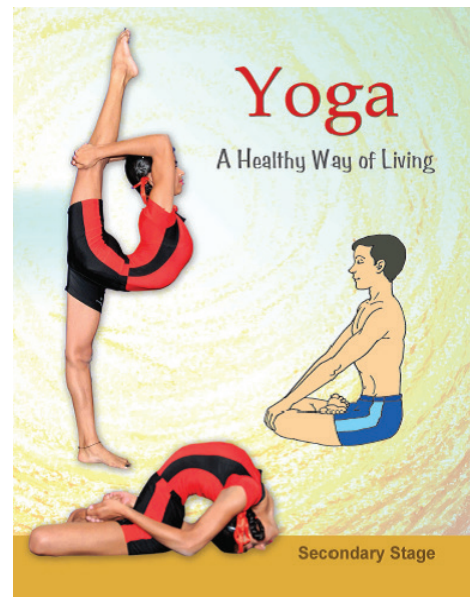
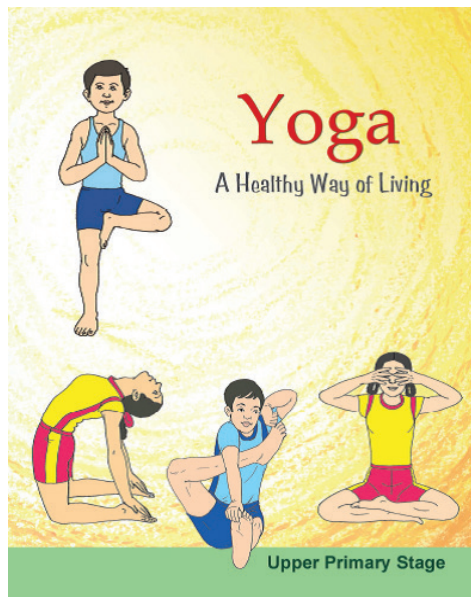
- Sit quietly in the classroom on their seats or on the floor (as per the infrastructure available in the school). Ask them to Close their eyes and hear their own breath.
- Start taking deep and slow breaths for 30 seconds.
- Open their eyes after 30 seconds but stay absolutely still and quiet and respond to three questions one by one:
 - What are the three things I can hear? (Example: my own breath, my partner’s breath, clock on the wall, vehicle passing by, children in other classrooms in the school, music in the next rooms, etc.)
 - What are the three things I can see? (Example: the table, the environment in the classroom, someone walking by outside, the facilitator, other learners in the classroom, etc.).
 - What are the three things I can feel? (Example: the chair under me, the floor under my feet, nail of the bench, etc.)
- After 30 seconds to one minute, the facilitator then asks the learners to shift their focus back to their breathing.

Meditating/Body Exercise

- Ask all the learners to lie down on their yoga mats or alternatively on the common mat provided in the school or sit on the bench in the classroom.
- Explain that the goal is to try and remain alert and aware of the present moment.
- Ask everyone to slowly close their eyes, let shoulders drop down, away from the ears and bring their attention to their own breathing.
- Breathe in and out and continue to breathe naturally.
- In a deep calm voice explain that the aim of the exercise is to bring awareness to the physical sensations in different parts of the body. Then ask them the question: “Do you notice any tingling, warmth, pulsation, tightness or any other sensation anywhere in the body. It is not about any sensation being good or bad, but about feeling them.”
- Then instruct: “Continue to breathe at your own pace allowing each breath to come as it may without any conscious effort to change your breathing.”

- Gently add that the mind will inevitably wander away. They need to acknowledge it and then shift their focus back to their breath.
- Ask them to now focus on their arms, legs, stomach, chest, shoulders, hands, palms, back, neck, mouth, face. This exercise can be continued for as long as 15-20 minutes.
- Ask them to slowly open their eyes after taking a few deep breaths.
- Explain to the learners that these are techniques that they can use to calm down when they face challenging emotions like anger or fear. Tell them regular practice of mindfulness will also improve their concentration.

Note: The teacher can also take the help of the following NCERT books on yoga.



Reflective question

- How can we practice mindfulness?

Take-home messages

- There are ways to deal with challenging emotions and distress.
- Regular practice of simple relaxation exercises and mindfulness helps us cope with distress.

Additional suggested activity

- **Keep a log:** The learners could be asked to keep a log while they practice these exercises and document how they feel before and after the exercise.



INTERPERSONAL RELATIONSHIPS

A strong, deep or close association between two or more people that may be for a short or long duration is referred to as an interpersonal relationship. This relationship may be based on friendship, love, support, regular work interactions, or some other type of social commitment. The emphasis of this theme is to develop interpersonal skills among the learners in building and nurturing relationships with friends, family and the community and dealing with unhealthy relationships. The emphasis is on building the skills of empathy, empathetic communication that help nurture relationships and skills required to deal with unhealthy relationships in an assertive manner. In this module, the learners are also taught skills on how to work as a team.

Activity 3.1 Understanding Other's Emotions

LEARNING OUTCOMES

The learner

- Identifies various emotions.
- Demonstrates understanding of others' thoughts and emotions.

TIME REQUIRED

- One Period

LIFE SKILLS ENHANCED

- Empathy, Critical thinking, Interpersonal relationships, Creative thinking

RESOURCES

- Ten slips of paper; Five situations - each written on two slips of paper

Guidance for the facilitators

Encourage the learners to think more and empathise with different characters in each situation.

- Divide the learners into 10 groups and give them one situation each.
- The learners have to read the situation carefully and write the emotion/s that each character in the given situation could have felt, in a notebook. Give the learners five minutes to discuss and write.
- Create a table on the board/chart with all the characters (Reema, Pintu, etc.) listed in the first column and emotions in the second.

Character	Emotion
Reena	
Pintu	
Reena's father	
Shabana	
Sarita	

Situations

1. Reena and Pintu came home late, after playing. As they entered the house, dad said, "Reena, what's the time? I have told you hundreds of times to be back before dark?" Reena said, "You always scold me and never say anything to Pintu." Dad said, "Don't compare yourself to him. He is a boy!"
2. Shabana and Sarita are very good friends. Shabana is very scared of Maths. Sarita is good at Maths and always helps her before the exams. The same thing happened before their mid-term exam. When the results came out, Shabana scored way more than Sarita.
3. Today is Jemy's first day in his new school. The teacher asks him to sit next to Ranjan. Jemy tries to interact with Ranjan but Ranjan does not talk to him much. During the lunch break, Jemy looks at his crutches and thinks that he will never have friends. He starts having his lunch alone. That's when Suraj comes to him and invites him to join his group for lunch.
4. Parveen and Nuzhat are siblings. Parveen is four years older than Nuzhat. Some days back, Parveen told Nuzhat that she and her friends bunked school and went to see a fair. She asked Nuzhat not to tell anybody. Somehow, Ammi sensed it and asked Nuzhat if she knew anything about it. When Ammi asked too many questions, Nuzhat told her the truth.
5. Balvinder was waiting in a long queue at the bus stop. As the bus came closer to the stop, people started boarding. As Balvinder was about to board, a boy came running, broke the line, pushed Balvinder aside and boarded the bus. Balvinder fell and missed the bus.

- Once all the groups are ready with their responses, ask a learner from each group to come forward. They will first read out the situation and then share the emotions that they have written for different characters. Note down the responses in the respective rows. After every situation, ask the large group if anybody would like to add any more emotions to the list and add them to the table.
- After all the presentations, generate a discussion using the following questions.
 - In any given situation, did all the characters experience the same emotions? Yes/No? Give examples.
 - Why do you think different characters experienced different emotions?
 - In a day-to-day situation, how do we get to know what the other person is feeling? (Probe with questions like, how do we know someone is angry? How do we know when someone is sad?) (Answers: facial expression, body language, what they say)
- Explain the meaning of the word ‘empathy’. Empathy is different than ‘sympathy’. Sympathy means feeling sad or pity for someone’s sorrow or misfortune. Empathy means to be able to see things from the viewpoint of others that is, getting into someone else’s shoes; understanding and sharing others’ thoughts, feelings and emotions. Empathy is important because it enables us to connect with people around us and build relationships. In order to develop empathy, one needs to practice certain skills, like active listening and careful observation.

Explain ‘OLA’ (Observe – Listen – Ask) as follows

- Observe: Look at the other person carefully, look at the facial expressions, eye contact, gestures, postures, etc.
- Listen: Pay attention to the words, tone and facial expressions to understand what the other person is saying. Communicate that you are listening and have understood what is being said by nodding your head or saying ‘hmmm’, ‘okay’, ‘right’, etc.
- Ask to clarify: Try to confirm your understanding by stating the other person’s point in your own words and asking the person to confirm or otherwise.



- Don't assume anything, ask a question to clarify or confirm your understanding. For example, you may say "Are you saying that you felt neglected?"

Demonstrate how OLA can be used

Let us look at the first situation with Reena, Pintu and their father. Suppose Reena comes to you and narrates the situation to you, you should be able to empathise with her. If Reena's father comes and speaks to you, he may tell the same story from his perspective. You will have to listen to him carefully, observe his body language and ask relevant questions in order to empathise with him. Let's see how it works.

Read out the first situation (Reena and Pintu). Invite a student (preferably a fluent reader) to come forward. Share the script with the student and ask her to play Reena's role. You will play the role of Reena's friend. While you play the role, make sure that you demonstrate the skills in OLA.

Tell the learners that you are going to demonstrate OLA as follows:

Reena: Do you know what happened the other day? I reached home late with my brother and my dad shouted at me for coming home late.

Friend: (Listens and observes carefully) Oh, is that so?

Reena: He always does that. He always scolds me. What makes me angry is that he does not say anything to my brother just because he is a boy.

Friend: Does that upset you more? That he scolds you and not your brother? I am wondering why he does that.

Reena: May be, he is more concerned about my safety, but it's not fair to just scold me.

Friend: (Nods) You are right. He is probably more concerned about you. Do you think he should be concerned about your brother's safety also?

Reena: Obviously! He should be concerned about his safety too and actually he should not scold us at all. We both were together and we were careful.

Friend: I see.

Ask the learners what skills they saw in the demonstration. This discussion must be focused on what you as a friend said/did to show empathy. The learner can also be encouraged to role play the above situations.

Reflective questions

- Why is it important to understand the emotions of self and others?
- What are the skills that will help us in showing empathy?
- How do we know someone is listening to us?

Take-home messages

- Understanding the other person's point of view is very important for building relationships.
- Responding to others' thoughts and emotions involves multiple skills. If these skills are enhanced it helps individuals to build positive connections with people around them, friends, siblings, parents or teachers.
- Understanding others' feelings/emotions helps individuals become more sensitive to the other and strengthens relationships.

Additional suggested activity

- Use 'OLA' in your everyday interactions at home and in school over the next few days and write your experiences.

Activity 3.2 Nurturing Positive Relationships

LEARNING OUTCOMES

The learner

- Become aware of how they relate with different people in their life.
- Identifies ways of nurturing positive relationships.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, Interpersonal relationships, Creative thinking

RESOURCES

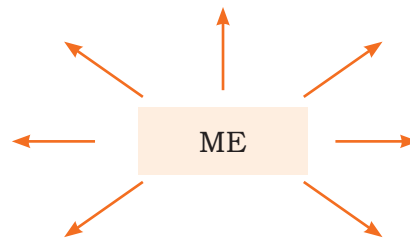
- Blank sheets of paper/Notepads, Pen/Pencil or Coloured pens/Crayons

Guidance for the facilitators

- The focus of this activity is on identifying positive relationships and nurturing them further.
- Write the word 'relationships' on the board and ask the following questions:
 - What do you understand by the word relationship?
 - What is the importance of relationships in our life?
- Encourage a few learners to share their thoughts.
- Summarise the learners' responses by emphasising that relationships are an important aspect of our lives.

Activity

- Ask the learners to write the word 'ME' in the centre of a page and encircle it.
- Next, ask them to write different relationships around it. These could be various people from their family, friends and community (see diagram below for reference).
- Encourage the learners to reflect on relationships, which are the strongest and closest for them. For example, a friend could be closer than a parent for some learners.
- Ask the learners to pick the three most important relationships in their life right now. These may change from time to time.
- Ask the learners to reflect on their own behaviour with respect to these relationships.
- Ask them to list the three relationships/people and select one-two positive action/behaviour that they want to practice in the near future to make the relationship stronger and more positive.



Relationship	Action points	By when

Reflective questions

- How do positive relationships help us in our lives?
- What can we do to make our relationships better and stronger?

Take-home messages

- Each person's relationship map is different and unique. There is no right or wrong map and it is quite possible that with time relationship maps change.
- Some relationships are positive and some are not.
- Certain actions/behaviour help strengthen relationships.
- It is very important to nurture positive relationships as they keep individuals inspired and happy. These relationships are also a source of strength and support in difficult times.

Additional suggested activity

- Follow their action plan. Take up the actions that you planned to take up.

Activity 3.3 Dealing with Unhealthy Relationships

LEARNING OUTCOMES

The learner

- Identifies attributes of unhealthy or negative relationships.
- Demonstrates strategies to deal with unhealthy or negative relationships.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, Critical thinking, Interpersonal skills, Problem solving

RESOURCES

- Copies of case studies

Guidance for the facilitators

- The focus of this session is on identifying unhealthy relationships and trying to deal with them in the best possible way.
- It is important that the learners understand the difference between a not-so-positive relationship that needs efforts from both sides to make it better and a harmful relationship, from which they need to keep themselves safe/away.
- Explain the following points:
 - Relationships can be both positive and negative. While most relationships contribute to joy and overall development, negative or unhealthy relationships cause emotions like fear, humiliation, and pressure and obstruct our overall development. It is very important for us to learn to identify these relationships and learn how to deal with them.
- Tell the learners to listen carefully to characteristics of unhealthy relationships and read the following characteristics slowly, asking them to give examples from their own experiences.
 - People who never help or cooperate with us
 - People whom we are afraid/scared of
 - People who try to touch us in a wrong way

- People who make us uneasy
- People with whom we feel unsafe or insecure
- People who do not give any importance to us or our views/thoughts
- People who hurt us physically, mentally or emotionally
- People who give us wrong advice or ask us to do wrong things/things that harm us or others
- Make groups of 5-6 learners and give one case study to each group. Ask them to read the case study in their small group and write down what strategies a person can use to address the problem.

Case Study 1

Laali's maternal uncle comes to stay at her home from time to time. He places a lot of restrictions on Laali. When he arrives, Laali is unable to meet her friends or go out of the house. Meeting her friends becomes very infrequent and erratic. Laali becomes quiet and fearful and she almost stops talking and laughing.

Case Study 2

Amandeep has speech impairment. She loves studies and likes going to school. Her only fear in school is her class teacher, who never wanted her in the class. The teacher could not be bothered with a girl who couldn't speak. She taught the class as though Amandeep was not present. When Amandeep would score low in tests, the teacher would often tell her that she should just stay at home.

Case Study 3

When Iqbal joined the school hostel, a group of senior boys started bullying him. Soon this became a routine and they started threatening Iqbal of bad consequences if he did not do their work. Sometimes they would ask him to wash their clothes, give his snacks and money to them. Iqbal felt very scared in the hostel and has started keeping quiet and losing his confidence.

Case Study 4

Ronny has come to stay at her cousin sonam's house. Sonam welcomed her warmly but she wants Ronny to her all the time and not meet or play with other friends. Ronny wants to do other things and talk to other friends too.

- Ask one member from each group to read out a case and share their strategy for dealing with the situation. Ask other learners to also suggest how the person can communicate their feelings clearly, without hurting the other person.

Ask the group for their opinion on suggested strategy/ strategies from different groups.

Summarise

- Some relationships are important for us and we may want to put in more efforts to make them better. We may want to involve a third person to resolve the issues in a relationship.
- Some relationships can be difficult and the other person does not respond to our efforts to resolve the issue. In such situations, a call has to be taken as to how far one person can go to try and resolve issues.
- If the other person dismisses all the positive efforts and threatens to harm, it is important to complain and seek help from a trusted source. It may be important to give up on such relationships.

Reflective question

- How can we deal effectively with unhealthy relationships?

Take-home messages

- It is very important to understand which relationships are unhealthy and gather courage to address them.
- Sharing one's feelings clearly helps in dealing with the situation in most cases. If it is difficult to express one's thoughts and feelings with the concerned person, one may seek support from family, friends or teachers to deal with an unhealthy relationship.
- Some relationships may seriously be harmful and one may need to seek help from others. If a relationship is creating a lot of distress and having an impact on daily functioning, one can approach a peer leader in the community or a counsellor in the AFHC.

Additional suggested activity

- Look at the relationship map drawn in the previous session to see if there are any harmful relationships marked there. Think about strategies to deal with the relationships, share with a friend or the teacher if you wish to.

Activity 3.4 **Communicating Assertively**

LEARNING OUTCOMES

The learner

- Demonstrates the ability to listen to another person's viewpoints.
- Expresses viewpoints in an assertive and effective manner.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Effective communication, Empathy, Interpersonal skills, Self-awareness

RESOURCES

- Chits with role play situations written on them

Guidance for the facilitators

Before this activity, it is important to be familiar with the three styles of communications explained below.

- **Passive:** A person does not share wants, needs, desires or opinions. Passive communication gives you the feeling that your opinion doesn't matter and you do not have a voice. It can lead to anger, frustration and other negative emotions.
- **Aggressive:** A person shares needs, wants, desires and opinions at the expense of others. This style may make you feel better in the moment, but you may lose relationships and may have difficulty forming new relationships.
- **Assertive:** This form of communication is characterised by honesty and a direct approach. Assertive communication is a healthy and positive style of communication that all of us should aspire to use. Being able to express our feelings/ thoughts without hesitation or anger may often seem difficult but this leads to resolving many conflicts.

Tell the learners that we will learn about effective and ineffective styles of communication through role play. Read out the following role play situation to the class.

Your friend borrowed your book and lost it. You want your friend to buy a new book for you. You decide to discuss this issue with your friend.

Ask the first pair to enact role plays on the style of communication. Instruct the pair to show the right expressions.

Passive Style

- **Friend:** Hey, I am not able to find the book I borrowed from you three days back. I have been searching for it, but I think I lost it.
- **You:** Search for it again, please.
- **Friend:** I have searched the same everywhere but can't find it.
- **You:** Then what do I do? I need that book urgently.
- **Fried:** Oh I lost your book. I suggest you buy a new book.
- **You:** Okay, I will buy the book as you say (submissively).

Aggressive Style

- **Friend:** Hey, I am not able to find the book I borrowed from you three days back. I have been searching for it, but I think I lost it.
- **You:** What? How can you be so careless? Just go and search for it everywhere (angrily).
- **Friend:** I have searched the same everywhere but can't find it.
- **You:** Listen, I need that book urgently! I don't care how you get it (angrily)!
- **Friend:** I am sorry for losing your book. I suggest you buy a new book.
- **You:** What? Why should I buy that book? You are the one who lost it. You have to buy the book, understand (angrily).

Assertive Style

- **Friend:** Hey, I am not able to find the book, I borrowed from you three days back. I have been searching for it, but I think I lost it.
- **You:** Oh. Search for it again please. Check with your friends too, may be one of them has taken it.
- **Friend:** I have searched the same everywhere, also checked with my friends but can't find it.
- **You:** I am sad because I need that book urgently for the upcoming class test. I gave it to you and you lost it.
- **Friend:** I am sorry for losing your book. I suggest you buy a new book.
- **You:** I can see that you have tried your best to find the book. I feel upset that you expect me to buy the book. I think it is not right to request my parents for extra money for this book. I request you to find a way to get the book for me.
- **Friend:** I am sorry. You are right, it is my fault and I will find a way to buy the book and give it to you.

Summing up

- Emphasise that assertive communication reflects respect for everyone's needs and wishes, feelings and needs calmly, and is more likely to lead to a positive outcome for everyone.

Reflective questions

- What is a healthy and positive style of communicating your viewpoints to others?
- If your parents, friends, teachers are pressurising you to do something you do not believe in, what should you do?

Take-home messages

- At times, people tend to show their disagreement by fighting/ arguing or by ignoring, keeping quiet or agreeing with everything the other person is saying against their wishes. Both these approaches are ineffective as true emotions are hidden.
- Communicating effectively is to state one's feelings and thoughts clearly without hesitation or anger in front of the other person. This is a very important skill, which comes with practice.
- Effective communication helps build meaningful relationships.

Additional suggested activity

- Reflect on incidents where you communicated in a passive or aggressive manner in the recent past. Write a script on how, in the same incident, you would communicate assertively. Discuss with your teachers after writing the scripts.

Activity 3.5 Building Harmonious Relationships

LEARNING OUTCOMES

The learner

- Expresses attraction and romantic feelings positively.
- Demonstrates skills to negotiate with their parents and guardians.
- Demonstrates skills to negotiate more space and autonomy on issues of concern.

TIME REQUIRED

- One Period

LIFE SKILLS ENHANCED

- Empathy, Interpersonal Skills, Managing Emotions, Effective Communication

RESOURCES

- Case studies

Guidance for the facilitators

- The goal of this activity is to look at issues and conflicts that children face in various relationships.
- Divide the learners into groups of 7-8 and give them one case study each.

- Give the groups 10 minutes to discuss the case study and answer the questions given below each case study.

Case Study 1: Peer Judgement

Deepika and Amalia are talking to each other in hushed tones about their good friend Sangeeta. Deepika asks, “Did you hear about Sangeeta’s supposed relationship with Amar?” Amalia replies, “I find it hard to believe that Sangeeta is so attracted to Amar!” Deepika responded, “I do not know why she is behaving like a crazy person and what does this ‘attraction’ even mean?” Amalia replied, “I do not understand these things. I am more interested in the upcoming exams!”

Points for discussion

1. What do you think about Sangeeta’s feelings towards Amar?
2. Is it right for Deepika to call Sangeeta crazy? Please give reasons for your response.
3. Do you think Sangeeta’s friends could have played a different role in this situation?

Case Study 2: Positive and Negative Peer Influence

Salman used to study all the time, whether at school or at home. He always scored good marks. He did not have any other interest or hobbies. When he joined a new school in Class XI, he became friends with Akash and Moti. Both were cricketers. Salman started to play cricket with them and discovered that he was a good spin bowler. His parents are now concerned that he is spending too much time on the playground, which may affect his studies. The parents are not saying anything to Salman but he can feel their concern.

Points for discussion

1. Do you think Salman’s parents are justified in being concerned about his new hobby?
2. Do you think Akash and Moti are good influences on Salman? Why?
3. If you were Salman, would you like to discuss this issue with your parents and how?

Case Study 3: Attraction and Romantic Relationships

Simran and Vishal live in the same neighbourhood and have been friends for many years. They study in Class XI in the same school. Recently Vishal sent a greeting card expressing his love for Simran. She is confused about her feelings for him. She feels that she needs more time to decide. However, Simran is worried that if she does not respond now, she may lose Vishal as a friend.

Points for discussion

1. If you were in Simran's place, what would you do?
2. If you were Vishal, how would you respond if Simran told you that she needed more time to decide?
3. Do you think Simran and Vishal's parents and teachers can play any positive role in the above situation? If yes, what role can they play? If not, why?

Case Study 4: Body Image

While walking in the corridor, Rohan accidentally bumped into Shyam, one of his classmates. Shyam got angry and said 'chashmish, can't you see properly?' Other classmates also joined Shyam in teasing Rohan about his thick spectacles. Rohan was upset and could not concentrate on his studies due to this constant teasing by his classmates.

Points for discussion

1. Why was Rohan upset and not able to concentrate on his studies?
2. What would you do if you were in Rohan's place?

Case Study 5: Cross Generation Relationship

Aman is 15 years old. His friends have planned to go for a movie and they are insisting that Aman join them. Aman is quite excited about this outing. When Aman talks to his father to seek his permission, he refuses saying that Aman is not old enough to go out with his friends. Aman, storms out of the room and stops talking to his father. Both are unhappy about this situation. Aman wants to convince his father but does not know what to do now.

Points for discussion

1. What would you do if you were Aman?
2. Whom do you agree with, Aman or his father and why?
 - After the group discussion, ask the groups to share the points/views.
 - What are the issues that you find difficult to talk to with your parents or teachers?
3. Do you think it is necessary to agree with your parents all the time? Why?
4. How can you express your thoughts and feelings to your parents, friends and teachers?
5. Is it acceptable to get attracted and have romantic feelings towards someone?

Summing up

- Feeling attracted towards another person during adolescence is normal. We should refrain from judging others for their behaviour. Being non-judgmental is not easy, however, it is important for building healthy relationships.
- Parents/elders may get concerned about our relationships. Therefore, it is important to assess their feelings and maintain a dialogue with them.
- Attraction and romantic relationships are part of growing up. Every person should learn to assertively communicate about how they feel about their friends. It is important to accept that the other person may not reciprocate those feelings.
- The way we feel about our body and appearance, forms our body image. It also affects our feeling of self-worth and self-confidence. It is important to understand that we all look different but we all have our unique and special characteristics. We should refrain from teasing others based on their looks and if we are the recipient of such comments we have to focus on our uniqueness, our strengths and specialness.
- Inform the learners that sometimes they may face issues in interpersonal relationships that are difficult to cope with and they need help. They can approach a teacher, peer-leader or counsellors in the AFHCs provided under the RKSK programme.

Reflective questions

- How can we strive to build healthy and harmonious relationships?
- Who can we approach when we want to share our challenges or problems in life?

Take-home messages

- During adolescence, individuals develop a sense of identity and their views about issues. Disagreements with parents and other adults, can lead to conflicts. Children should learn to resolve such situations by expressing their thoughts and feelings with respect and honesty.
- Feelings attracted towards another during adolescence, is normal and peers should not judge their friends for it.
- During adolescence, relationships with peers keep changing with time and context. It is important to understand the dynamics of each relation.

Additional suggested activity

Maintain a diary to express some interactions that have had a positive and negative impact on you for one week. You can share your experiences with those you want. While writing down the experiences reflect on three points:

- Whether these experiences are positive or negative?
- Was I able to regulate my emotions? How could I have dealt with it differently?
- Whom should I approach for help?

Activity 3.6 Resolving Conflict

LEARNING OUTCOMES

The learner

- Demonstrates understanding of different approaches for resolving conflict.
- Practices skills to resolve conflict.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, Interpersonal skills, Empathy, Problem solving

RESOURCES

- Story to build scenarios for group discussion, list of scenarios for group discussion, chart papers (optional), sketch pens

Guidance for the facilitator

- There are five different approaches to dealing with conflict – explode, avoid, pretend to ignore, attack and work together to find a solution.
 - **Explode:** You focus on your feelings about the situation and get extremely angry.
 - **Avoid:** You try your best to avoid the conflict situation.
 - **Pretend to ignore:** You don't say what you are thinking or feeling because you don't want people to get upset.
 - **Attack:** You make sure that you hurt the other person before they have a chance to hurt you.
 - **Work together to find a solution:** You try to solve the problem through dialogue and discussion.

- Steps to resolve conflicts
 - **Observe:** Look at the other person carefully, the facial expressions, gestures, etc.
 - **Listen and acknowledge:** Pay attention to the words, tone and facial expressions to understand what the other person is saying. Nod or respond to communicate that you are listening and have understood what is being said. Nod your head or say 'hmmm', 'okay', 'right', etc.
 - **Ask to clarify:** Try to confirm your understanding by stating the other person's point in your own words, for example, you are saying that you felt very sad at that point, or, are you saying that you felt neglected? It is difficult to find solutions without knowing what the other person thinks/wants. One way of knowing this is by asking questions. However, one must ask questions in a way that doesn't offend the other person.
 - **Communicate:** After hearing and understanding, it is important to share your own feelings to make the other person understand how their behaviour impacts you. Clearly communicate your thoughts and feelings about the situation to the other person.
 - **Come to a consensus/common ground:** Work with the other person to find a solution to the given situation to resolve a conflict.
 - **Action:** Take action, which is agreed upon by both the parties.
 - **Build a relationship:** Once you have resolved the conflicting situation, make efforts to build a relationship with that person. This will prevent future conflicts.
- Ask the learners what they normally do when they have a conflict with a friend or an adult? Make a note of some of their responses on the board.
- Divide the learners into five groups. Narrate the following story to all the learners.

Story

The school Principal has decided to conduct elections to select the Head Boy and Head Girl from this year onwards. For this purpose, the learners who are interested in contesting the elections have been asked to campaign for votes. The learners from all classes and sections can vote and elect their representatives in a democratic way.

Raman has been dreaming of becoming the Head Boy of the school. However, he is feeling threatened by another boy, Karan, who is quite popular in school. So, he decides to approach some of his friends in other classes to help him get votes. Saurabh, his friend from another section, promises to get Raman the necessary support from his class.

However, Raman does not get elected. One of the major reasons for his defeat is the lack of support from the other sections, including Saurabh's class. Raman is very upset with the result and is particularly angry with his good friend, Saurabh for not helping him.

- Tell the learners that each group will get a different scenario. Assign the following five different scenarios to five different groups and ask them to read the scenarios and discuss the given questions. Give each group 10 minutes for that.

Scenario 1: Explode

Raman approaches Saurabh after the results of the elections. He is clearly very upset. He raises his voice and says that he is very hurt because Saurabh did not support him. He thought that Saurabh was a good friend but he lied and did not help him! He storms off without giving Saurabh a chance to respond.

Points for discussion

1. How do you think Saurabh felt when Raman shouted at him?
2. What could be the outcome of this interaction? How do you think it could end?

Scenario 2: Avoid conflict

Raman is walking towards the class and sees Saurabh in the corridor. Raman quickly turns around and walks in the opposite direction. He tells himself, "it's better if he does not see me. Then I don't have to talk to him about the problem."

Points for discussion

1. How do you think Saurabh felt when Raman avoided him?
2. What could be the outcome of this interaction? How do you think it could end?

Scenario 3: Pretending to ignore

Raman greets Saurabh and starts talking to him about various other things (studies, sports and other general topics). He does not mention his feelings about what has happened. They have a pleasant conversation.

Points for discussion

1. What, do you think, could have stopped Raman from expressing his feelings to Saurabh?
2. What could be the outcome of this interaction? How do you think it could end?

Scenario 4: Attack

Raman begins speaking from across the classroom to Saurabh. He speaks loudly for other people to hear what he has to say. He accuses Saurabh of being a liar and cheater. He says that he realises that he was wrong to trust Saurabh.

Points for discussion

1. Is Raman right to accuse Saurabh of being a liar?
2. What could be the outcome of this interaction? How do you think it could end?

Scenario 5: Work together to find a solution

Raman approaches Saurabh. He says that he thinks Saurabh did not try to convince his classmates to vote for him even after promising him. Saurabh explains that he tried his level best to convince his classmates to vote for Raman but his classmates thought that Karan would be a more competent and deserving candidate. Saurabh says that he is sorry about that and Raman realises that Saurabh is equally upset about the final results.

Points for discussion

1. What do you think about this conversation?
2. What could be the outcome of this interaction? How do you think it could end?
 - Once they finish the sub-group discussion, call each group to make a presentation to the large group. Give them three minutes for the presentation. After each presentation, explain the relevant approach to deal with the conflict – explode, avoid, pretend to ignore, attack and work together to find a solution.
 - After all the presentations and explanations are completed generate a discussion, based on the following questions:
 - Why do conflicts occur?
 - How do conflicts impact us emotionally?
 - If you are not able to express your true feeling in a conflict situation, how does it impact you?
 - Which approach did you find most effective and why?
 - Ask the learners to share a conflict situation they may have faced and how they resolved it.
 - Compile all key ideas on the board and conclude the activity with key takeaway messages.

Reflective questions

- Which is an effective method for resolving conflicts?
- What could be the best way of expressing your views, thoughts in a conflict situation?

Take-home messages

- If conflicts are not resolved they can harm relationships.
- Working together to find a solution is the best approach to resolve a conflict.

Additional suggested activity

- Think about a conflict that you could not resolve. Write a note on how you could have resolved it. Using the note, try to resolve the conflict, if that is still possible.



VALUES AND RESPONSIBLE CITIZENSHIP

Values are those inner standards that provide you the motivation to act as you do. Values signify what is important and worthwhile. They serve as the basis for moral codes and ethical reflection. Individuals have their own values, based on many factors, such as family, peers, culture, race, social background, gender, religion, etc.

Value, and behaviour guided by that value, must be chosen freely. For example, if you don't cheat only because someone tells you not to, or because you know you might get into trouble, you are not freely acting on your values of honesty and integrity. Value, and the associated action, is always chosen from among alternatives. If you don't cheat because you are taking a test in an empty room without any resources, you cannot say you chose not to cheat. A value results from a choice made after thoughtful consideration of choices. If you don't cheat because it never occurred to you to do otherwise, there is no value at play, but if you cheat carefully, it does reflect a value.

When you value something, it has a positive quality for you. If your decision not to cheat is something you feel good about, then it is based on a value. You like yourself for your honesty and integrity. You prize them and cherish these qualities in yourself. You are willing to publicly stand by your values. Not only are you proud of your choice not to cheat, you will speak about your position and even try to convince others not to cheat. You declare by your actions and words that you value honesty and integrity. Your value shows up in every aspect of your life. You don't just talk about having honesty and integrity, you live it. You will associate with people who also value honesty and integrity. You will make sacrifices (money or otherwise) to live by your values.

The thrust of this module is to help the learners to reflect on what constitutes their values and align them with constitutional values for responsible decision-making. At the elementary level, this is done by the learners reflecting on their actions and daily life situations to identify the embedded values. They learn to recognise that values influence their decisions and learn to prioritise them. At the secondary and senior secondary level, the learners step beyond themselves and reflect on the society around them. They begin to identify conflict and its underlying value clashes. They reflect on their own behaviour and values to

establish harmony between personal and constitutional values and more informed decisions. They also implement active citizenship objectives to internalise some constitutional values and learn to balance and negotiate between their personal and civic values.

Activity 4.1 **Real-life Value Dilemmas**

LEARNING OUTCOMES

The learner

- Recognises how values influence decision-making.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Problem solving, creative thinking, decision-making

RESOURCES

- Case studies

Guidance for the facilitators

- Arrange the room in such a manner that the learners are all seated in a circle.
- Values, either consciously or unconsciously, are a standard for guiding actions and making choices. The choices people make reflect their perception of what is right, just, or cherished at a particular time. We hold a number of values, such as friendship, loyalty, honesty, etc., and our actions are usually guided by these.

Sometimes, even though two people have common values, their stances on an issue may differ. For example, a person for whom loyalty as a value is more important than honesty could lie to defend a friend. But a person, for whom honesty is more important, will not. In this way, people prioritise their values while taking action or making behaviour choices.

1. Share a different case study with each group. Ask the learners to read the case studies in their groups.
2. Allow all the groups approximately 10 minutes' time to deliberate on the questions given below.

Case Study 1

Sonu, Kashish, Nikita and Parvez are good friends since childhood. They are now in Class X and have to pick a stream of choice from Science, Commerce, and Arts.

Kashish and Parvez will take up Science while Nikita wants to take up Commerce. Sonu wants to become an artist. Sonu knows choosing different streams may mean going to different schools and separating.

Points for discussion

1. What should Sonu do?
2. How did you arrive at this decision in your group?

Case Study 2

Razaa from Class VIII went to drink some water. When he got to the water tank, he heard voices. They seemed to be coming from behind the tank. Suddenly, he realised that it was Rajesh's voice. Rajesh was also in Class VIII but he was taller and stronger than Razaa. He heard Rajesh's booming voice, "Hey, who do you think you are?" Razaa stood still. He knew that Rajesh was troubling some younger students and perhaps even physically bullying him.

Points for discussion

1. What should Razaa do?
2. How did you arrive at this decision in your group?

Case Study 3

During the final exams, Tehseen notices that his best friend, Dalsie, is attempting to cheat from notes she sneaked into the exam hall. Tehseen is worried that she will get caught by the facilitator. He is also unhappy that she is cheating as what Dalsie is doing, that's not right. Tehseen also does not want to complain, as it would get Dalsie into trouble.

Points for discussion

1. What should Tehseen do?
2. How did you arrive at this decision in your group?

Case Study 4

Kabir and Anna are very good family friends. One day, Anna shares a personal issue about her family with Kabir, and asks him not to share it with anyone. Kabir promises. However, during a conversation with his mother, he shares it with her. Kabir's mother happens to meet Anna's mother and mentions what Kabir had told her. When Anna finds out, she is disturbed. She doesn't want to be friends with Kabir anymore.

Points for discussion

1. What should Anna do?
2. How did you arrive at this decision in your group?
 - Ask each group to present their views on their case to the whole class. They should give their decision as well as the reasons and values behind their decisions.
 - Note down the reasons behind the decisions and the corresponding values on the board for everyone to see.
 - See sample board work given below, (not to be replicated exactly). The facilitator plots the learners' responses for Sonu, Razaa, Anna and Tehseen in the following format.

Exemplar note for the blackboard (sample)

Decision	Reason	Values
Sonu takes up Arts	She should follow her interests	Happiness, Independence
Sonu takes up Science	She will be happy with her friends	Friendship, Loyalty, Happiness

Points for discussion

1. What factors did you keep in mind while taking a decision?
2. What were the values guiding the decision?
3. Did you notice that for different decisions, sometimes the value behind the decisions is the same? For example, Sonu prioritises happiness as a value, yet might show two different types of behaviour. Remember, many times, in life there is NO ONE RIGHT ANSWER.
4. What else do we infer from the table?

Summing up

1. Values guide every person's decision-making process.
2. The decisions one takes may be different, but the values behind them may still be the same. This is why it is important to respect everyone's decisions and try to understand the underlying value, to understand each other better.
3. People are not necessarily aware that their decisions are influenced by their values. This awareness becomes apparent only when a person reflects on why they chose to act in a particular way in a particular situation.
4. People hold a number of values important, such as friendship, loyalty, honesty, etc. However, their actions are usually guided by the value/s they hold as most important. For example, a person for whom loyalty is dearer than honesty could lie to defend a friend. But, a person for whom honesty is more important may not defend the friend.

5. Knowing one's values helps one get more clarity on why one does something. This can help one become more aware and behave more consistently.

Reflective questions

- Can there be scenarios where underlying values may be similar but behaviour may be different? Explain through an example.
- Can you think of a situation where you chose a value and then took a decision? For example, not eating a toffee every day because it spoils the teeth.

Take-home messages

- Values guide our decision-making process.
- We prioritise our values while making behaviour choices.
- Sometimes, even when common values operate in two people, their substance on an issue may differ.

Additional suggested activity

- Revisit the list of decisions that you wrote down in the first activity. Take a look at the values that you identified then, again. Is there any value that you would now like to add/delete/clarify?

Activity 4.2

Active Citizenship Project: My Pledge for a Better Society

LEARNING OUTCOMES

The learner

- Analyses own behaviour in the light of constitutional values

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, problem solving

RESOURCES

- Pen/Paper

Guidance for the facilitators

- Ensure action ideas that are possible for the learners to implement.
- Encourage them to share examples of small efforts made in everyday life and its larger impact on society.
- Emphasise that even a small action can bring big changes.

- Ask the learners to take out their rough notebooks or hand out coloured sheets (if available).
- Ask them to identify at least five of their own personal habits that are harmful to the environment, and write them down. Give at least 5-8 minutes for this.
- Now ask them to carefully identify three of these habits, which they think they can change immediately, how they will do it and how quickly?
- Now ask them to pledge to change the remaining two habits in the next one month.
- Ask a few learners to volunteer to share their experience.

Reflective questions

- How do you think you are influenced by the environment around you?
- How can you influence the environment around you?
- How can you contribute towards creating a better society?

Take-home messages

- Our values and decisions get reflected in our actions. Acting responsibly for oneself and society can have impact full consequences.
- Your actions impact your environment. The environment needs us and it is our responsibility as responsible citizens to keep our surroundings clean.

Additional suggested activity

- Identify and examine advertisements about the environment that or posters in newspapers or any other media that inspire you, and write down what among them inspires you.

Activity 4.3 **Value-based Decision Making**

LEARNING OUTCOMES

The learner

- Develops a better understanding of oneself.
- Thinks about options and the consequences of each of those options while taking decisions.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Decision-making, problem solving

RESOURCES

- Blackboard, Chalk, Notebooks, Pens/Pencils

Guidance for the facilitators

- There may be many ways to make informed and responsible decisions. In this activity, a tool called the decision-making wheel, that helps align our values with our decisions, will be discussed.
- Decision-making Wheel can help make better choices in life. When there is an important decision to make, start by stating the problem at the hub of the wheel.
- The facilitator draws the decision-making wheel on the blackboard.



Read the following case cloud to the learners

It is the sports period and all Class IX students are supposed to be out in the playing field. You have to go to the toilet. On the way, you pass your classroom and notice that there is someone in the room. You stop and deep in, and see one of your best friends reach into another person's bag and take something out of it. You quickly move past the door. During the next period, the learner whose bag you saw your friend

reach into, walks up to the class teacher. A moment later the teacher announces that this student's new book has been stolen. What do you do?

Points for discussion

- Using the decision-making wheel as a guide, the facilitator discusses the following questions with the learners, thinking together, and referring to the wheel on the blackboard.
 - *Problem:* What is the problem?
 - *Choices:* What are the choices you have?
 - *Consequences:* What do you think the consequences will be for yourself and others who are involved?
 - *Values:* What values do you need to consider?
 - *Feelings:* How do you feel about the choices you have made?
 - *Decision:* What is your decision?
 - *Assess Decision:* Do you think you made the right decision? Why or why not?
- The facilitator writes their answers on the board on the given sections of the wheel. The facilitator should emphasise that even though the situation is the same, decisions may be different for different people.
- The facilitator now asks the learners to think of a situation in which they wish to take a decision in their personal life and follow the same decision-making wheel.
- Give the learner about 10-15 minutes to carry out the personal exercise.
- The facilitator then invites the learner to share the process and the results.

Reflective questions

- What would you do differently now that they have learned how to make care full decisions?
- What are the steps to consider while arriving at a decision?

Take-home messages

- Decision-making and values go hand in hand.
- Thinking about the problem, options available and consequences of different actions before taking a decision is important.
- It is important to identify the values behind our decision to strengthen the decision-making.

Suggested Activities

- Ask the learners to choose a friend and take a decision together using the decision-making wheel.

Activity 4.4

My Values, My Behaviour, My Decision

LEARNING OUTCOMES

The learner

- Reflects and becomes aware of one's own behaviour.
- Takes responsible decisions based on certain constitutional values.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, self-awareness

RESOURCES

- Blackboard, Chalk

Guidance for the facilitators

- The constitutional values guarantee certain rights. Some of the important constitutional values are equality, freedom, justice, fraternity and human dignity.
- The activity tries to reflect on one's own values, in the light of constitutional values. In the following cases the freedom of one person seems to be compromised due to a friend's values. This often causes conflict. In such cases, one's own behaviour needs to be altered to be able to align with the constitutional values.
- Each situation has been deliberately kept open-ended so as to allow the learners to end it their way.
- Share that we are now meeting two people– Deepak and Firoza, who are caught up in certain situations. We have to think of ways to help them through role play.
- Share that Deepak, an older child, is caught up in a situation with his best friend Dilshad, and so is Ruheen with her friend Firoza. Let's try to step into their shoes and understand their struggles, and think of suggestions for them.
- Divide the learners into two groups.

Case Study 1

Deepak and Dilshad are best friends. One evening, after ensuring no one's watching, Dilshad draws out a cigarette/beedi and lights it. He then gives the cigarette/beedi to Deepak and invites him to do the same. Deepak is uncomfortable. What do you think Deepak should do?

Points for discussion

1. Do we identify a value clash in these cases? What is it?
2. What do you think of the ending for the case?
3. Can you suggest an alternative end to this case?

Case Study 2

Firoza and Ruheen go to the village mela. Ruheen likes a poster of her favorite actor but doesn't have the money to buy. Firoza uses her parent's mobile phone and secretly clicks a picture of the poster. Ruheen thanks Firoza!

Soon, they identify a senior boy, Shogun, whom they both find very attractive. Firoza uses her mobile phone and secretly clicks Shogun's picture but Ruheen feels uncomfortable about this.

Points for discussion

1. Was it okay for Firoza to click a picture secretly? Why or why not?
2. Do we identify a value clash in these cases? What is it?
3. What do you think of the ending for the case?
4. Can you suggest an alternative end to this case?

Reflective questions

- What would you do differently now that you have learned how to make responsible decisions?
- What is value-based, responsible behaviour?

Take-home messages

- Responsible behaviour is about respecting others' rights.
- Different people prioritise different values while taking a decision, which may result in conflicts.
- It is important to align one's own values with constitutional values.

Additional suggested activity

- Can you think of a situation around you, where you feel someone's values and behaviour is infringing others' rights, and constitutional values?

Activity 4.5

Active Citizenship Project: Waste Audit

LEARNING OUTCOMES

The learner

- Practices responsible citizenship behaviour to establish harmony between personal behaviour and civic values.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking and problem solving

RESOURCES

- Notebook, pens/pencils

Guidance to the facilitator

- To conduct an 'audit' means, to examine something in detail, to make sure it is in order.
- Wastage of a resource refers to an action or a process of losing or destroying something by using it carelessly or extravagantly, such as natural resources.
- This project is deliberately designed to be practical and action-oriented. The reason for this is to initiate action based on the civic values they may have learnt through books, so as to practice these values in daily life.
- Ensure that the focus is on sensitising the learners to their role as citizens in the society.
- Each of the three groups is given a theme:
 - Water wastage
 - Power wastage
 - Food wastage
- Each group does a quick round of (some parts of) the school premises to identify forms of wastage, related to their theme within 10 minutes.
- After returning, each group sits together to classify the wastage under – water, power and food wastage. The group also thinks of ways to reduce the wastage.
- The facilitators then invite each group to share their findings with the rest of the class.
- Generate a discussion with the help of the following questions after each presentation. Encourage other groups to add their observations and ideas.

Points for discussion

1. Is wastage related to water, food and power, a problem? Why do you think so?
2. Who creates this wastage, and why?
3. Is there a role we can play to reduce the wastage?
4. What do you think is the underlying value here?
5. Who benefits if there is minimal wastage? An individual or the society at large?

Reflective questions

- Why do you think precious resources such as water, food, and power are wasted?
- What role can you play in minimising wastage? If you were to change a habit to avoid wastage, would you do it? Give an example.

Take-home messages

- It is important to harmonise our behaviour with civic values.
- We can all act as responsible, concerned and capable citizens.

Additional suggested activities

- Identify forms of wastage in and around your house.
- Can you try to think of ways to avoid/reduce it? Tell your family members about it so your home can be a no-wastage home.

Activity 4.6

Active Citizenship Project: Developing Sensitivity towards Disability

LEARNING OUTCOMES

The learner

- Develops sensitivity through simulation of experience, as a person with physical disability.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Empathy and Self-awareness

RESOURCES

- A piece of rope or a long piece of cloth for per child.

Guidance to the facilitator

- Ensure that the focus is on sensitising the learners to the role they could/should play to make life easier for people with a disability.
- Some children might get emotional while experiencing such hardship, and feel overwhelmed.
- In case there is a learner in class who has a physical disability, be sensitive to the situation. Appreciate how well the person manages daily life situations, including coming

to school and studying. Integrate the person respectfully in the activity, and ensure that the others listen, respectfully, if the person wishes to share any incident or experience.

- You may ask the learners to carry a piece of cloth from their homes, a day in advance.
- The facilitator ties one leg of a learner with the other, so that the learner is able to walk only with one leg.
- For another learner, the facilitator ties one hand to the waist of the child, so that the hand becomes dysfunctional.
- The facilitator asks each learner to choose if they wish to tie their leg or arm or both. Accordingly tie that body part.
- The facilitator now gives daily situations to the learners, for example,
 - Drink water
 - Walk around the classroom
 - Eat food
 - Wear your sweater
 - Comb your hair
 - Write on the blackboard
 - Sit down
 - Wash your face
 - Take part in a race
 - Help in the kitchen
 - Climb into a bus
 - Buy vegetables in the market
- Continue this for about 15 minutes
- Untie the body parts.
- Generate a discussion on what the learners experienced.
- Invite 2-3 volunteers to share.

Points for discussion

1. What did you experience?
2. What was most difficult? Why?
3. Did you need help at any time? In what situations?
4. Did you receive help from anyone? How did it feel?
5. What would it be like to live life this way?
6. If you had a friend with a disability, how would you help?
7. Who else do you think can play a role in making life less difficult for such a person?

Reflective questions

- Are people with a disability less able or inferior to others?
- Is their right to equality and dignity compromised because of the disability? If so, how and why?

- Do you think you can play a role in supporting persons with disability? and How?
- Do you think this will help enrich your own life in some way? If so, how?

Take-home messages

- It is important to be sensitive to those around us and the different realities they face.
- We can play a role in supporting friends with physical disabilities. Those with a disability have many other abilities and qualities.
- Our constitution guarantees the right to equality to each one of us, including persons with disability.

Additional suggested activities

- While you are home, cover your eyes for two or three hours, so that you cannot see at all, and see how it feels. What are the tasks that you can and cannot do?
- Identify three ways in which you could be sensitive to the lives of persons facing disability.



GENDER EQUALITY

The theme encourages the learners to develop knowledge and skills to counter gender-based stereotypes, discrimination and violence, practice positive gender roles, and promote gender equality and rights in all situations. The learners will develop a basic understanding of gender identity, including transgender; question gender stereotypes and negative constructs of masculinity and femininity; and begin to practice/promote positive gender roles and gender equality—at home, school, society and in the media. The module will further provide an opportunity to a learner to analyse gender norms and recognise power dynamics, identify strategies to challenge gender-based discrimination and violence, and uphold equality in all interactions.

Activity 5.1 What is Gender?

LEARNING OUTCOMES

The learner

- Explains that sex is based on biology, while gender is linked to social inequalities.
- Recognises gender stereotypes and how they are associated with men, women, and transgenders.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-reflection and Critical thinking

RESOURCES

- Board and chalk

Guidance for the facilitators

Difference between sex and gender is shown in the table on the next page.

SEX	GENDER
Is biological	Is socially constructed
You are born with it	Gender is what actually gets expressed – how we look, how we act and how we feel
Cannot be changed (without surgical intervention)	Gender stereotypes vary in different societies, countries, cultures, and historical periods

- Keep in mind that gender refers to men, women, and transgenders. Transgenders are individuals who do not identify with the gender assigned to them based on their biological sex.
- Provide many examples to help the learners understand the concept of gender and stereotypes associated with it.
- Draw the following table on the board. (Note: Do not name the third column).

Men	Women	

- Ask the learners to share some words that they associate with women and some that they associate with men.
- Ensure that the learners respond with a variety of words—associations, both positive and negative.
- Some of the likely responses are given in the table below. Please do not share any of these with the learners. Let them come up with their own words, which may be similar or different from these.

Women	Men	
Sensitive	Tough	
Shy	Cruel	
Giving birth	Adventurous	
Affectionate	Anger	
Breast-feeding	Beard	
Gossiping	Earns money	
	Muscular	

- Now interchange the column heads 'Men' and 'Women'.
- Ask the learners if those words can be associated with the changed gender (new head). For example, ask: Is it possible for women to be tough, cruel, muscular, have a beard and for men to be sensitive, shy, giving birth, affectionate, breast-feeding, gossiping, etc.

- In the third column, help the learners to list the words that are specific characteristics of either only men or only women. For example, giving birth, breast-feeding, beard. Erase these words from columns 1 and 2, as you bring them into column 3, now called biological factors.
- Explain to learners that columns 1 and 2 refer to 'social factors', while column 3 refers to 'biological factors'. Columns 1 and 2 are related to our gender, while column 3 is related to our sex. Write 'GENDER (Social)' above columns 1 and 2 of the table on the blackboard, and write 'SEX (Biological)' above column 3. Tell the learners that biological categories are natural, and cannot be changed (except by surgery or medical interventions).
- Explain that there is also a third gender, called transgender. Transgender persons are individuals who do not identify with the gender assigned to them based on their sex.

Points for discussion

- What is gender? How is it different from sex?
- How do gender stereotypes affect our day-to-day life?
- Can gender stereotypes be changed over time? If so, think of some gender stereotypes you would like to change.
- Do you think transgender people should have the same rights as other genders?

Reflective questions

- Can men do almost anything that women can do? Name some things that men are not supposed to do according in our society. Can you think of some men who are doing these things?
- Can women do almost anything that men can do? Name some things that women are not supposed to do according to our society. Can you think of some women who are doing these things?

Take-home messages

- Gender describes the stereotypical characteristics that society deems appropriate for men and women.
- Gender can vary with culture, society and country. Gender is socially constructed and thus can be changed over time. We are all equal and deserve to be treated equally.

Additional suggested activity

- Have a conversation with your grandmother or grandfather on how gender roles and expectations have changed from their time to your time with regard to mobility, education, clothes, work, and any other aspect of life.

Activity 5.2 Gender Roles and Discrimination

LEARNING OUTCOMES

The Learner

- The learner analyses the effect of gender roles and stereotypes that result in discrimination.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Empathy and critical thinking

RESOURCES

- White board and markers

Guidance for the facilitators

- Gender-based roles and expectations try to force men and women into certain job categories and discriminate against those who do not conform.
- Both women and men are affected due to gender-based roles and expectations.
- Gender discrimination between boys and girls is discussed here too.
- Draw the following table on the board.

Gender Roles

Work	Work Distribution	
	Women	Men
Washing dishes		
Grocery shopping		
Sweeping/Cleaning		
Washing clothes		
Going to office		
Serving meals		
Going to school/college		
Cooking		
Caring for children		
Any other		
Leisure		
Listening to music		
Playing a sport		

Watching TV		
Meeting friends		
Watching a movie		
Rangoli making		
Any other		

- Starting with the ‘Work’ portion of the table, ask the learners, who spends more time doing these tasks in a day. They may speak from their own experience, as well as what they see around them in their families and community.
- If a particular task is done substantially by both men and women, put a tick under both the columns against that task.
- Ask the learners to name any other tasks that may be listed. Add these to the table.
- For better growth and development of the boys, their nutrition is given priority over girls. Due to gender discrimination, girls often do not get the same nutrition as boys. For example:
 - Girls are often fed last and given chutney/pickle as their main meal.
 - Girls are taught to compromise their nutritional needs and feed their family first.
 - They face dietary restriction during menstruation.

Points for discussion

- What are your thoughts when you look at the table of gender roles?
- Is the distribution equal? Who has more housework to perform? Who has more leisure time? Is this distribution acceptable to you? Why or why not?
- Why is it that women do much more housework than men?
- How are gender roles linked to social discrimination against girls and women?
- If we look outside our homes, who does the following work (women or men)?
 - Cooking in dhabas/hotels/Master Chef programmes
 - Washing/cleaning clothes in dry cleaning shops
- Why don’t most men perform these tasks in their own households?

Reflective questions

- What household work do you think men should learn and perform? Why? How will equal participation of men in household works affect the lives of women?

- How will the equal participation of men and boys in household chores affect their own lives?

Take-home messages

- If given an opportunity, girls, boys and trans-genders are capable and should perform all kinds of tasks and work within the household as well as outside.
- All kinds of work, as mentioned in the table, are important and deserve equal respect.
- While work is important, leisure and play is also important for girls and boys and equal opportunity must be provided to them.
- When individuals are treated in an unequal manner and are denied certain rights on the basis of their gender, it is called gender-based discrimination. Gender discrimination may affect girls, transgenders and boys.

Additional suggested activity

- If there is one gender role you could change, what would it be? Imagine the changes in your own life that would come about, and how others around you might also need to change. Share your thoughts with your friends, parents, teacher, and discuss how the particular gender role might be changed.

Activity 5.3

Gender Stereotyping and Advertisements

LEARNING OUTCOMES

The learner

- Challenges gender-based discrimination and negative influences of the media.
- Creates gender equitable advertisements that promote gender equality and rights.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Creative thinking, Critical thinking

RESOURCES

- Chart papers, Markers, Pens, Glue tack or two-sided tape and various props that are available

Guidance for the facilitators

- The media plays an important role in shaping our perceptions and influencing our behaviour.
- The media programmes can help to promote gender equity, by respecting the equality and rights of people of all genders.
- The media programmes are often not gender equitable. They may promote gender stereotypes, gender-based discrimination, and unequal gender roles.
- This activity encourages the learners to think for themselves and make gender-equitable advertisements.
- Call out the names of different products like motorbikes, razors, washing machine, mix—that is, talcum powder, soap, laptop, office furniture, engine oil, etc., that are advertised on TV.
- Ask the learners to call out the gender (men or women) that they associate with that product.
- Tell the learners that these media images need to be questioned, and positive media messages need to be created, which are gender-equitable.
- Divide the learners into groups of 4-5. Ask them to make gender sensitive advertisements on any products of your choice.
- Explain that each group has to design a gender-equitable advertisement for their product. Each group can name themselves as an advertising firm and design an advertisement for TV, radio or print medium, as per their choice.
- Give the group 10 minutes to prepare their advertisement. Groups may choose to act out their advertisement or sketch out the concept on paper and explain it to the group.

Points for discussion

- Why do people usually make stereotypical associations between certain products and a particular gender?
- Do you think the media is influencing our behaviour by associating products with a particular gender?

Reflective questions

- Do you think the media has, somewhere, influenced you in terms of gender? Give examples.
- Are there some existing advertisements, serials, movies, songs or cartoon strips, which are gender-equitable? If yes, name them.

Take-home messages

- The media pervades our lives. It influences our behaviour. The media generally promotes gender stereotypes.
- One needs to question and challenge the stereotypes that are being portrayed by the media and not accept or blindly emulate the images and roles projected in the media.

Additional suggested activity

- Analyse some gender-equitable videos, programmes and advertisements on the visual media such as TV, YouTube, etc. Discuss these with your friends and family.

Activity 5.4 Gender Power Walk

LEARNING OUTCOMES

The learner

- Analyses how gender norms affect beliefs, attitudes, and behaviour.
- Recognises power dynamics, inequalities and discrimination, and upholds equality in all interactions.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, Critical thinking, Empathy

RESOURCES

- Chits with roles and instruction sheet

Guidance for the facilitators

- An important cause of differential achievements is the discrimination based on factors such as gender, physical or mental disabilities.
- Do not tell the learners what the game is about.
- Emphasise that this is not a competition and thus they should not take extra-long steps in trying to reach the finish line.
- Invite volunteers from among the learners and give a chit to each.
- Ask the volunteers not to disclose what is written on their chit to anyone. Each chit has a character role written on it.
- Explain to the volunteers that a series of situations/statements will be posed, to which they have to respond as the character that is mentioned in their role chit.

Roles in the chits are as follows

CHARACTER ROLES WRITTEN ON CHITS
Boy
Girl
Third gender
A girl who is living with disability
A boy who is living with disability

- Now ask the learners to stand in a horizontal line.
- Explain the following:
 - For the duration of the game, they must think that they are the person mentioned in the chit and respond to each statement accordingly.
 - They must take a step forward or backward depending upon what they feel (as per the character/role assigned to them via chits) about each statement that the facilitator reads out.
 - The objective of the game is to be true to the role and play with honesty. Clarify that this is not a competition.

Now start reading out one statement at a time from the following instruction sheet, giving the learners enough time to step forward or backward

- (a) If you can easily go out to study in another village/city, take one step forward. Otherwise, take one step back.
- (b) If you think it is possible for you to choose any career of your choice, take one step forward. Otherwise, take one step back.
- (c) If you can easily make friends with persons from any other gender, take one step forward, else take one step back.
- (d) You have been detected with a disease. If you will receive attention and get treated immediately, take one step forward, else take one step back.
- (e) Your school team is playing a match in the evening close to your home and you want to go and support them. If you think you can go by yourself take one step forward. Otherwise, take one step back. In case you are not in school, then take one more step back.
- (f) You want to become a class monitor. If you think it is possible, take one step forward. Otherwise, take one step back. In case you are not in school, then take one more step back.
- (g) If someone teases or taunts you, inside or outside school, then take one step back. Otherwise, take one step forward.
- (h) If you think you can take rest whenever you want to, take one step forward. Otherwise, take one step back.

- (i) If you think you can go out with your friends and have fun, then take one step forward. Otherwise, take one step back.
- (j) If you always have sufficient food to eat in the house, take one step forward. Otherwise, take one step back.
- (k) If you have to undertake a major part of the housework, take one step back. Otherwise, take one step forward.

After all the statements have been read out, ask the volunteers to continue to stand where they are. Ask them to now read aloud the identity given to them on their chits.

Reflective questions

Ask the learners to identify whether the following is discrimination, and why they think so.

- Simi, 14 years old, is not allowed to go out alone to the nearby market, while her twin brother can go there alone.
- Matthew suffers from hearing disability. In his village, he has completed upper primary level with good marks. The principal of the senior secondary school in the nearby town refuses to admit him.

Take-home messages

- Some people get more opportunities than others in society. These inequalities are based on gender, caste, class, physical or mental disabilities and other factors.
- Discrimination can play out in many ways, such as access to education, health, career choices, permission for going out, befriending people, ability to state one's opinions openly, etc.
- Often, what people are able to achieve or not depends less on their ability, and more on the opportunities available to them.
- We need to examine our own behaviour and honestly assess whether we are discriminatory in any of our interactions, and, if so, modify our attitudes and behaviour
- In the spaces that we can influence (home, school etc.), we should try to challenge discrimination and ensure that everyone is treated with equality and respect.

Additional suggested activity

- Ask the learners to discuss with a friend or with a trusted adult, any one incident where they observed discrimination based on gender, class, caste, or disability. They may write about the incident, reflect upon it, and describe a strategy to

counter the discrimination that they observed. They could share this with the facilitator.

Activity 5.5

Dealing with Gender-based Discrimination

LEARNING OUTCOMES

The learner

- Recognises causes of gender-based discrimination.
- Identifies strategies to challenge and address gender-based discrimination.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Creative thinking, Critical thinking, Problem solving

RESOURCES

- Chart papers, Case studies

Guidance to the facilitator

- The cases in the activity reveal socially accepted gender norms, and gender-based discrimination.
- Gender-based discrimination does not happen only with girls. It also happens with boys and transgenders.
- Tell the learners that today's activity will help them deal with gender-based discrimination.
- Write the following four steps on the blackboard.

What is the Issue?

- Identify the issue/problem

What are the Causes?

- Role of the individual
- Factors within family
- Factors within community/society

What are the possible solutions? Who can help?

- What can the individual do himself/herself?
- What can the others (family, friends, community) do?
- Can the individual take help from others?
- Can institutions like police/law help?

What is the best way?

- Move ahead to solve the problem.
- Share with the learners that the four-step diagram can help us understand how to deal with gender stereotypes and gender-based discrimination. Explain all the steps.
- Divide the class into six groups and distribute one case study per group.
- Ask the groups to carefully read their case study, and then apply the process outlined in the flow chart to arrive at ways to address the situation within 10 minutes.
- Ask the groups to make their presentation, one-by-one, followed by discussion with the other learners.
- Facilitate the discussion; appreciate the strategies put forward by each group.

Case Study 1

Salma is a 14-year-old girl who wants to become a police officer. Her parents are very supportive of her, but they are hesitant because no other girl from their village has ever taken up a formal job. Salma is not sure whether she will be able to fulfill her dream.

Points for discussion

1. What is the problem that is evident in the case study?
2. What are the causes contributing to the problem?
3. Who can help Salma resolve the problem?
4. What is the best way to move ahead and resolve the problem?

Case Study 2

Dinesh works at a small shop in his village. He is to get married soon. He insists on not accepting dowry from the girl's family. This is unheard of in his community and his parents are angry and upset with him.

Points for discussion

1. What is the problem that is evident in the case study?
2. What are the causes contributing to the problem?
3. Who can help Dinesh resolve the problem?
4. What is the best way to move ahead and resolve the problem?

Case Study 3

Rishabh studies in Class IX. He is interested in art and making rangoli. A rangoli competition is being organised in his neighbourhood. He wants to participate in the competition. His older cousins laugh at him when they come to know this.

Points for discussion

1. What is the problem that is evident in the case study?
2. What are the causes contributing to the problem?
3. Who can help Rishabh resolve the problem?
4. What is the best way to move ahead and resolve the problem?

Case Study 4

Mary, 14 years old, likes to play cricket. She has played cricket for many years with a group of girls and boys near her house. When she shifts with her parents to a new colony, she finds only boys play cricket. She goes up to them and asks if she can join them. The boys tell her that she cannot play with them.

Points for discussion

1. What is the problem that is evident in the case study?
2. What are the causes contributing to the problem?
3. Who can help Mary resolve the problem?
4. What is the best way to move ahead and resolve the problem?

Case Study 5

Aslam and his sister help their parents in daily household chores like up-keep of the house and washing dishes. Aslam's friends constantly taunt him when they find him washing dishes or cleaning the house.

Points for discussion

1. What is the problem that is evident in the case study?
2. What are the causes contributing to the problem?
3. Who can help Aslam resolve the problem?
4. What is the best way to move ahead and resolve the problem?

Case Study 6

Maya is a 15-year-old girl who attends school with Sonu, her 13-year-old brother. Sonu learn wrestling after school. Maya also wants to join him for wrestling coaching. However, their parents do not think that girls should play sports like wrestling.

Points for discussion

1. What is the problem that is evident in the case study?
2. What are the causes contributing to the problem?
3. Who can help Maya resolve the problem?
4. What is the best way to move ahead and resolve the problem?

Reflective questions

- Think and share some examples of people who faced discrimination based on their gender. What helped them to stand firm against the odds, and achieve what they aspired to? How do you think they did this?

Take-home messages

- We may want to pursue our interests, which may not be aligned with the existing gender norms and stereotypes.
- We must understand the different causes of our problem before deciding the strategy to address the problem. To challenge gender stereotypes and discrimination, we need to do what we can at our level, as well as draw support from different sources such as friends, school, family, and other institutions.

Activity 5.6 **Challenging Gender-based Violence**

LEARNING OUTCOMES

The learner

- Identifies gender-based violence and its causes.
- Identifies strategies to challenge and address gender-based violence.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Creative thinking, Critical thinking, Problem solving

RESOURCES

- Blackboard, chalk, chart papers, colours/pen/pencil, case study

Guidance for the facilitators

- Gender-based violence targets individuals or groups on the basis of their gender. Gender-based violence is any act that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to someone (male, female, or transgender) based on gender norms, role expectations and stereotypes.
- If the learners disclose their own experience during the discussion, the facilitator should acknowledge it respectfully. If required, referral to appropriate authorities should be

made. Tell the learners that they should respect each other's feelings. Any personal sharing that takes place in the class should not be discussed with others outside.

- Perpetrators of violence may be from any gender, but research shows that it is predominantly men or older boys. In many cultures, as boys grow up, they are expected to conform to the norms of 'masculinity', which require them to be aggressive, and even violent. Girls are expected to conform to the norms of 'femininity', which often require them to be soft, shy and adjusting. These stereotypes should change and new norms of masculinity and femininity encouraged, which allow boys and men to be sensitive, emotional, and caring while allowing women to be assertive, strong and self-confident.
- Give the following case to the learners.

Case Study 1

Soni and Arun both study in Class IX. One day, two older boys passed comments on Soni's physical appearance and tried to touch her. She told them that they should stop such behaviour. They laughed and continued passing comments whenever they saw her in the school corridor. Another day, the same boys pushed Arun and laughed at him, saying he is too short, and still has to learn how to be a man. Arun told them to stop such behaviour. Some classmates (girls and boys) saw both the incidents, but did not do anything although they felt bad for Soni and Arun.

Points for discussion

1. Was the behaviour of the older boys towards Soni an example of gender-based violence? Why or why not?
2. Was the behaviour of the older boys towards Arun an example of gender-based violence? Why or why not?
3. Why did their classmates do nothing to stop the older boys from harassing Soni or Arun?

Divide the class into three groups and assign one of the following situations to each group.

Group 1. You are Soni. What are the different steps that you can take to address the issue?

Group 2. You are Arun. What are the different steps that you can take to address the issue?

Group 3. You are the classmates who saw the incident but did not do anything at the time. What steps can you take later to stop such behaviour?

- Give 8-10 minutes to the groups for the discussion and 4-5 minutes for the presentation.

- Appreciate the presentations made by each group, and sum up the discussion with the help of the points below.

Take-home messages

- Gender-based violence is a form of violence that targets individuals or groups on the basis of their gender.
- It results in physical, sexual, or psychological harm or suffering.
- Girls, boys and trans genders should all be enabled to say 'No!' to violence.
- An important aspect of dealing with gender-based violence is to identify sources of help, and seeking help for the purpose.
- Help can be sought from family members/friends/trusted adults/teachers/school principal/government functionaries including the police, etc., to stop such violence.
- It may not be easy to challenge gender-based violence but it is important to do so. If we uphold dignity, equality and respect in one situation, we help to make the world a safer place.

Additional suggested activities

- Ask the learners to find out the following:
 - The nearest police station for filing a complaint/FIR against violence.
 - Functioning helpline numbers to lodge complaint against violence.



NUTRITION, HEALTH AND SANITATION

There is need for children to be careful about their nutritional intake. Nutritional needs are higher during adolescence than in the childhood, as this is a phase of rapid growth and development. A nutritious diet ensures a well-nourished and optimal growth. It can prevent under nutrition (when weight and height are less according to age); malnutrition (deficiency of particular nutrients) and over nutrition (increased weight or height). This module is to help develop a positive attitude and to enhance the knowledge of the learner to be able to demonstrate healthy nutritional and hygienic practice and its connection with good health. It introduces the learner to the nutritional needs of children. It explains different food groups, locally available sources and their importance for maintaining good health. The learner is also introduced to the concept of a balanced diet. Efforts have been made to enable the learners to identify and challenge nutritional discrimination and the myths related to nutrition. The module also helps enhance the knowledge of the learner on the causes, prevention, and management of anaemia.

Activity 6.1 **Nutritional Needs of Children**

LEARNING OUTCOMES

The learner

- Explains different food groups and their importance.
- Identifies locally available sources of the different food groups.
- Explains the concept of a balanced diet.

TIME REQUIRED

- One Period

LIFE SKILLS ENHANCED

- Self-awareness

RESOURCES

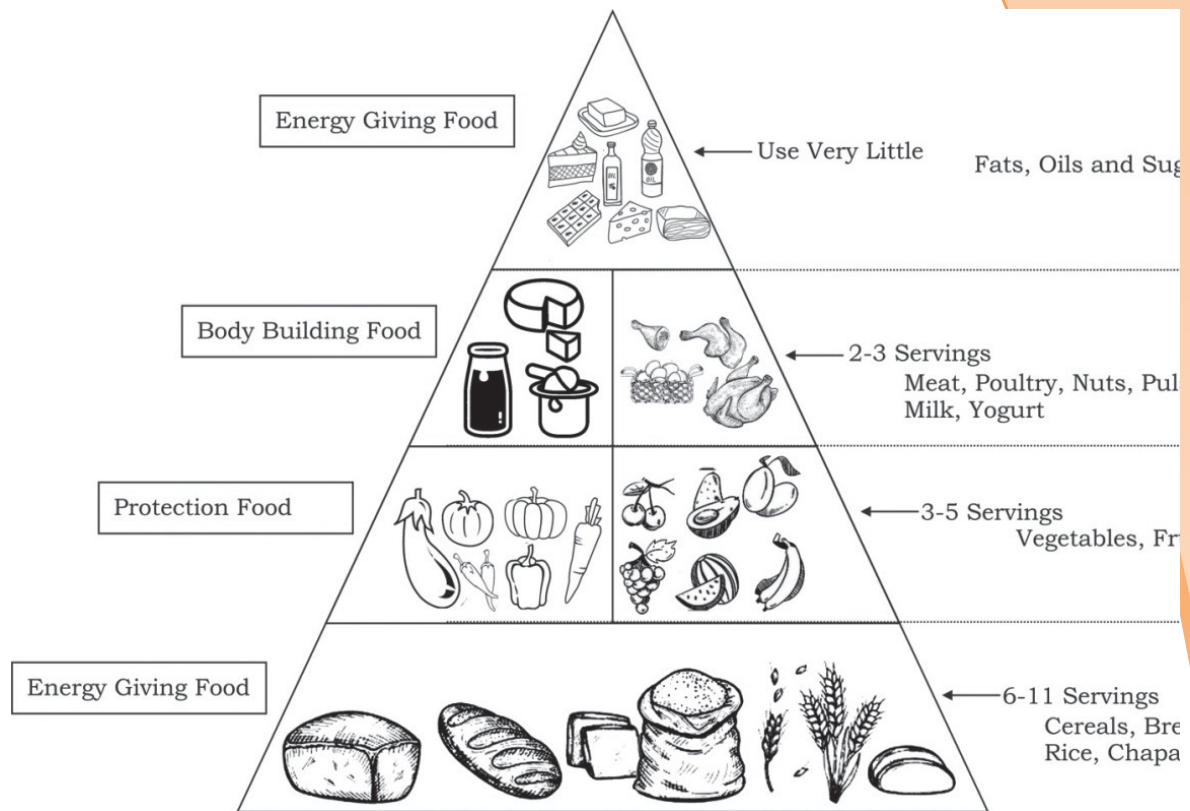
- Blackboard and chalk

Guidance for the facilitators

- Ask the learners: Why does our body need food? Take responses and write them on the board. Cluster them under these three categories:
 - Giving energy to body for all the functions
 - Body building
 - Protecting our body from diseases and infections and keeping skin, hair and eyes healthy
- Explain that there are ‘nutrients’ that are substances found in a variety of food that is required for all the functions in the body.
- Simultaneously make three columns on the board with these headings: 1. Energy giving food – carbohydrates and fats; 2. Body building food – proteins; 3. Protective food – vitamins and minerals. Ask the learners to identify, which of the three food types do the food listed by them, belong to.
- Remind them about any food they might be missing. Use the list below to ensure all food components are covered.

Food Items	Food Group
1. Grains (wheat, rice, bajra, millets, ragi, etc.); white roots and tubers; plantains	Energy giving food—carbohydrates and fats
2. Oils, fats, sweets	
3. Pulses (beans, peas and lentils)	Body building food—proteins
4. Nuts and seeds	
5. Dairy products	
6. Meat, poultry and fish	
7. Eggs	Protective food—vitamins and minerals
8. Dark green leafy vegetables	
9. Other Vitamin A-rich fruits and vegetables	
10. Other vegetables	
11. Other fruits	

- Ask the learners what they understand by a ‘balanced diet’?
- Explain that a diet with an appropriate quantity of food from each of the different food groups that fulfills a body’s nutrient needs is a balanced diet.
- Show the balanced diet pyramid or make one on the blackboard by just writing keywords and ask the following questions.



- What functions do the food, at the base of the pyramid (cereals/grains), perform in our body? Repeat this for other groups.
- Why is the base of this pyramid broad and top narrow?

Take-home messages

- The base of the pyramid is wide because it shows that food that is placed in the base must be eaten in more quantity in the daily diet.
- The tip of the pyramid shows food that are high in fats (oils) and sugar. These must be eaten in very less quantity in the daily diet.
- To meet all the nutrient needs, we need to have a sufficient quantity of food from each of the different food groups.
- The National Programme of Mid-Day Meal in Schools, popularly known as the Mid-Day Meal Scheme, is an on-going centrally-sponsored scheme, which covers all school children studying in Classes I-VIII of government, government-aided, special training centres including *madarsas* and *maqtabas* supported under Samagra Shiksha.
- People often have a lot of myths about processed food being healthier and hygienic than locally available foods. In reality, however, locally available foods and home cooked food is much healthier than packaged food and fast food.

- Packed and junk food may be tasty, but if it replaces regular meals on a daily basis it could result in micronutrient deficiency.
- The media often promotes the consumption of fast food and packaged food by making it look cool, hygienic and often healthy. The advertisements influence us. It is important to critically analyse advertisements.
- Food serves many important functions in our body. It gives energy for the various functions and activities of the body. It builds muscles, protects the body, and also helps fight diseases and stores energy.
- A balanced diet includes energy giving food such as chapatti/ rice/bread, protective food like vegetables and fruits, some body building food like milk, curd or paneer/cheese or meat/ fish at every meal and a small amount of oil/fats daily.
- There are many locally available nutritious and seasonal food items that can fulfill a body's nutritional needs.

Additional suggested activity

- Ask them to prepare a chart of whatever they eat over a period of a week. Check whether all the nutrients mentioned are present in one or the other food items being eaten within a day or so. Ask them to analyse how balanced their daily diet is (does it have all the components of a balanced diet? Are they eating all food compositions in the right amount) for the next one week and share it with their parents and peers?

Food Items	Food Component	Analysis

Activity 6.2 Personal Hygiene

LEARNING OUTCOMES

The learner

- Relates personal hygiene with good health
- Describes methods to maintain personal hygiene.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Creative thinking, self-awareness

RESOURCES

- Chits with 16 personal hygiene practices, a container to place the chits of paper, ball, blackboard, chalk

Guidance for the facilitators

- Prepare chits of paper, each containing one of the 16 personal hygiene practices given below.
- Ask the learners to think of the factors other than food habits that impact a person's health. The learners may talk about physical exercise, clean environment, personal hygiene, mental health, etc.
- Explain that while eating food is critical for staying healthy, it is equally important to follow good hygiene practices to avoid infections.
- Now announce the game called 'passing the parcel'.
- Ask all the learners to stand in a circle. In case the class size is big, ask only 10-12 learners to come forward and form a circle. The others can guess.
- Place the bowl with 16 chits on healthy hygiene practices at the centre of the circle.
- Ask for a volunteer to facilitate the game. The learners will stand facing away from the group. The volunteer will clap hands.
- As soon as the clapping starts, the rest of the learners will start passing the ball to the person standing next to them.
- When the clapping stops, the learner who is left holding the ball will pick up a chit from the bowl, read it silently, and convey by enacting without uttering any word.
- Other learners in the group and in class will need to guess the activity being demonstrated.
- If the learner is unable to enact properly, then get another volunteer to perform. Ensure that the learners are able to guess the act, otherwise reveal the practice.
- Continue the game till all the 16 chits are completed. Chits are given below—

1. Washing hands with soap and water after going to the toilet
2. Washing hands with soap and water before all meals
3. Brushing teeth twice a day (morning and night)
4. Bathing daily
5. Clipping nails of hands and feet
6. Cleaning eyes while washing the face
7. Keeping the ears clean
8. Covering the mouth while coughing
9. Turning the head or covering the mouth while sneezing
10. Wearing clean clothes including clean undergarments
11. Rinsing the mouth after every meal
12. Flushing the toilet after use
13. Not biting nails
14. Not digging the nose in public
15. Combing hair everyday
16. Not spitting in public places

Reflective questions

- Are there any challenges one faces to practice these personal hygiene habits?
- Why is personal hygiene important for good health?
- What are the personal hygiene practices one must follow at least once daily?
- What can happen if one does not maintain personal hygiene? Probe to get multiple responses.

Take-home messages

- Maintaining personal hygiene prevents illness and infection from bacteria or viruses.
- Simple activities can be done to maintain personal hygiene like washing hands (before eating or preparing food, after playing or going to the toilet), brushing teeth at least twice a day, rinsing mouth after every meal, clipping finger nails when long, having a bath daily, avoid biting nails or digging the nose, changing undergarments daily, wearing footwear when going out, turning head away when coughing or sneezing.

Additional suggested activity

- Tell them to put a tick across the hygienic practices every day for a week. By the end of the week the health buddy will take an update on the sheet to see if the practices are

becoming a habit. If not, they can continue this exercise.
(See below for reference)

Personal Hygiene Practice	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Brushing teeth twice a day							
Not biting nails							

Activity 6.3

Healthy Habits Quiz (Healthy Eating and Food Hygiene)

LEARNING OUTCOMES

The learner

- Explains good eating habits to maintain good health
- Explains seven Cs to maintain food hygiene

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking

RESOURCES

- Blackboard and chalk, cardboard (to prepare placards)

Guidance for the facilitators

- Tell the learners that through this activity they will be able to assess themselves on their knowledge of healthy eating and good hygiene practices and learn more about them.
- Explain the following instructions for the game:
 - Read out 15 sentences one by one. Each learner needs to decide if the statement indicates a healthy practice or an unhealthy practice and raise the respective placard as their answer.
 - If they do not know the answer, they can raise the 'Unsure' card.
- Read out the sentences in the first column and ask a learner to share their answer. Ask them to give reasons for their answer.
- After each sentence, reinforce the information using the facts given in the table below.
- You can have 2-3 rounds of questions using the table provided below.

Statement	Healthy or Unhealthy	Facts
Eating whole grains like maize, barley, ragi, bajra, wheat, etc.	Healthy	Whole grains are nutritious and available locally. Grains like bajra and ragi are rich in calcium and iron. Unlike these, refined flour has very little to no nutrients and less fiber.
Removing fiber from wheat flour to make chapattis	Unhealthy	Fiber is important for digestive health and regular bowel movements. It is required for a healthy gut.
Drinking chaach, lassi, bel sharbat, nimbupani, aam panna	Healthy	These locally available drinks are healthy and nutritious. Packaged cold drinks are high in sugar and do not have any nutrients. They also contain high amounts of acid, which is bad for the teeth and bones.
Eating white bread, buns and noodles daily	Unhealthy	These are made of refined flour and hence have no micronutrients and fiber. Therefore, consumption of these in too much quantity regularly is not good for health.
Drinking tea/coffee immediately before or after eating food	Unhealthy	One should not drink tea/coffee before and after eating food at least for one hour as it impairs the absorption of iron in the body.
Cooking food in iron utensil	Healthy	Cooking food in iron utensils increases the iron content of food. This is helpful to prevent iron deficiency anaemia.
Consuming jaggery and sattu	Healthy	Jaggery and sattu are easily available locally. Jaggery is a good source of iron. Sattu is rich in Vitamin B, protein and iron.
Eating sprouts	Healthy	Sprouted grains and pulses have plenty of micronutrients and are a good source of energy and proteins. Taking sprouts daily will be good to meet the growth requirements of children.

Eating street food like samosa, chowmein, momos, chaat on regular basis	Unhealthy	Street food like samosa, chowmein, momos, chaat, etc. could be prepared in the open and so are exposed to dirt, dust and insects and carry the risk of infections. Also this food is low in fiber, high in fat and sugar. Eating too much of it can give rise to obesity and other diseases like diabetes.
Checking date of manufacture, date of expiry, MRP, etc., while buying packaged food	Healthy	No food item should be consumed after the expiry date as it is not fit for consumption. One should not pay more than the MRP. So it is essential to check these details.
Cooking greens in an open vessel	Healthy	Cooking greens in an open vessel helps to maintain the nutritive value of iron. In addition, squeezing lime juice (rich in Vitamin C) on green leafy preparations increases the absorption of iron in the preparation and thus helps in preventing anaemia.
Keeping drinking water in an open vessel	Unhealthy	It is important to keep all food and drinking water covered in a storage area that is free of pests and dust. Food stored in refrigerators must also be covered to avoid drying and absorbing of odours.
Eating fruit without washing them	Unhealthy	Fruits and vegetables may contain bacteria and pesticides, therefore, should be washed before consumption. It is equally important to wipe all packages, tins, bottles before storing and consuming.
Consuming cooked food stored in room temperature after two days	Unhealthy	Eating old food stored in room temperature can cause food poisoning/ stomach infections as harmful bacteria develop in food if it is not stored in the refrigerator. Bacteria may still develop in the refrigerator if the food is stored for more than 3-4 days.
Refrigerating meat, poultry, eggs, and other perishables as soon as you get them home	Healthy	Perishable food and meats, etc., develop bacteria very fast. Therefore, it is important to refrigerate/freeze meat, poultry, eggs and other perishables as soon as you get them home from the market.

Summarise

- Ask the learners what healthy eating habits we learnt through this quiz?
- Tell the learners that lack of food hygiene is a common cause of illness and death among infants and children in our country, which can be easily reduced if we take care of hygiene and sanitation at a personal and community level.
- Next, write C seven times on the board and tell the learners that each C represents a good food hygiene/management practice. Ask them to guess what each C could mean.
- Write 'cover' as the first C and ask them what it could mean. Explain cover using the information provided below.
- Ask them to guess the other 'Cs', give hints, reveal each C and explain what it means.

7 Cs for food hygiene to prevent food contamination

1. Check: Select food that is fresh. When buying packaged food, check the 'best before date'.
2. Clean: Wipe all packages, tins, bottles before storing food. Wash whole fruit, vegetables and other food before cooking or even consuming raw.
3. Cover: Keep all food and drinking water covered in a storage area that is free of pests and dust. Food stored in refrigerators must also be covered to avoid drying and absorbing of odours.
4. Cross contamination avoided: Keep raw and cooked food apart. Never place cooked food on a plate that previously held raw meat before washing the plate.
5. Cook: Cook food thoroughly and ensure it is freshly cooked especially if there is no refrigerator to store it.
6. Cool/Chill: Refrigerate or freeze meat, poultry, eggs and other perishables as soon as you get them home from the market.
7. Consume: Serve food in a clean environment. Use clean vessels, plates, spoons for serving food and wash them well after using.

Reference: Food Safety and Standards Authority of India (FSSAI)

Reflective questions

- What is the benefit of cooking food in iron utensils?
- Why does street food and packaged cold drinks need to be moderated?
- What is the benefit of whole grain over refined flour?
- What is 'best before' date in packaged food? Why is it important to check it?

Take-home messages

- Good eating habits and maintaining food hygiene is essential for maintaining good health. For example, eating whole grains, sprouts, drinking local drinks (instead of packaged drinks), moderating street and junk food, cooking in iron dishes.
- It is important to maintain food hygiene by following the seven Cs. That is, checking its manufacturing date, cleaning it before consumption, keeping food covered, avoiding cross contamination, cooking it right, cooling food to avoid bacterial growth and consuming it in clean environment.

Activity 6.4 Sanitation and Health

LEARNING OUTCOMES

The learner

- Explains the connection between personal and food hygiene, sanitation, and good health.
- Explains the five modes of faeco-oral transmission (five Fs) of infectious diseases.
- Explains ways to maintain hygiene and sanitation to prevent infections.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, effective communication

RESOURCES

- Ask a volunteer to write these on five sheets of paper

Guidance for the facilitators

- This activity contains information about personal and food hygiene and sanitation and open defecation.
- Explain that while personal hygiene refers to cleanliness of body and food hygiene refers to practices to ensure that food is safe and clean for consumption, sanitation refers to clean surroundings.
- Divide the class into six groups and give out copies of the case study with accompanying questions to each group.

Hema is a mother of three young children who are 8, 4 and 2 years old, respectively. Her husband is a daily wage labourer who goes to work early in the morning. She does not have any help at home and finds it difficult to manage the children and her household work of cooking, cleaning, washing clothes and vessels. Usually, she is able to cook only once in the day. They do not have a fridge and the cooked food lies outside. There are lots of house flies in and around Hema's house that often sit on the food. In the hurry to finish several chores, she often forgets to cover the food and keep it out of the reach of the children who eat without washing their hands.

Hema and her family defecate in the nearby field making it harder for Hema to go after her two younger children and clean them each time they go to the toilet. They also play in the same field bare feet. Hema sometimes forgets to wash her hands after cleaning her children. She finds it hard to clean and bathe her two younger children every day and their nails often remain unclipped and dirty. In the absence of tap water she sometimes uses water from the pond next to the field in kitchen.

Hema and her family often have abdominal pain and loose stools. Recently her younger child has been complaining of nausea and she has noticed blood in the stool. Hema has herself been feeling very weak.

Group	Questions for discussion
Questions for groups 1 and 2	Do you think the personal hygiene practices of Hema and her family led to the family's frequent illnesses? Please provide reasons for your response. What advice would you give Hema and her children for maintaining personal hygiene?
Questions for groups 3 and 4	Do you think Hema's cooking and food storage practices led to her family's frequent illnesses? Please provide reasons for your response. What advice would you give Hema and her husband for maintaining food hygiene?
Questions for groups 5 and 6	Do you think the state of sanitation in and around Hema's house led to the family's frequent illnesses? Please provide reasons for your response. What advice would you give Hema and her husband for maintaining good sanitation?

After each presentation ask them to share all the good personal hygiene, food hygiene and sanitation practices that should be followed to avoid infections.

Summarise

- The absence of personal hygiene can result in the transmission of harmful germs from the surroundings into one's body. The following personal hygiene measures should be followed to avoid getting infected, for example, washing hands with soap and water after every exposure to human or animal faeces, washing hands before eating.
- Contaminated food and water are common mediums of transmission of harmful germs into a person's body.
- Like personal and food hygiene, sanitation is equally important to avoid growth and transmission of harmful organisms in surroundings. Open defecation can lead to infections as an infected person contaminates soil with faeces containing worms, eggs or larvae, which are ingested into another person's body through dirty hands, food, water or by penetration into skin when walking barefoot. The eggs and larvae then develop into adult worms inside the body.
- The following measures can be taken to maintain good sanitation:

TOILETS

- Not defecating in the open, using toilets connected to a proper sewage system.
- Keeping toilets clean.
- Ensuring there is water available for use in the toilets.

ENVIRONMENT

- Keeping the surroundings clean and free from flies.
- Having and using dustbins to throw waste.
- Drinking water should be clean. Collect water from a safe source like the municipality, which supplies treated water. Boiling, filtering using tablets supplied by the government and pharmacies for treating water is a good practice especially during summer and rainy season.
- Keeping the cooking area in a covered room away from the toilets.
- Cleaning vessels and utensils with a soap/detergent.

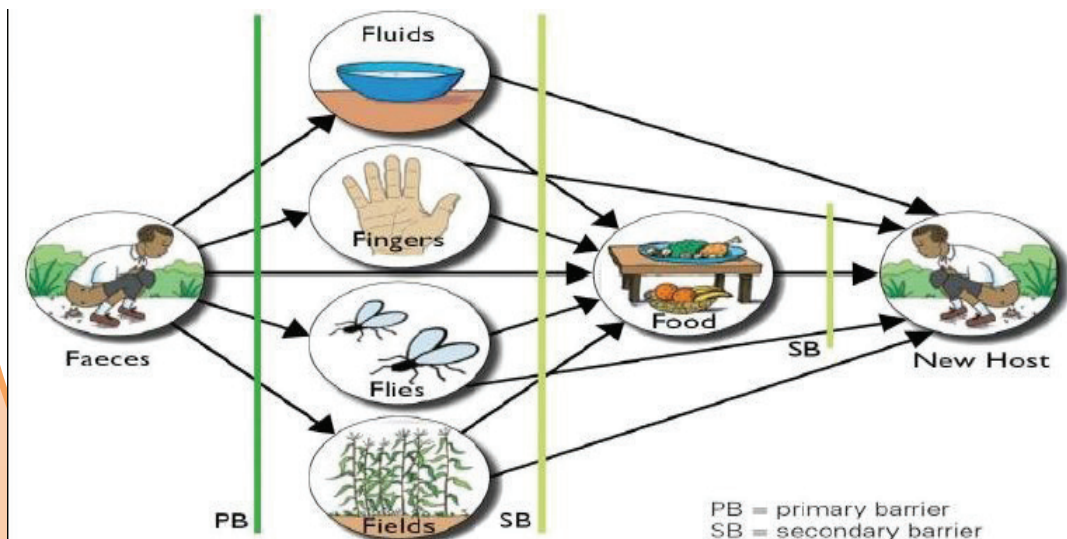
Complete the activity by explaining the fiveFs. The five mediums of transmission of infection from the surroundings to the body are:

- Faeces, fingers, flies, fields (or soil) and food/fluids.
- For example, organisms in *faeces* of an infected person can contaminate *water* especially in the case of open field defecation. If this water is used for drinking directly or for washing *food*, it could contaminate the food. *Flies* that sit on contaminated soil could also sit on food that is not covered. *Fingers* can get contaminated if they are not washed after playing in soil/mud in fields that are used for open field defecation or after defecation. Thus, if they do not wash their hands before eating, there is a big risk of them picking up infection.
- Once inside the body of another person, the organism multiplies and is subsequently found in their faeces.
- Besides this, infections can also transmit through skin (by walking bare feet on contaminated land).
- Good sanitation, including personal and food hygiene breaks the chain of transmission of harmful germs through the 5 Fs, that is, faeces, fingers, flies, fields and food/fluids and thereby prevents infections.
- Share information on Swachh Bharat Abhiyan.
- Ask the learners what an individual can do if they develop infections? And share that they may visit the school medical counsellor, a nearby public health centre or a qualified doctor or ASHA/ANM.

Reflective questions

- How can lack of personal hygiene result in infections?
- What measures can a person take to maintain sanitation?

The chain of five Fs that can cause infections



Scheme: Swachh Bharat Abhiyan

Swachh Bharat Abhiyan is also called the Clean India Mission or Clean India drive or *Swachh Bharat Campaign*. It is a national level campaign run by the Government to cover all the backward statutory towns to make them clean. This campaign involves:

- Construction of latrines for households below the poverty line or converting dry latrines to low cost sanitary latrines.
- Promoting sanitation programmes in the rural areas—use of hand pumps for water, safe and secure bathing facilities, sanitary marts, construction of drains, disposal of solid and liquid wastes.
- Cleaning streets, roads and changing the *infrastructure of the country to lead the country ahead*.
- Enhance health and education awareness.

This campaign was officially launched by the Honourable Prime Minister, on the 145th birth anniversary of Mahatma Gandhi on 2 October 2014 at Rajghat, New Delhi. This mission aimed to join each and every Indian from all walks of life, like the branching of a tree.

Apart from the goal of clean surroundings, this programme also intends to reduce the risk of diarrhoea through clean sanitary practices. Additionally, the construction of latrines would reduce the risk of worm infestation through open field defecation.

More information: <http://swachhbharatmission.gov.in/SBMCMS/about-us.htm> <http://sbm.gov.in/sbmreport/home.aspx>

Take-home messages

- Good sanitation and personal and food hygiene breaks the chain of organisms through the five Fs, that is, faeces, fingers, flies, fields and food/fluids and thereby prevents infections.
- Personal and food hygiene include practices to keep our body (including hands), clean and free of harmful organisms and preventing food from getting contaminated by following the seven Cs (see page no. 113).
- Good sanitation practices include not defecating in the open, maintaining cleanliness in the toilet, cleanliness in the surroundings and using clean drinking water.

Additional suggested activity

- Identify good personal and food hygiene and sanitation practices followed at your home and a few practices that you feel need to be changed. Share your list with the elders in the family.

Activity 6.5 Anaemia: Causes, Prevention and Management

LEARNING OUTCOMES

The learner

- Describes the common causes, symptoms of anaemia in children.
- Lists risk factors for iron deficiency anaemia.
- Identifies locally available sources of food rich in iron, folic acid and Vitamin B12.
- Explains how anaemia can be prevented and managed.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, critical thinking, interpersonal skills, effective communication, decision-making

RESOURCES

- Blackboard and chalk, five sheets of paper with related questions for the five groups

Guidance for the facilitators

- The class will be divided into groups of 4-6 children. Each group would be provided with a sheet of paper with a question on anaemia. Each respective group shall brainstorm and come up with their responses. Give the group five minutes to discuss.
- Tell the learners that today they will learn more about anaemia. Divide the participants into five groups.

Scheme: Weekly Iron Folic Acid Supplementation

- Ministry of Health and Family Welfare launched the Weekly Iron and Folic Acid Supplementation (WIFS) programme in 2012 to meet the challenge of high prevalence and incidence of anaemia in adolescent girls and boys (56 per cent of girls and 30 per cent of boys).
- There are many causes of anaemia, of which iron deficiency accounts for about 50 per cent of anaemia in school children and among women of reproductive age-group (15-45 years), and 80 per cent in children 2-5 years of age.
- Under this programme iron tablets (pink/blue tablets) are given to children studying in Classes I-XII. This service is delivered through school teachers.
- The tablets should be consumed after the main meal of the day to prevent side effects such as nausea.

Group 1: Causes of anaemia

List three causes of anaemia in children

Points for discussion

Anaemia is caused by a number of factors such as:

- Inadequate intake of iron and/or folic acid or Vitamin B12.
- Worm infestation by hook worm or round worm leading to bleeding as well as decreased absorption of nutrients from the diet.
- Malaria and bleeding disorders (these disorders can lead to anaemia besides also causing heavy and prolonged bleeding after an injury).

Group 2: How do you recognise if a person has anaemia?

Write down 3-4 features that are associated with anaemia. What would you do if you or someone you know has these symptoms?

Points for discussion

- The main feature in all varieties of anaemia is tiredness and a decreased capacity to work. Loss of appetite and irritability may develop. There is an increased chance of them picking up infections and becoming breathless on exertion like when they play or climb stairs or do some heavy activity.
- Other common symptoms are:
 - giddiness, headache, sleeplessness or sleepiness.
 - pale skin/nail beds or mucous membranes, conjunctiva below the eyes. This is often missed or not recognised.
 - loss of appetite.
 - irregular periods in girls/females.
- Anaemia should not be neglected. Consult an Anganwadi Worker (AWW), Auxiliary Nurse Midwife (ANM) or a qualified doctor.
- Severe anaemia in a pregnant woman affects the growing foetus, and results in birth of a low birth baby (less than 2.5 kg) affecting the next generation.

Group 3: Sources of iron

List four sources of dietary iron in the foods eaten in your area.

Points for discussion

The iron needed by the body comes from the diet, mainly from the following sources:

- Green leafy vegetables such as spinach, bathua, beans, tinda, bottle gourd, mint, dried lotus stem, pumpkin leaves, drumsticks, beetroot, meat, fish and poultry, sorghum, ragi and millet, dry fruits, and jaggery.

- In general, fresh fruits and vegetables are of great value because of their Vitamin C content, which facilitates iron absorption. Regular consumption of Vitamin C rich fruits such as amla, cheeku, sitaphal (custard apple), watermelon, guava, orange, lemon, and even tomatoes promotes iron absorption. Consumption of tea/coffee along with food, inhibit iron absorption.

Group 4: What advice would you give people in your community to prevent iron deficiency anaemia?

Points for discussion

- Eat green leafy vegetables and cereals along with Vitamin C rich food.
- Where possible, eggs and meat may be consumed as they have high iron content.
- Given the high prevalence of anaemia in our country, the government has a weekly iron folic acid supplementation programme.
- To preserve the iron in foods, such as in green leafy vegetables, these should be cooked in open vessels.
- Promote use of footwear and latrines to prevent hookworm infestations.
- To prevent malaria, avoid collection of water in drains, other open spaces, broken vessels, tyres, etc. as these lead to breeding of mosquitoes.
- Do biannual deworming with Albendazole. There is a national programme for deworming.

Scheme: National Deworming Day (NDD)

This programme was started by the Ministry of Health and Family Welfare to reduce the risk of worm infestation causing anaemia, malnourishment leading to impaired mental and physical development.

India has the highest burden of intestinal worms infecting humans that are transmitted through contaminated soil in the world. Parasitic worms in children interfere with nutrient uptake, and can contribute to poor health.

Thus to control Soil Transmitted Helminths (STH), the National Deworming Day (NDD) programme was started on February 10, 2018.

National Deworming Day is conducted twice a year on 10 February and 10 August every year. On these days, mass deworming for children in the age groups between 1-19 years is carried out by giving them the recommended dose of Albendazole tablets.

National Deworming Day is conducted through schools and anganwadi centres in order to improve their overall health, nutritional status, access to education and quality of life.

Group 5: Children at risk for anaemia – reasons

Provide four reasons for high prevalence of anaemia among children.

Points for discussion

- Increased requirement of nutrition, including iron due to rapid growth and development.
- Eating pattern of children: Missing meals and snacking is very common.
- Influence of peers, mass media and urge to stay very thin lead to poor eating choices.
- Fast foods that are high on calories and low on nutrition are popular among children. These spoil the appetite for regular meals and end up replacing regular meals.
- Food selection is often based on availability, convenience and time, rather than on food value.

Take-home messages

- Anaemia is a condition of deficiency of haemoglobin in the red-cells in our blood. It is caused due to lack of iron. Any adolescent who has haemoglobin below 12gm/100 ml is anaemic.
- The body develops rapidly during adolescence. Hence, the overall nutrition and iron requirements also increase.
- Iron deficiency interferes with a person's ability to work, play or study. If left untreated, it can have long-term negative consequences.
- Importantly, anaemia can easily be prevented and can also be treated. We need to eat iron rich food to keep healthy and fit.
- We should watch out for symptoms of anaemia and get timely treatment.
- Children should consume iron and folic acid under the WIFS scheme of the government to prevent anaemia.

Activity 6.6

National Schemes on Nutrition and Sanitation

LEARNING OUTCOMES

The learner

- Describes the key provisions and benefits of government programmes including

- Weekly Iron Folic Acid Supplementation
- National Deworming Day
- Swachh Bharat Abhiyan

TIME REQUIRED

- One Period

LIFE SKILLS ENHANCED

- Creative thinking, critical thinking, interpersonal skills and effective communication, decision-making

RESOURCES

- Two copies each of the overview of the three government schemes

Guidance for the facilitators

- This activity requires the learners to go through the information on three government schemes in class, discuss the schemes, analyse them and present them back in the class. It is important for you to be familiar with the content handed out to the learners to answer any questions they may have about it.
- During the presentation, ensure that all the learners listen attentively to other groups so that each person learns about all three schemes.

Transacting the Activity

1. Recap – Ask the learners what are the three aspects of cleanliness that can prevent transmission of infections? What are the five Fs of transmission of infectious diseases? How does personal hygiene break the chain of organisms through the five Fs? How does food hygiene break the chain through the five Fs?
2. Enquire if the learners have analysed or brought about some change in hygiene and sanitation practices around themselves? Take a few responses.
3. Next, introduce this activity by telling the learners that the government runs a number of schemes across all states of the country to ensure good health of the people. It is important for us to have knowledge about these schemes, avail their benefits and participate to make them successful.
4. In this activity, the learners will be given information about three core schemes of the government. Each group will discuss the schemes and make a presentation on the scheme.

5. Next, write the names of the three schemes on the board:
 - Weekly Iron Folic Acid Supplementation
 - Swachh Bharat Abhiyan
 - National Deworming Day
6. Take one scheme at a time and ask the learners what they know about it. Give them basic information about these schemes.
 - Weekly Iron Folic Acid Supplementation (WIFS) was launched by the Ministry of Health and Family Welfare in 2012 to supply iron tablets (pink/blue tablets) to children studying in Classes I to XII in the schools. These services are delivered through school teachers (<http://nhm.gov.in/nrhmcopponents/reproductive-child-health/adolescent-health/wifs.html>).
 - Swachh Bharat Abhiyan, a national level campaign run by the Indian Government was launched in 2014. It aims to involve public in a mission to clean India. This campaign involves the construction of latrines, construction and sanitisation of water and waste management facilities, cleaning streets/roads, enhance health and education awareness.
 - National Deworming Day was launched on 10 February 2018 by the Ministry of Health and Family Welfare to reduce the prevalence of parasitic worm infections, a widespread health issue affecting over 241 million children in India alone. The deworming day is celebrated twice a year, on the 10th day of February and August. On this day all students in schools are given a deworming tablet of Albendazole (white chewable) (<http://nhm.gov.in/nrhmcopponents/rmnch-a/child-health-immunization/national-deworming-day-2016/national-deworming-day-february-2018.html>).
7. Next, divide the class into six groups so that the two groups can discuss one scheme. In case the size of the class is below 20-25, only three groups can be made.
8. Give the information leaflet of one scheme to each group.
9. Ask each group to nominate a reporter who will be responsible for recording the discussions and making the presentation on behalf of the group.
10. Write the following questions on the board and ask each group to go through the information on their respective schemes and discuss it using these questions:
 - What is the key problem that this scheme is trying to address? Why is it an important concern for children?
 - What are the key provisions of this scheme for children?

- How can this initiative improve the health and well-being of children?
 - What role can children play to participate in this scheme?
11. Give them 15 minutes to read the information, discuss and write their answers.
 12. After 15 minutes, ask the two groups who have worked on one scheme to come before the class to make their presentation.
 13. Ask the groups to pay attention as questions about the schemes will be asked later.
 14. Ask one group to read out their answer of the first question and the other group to share if their answer is different from the one presented by the first group. Ask the second group to read out their answer for the second question. Repeat the process to avoid repetition while presenting.
 15. Invite the next two groups who have worked on the second scheme and then the third. Use the same process shared above.
 16. After each presentation, add or correct the information shared by the learners if needed. Appreciate each group for their presentations.

Reflective questions

- Which issue does National Deworming Day try to tackle?
- What is the core provision of Weekly Iron Folic Acid Supplementation? What is its target age group?
- When was Swachh Bharat Abhiyan launched? What is the aim of this programme?

Take-home messages

- The Government of India runs many programmes to enhance people's health and protect them from prevalent diseases.
- Weekly Iron Folic Acid Supplementation, National Deworming Day and Swachh Bharat Abhiyan are three national level programmes that try to tackle the issues of widespread anaemia, parasitic worm infections, and lack of sanitation, respectively.
- It is important to have information and participate in these schemes to ensure that its benefits reach us and people in our community.

Additional suggested activity

- Each learner can find out about the activities of the three schemes mentioned in and around their locality/schools by talking to elected representatives, students and teachers of other schools, etc.



PREVENTION AND MANAGEMENT OF SUBSTANCE MISUSE

Children are most vulnerable to substance misuse, commonly known as drug abuse. Substances, including drugs can change the mental order of individuals and affect their mental health. The non-medical use of a substance, including drugs that changes an individual's mental health and affects all dimensions of health adversely, is known as substance misuse.

Activity 7.1 **Types of Substances and Signs and Symptoms of Substance Misuse**

LEARNING OUTCOMES

The learner

- Describe few commonly abused substances.
- List signs and symptoms of substance misuse.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, critical thinking

RESOURCES

- Blackboard/writing board, chalk/markers

Guidance for the facilitator

- Begin a brainstorming session by asking the learners to explain what they understand from the terms 'drugs' and 'substance'. List their responses.
- Ask them what they understand by the terms substance use and substance misuse.
- Ask the learners to list the substances they know are misused generally by young people such as themselves.
- Ask the learners about the perceived advantages and disadvantages of substance misuse.
- Write the responses given by the learners on the blackboard/writing board under three headings.

Name of the substance	Perceived advantages	Disadvantages
White fluid	Feeling relaxed	Slows down activity of the brain and may also have hypnotic effects

- Discuss the types of substances that are misused based on the fact sheet at the end of this module titled, 'Types and effects of substances'.
- Then, write the incomplete story on the board as follows:

Abdul and Sohan are classmates. Abdul observes that Sohan has not been coming to school for some days. One day, Abdul finds Sohan lying under the tree at an odd hour,

After reading the incomplete story, divide the learners into 6-8 groups, each group having not more than 5-6 learners.

- Ask each group to complete the story in 10 minutes.
- The story should highlight some of the signs and symptoms of substance misuse that they know.
- Ask the groups to present their stories.
- Make sure that all the signs and symptoms have been covered in the list by mentioning the points that have been missed out by the learners.

Points for discussion

- Commonly abused substances are tobacco, alcohol, marijuana (ganja), opiates, cannabis, solvents (petrol, glue, correction ink) and aerosol inhalants, cough syrup, caffeine, cocaine and ecstasy.
- The experimenters are those who start using the substance as an experiment or because of peer pressure and curiosity.
- The next stage is called occasional users. This includes those who have already crossed the stage of experimenting and use the substance occasionally – either for social reasons or during certain phases.
- A user becomes a compulsive user where they are dependent on a substance and increase the amount of the substance consumed to experience the same effect. This is the stage when the user has a continuous and uncontrollable craving for the substance.
- The signs and symptoms of substance misuse vary depending upon the type, dose and method of substance misuse (for example, inhaling, oral intake or through needles/injections).
- The signs and symptoms also vary according to the age of the person. Furthermore, the same substance can affect different individuals in different ways and it is difficult to

predict this in advance. Hence, the signs and symptoms of substance misuse may show up in several different ways.

- An individual who is addicted to a substance displays certain behaviour patterns, which are different from their normal behaviour. This includes being overly submissive or aggressive, stealing and being furtive, unable to maintain a regular schedule or routine, unable to complete school work on time, withdrawal from friends and family.

Take-home messages

- There is a need for critically analysing concerns related to substances, because socially acceptable drugs are often misused and even many drugs that are used for medicinal purposes can be misused.
- For many substances, the line between use and misuse is not clear.
- No one starts taking substances with the aim of getting addicted to them. However, very few young people realise that experimentation can lead to addiction.

Additional suggested activity

- Make a chart of various substances available locally and highlight the effects of the misuse.

Activity 7.2

Why are Children Vulnerable to Substance Misuse?

LEARNING OUTCOMES

The learners

- Understand the reasons for increased vulnerability of children during adolescence.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, critical thinking

RESOURCES

- Case studies, writing board/blackboard, markers/chalk

Guidance for the facilitator

- Initiate the session by dividing the learners into five groups, each group having 5-6 learners.
- If need be, one case study can be shared by more than one group. Please ensure that each group has at least one case study

- Allocate 15 minutes to every group to discuss the case study assigned to them and to answer the questions after the case study.

Case Study 1

Sohan has performed well in the Class IX annual exams. Now, he is worried whether he will be able to keep up his performance and score good grades in Class X. His parents always tell him how they expect to see him as topper of his class. Afraid of disappointing them, Sohan does not share his concerns with his parents. He feels that some of his friends may be going through the same phase and discusses his problem with them. His friends suggest that smoking might reduce his stress and help him to relax. Sohan wants to feel better and decides to follow his friends' advice. He starts smoking a cigarette or two every day. Without realising, over a period of six months, he was smoking 6-10 cigarettes a day. Smoking has become a habit with him.

Points for discussion

1. Who do you think is responsible for Sohan's habit of smoking and why?
2. Do you think smoking helped reduce Sohan's stress? Why?
3. What else could Sohan have done to reduce his stress effectively?
4. What role could Sohan's parents have played to prevent him from smoking?

Case Study 2

Three friends Mani, Adil and Ronny met at a marriage party. Mani and Ronny wanted to drink in celebration and compelled Adil, who has never had a drink before, to join them. They tell him that he should join them for the sake of friendship. Adil is in a dilemma. On the one hand he doesn't want to lose his friendship but on the other he is conscious that nobody in his family drinks. He has also learnt from his parents that alcohol is harmful for health.

Points for discussion

1. What are the choices that Adil has?
2. What would you have done if you were in Adil's place?
3. How else could Adil's friends have celebrated?

Case Study 3

Gudiya was used to seeing both her mother and grandmother enjoy chewing tobacco regularly. When she turned 12 she felt that she was old enough to begin chewing *gutka*/tobacco and *paan* (betel) along with them. Gudiya knows that the corner shop keeper stocks *gutka* and she buys it from him.

Points for discussion

1. Enact a 2-3-minute conversation between Gudiya and her mother in which the mother tries to dissuade Gudiya from picking up this addictive habit.
2. Using the above case study establish the role of the family in initiating children substance misuse.
3. Why do you think Gudiya should listen to her mother and resist the temptation of *paan* (betel) and *gutka*/tobacco chewing?

Case Study 4

Amrit, Manu, and Rishi have started smoking because they wanted to be noticed by others in their school and wanted to be 'cool'. They were quite sure that they will be able to keep their habit in check and escape any long-term negative consequences of smoking.

Points for discussion

1. Using the above case study, describe how the three children started misusing a substance.
2. Like Amrit, Manu and Rishi, do you also think that they will not get addicted to smoking and escape its negative effects? Please explain your reasons.
3. Do you think the three children were reasonable in wanting to be noticed by others? Please explain your reasons.
4. Could they have been 'cool' and got noticed in other ways? Please explain with examples.

Case Study 5

Mukesh's father was an alcoholic. He did not interact with anyone in the family and there were constant fights between his parents. Mukesh was fed up and started drinking because he thought that this would help him ease off the tensions at home. Though he could forget his problems and tensions for some time, the problems persisted and in fact grew worse over time.

Points for discussion

1. Who are responsible for Mukesh's drinking habit?
2. What choices did Mukesh have?
3. What would you have done if you were in Mukesh's place?

Take-home messages

Young people are more vulnerable to substance misuse due to the following reasons.

- Peer pressure, poor self-esteem, low achievement at school, performance pressure, previous experience of taking substance, family history of substance misuse, family instability.
- Lack of easily available support from the family, friends and school, seeing substance use as a means of 'growing up' or fun also makes adolescent children more vulnerable to substance misuse.
- Pressure from friends to try an addictive substance, the urge to gain popularity among friends, and the desire to experiment and the curiosity to try out new things also makes young people particularly vulnerable to substance abuse.
- Lack of basic knowledge about the effects and dangers of consuming addictive substances.
- Media images that glamourise substance misuse may also mislead young people.
- If an elder (parent, grandparent) in the family engages in substance misuse, young people in that family are more likely to start using the same or different substance/s.
- Factors like relatively easy availability of substance/drugs, community norms, and adverse family situations may push young people into substance misuse.
- Attitudes related to smoking, drinking, and misuse of other substances are formed during pre-adolescence and early adolescence. This is an important age to invest in prevention efforts. Peers can encourage or motivate their group to avoid substance misuse.
- Children need to be engaged in socially productive activities.
- Substance misuse leads to physical and psychological dependence. Some substances produce only physical dependence while others produce both physical and psychological dependence.
- Long-term use results in losing control of one's emotions, that is the user may become angry or violent, depressed or anxious,
- Substance misuse creates problems within the family. It results, not only in, loss of trust but also breakdown in the relationships. It may result in losing friends and family thereby, making the user isolated and lonely.
- The user may become less motivated to do well in school/college/work. Additionally, memory and ability to think clearly is affected.

- One of the major impacts is economic. The substance user may lose a job, will not be able to support the family, may start stealing money from home and so on.
- The substance user also suffers from major health consequences. This makes them predisposed to disease and infections.
- There are drugs that are prescribed by qualified medical practitioners that are available off the counter or on prescription.
- Substances like alcohol, solvents, and some others like glue, correction ink, may be legal in specific contexts, but when these are misused, it can lead to addiction.
- Excessive use of socially accepted substances like tea, coffee, nicotine, *gutka* are also addictive and harmful.
- The commonly misused substances among children are tobacco and alcohol. Other misused drugs are marijuana (ganja), cough syrup such as Corex and Phensydyl, solvents (petrol, glue, correction ink).

Additional suggested activity

- Collect information from your neighborhood on what the children do during their free time and analyse the type of activities they engage in as positive and negative activities. Suggest activities that the children can take up as a group for the benefit of the neighbourhood.

Activity 7.3 **Dealing with Negative Peer Pressure**

LEARNING OUTCOMES

The learner

- Recognises negative peer pressure
- Identifies ways of dealing with negative peer pressure

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, effective communication, critical thinking

RESOURCES

- Activity sheet, writing board/blackboard, marker/chalk

Guidance to the facilitator

- Inform the learners that there will be a role play and ask for five student volunteers to play the roles of five characters.

- Assign the roles of the five characters, one role to each student volunteer.
- Give them five minutes to enact this role play.
- Role play characters.

Vijay is a smoker. He acquired this habit under the influence of his friends, who suggested smoking as a way to relieve his stress. He is keen that his friends should also smoke. He tells Mujib and Manju “Hello, I have got cigarettes, come and have a smoke.”

Mujib has no reservations about smoking. Rather he is curious and wants to experiment. He says, “Sure! Thanks, that’s great. I also want to try but did not get an opportunity though I was always fascinated whenever I saw adults smoking.” He is also thinking that if he does not smoke, others would mock him. He starts smoking and offers the cigarette pack to others.

Manju knows that smoking may harm her, but she does not want others to think that she is not a part of the group, and hence she gives in. She says, “Yes, I would like to smoke. Otherwise you may think that I am not brave enough to be a part of the group.” She takes one cigarette and starts smoking.

Raju is convincingly against smoking. He says, “No chance! I do not need to smoke to prove that I am an adult and a bold person. I know that smoking is bad for my health as well as for others. I would not like to prove my adulthood at the cost of my health.”

Ashok thinks that smoking one cigarette may not harm a person, at the same time he does not want to smoke. He is afraid that his action may make him a habitual smoker. He, therefore, refuses outright the cigarette offered by Vijay.

- After the role play, ask the following questions and write the responses given by the learners on the writing board:
 1. What are the different situations you have observed from the role play?
 2. Why is it that some of the characters give in to smoking while others do not?
 3. Can you suggest some other ways of dealing with negative peer pressure?
 4. Is peer pressure always negative? If not, can you share an example of positive peer pressure?

Points for discussion

- It has been observed that young people are highly influenced by their peers and mimic their behaviour. Hence, parents/guardians should always be aware of their children/wards’ friends.
- In many instances, young people are influenced by their peers to experiment with cigarettes, alcohol and other harmful substances.

- Peer pressure can be managed by being aware of the implications of drug abuse and developing skills to manage peer pressure.
- Young people should also be educated to recognise that a friend is someone who cares, protects and looks after the welfare of their friends rather than coerce them/initiate them into unhealthy habits.

Reflective questions

- What do you think are the most powerful influences on a young person, such as yourself, to start substance use?
- How can you protect yourself from these harmful influences?

Take-home messages

- We must learn to analyse social norms, customs, and practices, assess false notions shown in the media and pressure from peers to decide what is good for us rather than giving in to influences.
- It is important to assertively say 'No' to protect oneself from the temptation to experiment with drugs.
- It is also important to seek help and support from trusted adults.

Additional suggested activities

- Think about how your friends and family influence your behaviour – both positively as well as negatively. Identify one negative influence and use your decision-making and assertive communication skills to overcome this influence. Document your experience and share it with your family and friends.
- Make a poster discouraging substance misuse.

Activity 7.4 **Clarifying Myths and Misconceptions about** **Substance Misuse**

LEARNING OUTCOMES

The learner

- Counters common myths and misconceptions related to substance misuse.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, self-awareness

RESOURCES

- Notebook and pen with each group of students

Guidance to the facilitator

- The objective of this activity is to develop an understanding about factually correct information about substance misuse and taking wise decisions.
- Divide the class into small groups, with each group not having more than 6-8 learners.
- The facilitator reads out the sentences given below one by one and asks the group to discuss for a minute on whether they agree or disagree with the statement. The group reporter makes notes of the response and its reason.
- Give about 2-3 minutes after each statement for this.
- Now read each statement again and invite the group to share their response and its reasons.
- Also ask other teams to add if they have a different reason.
- Share the correct answer and use the explanation below to supplement with accurate information.

There is no harm in trying a drug just once, because one can stop after that.

Almost all drug addicts start by trying just once. Once the drug is taken, the user is always amenable to further drug intake, which becomes a habit over time.

One cigarette a day does not harm anyone.

Every cigarette you smoke is doing you damage. There is no safe level of exposure to tobacco smoke. Even relatively small amounts, damage your blood vessels and make your blood more likely to clot. That damage causes heart attacks, strokes, and even sudden death. Smoking just one to four cigarettes a day doubles your risk of dying from heart disease.

Willpower alone can help a drug addict to stop taking drugs.

Besides a strong willpower, love and support of the family and friends, medical and psychiatric treatment may be required.

Using drugs helps you feel good and relaxed.

Everyone needs to find techniques to cope with stress and difficult feelings. To some, using drugs may seem like a good way to relax and feel good in general. But, especially in the long-term, drug use can have quite a different impact on the well-being of the body and mind, seriously compromising our health and functional capability.

Inhalants are basically harmless even though people make a big deal about them.

Using inhalants such as thinners, glue, cleaning fluids can cause damage to liver, brain, kidney and nervous system. They are also extremely flammable and can cause burns if matches are lit nearby.

Drug use makes one 'cool' and better accepted by peers.

In the beginning, it may seem that use of drugs helps in winning more friends but this is a myth as these are not true friends or well-wishers. Furthermore, over a period of time, drug dependence makes one unsocial and isolated.

There is a legal drinking age in India, but there is no legal smoking age.

There is minimum legal age for both smoking and drinking in India. People under 18 are legally not allowed to smoke. It is even a crime to sell tobacco products to children under 18.

The minimum legal age for drinking alcohol is different in different states of India. In Delhi, it is 25, in Kerala and Meghalaya it is 21, In Himachal Pradesh, it is 18.

Alcohol is not as harmful as other drugs.

Consuming alcohol increases your risk for many deadly diseases, including diseases of the heart (stroke, high blood pressure), the liver (alcoholic hepatitis, cirrhosis), the pancreas (pancreatitis), and more. It also increases your risk of developing certain cancers, such as cancers of the mouth, throat, liver, and breast. Binge drinking (consuming an excessive amount of alcohol within a short period of time) has its own unique dangers. Drinking too much alcohol too quickly can lead to alcohol poisoning, which can kill you.

Reflective question

- How would this accurate information benefit you?

Take-home messages

- There are many misconceptions about drug use amongst children, many of which are perpetuated by the media or peers who are themselves ill-informed.
- It is important that children have the information and skills to manage peer pressure by say 'no' to risky behaviour in a constructive way without harming self.
- Adequate, correct and timely information and skills go a long way in enabling the children to resist the temptation of misusing substances and drugs.

- We should not just inform ourselves but also spread awareness amongst the peers to prevent them from drug abuse that has only, both short and long-term, negative consequences.

Additional suggested activities

- Look around your surroundings – peers, friends, family, media – and identify myths related to substance misuse. Share these in the next class.
- Prepare a role/street play with the other learners on the theme of misconceptions about substance misuse amongst children and young people and how to deal with it. Stage the street theatre in the morning assembly, PTA meeting or another event in your school or community.

Activity 7.5

Accessing Support for Prevention and Treatment: Safety Net

LEARNING OUTCOMES

The learner

- Is able to identify a support system for self and others in case of substance misuse.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, creative thinking

RESOURCES

- Blackboard, chalk, notebooks and pens

Guidance for the facilitators

- A safety net in the context of substance misuse would include individuals and relevant organisations that prevent access to harmful substances and further encourage access for treatment and rehabilitation services, if required.
- Write the term ‘Safety Net’ and highlight that it is related to protecting oneself and others from substance misuse. Now share that a safety net is a web of support systems to prevent and manage any difficult situation and in our discussions today it implies support that we can access to prevent and manage substance misuse.

- Draw the following diagram on the blackboard.
- Ask the learners to identify the names of the people (for example, parents, siblings, best friend, teacher, classmates, neighbour, local doctor, etc.) and institutions (for example, the police station, clinic, gram panchayat, school management committee, etc. that they would want to include in their safety net).
- Give 10 minutes for writing these names in the rectangular boxes.
- Invite 4-5 volunteers to share their safety net with the class.



Points for discussion

- What is the advantage of having a safety net?
- Who are the people who could help you? Include these in your safety net? Which are the institutions that could help you?
- Why have you included these people/institutions in your safety net?

Reflective questions

- Besides substance misuse, can you identify other situations in which a safety net can be used?
- If you get to know that a friend or classmate is experimenting with tobacco, alcohol, as a good friend how would you link your friend to a trusted adult as a safety net?

Take-home messages

- A safety net is both for prevention and management.
- This safety net could include parents, teachers, elders, relatives, friends, counsellors and guides, health professionals or even government services including police, dealing with narcotics or non- government organisations based on the individual's understanding and experiences of support networks.
- Each person should be aware about who all constitute her/his safety net.

Additional suggested activities

- After listening to your peers and seeing their safety net, are there other people or institutions that you would want to include in your safety net? If yes, revise your current safety net.
- Collect information about various laws related to substance abuse/misuse and share in the class.

Activity 7.6 Promoting Tobacco-free Schools

LEARNING OUTCOMES

The learner

- Advocates for tobacco-free schools.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Creative thinking, effective communication

RESOURCES

- Blackboard and chalk

Guidance for the facilitators

Familiarise yourself with the Cigarette and Other Tobacco Products Act, 2003 as shared in the factsheet.

- Share the following key provisions from the Tobacco Control Act:
 - Prohibition of smoking in public places
 - Prohibition of all forms of direct and indirect advertising of all forms of tobacco products
 - Prohibition of sale of any form of tobacco to and by minors (under the age of 18 years)
 - Ban on sale of tobacco products within the radius of 100 yards of educational institutions
 - Specified health warnings on tobacco product packages
- Write the following points on the blackboard and tell the learners to keep them in mind to design an effective campaign. The purpose of the campaign:
 - Why should young people stay away from tobacco?
 - What can be the message for tobacco users?
 - What is their motivation in keeping the school tobacco-free?
- Ask them to identify resources required to develop the campaign and share if they need help in arranging for the resources. They should decide on a date for staging the campaign and seek the principal's approval for it.

Reflective question

- In doing advocacy on tobacco-free schools, what are the challenges that you anticipate? How will you overcome them?

Take-home messages

- Co-create an environment that does not support tobacco use.
- Awareness about the consequences of tobacco use and relevant laws helps in overcoming temptation.

Additional suggested activity

- Ask the learners to draft a petition against use of harmful substances and get it signed by the family and friends in their community and submit it to the school principal.

Fact Sheet

Types and Effects of Substance Misuse

Substances that are misused may be classified according to the effects they have on the central nervous system. Following are some of the groups in which they may be classified. Cannabis has been put as a separate category under the classification of drugs according to the effect they have on the central nervous system. However, cannabis is a hallucinogen and should be placed as such.

Types of Substances and Their Effects

Group	Drugs	Effects on the user
Stimulants	Amphetamines like Benzedrine, Dexedrine and Methedrine, cocaine, nicotine, tobacco, caffeine, gutkha, pan masala	Accelerates the brain (central nervous system). The user may feel alert, full of energy or confident and strong. In higher doses, the stimulants may lead to anxiety or panic. Mental health problems can occur with increasing use. Serious overdose may lead to death. Tobacco is also one of the most addictive substances and contains nicotine. Long-term use may result in cancer of the lungs, mouth, larynx, esophagus, bladder, kidney or pancreas.
Depressants	Alcohol, barbiturates, tranquilisers (sleeping pills), inhalants like glue, petrol, correction ink, heroin	Brain activity slows down. May also have hypnotic effects. At first, the person feels relaxed and less inhibited but slowly the person's reflexes become slower. He or she will have trouble working and doing anything that requires any physical and mental co-ordination. Regular drinking may result in an inflamed stomach or pancreas, cirrhosis of liver, certain cancers of the gastrointestinal tract, heart disease, high blood pressure, brain and nerve damage.

Sedatives	Hypnotic drugs like Mandrax, Doriden	Produces opium like effect and stupor. This group of drugs produces a relaxing, peaceful and happy feeling. In higher doses, they may lead to drowsiness, decreased concentration, nausea, vomiting and sweating. Further increase in the dose may lead to deep sleep, loss of consciousness and even death.
Narcotic/ Analgesics	Opium, Morphine, Codeine, heroin, brown sugar, synthetic drugs like Methadone, Pethidine, Mephadrine	Reduces pain and anxiety. Produces contentment. Higher doses lead to sedation, nausea and unconsciousness. Restlessness, nausea, vomiting and dry mouth may develop. There is a warm feeling in the body and extremities will feel heavy. User will get into a state where the user is in and out of consciousness. Breathing becomes slower. Pupils contract to pinpoints. Skin becomes cold, moist and bluish. Prone to infections from unsterilised needles, including infection of the heart lining and valves, HIV and AIDS, abscesses, liver disease and brain damage. Withdrawal symptoms upon stopping. Overdose potential is high.
Cannabis	Bhang (Marijuana), ganja, charas	Leads to relaxation, drowsiness, talkativeness and later unconsciousness. The person's pulse rate, heart beat and blood pressure rises, eyes become red. Increase in appetite. After a while, the person may become quiet and sleepy. In very large doses, the person may become confused, restless, excited or begin hallucinating. Interest in activities, the ability to learn new information, decreases and problems with memory may develop. Immune system is damaged and the person may develop chronic bronchitis, throat cancer, and heart attack, stroke, and blood pressure.
Hallucinogens	LSD (Lysergic Acid Diethylamide PCP (phencyclidine), Mescaline, Psilocybin, cannabis	Distort the way in which individuals see, hear and feel. Ecstasy's use has been associated with young people who attend 'raves'. In low to moderate doses, it produces a mild intoxication, a strong sense of pleasure and feelings of euphoria, increased sense of sociability or closeness with others, enhanced communication skills and increased energy and confidence. Users may also experience increased sweating, increased blood pressure and heart rate, nausea, grinding of teeth, jaw pain, anxiety or panic attacks, blurred vision, vomiting, insomnia, paranoia and convulsions.

		<p>Higher doses of Ecstasy may intensify the negative effects and may produce a distortion in perception, thinking or memory.</p> <p>There is a potential for strong negative effects and psychiatric complications that may last for days or weeks. It may also cause jaundice and liver damage.</p>
Inhalants	<p>There are a number of substances of everyday use collectively referred to as inhalants. These are volatile solvents. Some are:</p> <p>Paint thinners, degreasers, dry-cleaning fluids, gasoline and glue</p> <p>Correction fluids, felt-tip marker fluid, gases</p> <p>Butane, lighters, whipped cream aerosols, and refrigerant gases</p> <p>Spray paints, hair or deodorant sprays, medical anaesthetic gases, like ether, chloroform and nitrous oxide (laughing gas), nitrites</p> <p>Butyl, and amyl nitrites, commonly known as 'poppers'</p> <p>Video head cleaner, room odouriser</p>	<p>The user experiences a feeling of euphoria that is characterised by lightheadedness, exhilaration and vivid fantasies. It slows down body functions. Acute effect could include drowsiness, impaired motor function, impaired judgment and memory, hallucinations. Damage to the brain can occur even after one use and chronic use can lead to chronic lung diseases and even sudden death. Physical effects such as pallor, thirst, weight loss, nose bleeds, bloodshot eyes and sores on the nose and mouth occur. Mental confusion and fatigue may occur. Depression, irritability, hostility, paranoia may occur.</p>
Tobacco	<p>Various forms of tobacco like: chewing (khaini, gutkha, zarda, etc.), smoking (cigarettes, beedis, cigars, hukkah) or by sniffing</p>	<p>The effect remains from five minutes to two hours. Thus, nicotine addicts are compelled to consume it repeatedly to continue experiencing the effects.</p> <p>Fingers and mouth smell bad on smoking. Chewing tobacco leads to diseases that affect the teeth and mouth, including mouth cancer. Continuous use of tobacco reduces the capacity to sense taste and smell.</p> <p>Smoking tobacco can lead to upper respiratory diseases, lung cancer and heart problems. Smoke from tobacco can also cause these ill-effects in non-smokers exposed to the smoke. This is known as passive smoking and could lead to lung respiratory or heart problems.</p>

<p>Alcohol</p>	<p>Tobacco and alcohol are called gateways to substance misuse. People start with these two and slowly start using other and more dangerous substances. Alcohol slows down the nervous system, which makes people feel they are relaxed.</p>	<p>High intake causes loss of control over speech, bodily movements and vision. Alcohol causes reduced awareness and responsiveness, which can cause accidents and other mishaps. It diminishes cognition and inhibition and can sometimes make the user very aggressive. Long-term alcohol use is extremely harmful for the liver. Drinking alcohol from a young age affects the growing mind and increases the risk of becoming an alcoholic. People addicted to alcohol experience extreme bodily discomfort, irritation and anger in the absence of alcohol.</p>
<p>E-cigarettes</p>	<p>E-cigarettes are tobacco free, but they contain an aerosolised mixture containing flavoured liquids and nicotine that is subsequently inhaled by the users. E-cigarettes contain nicotine, which is a highly addictive substance that has the potential to harm the developing brain of an adolescent or youth.</p>	<p>E-cigarettes act as a gateway increasing the usage among children who have never smoked and thus may be vulnerable to nicotine addiction and subsequently moving to conventional cigarettes. This early exposure to nicotine during adolescence is harmful as it may derange the normal course of brain maturation and have lasting consequences for cognitive ability, mental health, and even personality. E-cigarettes have other emissions such as formaldehydes which are classified as a carcinogen.</p>
<p>Shisha Smoking</p>	<p>Shisha smoking is becoming popular among youth. Shisha is a fruit scented tobacco smoked through an ornate water pipe, sometimes also known as 'hookah', 'narghile' or 'hubble bubble'. It dates back over 500 years and originated across India and the Middle East. Shisha is typically smoked in social settings (cafes and restaurants), where water pipes are passed from person to person and the smoke inhaled.</p>	<p>Shisha also has been associated with a variety of adverse health outcomes, including esophageal cancer, decreased pulmonary function, infertility, low birth weight (in babies born to smokers) elevated blood pressure and heart rate and infectious diseases and physiological dependence.</p>

Consequences of Substance Misuse

Substance misuse leads to a number of short-term and long-term effects that are detrimental to health.

Short-term effects: These are effects that appear only a few minutes after the intake of substance. The user feels a false sense of well-being and a pleasant drowsiness. Some of the short-term effects are distorted vision, hearing and coordination, impaired judgment, bad breath and hangovers.

Long-term effects: Substances have a long-term impact that leads to serious damage due to constant and excessive use. These effects show up over a course of time and are usually caused by progressive damage to different body organs. Substance misuse impairs both physical and mental functioning leading to compromised quality of life. Some of the health consequences include irregular eating habits, poor hygiene resulting in poor health and low immunity. This makes them predisposed to disease and infections.

Substance misuse in itself is not a cause of HIV/AIDS or STDs but under the influence of drugs, people may engage in risk-behaviors that make them more susceptible to these infections. Injectable drug users, however, are more prone to HIV in conditions where the users do not sterilise needles and share needles to inject the drug.

Substance users may even die suddenly from a so-called overdose, when one consumes more than what the body can tolerate. Death may also occur from long-term damage to the organs of the body.

Although substance misuse is harmful at any stage of life, these substances are especially harmful if consumed during pregnancy. These substances are absorbed through blood and as the growing foetus (unborn child) gets nutrition from mother's blood, these substances can reach the foetus and cause harm.

Furthermore, substance misuse influences not only the individual but the family and also the community. The persons who get addicted often lose interest in other activities be it school, job or any other responsibility. As a result, they are not able to take care of their responsibilities and may become a liability for their families and finally the society. Furthermore, it is expensive to buy substances/drugs on a regular basis. Hence, in desperation, addicted individuals may be forced to engage in petty crimes.

The protective factors are categorised as the individual, the family and the environment that enhance one's ability to resist substance misuse. Protective factors include:

- Well-developed personal skills to deal with difficult situations such as ability to analyse situations, take quick decisions, to communicate and negotiate.
- Positive self-esteem, self-concept, academic achievements
- Good personal relationship with people including family members and friends.

- Growing up in a nurturing home with open communication with parents and positive parental support.
- Adequate resources to meet one's physical and emotional needs.
- Cultural norms that discourage substance misuse.
- Well-enforced laws that regulate substance misuse.

Treatment for Substance Misuse

Substance misuse and dependence can be treated by adopting a combination of approaches, which include medication, behavioural changes and health care for physical and psychological symptoms. Professional counseling or drug de-addiction therapy is required to help users overcome addiction. This treatment needs to be administered for an appropriate period of time as per the needs of the person and also in accordance with the severity of the problem.

As there is progress in the treatment, the intensity of treatment decreases and the final part of the treatment entails continuing individual and group support in order to prevent a return to substance use. Full rehabilitation and reintegration requires efforts at all levels of society.

Role of Parents, Teacher and Citizens in Prevention of Drug Abuse

One can keep oneself away from substance misuse. Our socio-cultural environment does not approve it. Attitudes concerning smoking, drinking and other drug misuse are formed, usually during pre-adolescence and early adolescence. Hence, interventions for prevention must begin early. Parents and teachers play decisive roles in helping children cultivate a proper attitude towards drugs and to stay away from drug abuse.

Parents have an important influence on their children. Despite the fact that children today are exposed to various factors, parents continue to be role models for an overwhelming majority of them. Open communication and a close relationship through regular conversations with your child will go a long way in understanding your child and building their self-esteem and self-confidence.

Teachers are also the most influential adults in the lives of children. Teachers should try to share the problems, academic and personal of the learners and guide them on how to handle their problems. Be careful in advising them and try not to make any value judgment on their views and actions.



PROMOTION OF HEALTHY LIFESTYLE

Promoting healthy behaviour among children and taking steps to better protect young people from health risks are critical for the prevention of health problems in adulthood. Non-communicable diseases (NCDs) are one of the biggest public health challenges of the 21st century. NCD-related deaths are increasing, especially in low and middle-income countries and over half are associated with behaviour that begin or are reinforced during adolescence, including tobacco and alcohol use, poor eating habits, and lack of exercise. The skills in the module are to be contextualised as per the developmental needs of the children. It focuses on building self-awareness and critical thinking in the learner. The module helps create awareness in the learner on how lifestyle choices contribute towards long-term health and well-being. It demonstrates how physical activities are important for a healthy lifestyle and how the learner can seek support and services to keep healthy. It demonstrates effective ways to cope with stress and other mental health concerns.

Activity 8.1 **Healthy Life Choices within Our Reach**

LEARNING OUTCOMES

The learner

- Explains how lifestyle choices contribute towards long-term health and well-being.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, critical thinking, problem solving, decision-making

RESOURCES

- Copies of the case studies

Guidance for the facilitators

- Explain that lifestyle includes the behaviour and activities that make up our daily life. This includes the food we eat, what we do in our leisure time, the work we do and interactions with members of our family and community.
- Tell them that several lifestyle diseases depend on the choices or the decisions we make in our daily lives. They are also called non-communicable diseases (NCDs) as they cannot be transmitted from one to another person.
- A factor that increases the chances of developing a disease or injury is called a risk factor. For example,
 - lack of exercise or physical activity and poor diet can lead to obesity,
 - unmanaged stress can lead to anxiety and depression, and
 - smoking or chewing tobacco can lead to respiratory illnesses or cancers.
- Divide the learners into four groups of 7-10 members each.
- Distribute one case study each to the group and give them 10 minutes to discuss it.
- Write the following discussion questions on the blackboard:
 - Is this a healthy choice/healthy behaviour? Why do you think so?
 - What could be the possible consequences of this choice?
 - Can this choice/behaviour be modified? How can it be modified?
 - Who can be helpful in this process?

Case Study 1

Rita gets home cooked food but leaves her tiffin uneaten most of the time. She either skips meals or buys samosas, pakoras, kachori, poori-sabji from a nearby stall.

Case Study 2

Manoj is very impressed by the hero in a film he saw recently. After smoking a couple of cigarettes, the hero succeeds without much effort at anything he tries. Manoj thinks that smoking cigarettes may be an easy way to success and buys cigarettes from the cash gift he got from a relative.

Case Study 3

Zakir and Shama are siblings. After completing their homework, their mother asks them to relax for an hour. Shama quickly takes out her bicycle and goes for a ride, while Zakir stays back in the house and plays a video game.

Case Study 4

Janet, a Class VIII student, is very good at studies and she wants to top her class in every exam. Her final exams are approaching and she concentrates only on her studies. Often, she skips her meals thinking that she will lose precious time for studies. She also refrains from going out to play with her friends

- Invite each group to share their responses on the discussion questions with the entire class.
- Write the main points of the discussion on the blackboard.
- Tell them that as reflected in the case studies, we make unhealthy choices due to several reasons, such as feeling lazy or tempted, lack of correct information, influence of media, peers, pressure to perform, become popular etc. But, these unhealthy choices have both short and long-term negative consequences.

Take-home messages

- Healthy lifestyle choices like regular physical activity, NO to high sugar, high salt and fatty foods, NO to tobacco use and alcohol misuse help in reducing the risk factors for non-communicable diseases.
- Although factors like age, sex and family history are beyond our control, healthy lifestyle choices help in preventing or delaying the onset of NCDs and decreasing their severity.
- Highlight that lifestyle diseases or NCDs are closely associated with behaviour. Hence, monitoring our own



lifestyle choices will ensure a healthy and more productive adulthood.

- It is a well-known fact that establishing healthy behaviour during childhood is easier and more effective than trying to change unhealthy behaviour during adulthood.
- The more risk factors one has, the higher are the chances of getting a disease.
- Food choices, physical activity options, managing stress, misuse of substances are modifiable risk factors. Hence, we can make conscious choices to stay healthy. But, factors like age, genetics are beyond our control and are non-modifiable risk factors.
- Tell them that being aware of one's choices and differentiating between healthy and unhealthy choices is the first step in promoting a healthy lifestyle.
- Also, encourage them to seek help from friends, parents, teachers, trusted adults, as and when needed, to modify unhealthy behaviour and also be prepared to help others.

Reflective question

- Why is it important to make healthy choices during adolescence?

Additional suggested activities

- Tell the learners to identify one unhealthy habit that they would like to modify and develop a plan to change it.
- The learners could identify one unhealthy habit of a sibling or friend and motivate them to change it.

Activity 8.2 **Jump Forward and Race with pace**

LEARNING OUTCOMES

The learner

- Demonstrates how physical activities are important for a healthy lifestyle.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

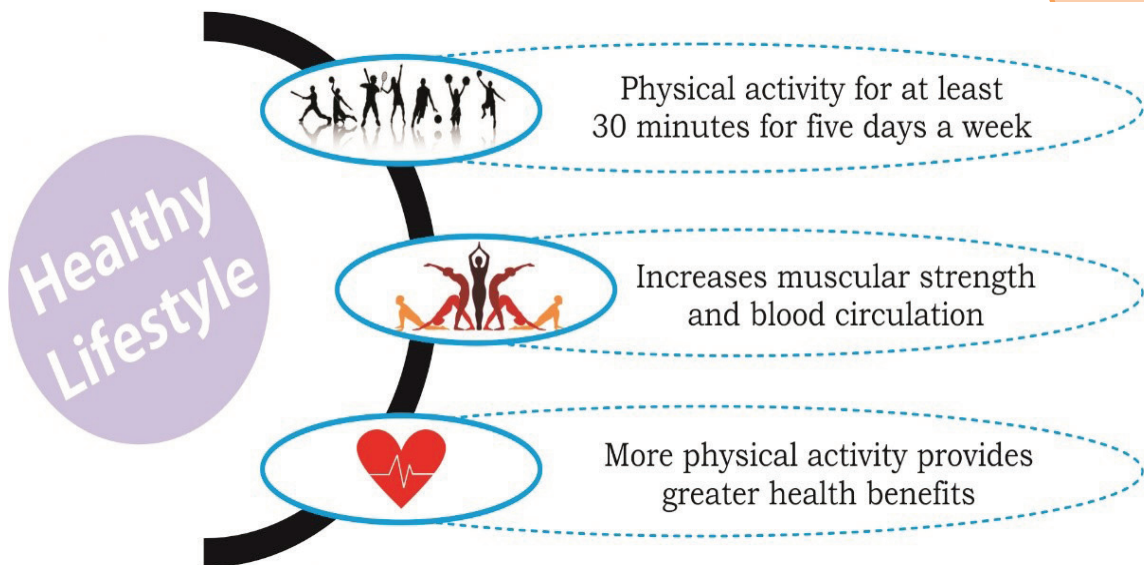
- Self-awareness, critical thinking, problem solving, decision-making

RESOURCES

- Open space/playground, school bags

Guidance for the facilitator

Inform the learners about the guidelines for physical activity and sedentary habits.



Sedentary Behaviour Guidelines



Limiting recreational screen time to not more than two hours a day. Lower levels are associated with additional health benefits.

For health benefits, children should minimise sedentary time each day.



Limiting sedentary transport, extended sitting and time spent indoors throughout the day.

Introduce the activity to the learners and lead a discussion on:

- Advantages of being physically active
- Various forms of physical activities/exercises/games and sports, they can think of
- The amount of time the learners spend on outdoor games
- Reasons why they are not able to include physical activities/exercises in their daily routine
- Steps one can take to include physical activities in their daily routine
- Divide the class into groups of 8-10 learners each.

- The learners will participate in a race (as in a sack race) with their school bag on their backs.
- After all the groups have run, the learners will rest for 15 minutes.
- Now ask the learners to jump again but without the bags on their back this time.
- After all the groups have completed the race, gather all the groups together and ask them to share their experience in both the variations of the race.
- Explain that it was easier without the weight on their back.
- Explain that being overweight not only hampers daily activities but it is also a risk factor for conditions like diabetes, hypertension and cardiovascular diseases.
- It is important to maintain an ideal weight as per the age.

Take-home messages

- There are many benefits of exercise such as:

Physical benefits

- It helps your bones and muscles grow and develop.
- It helps one to remain (or become) fit and trim.

Mental benefits

- It helps build self-confidence and self-esteem.
- It helps one to study and work better.
- It helps to calm down when one is anxious, sad or angry.

Social benefits

- It helps to meet people and develop a sense of camaraderie.
- It also helps one to cooperate with members of the team, and deal with both victory and defeat. Thus it is important that we make exercise a routine in our daily lives!
- Good health is not about not being ill. It is about adopting a healthy lifestyle and leading a healthy stress-free life. Eating well and physical exercise are both important to maintain good health and fitness.
- Overeating or unhealthy eating without physical exercise can cause overweight and obesity.
- Physical activities like exercises, yoga, dance, martial arts, outdoor games like cricket, badminton, kho-kho, football, basketball, etc. help us build stamina, fight fatigue and obesity and support the growth of bones and muscles.
- Yoga and meditation have both gained much importance in the past years as they promote health by improving the control of mind and body for the overall well-being of a person.

(See *Teacher's Guide on Health and Physical Education* for Classes VI, VII, VIII and textbook for Class IX)

Reflective questions

- Ask the learners to have a discussion with their grandparents and parents and find out what games they played, how they travelled to reach school and compare it with their own (the learners).
- What has changed?
- Has the level of activity increased or decreased? How does it affect health?

Additional suggested activity

- Choose a physical activity that fits into the daily routine and practice it. For example, walking to school, market, friend's house, etc. and exercise at home or during leisure.

Activity 8.3 **Choose Well: Do Well**

LEARNING OUTCOMES

The learner

- Seeks support and services

Time Required

- One period

Life Skills Enhanced

- Self-awareness, critical thinking, problem solving, decision-making

Resources

- Copies of the matrix on the list of activities

Guidance to the facilitators

- The aim of this activity is to emphasise that several lifestyle diseases can be prevented if we practice healthy choices.
- Tell the learner that they will be given a schedule of a day in Somu's life and the learners have to individually do an analysis of his healthy and unhealthy choices.
- Now hand over the copy of the matrix with statements provided below to each learner OR draw the matrix on the blackboard.

SOMU'S DAY

Time	Activity	Healthy Choice (Yes/No)
06:30 hours	Got up, felt lazy, slept again and missed yoga session with grandmother	
07:15 hours	Had multigrain bread, milk and bananas for breakfast	
07:30 hours	Picked some betel nuts from grandmother's room and walked to school	
10:45 hours	During recess, purchased a burger from the school canteen	
11:00 hours	Before entering the classroom, chewed betel nuts	
12:00 hours	Ate home cooked food during lunch recess	
14:30 hours	Came home walking	
14:45 hours	The lunch was not interesting, so prepared instant food for lunch	
15:30 hours	Started completing homework (did only half)	
16:30 hours	Went out to play with friends	
17:30 hours	Told mother that he had an argument with his friend Rahul at school and was feeling bad. Mother heard him patiently and Somu realised his mistake. He called Rahul and apologised.	
18:00 hours	Sat with father and grandmother and watched television	
19:00 hours	Went to his room and started playing video games	
20:00 hours	Had dinner with the family	
21:00 hours	Continued with video games	
23:00 hours	Tried finishing the homework but was feeling very tired and slept off before completing the homework	

- Write the following Discussion questions on the blackboard:
 - What healthy and unhealthy behaviour are depicted in the time slot/activities?
 - What could be the possible consequences of the unhealthy behaviour?
 - How can Somu change the unhealthy choices into healthy choices and healthy choices into a habit?
 - What help/support can Somu seek to change the unhealthy choices?

Take-home messages

- It is possible to give up unhealthy habits.
- To support your efforts, it is important to seek help of others when you are trying to change a habit.
- Adolescence being a stage when lifelong habits are being formed, it is important that conscious efforts are made to inculcate and practice healthy choices.

Additional suggested activity

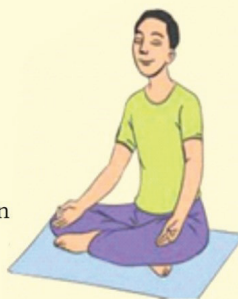
- Ask the learners to write on a sheet of paper their routine during a typical day using the same format as Somu's. Ask them to put a time in front of each activity. Analyse whether their choices are healthy or unhealthy.

Yoga

Yoga is a popular form of physical exercise based upon *asanas* (Physical postures), breathing techniques and meditation

Health Benefits of Yoga

- Improves balance and flexibility.
- Increase muscular strength and blood circulation.
- Improves breathing.
- Reduces lower back pain.
- In addition to taking regular medicine, yoga can help in the management of diabetes, respiratory/breathing disorders, and other lifestyle related disorders.
- It helps to reduce depression, tiredness, anxiety/nervousness disorders and stress.



Activity 8.4

Risk Factors for Non-communicable Diseases

LEARNING OUTCOMES

The learner

- Explains how lifestyle contributes towards long-term health and well-being

Time Required

- One period

Life Skills Enhanced

- Self-awareness, critical thinking, problem solving, decision-making

Resources

- The print out of the cartoon images

Guidance for the facilitators

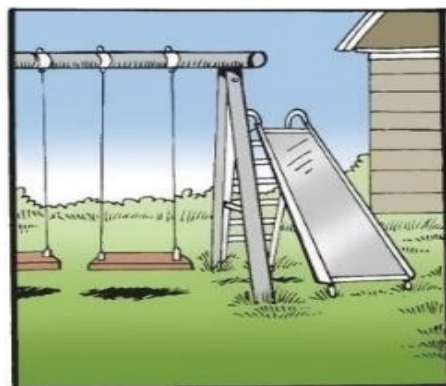
- Promoting healthy behaviour from childhood to adolescence and taking steps to better protect them from health risks are critical for the prevention of health problems in adulthood. Non-communicable diseases (NCDs) are one of the biggest public health challenges of the 21st century.
- Show the learners the set of cartoons to initiate the discussion on how life around has changed over the years.



dinner then:



dinner now:



PLAYGROUND,
1967



PLAYGROUND,
2011

Courtesy: <https://www.architecturendesign.net/funny-illustrations-proving-the-world-has-changed-for-the-worse/>

Points for discussion

- What do you see in these cartoons?
- Why do you think this is happening?
- Have you seen it around in your surroundings? Give examples.
- Do you think it is a problem?
- How can it be addressed?

Take-home messages

- Based on the responses from the learners, summarise how mechanisation, mobility, use of substances, etc. have reduced the level of physical activity, changed our eating habits and our socialisation patterns.
- Highlight that engaging in regular physical activity, abstaining from substance misuse and managing stress are some factors that could help prevent and manage NCDs such as heart disease, stroke and diabetes. It also helps prevent hypertension, overweight and obesity and can improve mental health and quality of life.
- Physical activities like exercises, yoga, dance, martial arts, outdoor games like cricket, badminton, kho-kho, football, basketball, etc., help us build stamina, fight fatigue, stress and obesity. Physical activities support the growth of bones and muscles.
- Yoga and meditation both have gained much importance in the past years as they promote health by improving the control of mind and body for the overall well-being of a person.

Reflective questions

- What measures can be taken by children:
 - to make healthy choices at a personal level?
 - to mitigate the effects of mechanisation and improve health at the family level?
 - to abstain from using substances?
 - to manage stress effectively?

Additional suggested activities

- Organise weekly sports events like race, volleyball, football, basketball, cricket involving your friends and other members in the community.
- Organise a health camp in your community. Talk to the AFHC counsellor or RBSK doctor and plan it.

Activity 8.5 My Habits and My Health

LEARNING OUTCOMES

The learner

- Adopts a healthy lifestyle (diet, yoga, manage stress) for a healthy body and mind.
- Identifies symptoms to prompt screening and seeks health care services for self and others.

Time Required

- One period

Life Skills Enhanced

- Self-awareness, critical thinking, problem solving, decision-making

Guidance for the facilitator

- The facilitator should not give any opinion during the exercise or even later and should avoid any expression. Such expressions create inhibitions or barriers among the learners, if they have an opinion different from what is being appreciated or expressed by you.
- Tell the learners that they will hear a story. Narrate the story or call a volunteer to read out the story to the class.

Case Stud 1

Sujoy is a 14-year-old boy and is fond of packaged snacks like chips and aerated drinks. He also likes sweets. He is very careless towards his studies and most of the time watches television and plays online games on his computer till late in the night. Due to this habit of keeping late hours, his sleep is disturbed, thereby affecting his health and studies. He is now getting concerned as his exams are just round the corner. Worried that he might get low grades, he has stopped playing sports in school and home and doesn't meet with his friends too. He tries hard to concentrate while studying but he often drifts to playing online games. To overcome his stress, he has started smoking cigarettes.

- After hearing the story, discuss the following in plenary:
 - What are Sujoy's problems?
 - Who can help Sujoy and how?

(Potential answers: Sujoy himself, parents, teachers, friends, seeking help from school counsellor, referral to AFHC)

Take-home messages

- Tell the class that there may be a Sujoy in all of us in different degrees.
- Good health is not only about protecting ourselves from diseases, it is about adopting a healthy lifestyle and leading a healthy stress-free life. Eating well and physical exercise are both important to maintain good health and fitness.
- It is important to recognise healthy lifestyle choices and practice them in our daily lives.
- We should also be willing to identify some of our unhealthy habits and try to change them.
- We should be willing to seek support and also extend support as needed.

Reflective question

- What can motivate us to continue to practice healthy behaviour?

Additional suggested activity

- Sehatwala Sunday: Try out a healthy recipe for any meal at home. You can try salads with sprouted dal, it could be a green leafy vegetable preparation or a poshtik paratha (combination of cereal and millets with green leafy vegetables).

Fact Sheet

1. *What is a Non Communicable Disease (NCD)?*

You must have heard in your family or community that people complain of having high blood pressure or high blood sugar or suffering from cancer. More and more people are affected by diseases like heart attacks and stroke, cancer, asthma and breathing difficulty, mental disorder injuries, kidney, liver and other problems. These diseases are called Non-Communicable Diseases (NCDs).

2. *Why are NCDs being given such a high priority?*

NCDs are diseases of long duration. These are non-infectious conditions that cannot be transmitted to other individuals. Some NCDs progress slowly or cause chronic symptoms requiring long-term care and control while others progress rapidly. They affect adult men and women but children are vulnerable as well. People may appear healthy but still suffer from these conditions. One of the most serious concerns about NCDs is that they affect people in the productive years of their life. They also cause 'premature deaths'—that is, a death occurring before the average life expectancy. These diseases are chronic in nature and after they set in, have to be managed throughout life. This increases the burden on the health system and on the person it affects.

3. Are NCDs increasing? If so, then why?

Over the past few years, an increase in deaths and illnesses due to NCDs has been noticed. Some of the reasons attributable to this are:

- People moving from rural areas to urban areas and making changes in lifestyles related to diet, exercise and other behaviour;
- Decrease in physical activity due to mechanisation (vehicle, machines);
- Lack of adequate, safe spaces for regular exercise;
- Availability and use of tobacco and alcohol for all age groups;
- Increased use of foods high in fats, salt, sugar and sugar sweetened beverages;
- Low consumption of fruits and vegetables because of high costs/lower availability;
- Increased consumption of refined foods (foods that are available in packaged form); and
- Growing environmental pollution (air, food, water).

4. How can one prevent NCDs?

A healthy lifestyle is one, which helps to improve a person's health and well-being. Healthy living includes healthy eating, physical activities, good personal hygiene, weight management, stress management, avoiding tobacco, drugs, and the harmful use of alcohol.

5. Healthy lifestyle is associated with

- Health awareness
- Work safety
- Living in safe environments
- Good nutrition
- Adequate sleeping patterns
- Physical fitness and regular exercise
- Absence of addiction
- Good personal hygiene
- Positive social communication

6. Non-communicable Diseases

Many NCDs are associated with behaviour that are established during adolescence, including harmful use of alcohol, tobacco use, sedentary lifestyle, and an unhealthy diet. Researchers estimate that 70 per cent of premature deaths among adults can be linked back to a behaviour that started in the adolescence. Interventions aimed at reducing the burden of NCDs, therefore, include addressing risk factors during adolescence.

Interventions on NCD Focusing on Adolescent Children

Best period to begin	Factors influencing	Interventions needed	Policies
Adolescence is the last best opportunity to build positive health habits and limit harmful ones	Adolescence is a time when the influence of peers is extremely important	To lower the likelihood of youth smoking and chewing tobacco, protect against alcohol use, and support healthy diet and physical activity.	Some of the most cost-effective strategies to combat tobacco use and harmful use of alcohol include raising taxes and enforcing bans on advertising especially targeted to children in adolescence age. For example, The Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003 or COTPA, 2003.
Unless preventive measures are initiated from adolescence, habits are very hard to change once they get established as a lifestyle.	Parental influence of being a role model for healthy or unhealthy lifestyles, is the maximum during this period	Communities must also work together to promote physical activity and healthy eating habits based on cultural appropriateness, especially within schools	Promotion of what constitutes a healthy diet and the appropriate amount of physical activity, specifically 30 minutes a day for children, is important. For example, the Raahgiri programme, started in many parts of India.
Some risks, such as, poor nutrition begin in childhood and are a clear precursor for later health problems	Media influences and the targeted marketing of unhealthy products and lifestyles for adolescents are on the rise	Sensitisation about healthy food choices, regular food timings, schedule for physical activities. Orientation to adverse effects of tobacco, alcohol, drugs. Healthy canteens	National and local governments can do more to ensure their communities are eating healthier by encouraging clear food labels; managing food taxes and subsidies; promoting healthy eating in schools and workplaces; restricting marketing of junk food and sugary beverages to children; and providing incentives for the food industry to prepare foods with less sodium, trans-fat and saturated fat. For example, the sale of carbonated drinks is prohibited in school and college canteens in Kerala.

Guidelines on the sale of high in fat, salt and sugar (HFSS) foods and non-standardised or proprietary foods in school canteens or in the vicinity of schools by private vendors

- Ban the sale of all HFSS foods in school canteens. Private vendors and street vendors should not be allowed to sell HFSS foods during the school timings (7 a.m. to 4.00 p.m.) within a vicinity of 200 meters.

- Shops and restaurants selling proprietary foods within a vicinity of 200 meters of a school should not be permitted to sell these foods to school children in uniform.
- In school canteens, non-standardised proprietary foods, can be categorised, based on a colour coded concept according to its nutritional value as fol



The green category (with a green flag), which is always on the menu, for example, vegetables and legumes, fruits, grain (cereal) foods; mostly whole grain, lean meat, egg, fish, etc., low or reduced fat milk, soy drinks and water.



The yellow category (with a yellow flag), for example, baked vegetable based snacks, ice creams, milk-based ices, dairy desserts, etc.



The orange category, which is not recommended on the canteen menu, for example, all confectionary items, energy drinks, carbonated and sweetened beverages, fried, packaged and non-packaged foods, chocolates, potato fries, etc., and should not be sold in school canteens.

- Use of hydrogenated oils should be totally banned in school canteens and use of oils high in saturated fats should be limited in the schools for preparing any food item to be served to the children. Use of blended oils and those high in monounsaturated fatty acid/polyunsaturated fatty acid oils, such as mustard oil, rice bran oil, soya bean oil, sunflower oil, etc., should be encouraged.
- Setting up of a school canteen management committee for making available quality and safe food in schools, where the learners/head boys/head girls/school monitors/prefects, should be involved to ensure strict implementation of the guidelines.
- The school management committee should make appropriate arrangements for the display of contact numbers of doctors/ medical officers, who can be contacted for any health related emergency at various important places such as notice boards, first-aid room, labs, canteen, etc.
- This stressful environment along with the availability of HFSS foods in school canteens becomes a dangerous combination resulting in serious psychological consequences, which can have a long-term impact on the health and life of children. All school going children spend 6-7 hours of their time every day in a learning environment.

Policies and legislation

- Policies and legislation to protect children from harmful substances such as tobacco, alcohol and foods containing high levels of saturated fats, trans-fats, sugar and salt, are the cornerstones of national programmes to respect and fulfill a child's rights and prevent behaviour that increases the risk of NCDs.



REPRODUCTIVE HEALTH AND HIV PREVENTION

The content emphasises on developing awareness on symptoms and ways to prevent Reproductive Tract Infections (RTIs) and ways to maintain personal hygiene. It focuses on making the learners demonstrate comfort in sharing concerns about their reproductive health and in accessing services without shame and guilt. It explains the importance of respectful relationships between partners, consequences of adolescent pregnancy and ways to avoid it and services that adolescent children can access for positive reproductive health. The knowledge is built on the meaning of HIV and AIDS, transmission modes, symptoms, prevention and its management. The module lays emphasis on the learner understanding the vulnerability of adolescents and women to HIV, services for testing counselling and treatment of HIV-AIDS, ways to protect self and others from HIV and countering myths and misconceptions related to it. Through case studies, it enhances the skills of decision-making, empathy and effective communication in the learners.

Activity 9.1 Personal Hygiene and RTIs

LEARNING OUTCOMES

The learner

- Explains the symptoms and ways to prevent RTIs
- Describes ways to maintain genital hygiene.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, decision-making, effective communication
Resources

RESOURCES

- Print outs of case studies

Guidance for the facilitators

- Children often feel ashamed in sharing their reproductive health concerns with anyone. This activity intends to equip the learners to be able to identify symptoms of RTIs and encourage them to seek help.
- Care should be taken, to not compel the learners to write about the experiences of growing up. You may discuss the same personally keeping their sensitivity in mind.
- While transacting the module, confidence building among the learners, should be constantly on.
- Write Reproductive Tract Infection on the board and explain:
 - RTI affects both women and men.
 - RTI can be caused due to many reasons including lack of personal hygiene or imbalance of normal bacteria in the reproductive tract, or risky sexual behaviour.
 - Untreated RTIs can become chronic and be the cause of serious complications.
- Explain that the awareness of such infections and treatment is often lacking amongst girls and boys because of social taboos. Emphasise that this is a safe space to express openly and asks questions.
- Divide the participants into small groups with five to six learners in each group.
- Give each group a photocopy of the case study and tell them that this case is around RTIs. Ask them to discuss the questions given below. If there are more students in the class, more than one group will get the same case study.
- After 10 minutes ask each group to present the discussion to the larger group.

Case Study 1

John studies in Class VIII. For the last few days, he has been having persistent itching in his private area. He also notices blisters there. This makes him a little apprehensive. When John asks his elder brother to guide him, he makes fun of him and asks him to visit the 'quack' (unqualified practitioner), who sits in a tent in the market.

Points for discussion

1. What do you think is happening to John?
2. What do you think about John's elder brother's response (making fun of John and suggesting that he visit the quack)?
3. What could John have done to prevent the persistent itching?
4. What should John do to resolve his problem now?

Case Study 2

Nisha is not careful about practicing personal hygiene. Over a period of time, she has developed rashes in her private area and experiences a lot of itching. She is feeling very uncomfortable but is not able to share her problem with anyone. She is not sure who she can talk to about her problem.

Points for discussion

1. What do you think is happening to Nisha?
2. What could be the reasons for Nisha's reluctance to share her problem?
3. What could Nisha have done to prevent the rashes and itching?
4. What can Nisha do to resolve her problem?

Case Study 3

Kalai has been feeling uncomfortable for some days now. About 10 days back he had noticed painful blisters around different parts of his body. He could not discuss it with anyone and the pain has been increasing and so is his discomfort. He feels he should get it checked but is not sure where to go.

Points for discussion

1. What do you think is happening to Kalai?
2. What could be the reasons for Kalai's reluctance to share his problem?
3. What could Kalai have done to prevent the painful blisters?
4. What can Kalai do to resolve his problem?

Take-home messages

After the presentations and discussions:

- not to neglect any discomfort or abnormality associated with different parts of their body.
- most RTIs are easily treated and cured, if diagnosed early.
- maintaining personal hygiene is the most important way to prevent RTIs. If any RTI symptoms occur, there is nothing to be ashamed about and immediate medical help should be sought from a qualified doctor.
- that RTIs can be treated with medicines. It is important to complete the prescribed dosage even if the symptoms improve.
- to follow the healthy personal hygiene practices as mentioned earlier
- remind the learners once again about the services that are available, which they can access in case of RTI.

- Public health facilities or any qualified doctor. ASHA, ANM (nurse didi), or anganwadi didi can be approached and they will refer them to a doctor.
- For information, they can also call helpline number 104 and speak to a counsellor. Counsellors at AFHCs (within public health facilities) may give useful information and refer to a doctor.

Reflective questions

- What are the common symptoms of RTIs?
- How can RTIs be prevented?
- Who can adolescents approach in case they notice symptoms of RTIs?
- What medical services can people access for the treatment of RTI?

Additional suggested activities

- Introduce the Learning Wall or Wall Mural activity. They may put up articles, posters, advertisements from different sources on the Learning Wall or Wall Mural. To begin with, ask the learners to use their creativity to make posters, leaflets, and infographics on RTI: symptoms, preventive measures and services.

Activity 9.2 Talking About HIV

LEARNING OUTCOMES

The learner

- Explains the meaning of HIV
- Explains the impact of HIV on the immune system
- Explains ways of testing for HIV and AIDS

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, creative thinking

RESOURCES

- Papers, tape/pins, pen, chalk and blackboard

Guidance for the facilitators

- The purpose of this activity is to create a basic understanding about HIV and AIDS.

- Start the session by asking “Have you ever heard the word ‘HIV’ or ‘AIDS’ before?”
- Share that lack of awareness about this infection makes people more vulnerable. Next, write H – I – V on the board and ask the learners if anyone knows the full form of this term. Explain each of the three letters while writing it on board.
 - H – Human: anybody
 - I – Immunodeficiency: reduced capacity to fight infections and diseases
 - V – Virus: micro-organism able to cause diseases
- Next, write AIDS and ask the full form of this term. Explain each of the four letters.
 - A – Acquired: not genetically inherited but transmitted from an infected person
 - I – Immuno: refers to the body’s immune system or capacity to fight infections
 - D – Deficiency
 - S – Syndrome: a group of related symptoms, which consistently occur together

Explain: AIDS is the condition of a weakened immune system of the body, caused by the HIV virus.

- Ask all the learners to stand in a circle. In case the size of the class is large, invite 10-12 learners to play the game and the remaining could observe it.
- Ask three volunteers to step aside. Give a piece of paper to each one. One volunteer should be the ‘body’, another volunteer should be ‘HIV’, and the third volunteer should be ‘pneumonia’.
- Ask the volunteer with the chit ‘body’ to stand in the centre of the room. Stick the post-it/paper label with the word ‘body’ on the volunteer.
- Ask the remaining participants to form a tight circle around the volunteer. The participants forming the circle should be standing shoulder to shoulder. Stick a post-it/paper label with the word Immunity, on one of these participants. Then, have the following discussion with the participants.
- Next, ask the participant with the ‘pneumonia’ post-it to try and enter the circle and touch the ‘body’. Instruct the participants forming the circle (Immunity) that they have to stop the ‘pneumonia’ virus from entering the circle. Say, “It was not possible for the pneumonia virus to reach the body because of the circle of protection formed by immunity.”
- Ask the volunteer playing ‘HIV’ to come forward and touch ‘immunity’, which will step out of the circle. HIV has weakened the immune system of the body so it is easier for other infections to attack the body.

Modes of HIV Transmission

- Unprotected physical relation with an HIV infected person
- Using and sharing infected or contaminated needles/ syringes/injections/blades
- Transfusion of HIV contaminated blood
- From an HIV+ woman to her unborn baby during pregnancy, during birth

Testing of HIV

- HIV infection may not have any visible symptoms and the only way to confirm the presence of HIV in the body is through HIV testing.
- The most common blood tests to detect HIV infection are ELISA and Western blot. These tests pick up HIV antibodies, which develop only after 8-12 weeks of getting the infection. Hence the tests conducted within 8-12 weeks (also known as 'window period') of contracting HIV may not show accurate results.

Reflective questions

- What is the impact of HIV on the immune system?
- What are the four modes of transmission of HIV infection and how can we protect ourselves from these?

Take-home messages

- HIV is a virus, which damages the immune system of the body.
- A weak immune system is not able to protect the body from various infections.
- AIDS is the condition of weakened immune system of the body caused by the HIV virus. As a result, the infected person falls prey to different infections.
- HIV can spread through physical relations with an infected person, use of HIV infected injections, transfusion of HIV contaminated blood or from HIV positive mother to her child. Avoiding these can prevent HIV infection.
- HIV infection is preventable, and each person has the right to protect themselves against HIV.
- HIV does not discriminate. It can infect people from any background, age or gender.

Additional suggested activity

- Collect more information about the spread of HIV and AIDS in India and creatively present your learning on the wall. You can also collect newspaper articles and advertisements on this theme and put them up on the Learning Wall.

Activity 9.3

Vulnerability of Women and Adolescents to HIV

LEARNING OUTCOMES

The learner

- Explains vulnerability of adolescents and women to HIV
- Describes the services for testing, counselling and treatment of HIV and AIDS.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, self-awareness, empathy

RESOURCES

- Question box, case studies, blackboard and chalk

Guidance for the facilitator

- This activity talks about how young people's risky behaviour, makes them more vulnerable to STIs including HIV. It is important to do a quick recall of STIs and HIV with the learners before initiating this activity.
- Inform the learners that in this activity we will talk about some risky behaviour that can make young people/ adolescents susceptible to STIs including HIV.
- Divide the learners into small groups having not more than 5-6 members in each group. There are four case studies given in this exercise.
- Sum up the key messages from Case Studies 1 and 2 using Summation 1: Vulnerability of adolescents to HIV, to highlight some important points.
- Sum up the key messages from Case Studies 3, 4 and 5 using Summation 2: Vulnerability of girls and women to HIV

Case Study 1

Seventeen-year-old, Sumitra is in Class XI. She did very well in her Class X board exams. She also bagged the 'Soulful Singing' award last year. She was a strong team player in the school's kho-kho team. She was recognised and respected at home and in school. Her classmates nominated her as the Class Representative. Sumitra is happy to be at the centre of so much appreciation. However, recently, she feels bogged down by the weight of so many expectations from everyone. When she tries to refuse something that she feels she does not have the time or energy to handle,

someone always says, “Come on Sumitra, you can do it! We are banking on you!” She does not know who to confide in and is much stressed. She comes across an advertisement promising a ‘magic injectable drug’ that increases energy and stamina several fold. Sumitra is very tempted to try it out and meet everyone’s expectations.

Points for discussion

1. Will the ‘magic injectable drug’ help Sumitra resolve her problems?
2. What are the possible risks for Sumitra in this case, especially in the context of HIV?
3. What advice would you give Sumitra as a friend?

Case Study 2

Fifteen-year-old Ravi is troubled by his parents’ arguments at home. His parents do not spend much time with him and he feels neglected and ignored. As a result, he stays out of the house for long hours. He hangs out with a group of older boys who engage in risky behaviour. Ravi at times feels a little uneasy with their behaviour. However, he feels that his parents do not care and he has no other friends. He continues spending time with the older boys. One day, this group decides to visit a sex worker. Ravi is uncomfortable but not able to think for himself, Ravi decides to go along with them.

Points for discussion

1. What made Ravi go along with the older boys?
2. Will Ravi’s behaviour solve his problems? Please give reasons for your response.
3. What are the possible risks for Ravi in this case, especially in the context of HIV?
4. What advice would you give Ravi as a friend?

Summation 1: Vulnerability of adolescents to HIV

- Engaging in risky behaviour such as experimenting with harmful drugs or risky sexual behaviour is no solution to any problem. In fact, this behaviour will further increase the problems.
- Young people may be afraid to find out their HIV status due to fear of exposure of their activities that are unlawful/unacceptable. Ignorance of HIV status may further spread HIV.

Case Study 3

Rita is 25 years old and wants to get married. After searching for a suitable partner, Rita and her parents identify Rohit as her future husband. Her parents do a lot of background check about Rohit, by talking to colleagues at work, neighbours, finding out family connections etc. and are satisfied with the information they obtain. During these discussions, Rita remembers her HIV class in school and wants to ensure there is no such risk with Rohit. She asks her parents to get Rohit's HIV test report as well. Her parents are a little surprised by the unusual request.

Points for discussion

1. What do you think about Rita's request for Rohit's HIV report?
2. Should Rita or her parents be offended if Rohit asks for Rita's HIV report?
3. Do you think a potential partner's HIV report would be useful? Why/why not?

Summation 2: Vulnerability of women to HIV

After the presentations, highlight the following facts about why girls and women are more vulnerable to HIV.

- Male to female transmission of HIV is more prevalent because female private parts are more susceptible to infection.
- Social and economic factors (lack of education, low self-esteem and economic dependence) also are the cause for women's vulnerability since she may not be able to negotiate with partners about physical relations decisions.
- They also have the right to ask a person she is marrying, to do an HIV test and show her the report.

Information about the services available for testing, counselling and treatment of HIV and AIDS as below:

HIV testing and counselling services

- Integrated Counselling and Testing Centre (ICTC) offers free of cost confidential HIV testing and counselling services at public health facilities.
- These centres have the provision for pre-test and post result counseling.

HIV-AIDS treatment services

- Anti-retroviral therapy (ART) is a legal right of HIV/AIDS patient.
- ART is available free-of-cost at government hospitals, in the ART centres.

- ART centers are in medical colleges, district hospitals and non-profit charitable institutions providing care, support, counselling and treatment services.

Reflective questions

- What can one do to prevent HIV infection?
- What are ICTC? What are ART centres and where are they located?

Take-home messages

- Young people may practice behaviour that put them at risk of contracting HIV. For example, physical relations with multiple persons, trying harmful injectable drugs in their quest to try out new things, under pressure to perform, to get over a stressful situation, under the influence of peers, etc.
- Anyone can easily avoid contracting HIV if they have accurate information about its transmission and the skills to abstain from risky behaviour and assert themselves.
- There are many services for HIV testing, counselling and treatment including the ICTCs, ART Centre, helpline 1097, and support groups. These services provide medical services and counselling and maintain confidentiality.

Additional suggested activities

- Tell each of them to make their own pledge and mention top three actions that they can undertake to protect themselves and their peers from HIV.
- Ask the learners to collect information about the nearest ICTC and ART Centre in their area.

Activity 9.4 Quiz on HIV

LEARNING OUTCOMES

The learner

- Explains ways to protect self and others from HIV.
- Counters myths and misconceptions related to HIV and AIDS.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Self-awareness, critical thinking

RESOURCES

- Blackboard and chalk, question box, some sweets for the winning team (optional)

Guidance for the facilitators

- Tell them that they have learned a lot about HIV and AIDS and this activity is an opportunity for them to assess their knowledge on this topic.
- Divide the students into groups of 4-6 each.
- Maintain team scoring on the blackboard while conducting the quiz.
- Read out the statements in the first column and ask them for the correct answer. Give them points for the correct answer but ask them to give reasons for their answer. (The reasons may not be scored as a lot of the content may be new for the learners).
- For each correct answer give 10 points, for answers that have been passed +5, and for incorrect answers 0. You can have 2-3 rounds of questions using the table provided below. After completing the second round of questions, do a tally of the score, and provide the students with another chance to beat the winning teams through another round.
- Calculate the total points and announce the winning team, runner-up team, etc. Congratulate all the players. You can distribute sweets to the winners!

S.no.	Statements	Answer	Correct Responses
1.	All people with HIV have AIDS.	NO	Being diagnosed with HIV does not mean a person will also be diagnosed with AIDS. Healthcare professionals diagnose AIDS only when immunity in HIV infected persons falls below a certain level or they begin to get severe opportunistic infections.
2.	HIV is transmitted through touching, hugging or sharing food.	NO	HIV cannot spread through touching, hugging, sharing food, sharing toilet and coughing/sneezing. This is because HIV is not present in saliva, sweat, mucus and stool.
3.	HIV is transmitted by mosquito bites or through other insects.	NO	HIV can only survive in the human body and not in animals and insects.

4.	A person can get HIV infection by donating blood.	NO	HIV is present in blood and can get transmitted if blood is not exposed to air like in needles and injections. (HIV gets killed when in contact with air). It is important, therefore, to check that needles/injections are not reused. Registered blood banks do not reuse needles/injections. Hence, HIV cannot be transmitted by donating blood in a registered blood bank. We can donate blood every three months without any harm to ourselves.
5.	A person can get infected by HIV by sharing needles with someone who has HIV.	YES	As explained above, HIV is present in blood and can get transmitted if blood is not exposed to air like in injection/needles.
6.	It is impossible to protect oneself from becoming infected with HIV.	NO	There are only four modes of HIV transmission and their prevention can protect one from HIV. These include—avoiding unprotected physical relationship, avoiding sharing or reusing needles, going to only registered blood banks and seeking qualified and consistent medical help during pregnancy to avoid transmission to the baby.
7.	You can know a person is infected with HIV by looking at him/her.	NO	HIV does not have visible symptoms initially. The only way to be sure of HIV infection is through specific blood tests.
8.	There is a cure for HIV and AIDS.	NO	There is no cure for HIV and AIDS. Early diagnosis and Anti-Retroviral Therapy (ART) slows down the replication (multiplication) and helps to prolong life expectancy and improving quality of life. This therapy is available free-of-cost at government hospitals, in the ART centres.
9.	Having HIV infection is the same thing as having AIDS.	NO	Human Immunodeficiency Virus (HIV) is the virus that damages the immune system of the body. AIDS is the condition of weakened immune system of body, caused by the HIV virus.
10.	Many people who have HIV infection are not sick with AIDS.	YES	If a person takes prescribed medicines regularly, lives a physically active life and consumes healthy and nutritious food, one can protect the immune system and delay onset of AIDS. Someone infected with HIV can feel and look healthy for more than 10 years.
11.	If one member of a family has HIV, all other members will definitely have HIV.	NO	Living together, working together does not lead to HIV infection. All the members of the family should take good care of the person who is infected with HIV.

12.	HIV can be transmitted from a pregnant woman to her baby.	YES	The chances of an HIV infected mother transmitting the virus to her child are approximately 15-45 per cent. This transmission can happen during pregnancy, child-birth and breast feeding. The chances of transmission can be reduced with proper medical advice and management.
13.	HIV positive students should be expelled from school as they may prove dangerous to other students and teachers sitting in the same classrooms.	NO	HIV does not spread by sitting together, working, playing, coughing, sharing toilet seats, etc. Therefore, any case of HIV/AIDS should not be discriminated.
14.	In India, there is a law that protects the rights of HIV positive persons.	YES	HIV AIDS Prevention and Control Act, 2017. This act prohibits discrimination against HIV positive persons.
15.	There is a helpline to access information about HIV, and related services.	YES	1097 is the toll free helpline where one may get all the information regarding HIV/AIDS.
16.	A person can get tested for HIV in less than four weeks of undertaking risky behaviour to find out if they have HIV infection.	NO	Most common blood tests to detect HIV infection (ELISA and Western blot) pick up HIV antibodies which develop 8-12 weeks after getting the infection. If these blood tests are conducted in the first 8-12 weeks, they may be negative while the person has acquired HIV infection and can infect others. This is known as the 'Window Period'. Hence, a second round of testing is required after 12 weeks of suspected infection to draw conclusion on the HIV infection status. There are newer tests that can detect the virus before antibodies appear in the blood but these are not widely available and are more expensive.
17.	A person infected with HIV can lead a normal life.	YES	HIV infection should not come in the way of living a wholesome life. An HIV infected person should consult a qualified doctor regularly and practice healthy behaviour.

Reiterate the following points

- Most people have heard a great deal about HIV/ AIDS, but many are confused by incorrect information about its transmission.
- Many people do not believe that HIV can affect them. Others believe that they cannot avoid HIV infection. Both these thought processes can encourage risky behaviour.

Take-home messages

- It is easy to protect oneself from HIV by avoiding physical relations, reused needles, accessing registered blood banks and taking medical help during pregnancy to avoid transmission to the baby from an HIV infected mother.
- It is important to challenge misconceptions and spread awareness about HIV and AIDS to prevent people from getting infected by HIV and put an end to discrimination arising from these misconceptions.

Additional suggested activities

- Identify 3-4 myths about HIV that may be most common around you and write why these myths are not true in your notepad.
- Talk to at least three elders or peers in your family or friend's circle and ask them if they believe in the myths identified by you. Then give them correct information about transmission of HIV and its prevention.

Activity 9.5 **Leading Life Positively**

LEARNING OUTCOMES

The learner

- Recognises that people living with HIV and AIDS should not be discriminated against.
- Explains the role of a healthy lifestyle and support in enabling an HIV positive person to live a fulfilling life.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Empathy

RESOURCES

- None

Guidance for the facilitators

- Often, people living with HIV/AIDS are treated poorly. Their human rights are violated. People avoid meeting them, doctors and nurses hesitate to treat them. People often discriminate against HIV positive people and their relatives. Besides violating the human rights of HIV positive people, such hostile reactions produce fear, insecurity, tension and also increases the danger of HIV transmission.
- The fear of hostility may force HIV positive people to keep their status a secret and not seek medical help. This is dangerous for everyone.
- Ask the learners if they know of any case where an HIV positive person was discriminated against?

Read out the following story loudly and slowly, and ask questions that follow to generate a discussion.

Rahul lost his father when he was just a child. He's a young man now and lives with his mother. He works at a senior position in a factory. Sonal is a bright young girl working in a science research laboratory. She resides in a hostel close to Rahul's place. They become good friends and want to get married.

But there are problems. Rahul is HIV+. It was detected during a routine health checkup conducted in the factory where he works. The Managing Director of his factory has taken the decision to remove him because of his HIV status.

Sonal too has a problem. She was in love with Vikram, a colleague in her place of work and that relationship resulted in her pregnancy. Vikram went abroad a couple of months back and soon wrote back to her ending their relationship. Sonal went into depression. That's when she became friends with Rahul. Rahul does not know that Sonal is pregnant and Sonal does not know of Rahul's HIV status. Dr Khurana consulted by both knows the truth about them, but he doesn't divulge their respective problems to one another for ethical reasons. Rahul's mother is excited to know about his plan to marry Sonal. Although she is aware of his HIV+ status, she persuades him to marry Sonal as early as possible so that they may have a baby soon.

Points for discussion

- What do you feel about Rahul's mother's position?
- Is the Managing Director's action justified?
- Did Dr. Khurana take the right decision?
- What kind of persons do Rahul, Sonal and Vikram seem to be?

Reflective question

- ‘People who are HIV positive can live long and healthy lives’
– How can this sentence be explained?

Take-home messages

- It’s illegal to test for HIV without consent.
- HIV status can’t be disclosed without the individual’s permission.
- HIV positive status cannot be the basis for expulsion from job or school.
- People living with HIV and AIDS have the right to live free of stigma and discrimination and each one of us needs to ensure that they are treated with respect and dignity like any other person.
- A healthy lifestyle, nutritious food, counselling, following the doctor’s advice, positive attitude, care and support from family and community and access to proper treatment can help a HIV positive person live a long and productive life.

Additional suggested activity

- Make slogans and poems that encourage people to fight HIV and not the person who is infected with it. Some of these can be read out in the school assembly or presented in class.

Activity 9.6 **Responsible Sexual Behaviour**

LEARNING OUTCOMES

The learner

- Explains the importance of equal and respectful relationships between partners.
- Explains the consequences of adolescent pregnancy and ways to avoid it.
- explains the services that adolescents can access for good reproductive health.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Decision-making, critical thinking, problem solving, empathy, effective communication

RESOURCES

- Copies of case studies

Guidance for the facilitators

- This activity has some sensitive but very critical messages. You may decide to conduct this activity in a co-gendered group or organise it separately for girls and boys depending upon the context and comfort level of the learners.
- Children with Special Needs may not be able to understand many things, it is necessary to explain to them separately, in detail (if required).
- Inform the learners that protection of individuals and their partners from avoidable health problems is 'responsible sexual behaviour'. For example, gaining correct knowledge about health, visiting a health facility in case of health issues, getting regular health check-ups, etc.

Case Study 1

Malavika just turned 17 and is going to be married soon. Her friend jokingly informed her that she will have to become pregnant soon after marriage. Malavika is quite upset with this information. She is not sure if she is ready to have a child at the moment.

Points for discussion

1. Is Malavika old enough to be married?
2. What could be the possible consequences of having a child at this age?

Case Study 2

Rita and Tejas got married recently and are happy with their marriage. Rita works for a community service organisation and Tejas runs a shop. They do not want a child for some time. They have seen some couples have an unwanted pregnancy and want to avoid any such situation.

Points for discussion

1. What options do Rita and Tejas have to follow through on the decision they have made?
2. What services can they assess to avoid an unwanted pregnancy?

Discussion

Case Study 1: Child Marriage

- Adolescent pregnancy is a consequence of child marriage (before 18 years of age).

- Early pregnancy has many harmful effects on health and life. It adversely affects the health of both the young mother and her child, since her body may not be ready to nourish a child till she is older.
- Besides this, as discussed in the child marriage activity, child marriage and early pregnancy can have negative consequences on opportunities for education, careers, economic productivity, socio-economic independence of adolescents and mental health.

Case Study 2: Pregnancy services and Products

- To avoid pregnancy, consult with a health care provider (ANM, nurse, or doctor), who can explain various options and enable them to make pointed and responsible decisions. Various contraceptive facilities are available at Asha, Anganwadi workers, chemists and all major health centers.

Reflective questions

- What responsible behaviour can prevent an unwanted pregnancy?
- What are the consequences of pregnancy among adolescents?
- Which services can one access in case of a reproductive health issue or concern?

Take-home messages

Safe/Responsible behaviour is essential to maintain good health.

- Establishing equal and respectful relationship with one's partner. This includes being assertive about one's choices and body and respecting the partner's choices.
- Early pregnancy can have a negative impact on the mother and child. This can be addressed by
 - avoiding child marriage (marriage before the age of 18 and 21 amongst girls and boys, respectively).
 - use of contraceptives to avoid early and unintended pregnancy.
- Accessing reproductive health services for accurate knowledge and services.

Additional suggested activity

- Reflect on the importance of consent in respectful and equal relationships and make short stories or poems to express what this means to you.



SAFETY AND SECURITY AGAINST VIOLENCE AND INJURIES

A learner will develop the knowledge and skills to keep oneself safe from violence and injuries, as well as promote safe environment, for all. They will develop a basic understanding of violence, abuse, and unsafe situations, and effective ways to respond and seek help to keep self and others safe, including the role of assertive communication. At the secondary level, the learner will develop a better understanding of various forms of abusive violence, dangerous behaviors, and display responsive behavior. We will promote collective response to violence and abuse and support the promotion of a safe environment for all, dignified and dignified treatment.

Activity 10.1 What is Violence?

LEARNING OUTCOMES

The learner

- Identifies and explains what is violence.
- Recognises different forms of violence.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, Empathy

RESOURCES

- Photocopies of stories and comic strips (optional)

Guidance for the facilitator

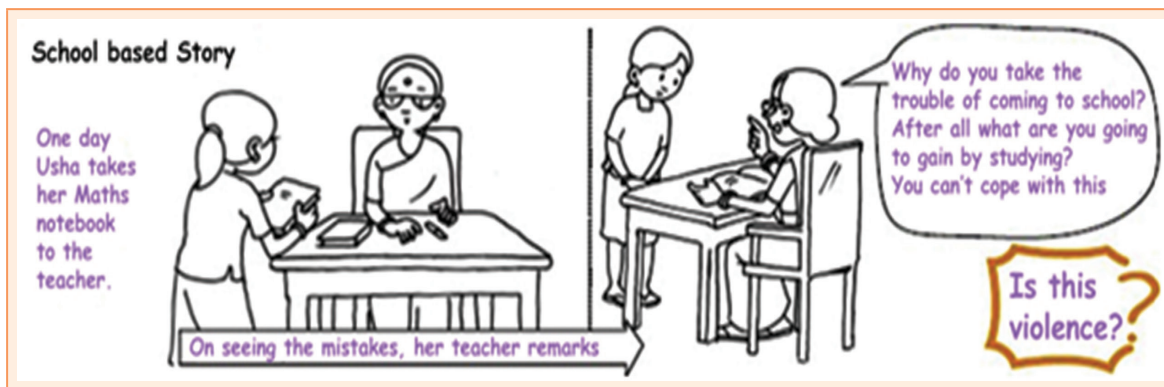
- This activity will enable the learners to recognise violence perpetuated in different forms and will sensitise them to the hidden forms of violence.
- Facilitators must be sensitive as some topics may be emotionally disturbing for some learners. Such learners may be referred for appropriate counselling.

- Try not to allow the learners to discuss any incidents in detail in the group as the information they share may be sensitive.
- Tell the learners that today's activity will help them to identify violence when it occurs. It will also help them to recognise different forms of violence.
- Explain that violence is any act that causes harm to another person against whom the act is directed. Violence may occur in any place, be it our own homes, school, or at public places that we access regularly.

Read out the following comic strips to the students.

Stories

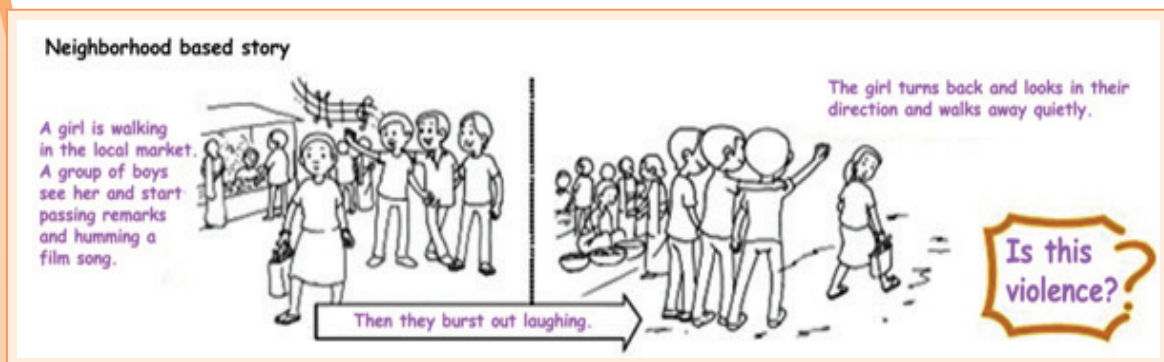
Story 1



Points for discussion

- Is this violence? Why do you think so?
- How do you think Usha would have felt in this situation?
- Could the teacher have acted differently? If yes, how?

Story 2

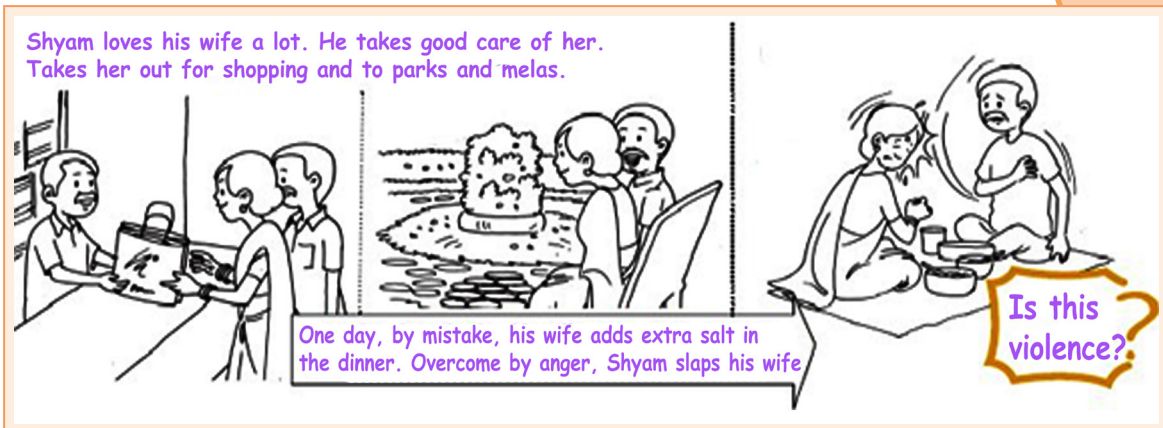


Points for discussion

- Is this violence? Why do you think so?
- How would the girl feel in this situation?
- Do such incidents happen often with women and girls?

- What can be done to stop such incidents?
- What can the girl do to seek help and stop this harassment?

Story 3



Points for discussion

- Is this violence? Why do you think so?
- How would Reena have felt in this situation?
- How could Shyam have behaved differently in this situation?
- Do you think violence is justified in relationships where the perpetrator claims to love the other person? Why/why not?

Story 4

Azad, 13, studies in Class VIII. One day, Azad is unable to finish his school homework. His teacher gets very angry and says, “You are a lazy boy and you have no interest in studies. Why are you wasting your father’s money and my time?” He hits Azad’s palm with a wooden ruler, leaving it red and burning.

Points for discussion

- Is this violence? Why do you think so?
- How do you think Azad would feel in this situation?
- What could the teacher have done differently?

Story 5

Rizwan and Gaurav are friends and study in Class VIII. For the past two months, some senior boys from their school have been making them carry their heavy bags from home to school and back. When Rizwan and Gaurav try to speak up, the senior boys use abusive language, push and kick, and tell them to learn to be ‘men’.

Points for discussion

- Is this violence? Why do you think so?
- How would Gaurav and Rizwan be feeling in such a situation?
- What can Gaurav and Rizwan do to stop this?

Share the following information with the learners, to reinforce the messages conveyed during this activity.

- People with power use violence as a means to control people with less power.
- Anyone can face violence at different times in their life. However, the ones who are in a position of less power in society due to their gender, age, caste, class, etc., are more likely to face violence.
- In the case stories given in this activity, we see different forms of violence and abuse of power. These are:
 - **Emotional Violence:** In the first story the teacher uses her power over Usha to inflict verbal or emotional violence on her. Emotional violence is when a person intentionally subjects another person to behaviour that may result in psychological trauma and emotional hurt. For example, calling someone names (labeling), bullying, verbally abusing and using foul language, etc.
 - **Sexual Harassment:** In the second story, a group of boys sexually harass the girl walking on the road, commonly known as eve-teasing. It is a form of sexual violence. Sexual violence is any sexual act or an attempt directed against a person's sexuality, regardless of the relationship to the victim. Examples of sexual violence are unwanted comments of a sexual character, child sexual abuse with boys and girls, molestation and rape.
 - **Physical Violence:** In the third story, Shyam uses his power attributed by the patriarchal structures of society, over his wife and inflicts violence on her. Physical violence is any intentional act causing injury to another person. Examples may be wife-beating, corporal punishment used in schools, parents beating their children to discipline them, physical fights between siblings, etc.
 - In Reena's case, her husband is often nice to her but it does not justify any act of violence. Shyam's action is also an example of domestic violence, that is, violent or aggressive behaviour within the home. Domestic violence is not limited to physical violence but it can also involve emotional and sexual violence.
 - **Corporal Punishment:** The fourth story depicts a case of corporal punishment, which is a form of physical violence inflicted on students with an intention to cause pain as a means of disciplining. The Right to Education Act, 2009, prohibits any form of physical punishment and mental harassment to students.

- **Bullying:** In the fifth story, the senior boys use their power to bully Rizwan and Gaurav. Bullying is a form of emotional violence, as it uses power against those with less power, causing them emotional harm, which often has a long lasting impact. Bullies may also resort to physical violence.

Reflective questions Based on a Quiz

Write the questions given below on the blackboard. Ask every learner to read the behaviour patterns given on the blackboard and identify which of them is a form of violence. Ask them to write 'Y' against the acts or behaviour that they think are violence and 'N' against acts or behaviour that are not violence. They can write these in their own notebooks. After everyone has written these, ask the learners to read out their answers for each statement, in a manner that maximum students get a chance to participate. The answers are given below for your reference. After each answer, engage students in a discussion around why a particular behaviour or act is violence and others are not. Finally, write 'Y' or 'N' on the blackboard against each statement.

1. A father helps his child to study.
2. When Radha makes a mistake in her homework, the teacher calls her 'stupid'.
3. A big boy pushes a smaller boy while playing.
4. The girls in her class make fun of Komal, because she has short hair.
5. A mother helps her daughter to get ready.
6. Boys start whistling when they see girls.
7. Sonu's mother beats him because a book get storn.
8. A child does not like the way a neighbor touches him/her.
9. Ali's friends make fun of him because he does not pass comments on girls.
10. An adult person shows vulgar photographs to a child.
11. Neighbours tease Rupesh because he helps with the household chores.
12. A tutor touches James in appropriately.
13. Robert and Meena play kho-kho together.

Check your answers

1-No	2-Yes	3-Yes	4-Yes	5-No	6-Yes	7-Yes	8-Yes
9-Yes	10-Yes	11-Yes	12-Yes	13-No			

Take-home messages

- Violence is any act that results in, or is likely to result in, physical, sexual or emotional harm to someone, including threats of such acts, whether occurring in public or in private life.

- Violence can happen with both girls and boys, irrespective of class, caste, educational status, rural or urban geographies.
- Violence in any form is not acceptable or justified. It should be challenged, by each person, and collectively.

Additional suggested activities

- Observe your surroundings – school, home, community. Do you see acts of violence around you? What forms of violence do you see? Discuss with your friends and/or parents on what can be done to prevent such incidents?
- Read newspapers from the last two weeks and cut out articles that have any forms of violence. Discuss with your friends and/or parents on what can be done to stop these?

Activity 10.2 Locating Violence

LEARNING OUTCOMES

The learner

- Recognises different forms of violence in and around their schools and other public spaces.
- Recognises the impact of violence on students.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Effective communication, problem solving, critical thinking

RESOURCES

- Chart papers, three different coloured pens/crayons/pencils, cello tape

Guidance for the facilitators

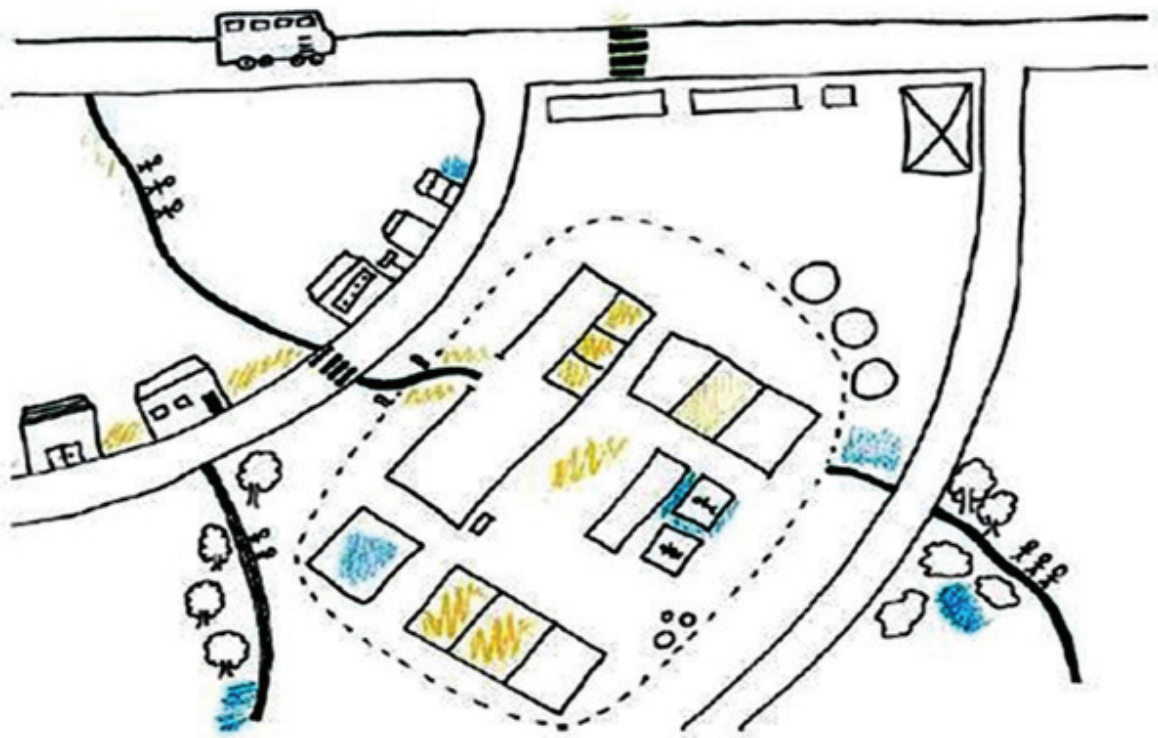
- It is important to develop a sense of shared responsibility, for making the school and its surroundings a safe and friendly space for all.
- As part of this process, it is important to identify different forms of violence that happen in and around schools and other public spaces.
- The exercise focuses on where and when violence is likely to happen, how it affects children and young people and develop strategies to stop this violence.
- Encourage the learners to first reflect on places (within the school and in public places), which they have heard of as being unsafe, or where they have themselves felt unsafe.

- After this, they can reflect on spaces where they have, either themselves actually experienced any form of violence, or have witnessed any form of violence.
- Be careful that students do not name and blame other students during the process. If any such issues emerge, ask the concerned learners to meet you outside class.

Divide the class into four groups. Provide them with chart papers and markers.

1. Ask groups 1 and 2 to draw a simple map of their school, including the streets and buildings, or fields and open spaces, around the school, and the different modes of transport that students take to school (walking, bus, cycle, rickshaw, private vehicles, etc.). Label the different areas.
2. Ask groups 3 and 4, to draw a map of the markets, which the learners and their families frequent, for shopping for daily needs or other goods. This could be a village haat or nearby market place in the city. Label the different areas within the marketplace.

(A sample school map is given below. Please do not show this map to the students, this is only for your reference. A similar map can be created for the market place as well.)



After they have made the map, ask the learners which places are safe and friendly for all students. Ask them to mark these places in any one colour. Then ask them, which places are unsafe?

In which places have they heard of, seen, or experienced violence? It could be physical, emotional, sexual, any form of violence. Ask them to mark these places in a different colour.

Ask the groups to present their maps to the class.

Points for discussion

- Which are the places where violence takes place?
- Do girls and boys experience violence in the same, or different, places?
- Where is violence most likely to occur?
- How can this violence be challenged and stopped?

Take-home messages

- Violence can happen within and around our schools and in public places that we access.
- It is important to be aware of our surroundings to help us to identify violence in and around school, and in public places.
- Violence, in any form, is not acceptable. We should seek and give help to prevent and respond to such violence – as individuals, and also collectively.
- We can sometimes see patterns in where and when certain forms of violence take place.
- Identifying such patterns can help us develop strategies to stop the violence and help make our school and its surroundings as well as other public places safe for everyone.

Additional suggested activity

- Make a map of your locality and indicate which places are safe for children and which are not. Take it up as a group to share with your Panchayat or local government bodies. You may have to seek support from elders in this process.

Activity 10.3 **Violence within Schools and its Effects**

LEARNING OUTCOMES

The learner

- Recognises different forms of violence experienced by girls and boys in school.
- Identifies the physical and psychological effects of violence and abuse.
- Questions different forms of violence and abuse.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

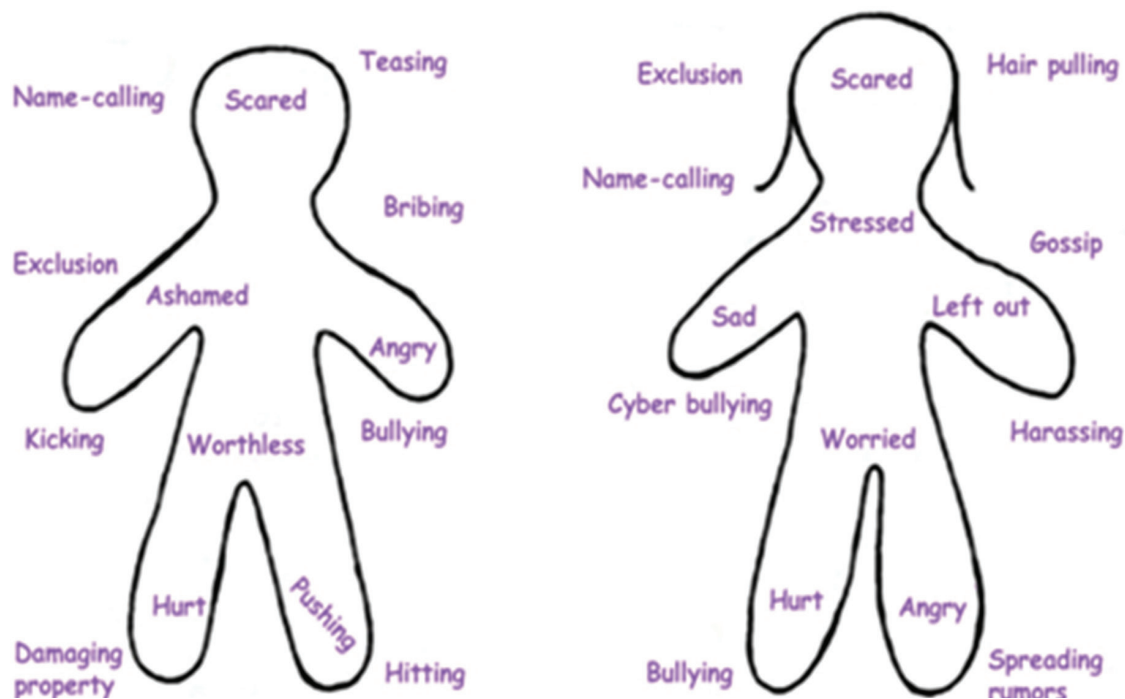
- Self-awareness, effective communication, empathy, critical thinking

RESOURCES

- Chart papers, pens, blackboard, chalk

Guidance for the facilitators

- This group activity is about understanding violence in school and its impact.
- The facilitators should be sensitive to the learners' experiences and the feelings they share.
- The learners should be reminded that this is a sensitive activity and they should listen carefully and respect the feeling of others.
- In case very sensitive questions/issues come up, the facilitator should be open to providing support to the individual/s outside the class.
- Arrange the learners into groups of 6-8.
- Explain that in this activity, the learners are going to talk about the different kinds of violence they can encounter in and around the school and emotions the person experiencing the violence might feel.
- Give each group a chart paper and divide the paper in half. On one side, draw the outline of a female. On the other side draw the outline of a male.
- In the space outside the body, ask the learners to list different forms of violence that can happen in and around school. Make separate lists for male and female learners.
- Prompt the learners to include examples of physical violence (hitting, kicking, corporal punishment), verbal and emotional violence (threats, rumours, name-calling), and sexual abuse (touching inappropriately, pornography, passing inappropriate comments etc.).
- On the inside of the body, ask the learners to write all the feelings that these experiences might cause in the person who experiences the violence.
- Ensure that all the learners participate in the exercise to make it meaningful.
- Make a large diagram on the blackboard noting down all the forms of violence experienced by girls and boys, as well as the effects in terms of feelings that the learners are sharing.
- Given below is an example of what the diagram may look like. Do not provide the diagram given below to the learners. If needed, help them with ideas from this example.



Reflective questions

- What are the different forms of violence that the learners may experience in and around their schools?
- What are the different ways in which violence can impact the learners?
- How do different forms of violence affect the emotional and psychological health of the person experiencing the violence?

Take-home messages

- Violence and abuse can have a negative impact on one's mental and physical health and can adversely affect a person's ability to learn and engage; even isolate the person.
- Right to Education Act 2009 prohibits physical punishment and mental harassment under Section 17(1) and makes it a punishable offence under Section-17(2).

Additional suggested activity

- Have you heard about or read or seen media reports about violence in schools, and how it affects children? Have you found any reports on anyone challenging violence in these newspaper reports? Please share with your friends, and write about it in your journal.

Activity 10.4 Seeking Help to Keep Safe

LEARNING OUTCOMES

The learner

- Demonstrates knowledge and skills to keep oneself safe from violence and injuries
- Explores ways to seek help

TIME REQUIRED

- One Period

LIFE SKILLS ENHANCED

- Effective communication, empathy, decision-making, problem solving

RESOURCES

- Blackboard, chalk, case study handouts (optional – the teacher can also write the case studies on the board)

Guidance for Facilitator

Both boys and girls can be abused.

- If learners share their emotion, do not correct them. For example, if a learner says “I do not like it when my uncle hugs me”, please accept it, and do not probe further. Talk to the learner outside class if you think there may be a need to offer support. The learner might disclose about her/his personal experience of abuse. Be calm, believe the child and help or link them to potential help to stop the abuse.
- Tell learners that often shame, fear of rejection, blame or disapproval can be a barrier to seek help. It takes courage to ask for help.
- Please establish ground rules before transacting an activity, and repeat them whenever necessary. Some examples, of ground rules:
 - Do not share personal details of friends or others
 - Do not tease each other with information shared in the class.

Transacting the activity

1. Share with learners that we have earlier understood what we mean by Physical, Emotional and Sexual Violence and abuse. We will do a brief recap here:
 - Any act that causes physical, mental, emotional or sexual harm to another person, against whom the act is directed, is violence or abuse.

- Physical violence is any intentional act causing injury to another person.
 - Hurting someone's emotions by threatening, abusing, scaring, humiliating or shaming is Emotional Violence
 - Sexual contact that a person has not consented to is called Sexual abuse. Sexual abuse does not happen only by touching; it can also happen by looking or talking.
 - Violence in any form or in any situation is never acceptable or justifiable
2. Share with the learners that we will discuss some case studies and understand how we can respond to violence and abuse
 3. Share with learners that we will start with an example case study, for which all of us will try to answer the questions together.
 4. Read out Gattu's case study, given below.

Case Study 1

Gattu is in class 7. Gattu's uncle helps Gattu with his homework every day and also gives him sweets and toffees. Gattu's uncle, while helping him with his homework started touching Gattu inappropriately. He also said that this is a secret between them and that Gattu should not tell anybody about it. He adds that if Gattu tells anyone, then he will not help Gattu with his homework and Gattu will fail in school.

5. Next, write each of the questions given below on the board one-at-a-time, ask the learners for their responses.

Share with learners that for the question regarding possible solutions, they need to use the following pointers to help them think through different levels of help and support:

- What can the individual in this case do himself/herself?
- What help can the individual seek from others?
- What can other people, like friends, family or community, do to help?
- Can other institutional sources, like police or law, help in addressing the problem?
- Have a discussion on these questions

Discussion questions for case Example

- Is this touch safe or unsafe for Gattu?

Possible Answer: This touch is unsafe for Gattu.

- Do you see any Abuse and Violence in this case? Why/Why not?

Possible Answer: Yes. It is sexual abuse. It is never alright for someone to touch, look at or talk about our Private Body Parts except to keep us clean and healthy. This is Personal Safety Guideline 1.

The uncle is touching Gattu inappropriately. He is not touching him to keep him clean or healthy.

The facilitator can provide additional examples of situations where adults can touch their Private Body Parts to keep them clean or healthy. (Refer to fact sheet)

- Have we heard of similar situations? Give examples without sharing names

Possible Answer: Facilitator can ask learners to share examples of similar incidences from their community.

- Facilitators also emphasise that sexual abuse can happen by touching, looking at and talking about private body parts. Hence, if someone makes you watch obscene pictures in magazines or on the internet, that is also sexual abuse.
- Facilitators must emphasise that while this story shows an uncle touching Gattu, inappropriately, it could also be an older friend, a peer, a neighbor, family member or anyone else.
- They also emphasise that sexual abuse can happen to both boys and girls.
- What are the possible solutions? Who can help? (What can Gattu do himself? Who can he seek help from?)

Possible Answer

- Gattu can assertively say No to his uncle and Get Away from the situation. The facilitator can ask learners to show how Gattu can so No assertively. (Look in the eye and say No Boldly)
 - If Gattu is unable to Say NO, he can “Think No” in his mind. This will give him the courage to say NO.
 - Gattu can tell a trusted adult and seek help. This is Personal Safety Guideline 3. Trusted adults are people who live near you, will listen to and believe you, and can help you. These are people you can go talk to about your problem.
 - His parents can help in stopping the abuse and his teacher can help in talking to his parents.
 - His teacher and principal can organise sessions on personal safety.
 - If the first person Gattu asks for help, does not help him then Gattu can keep on telling till someone help him to stop the abuse.
- Was it Gattu’s fault that he experienced abuse?

Possible Answer: No it was not Gattu’s fault that he was abused. It is always the fault of the person who broke Personal Safety Guideline 1.

- What are some of the laws and rights that can help learners when they are experiencing sexual abuse?

Possible Answer: Rights and Legal Provisions protecting children and help them report such as POCSO Act, 2012, Articles 19, 12 and 34 of UNCRC

For the next set of case studies

- Divide the learners into groups of 8-10 each.
- Tell them each group will be given a case study and a set of questions which they have to answer.
- Give each small group one of the four case studies given below. If there are more than four groups, two groups may be given the same case study.
- Now, tell the learners, we will start with group work.
- Ask them to read the case and, in their groups, write down answers for each of the questions given with the case study.
- Give the learners 10 minutes to answer the questions. Ask any one of the groups with the first case study to come forward, share the case and their responses to the questions.
- Other groups with the same case study can add their responses.

Repeat the process for the other three case studies as well.

Case Study 1

Pinki is in Class VIII. She was having mid-day meal along with her friend who belonged to a different caste. A group of students who studied in Class X were passing by when they saw Pinki giving water to her friend. They shouted at Pinki saying that people of her caste cannot sit and eat with higher caste people.

Points for Discussion

1. How do you think Pinki feels?
2. Do you see any abuse and violence in this case? Why/Why not?
3. Have we heard of similar situations? Give examples without sharing names
4. What are the possible solutions? Who can help? What can Pinki do herself? Who can she seek help from?

Case Study 2

During the English class, the teacher caught Nima repeatedly giggling. The teacher slapped Nima and dragged him to the front of the class, pulling his ear. The teacher turned towards the class and shouted, "I will not tolerate any indiscipline in my class." He then caned the boy on his legs before the class and asked him to leave the classroom.

Points for Discussion

1. Do you see any abuse and violence in this case? Why/Why not?
2. Have we heard of similar situations? Give examples without sharing names?

3. What are the possible solutions? Who can help? What can Nima do himself? Who can he seek help from?
4. What are some of the laws and rights that can help children when they are experiencing physical and emotional violence?

Case Study 3

Vimmi is in Class VI. She very often goes to play with Tikli at her flat in the same building. Tikli has an elder brother, Dukku. One day when Vimmi went to Tikli's house, Dukku took her to a room alone and showed her some obscene pictures of adults without clothes. She was shocked. Is this situation safe or unsafe for Vimmi?

Points for Discussion

1. Do you see any abuse and violence in this case? Why/Why not?
2. Have we heard of similar situations? Give examples without sharing names.
3. What are the possible solutions? Who can help? What can Vimmi do herself? Who can she seek help from? - Refer to the factsheet for Personal Safety Guidelines.
4. What are some of the laws and rights that can help children when they are experiencing sexual abuse?

Case Study 4

Gopal is in Class VIII. Several boys in his class are beginning to develop a moustache. His classmates have started teasing him and telling him he is too much like a girl. When he went to play cricket, his teammates told him that they did not want him on the team anymore.

Points for Discussion

1. Do you see any Abuse and Violence in this case? Why/Why not?
2. Have we heard of similar situations? Give examples without sharing names
3. What are the possible ways of dealing with this situation? Who can help? What can Gopal do himself? Who can he seek help from?
4. What are some of the laws and rights that can help children when they are experiencing gender-based violence?

Summing up

Use the following information to re-iterate the key messages transacted during this session.

- Violence and abuse are violations of children’s rights.
- Any form of violence and abuse (physical, sexual and emotional) is unacceptable.
- Gender-based violence is any act that results in physical, emotional or sexual harm based on whether girls or boys conform to gender roles and stereotypes. (In case study 4, Gopal was targeted because he does not conform to gender stereotypes.)
- It is never alright for someone to touch, look at or talk about your private body parts, except to keep me clean and healthy. If someone violates this, you can say No and get away.
- If you are facing an unsafe situation, you can follow the 3 step approach to safety; “No, Go, Tell”:
 - Say No assertively. If you are finding it difficult to say “No” – start thinking “No, Thinking NO” – “I do not want the abuse to continue”.
 - Go away from that person when you get a chance. Get to a safe place which has more people around, or go offline if you are being bullied online
 - Tell a trusted/helping adult and keep telling till someone helps you
- Children can try to keep themselves and others safe. If someone is teasing a friend or a peer, you can ask them to stop and seek help from a trusted adult.
- Children have rights and there are laws that help them report any abuse.
- It is never your fault if someone abuses you. It is always the fault of the person who abuses the child or adolescent. It is also not your fault if you are unable to say No or tell a trusted adult to seek help. You can do so as soon as you feel confident.
- There are laws to protect children from abuse.
 - United Nations Convention on the Rights of Child provides that no one is supposed to hurt children in any way.
 - The Government of India has created a law called Protection of Children from Sexual Offences Act (POCSO) to support children in case someone sexually abuses them. Anyone (be it an adult or a child) who sexually abuses children or adolescents or breaks their Article 34, will have to bear consequences under this law.

Activity 10.5 Violence, Injury and Seeking Help

LEARNING OUTCOMES

The learner

- Demonstrates knowledge and skills to keep oneself safe from violence and injuries.
- Exhibits skills to support others in case of violence.
- Explores ways to seek help without guilt or shame.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Problem solving, decision-making, critical thinking, empathy

RESOURCES

- Blackboard, chalk, case study handouts

Guidance for the facilitators

- Remember that anyone can be abused (third gender, girls and boys).
- The learners might disclose about their personal experience of abuse. Be calm, believe the learner and help in stopping the abuse.
- Tell the learners that often shame, fear of rejection, blame or disapproval can be a barrier to seeking help. It takes courage to ask for help.
- Some ground rules can be set, like:
 - Do not share personal details of friends or others.
 - Do not tease each other with information shared in the class.
- Share with the learners that we will start with a case study and understand how we can respond to violence and abuse, for which all of us will try to answer the questions together.

Discuss the following case studies

Case Study Example

Annu is in Class X. Her uncle touches her inappropriately when nobody is around. This has been happening for more than a year. She is unable to tell her father because she feels he will not believe her. Even if she tells her mother, she feels her mother will not be able to support her.

Points for discussion

1. Do you see any abuse and violence in this case? Why/Why not?

Possible answer: Yes. It is sexual abuse.

2. Have you heard of any similar situations? Give examples without sharing names.

Possible answer: Ask the learners to share examples of similar incidences from their community. Also explain that sexual abuse can happen by touching, looking at and talking about private body parts. Emphasise that sexual abuse can happen to both boys and girls. Both adults and peers can perpetrate sexual abuse. In a majority of cases, the abuser is not a stranger, rather is a known person, such as an older friend, a peer, a neighbour, family friend or a family member.

3. What are the possible solutions? Who can help? (What can she do herself? Who can she seek help from?)

Possible answer:

- Annu can assertively refuse and get away from the situation.
- If Annu is unable to say No, she can think No in her mind.
- Annu can tell a helping adult/s (an older person whom she can trust because they help her feel safe) and seek help.
- Her parents can help in stopping the abuse. If they do not listen she can tell other helping adults. Her teacher can help in talking to her parents.
- Annu can also share with a friend who can help her talk to a helping adult.
- Annu can reach out to youth-friendly services, organisations working on the issue, and call 1098 helpline.
- If the first person Annu asks for help, does not help her, then she can keep on telling others until someone helps her, to stop the abuse.
- If these efforts don't work out and the abuse continues, Annu can decide to file a complaint with the POCSO in consultation with a helping adult.

4. Was it Annu's fault that she experienced abuse?

Possible answer: No it was not her fault.

5. What thoughts or feelings might Annu have about asking for help? What may be her fears, concerns and hopes?

Possible answer: She might feel that no one will believe her. They will be angry and blame her. The abuser might cause more harm

6. As a friend, how can you help Annu and start a help-seeking conversation?

Possible answer:

- You can listen to her calmly. Do not blame her. You can encourage her to talk to a trusted adult.
- Divide the learners into groups of 8-10 each. Give each group one of the four case studies given below. Ask them to read the case and, in their groups, write down answers for each of the questions given with the case study. Give the learners 10 minutes to answer the questions.
- After all the presentations and discussion, share the key messages.

Case Study 1

Siro took his father's car to his friend's birthday party. He is 17 years old and does not have a driving license. He and his friends did not wear seat belts. They played loud music and felt it was fun. Siro drove at full speed. The car hit a huge heap of concrete piled up. He and his friends got injured as their heads banged against the car.

Points for discussion

1. List out the ways by which the injuries could have been prevented?
2. What can be the best way to respond to an emergency situation?
3. What are the consequences they may face?
4. What are your recommendations to avoid a similar event in the future?

Case Study 2

Dimpy's boyfriend cares a lot for her but he often looks down upon her. He says "Don't be stupid". Once, over an argument, he hit her on her face but later apologised for the mistake and told her that he loved her. She has also seen her father hitting her mother occasionally. Dimpy does not know to whom she can talk about this issue.

Case Study 3

Amreen cannot sleep at night because she is disturbed about her classmates who tease and laugh at her physical deformity. Who can she seek help from?

Case Study 4

Pallav belongs to the third gender. Some of his classmates harass/trouble him and sometimes they hit him. He does not like to come to school because he is too scared. Who can he seek help from?

Points for discussion for case studies 2, 3 and 4

1. Do you recognise any kind of abuse and violence? Why/ why not?
2. Have we heard of any similar situations? Give examples without sharing names.
3. What can be the possible solutions?

Take-home messages

- You have a right to be safe from abuse and violence.
- Inform and report any kind of violence to a helping adult. If someone tries to abuse you, remember the three step, 'No, Go, Tell' approach.
- Children and young people have rights and there are legal provisions to support them.
- Sometimes seeking help can be hard.
- Remember the abuse is not your fault.
- Additional suggested activity
- Create a poster on safety and put it up in your classroom. In the poster, show different ways to respond to violence, and injury, and from whom and how to seek help.

Activity 10.6

Understanding Risky Behaviour, Taking Responsible Steps

LEARNING OUTCOMES

The learner

- Demonstrates responsible behaviour.
- Identifies ways to minimise risk and reduce harm.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Decision-making, problem solving

RESOURCES

- Handouts with statements OR write statements on the blackboard

Guidance for the facilitators

- Please do not judge the learners for their views, which are different from yours. Help the learners understand why risky behaviour can be unsafe.
- Do not expect all the learners to agree that all risky behaviour can be unsafe. Give them time to mull over it.
- Divide the class into 10 groups.

- Give the following five statements to the 10 groups. Each statement will be given to two different groups.

THE STATEMENTS

- To ride a bike underage is unsafe.
- It is not alright to click photographs of someone without their consent.
- When my classmate is being sexually harassed, I have a role to play.
- It is wrong to express our anger with people we love by hitting or being violent with them.
- One must not touch someone without their consent, even if we love the person.
 - Tell the learners that for each statement, one group will defend the statement while the other group will oppose it. Ask the learners to discuss their thoughts on the issue, within their groups. Give 7-8 minutes for this.
 - Encourage each group member to participate.
 - Ask the groups to present one by one, taking 2-3 minutes for each. After groups 1 and 2 make a presentation on Statement A, encourage the rest of the class to ask questions, and allow the groups 2-3 minutes to respond.
 - Continue the process.
 - Emphasise that there are no winners or losers in this debate. Be neutral while conducting the debate, and conclude it with key learnings about safety.

Reflective questions Based on a Quiz

Identify whether the following behaviour is risky and unsafe, either for oneself or for others.

STATEMENT	YES, if the behaviour is risky and unsafe NO if the behaviour is not risky nor unsafe
When you hurt someone by making fun of them and calling them names	Yes
When you stalk or follow someone around	Yes
When you encourage someone to stay away from illegal activities.	No
When you hurt someone emotionally and physically	Yes
When you force someone to watch a pornographic video	Yes
When you help a friend who is being abused by telling a trusted adult	No

When you gossip or spread rumours about someone	Yes
When you encourage your friends to pursue their interests and talents	No
When you push your classmates while passing by – just for fun	Yes
When you respect rules and laws	No

- Read out each situation and ask the learners to write in their notebook – ‘Y’ if it is risky and unsafe, ‘N’ if it is not.

Take-home messages

- Being responsible means taking care of self and others, keeping promises and commitments, being dependable and helping others.
- It is important to make informed choices that are right for you, rather than do things just to please others.
- Always think things through. Some of the questions you can reflect on before acting out or making a decision are decision-making steps:
 - Is it safe for me?
 - Is it safe for the other person?
 - What may be the consequences (short-term and long-term) of my action or decision?
 - Some risky behaviour are not only unsafe for you but for others also.

Additional suggested activity

- Create a play to orient other learners in the school about being responsible and avoiding risky and unsafe behaviour. Put up the play during the school assembly.

Activity 10.7 **Collective Response to Violence**

LEARNING OUTCOMES

The learner

- Recognises the need to collectively respond to situations of violence.
- Recognises how collective response helps in curbing violence.

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Problem solving, decision-making, interpersonal skills and effective communication

Guidance for the facilitators

- This activity is for the learners to understand how to collectively respond when they either experience or witness violence.
- Encourage creative thinking and searching for ways to respond to the situations of violence.
- Ask the learners to be respectful of each other when they are watching each other's role plays.
- Divide the class into three groups, to develop role plays, of 4-5 minutes each. The first group has to make a play on a situation of physical violence; the second group on emotional or psychological violence; and the third group on sexual violence.
- Ask the learners of each group to clearly show how the situation of violence is resolved through collective action. The characters should include people who experience, those who perpetrate, and other characters that witness, intervene, and from whom help is sought.
- Tell the learners that while enacting the role play, they only need to indicate the required action and should not hit or touch each other inappropriately.
- They need to involve other stakeholders, for example, trusted friends and siblings, the elders like parents, teachers or headmasters/principals of school, trusted relatives, local government representatives police, adolescent friendly health clinics, health and wellness centres, primary health centres, child friendly police stations, Gram Panchayat, Gram Sabha, Village Level Child Protection Committees (VLCPCs), traditional village leaders, Child Line (1098), etc.
- Give 10-12 minutes for the groups to prepare their role plays. Then ask them to present their role plays, one by one.
- Facilitate a discussion on the importance of collective action in response to violence, by asking the following questions.
 - Did this role plays effectively communicate how collective action can help resolve situations of violence?
 - Could there be any other ways, which we did not see in the role plays, to collectively respond to violence?

Reflective questions

- Who are the different persons you can approach if you or any of your friends face violence of any form?
- Do you remember any helpline number that was discussed in this class, which you can call, if you need help?

Take-home messages

- One shouldn't be blamed for the violence one faces. It is not our fault if we face violence.
- We must always challenge violence, and seek help whenever we need to, if we face violence.
- Collectively responding to situations of violence is the best course of action. It does not put an individual at risk of further harm, and ensures that many people take responsibility together to counter violence.
- Collective action involves help from people and services, such as trusted adults, peer group, the police and laws. Children should be provided information and enabled to draw upon this network of support.

Additional suggested activity

- Ask the learners to design a campaign in their school and/or community to advocate collective action against all forms of violence including violence against children with special needs. Violence against them is a common phenomenon because of their vulnerability and as reported in different print media, sexual abuse is also found.



PROMOTION OF SAFE USE OF INTERNET, GADGETS AND MEDIA

Humans have tried to use different modes of communication from very early times. From using drummers to announce news, to the digital mode today, we have come a long way.

People sometimes get confused about where to get information from. Nowadays, many people use new media like Internet to quickly find information. At the same time, they spend a good deal of time on media like newspaper, magazines, radio or television. Knowledge about different media can help develop the skills to access the appropriate media for accurate information on a specific topic or issue. More so, media brings awareness, and provides access to global knowledge and shared learning. Although media is a rich source of information; all of it may not be true or reliable. Media and internet may have a strong influence on our lives. It is advisable to seek guidance from a trusted adult while accessing media and internet.

In this module issues related to how media works, real and 'reel' life finding it right news etc. are discussed. The world of communication and especially digital communication has expanded beyond imagination and we can access information we require with a mere click of a button. Apart from information it also helps us to stay connected. At the same time, use of technology should be done with caution and care. In this module the learners develop the knowledge and skills to use media and internet effectively and safely. The module introduces the media and internet to the learners along with prompting ways to seek clarification in the information and identify false and correct information.

Activity 11.1

Media and Internet: Storehouse of Information

LEARNING OUTCOMES

The learner

- Makes linkages between media and the information it provides

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Decision-making, Effective communication, Problem solving

RESOURCES

- Paper chits

Guidance for the facilitators

- The purpose of this activity is to generate awareness that media is a storehouse of information. Everyone takes latest news and other information from the media by reading newspapers, listening to radio or watching TV and using internet or other gadgets.
- Write 'What would I do if?' on the blackboard.
- Invite the learners one by one to select a paper chit.
- Each paper chit will have one of the following sentences written on it.

A	I need to know the schedule of power cut in my city
B	I want to know why I am not gaining height as my other friends
C	I need to deliver the teacher's message to all my classmates after school hours
D	I need to know about the debate on disability held in Parliament today
E	I want to listen to the most popular songs of this week
F	I want to know if it will rain tomorrow in my area
G	I want to know the arrival time of a local train/bus
H	I want to report bullying in school without revealing my identity
I	I want to complain about violence in my neighbourhood without revealing my identity
J	My friend has got lost in a mela
K	I want share my moment of glory when I win an inter-state match, with family and friends
L	I need to find out the answer to a general knowledge question
H	I want to know more details about Indian history beyond my textbook
I	want to know whether my school will be open tomorrow

Ask learners to think and give one response about the media that would be best suited for the task on their chit. Let them give their reasons also.

- Let the whole class to contribute and tell which other media could be used to do the same task effectively. Then repeat the process with other chits.

Discussion

- Humans have tried to use different modes of communication from very early times. From using drummers to announce news, to the digital mode today, we have come a long way.
- People sometimes get confused about where to get information from.

- Nowadays, many people use new media like internet to quickly find information. At the same time, they spend a good deal of time on media like newspaper, magazines, radio or television.
- Knowledge about different media can help develop the skills to access the appropriate media for accurate information on a specific topic or issue. More so, because media brings awareness, and provides access to global knowledge and shared learning.
- Although media is a rich source of information, all of it may not be true or reliable. It is advisable to seek guidance from a trusted adult while accessing media and internet.

Summarise

- We should not believe everything shown in advertisements. It is important to clarify information. False information affects our attitudes and behaviors.
- We may end up buying products or investing in something unnecessarily because of the way they have been portrayed in media and be disappointed, or even harmed. A lot of time, effort and money may be wasted.
- We may develop wrong notions that perpetuate myths and stereotypes around several issues, such as, gender roles, misuse of substances, trying dangerous stunts without training and supervision.
- There is a difference between real and reel. Not all which might appear real or look real is the reality.
- As aware citizens, we need to clarify what we see on internet and media with trusted sources.

Reflection questions

- You must have come across advertisements which make unrealistic promises. Were you ever influenced by these?
- Do you think messages shared in media are always correct? What can be your role in countering any false messages?
- Do you think products will sell if their reality is shown?
- How do we select which media platform is better suited for a specific task?
- Why should we seek a trusted adult's help in knowing which media to use for different purposes? Who are the adults who can help us with this?

Take-home messages

- Media and internet are effective ways of getting relevant information easily. There is a need to understand that each media is unique and different from each other, and is used for different purpose.

- Comprehensive information about an issue can be obtained by accessing various media. There is a lot of useful information, which is easily accessible.

Suggested additional activities

- The learners could look at media around them, and try to identify the various purposes different media is used for. For example, radio programs, television, social media, posters, pamphlets, newspapers, etc. Share your observations with one another, and with your parents at home. These observations may also be shared in the next class.

Activity 11.2 Real and Reel Life

LEARNING OUTCOMES

The learner

- Examines the information promoted through popular media
- Distinguishes between false and correct information
- Exhibits the skills to make informed choices

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Decision-making, Critical thinking, Effective communication, Self-awareness

RESOURCES

- Blackboard, Chalk, Case studies, Pen and notebook

Guidance for the facilitators

- Differentiate between 'Real' and 'Reel' life. Reel life is what we see on screen, which is made up while, real life is how we actually live our life.

Case Study 1

An advertisement promotes very low cost and ease of use of plastic spoons, plates and glasses that can be thrown after single use.

Discussion questions

1. What are the consequences of believing in this advertisement?
2. Who all pay the "real" cost of cheap plastic spoons, plates and glasses that have to be thrown after a single use?
3. Please suggest some alternatives to plastic spoons, plates and glasses that are not very expensive and are easy to use.

Case Study 2

An advertisement promotes a health drink that can increase six inches height within 6 months.

Discussion questions

1. Can anything that we eat or drink have such miraculous impact in such a short time?
2. Can 6 inches' height increase within 6 months just by drinking a health drink?
3. What factors contribute to height of an individual?

Case Study 3

An advertisement promotes high-speed cycle for “real boys” who want to move ahead in life.

Discussion questions

1. Who is the advertisement targeting? Please provide reasons for your response.
2. Are the advertisement reinforcing gender stereotypes? Support your answer with justification.
3. In your understanding, what are some of the traits of “realboys?”

Case Study 4

A popular advertisement promises that if a student joins XYZ coaching classes, 95% score is guaranteed.

Discussion questions

1. Is this a reasonable promise?
2. What can be the consequences of this promise if a student and her/his parents believe in this advertisement?
3. What may be required to score better in studies?

Transacting the activity

1. Divide the class into four groups. Name the groups 1, 2, 3, and 4, and give them chits with case studies 1, 2, 3 and 4 respectively. Give the groups 5 minutes to discuss their case studies within their groups.
2. You may go around and facilitate the discussion of each group, encourage participation, and if need arises give examples from popular media to initiate discussion.
3. Ask Groups to present their views before the rest of the class.
4. Let the rest of the class ask questions, and add their own points of view.
5. Repeat the process for the other groups as well.

Question

1. Now ask the whole class to discuss the following questions:
 - Have you ever come across any such advertisements on TV or Newspaper? Give examples.
 - Do you believe in the promises made in these ads?
 - Have you ever bought a product based on its advertisement? Was the result similar to what was portrayed in the advertisement?
2. Now ask the class to reassemble in their groups and within 5 minutes create an advertisement of 30 seconds to 1 minute.
3. Tell them that they can include jingles, dialogues etc. and use their creativity to sell the product in the market without making false promises.

Reflection questions

- You may have seen advertisements that make unrealistic promises. Have you ever been influenced by them?
- Do you think the products will sell if their reality is shown?

Take-home messages

- Advertisements are basically to attract people towards product or to project.
- There is a need to see these advertisement with question as whatever has been said is always totally correct, we should not believe everything in the advertisement.
- We need to be aware that not everything which is shown on media/internet is real. Always cross check and seek clarification from trusted sources.
- It is the responsibility of the user to ask questions, remain informed and make wise choices.

Suggested activities

- Be a Change-maker: Select one story each from at least three Media platforms that reinforces bias. Ask yourself a few questions: “Is this true? Is this necessary? Does this hurt anyone? Is this biased?” If yes, then write a strong letter to the local newspaper showing your displeasure towards media for perpetuating bias.

Activity 11.3 **Insights into Media and Internet**

LEARNING OUTCOMES

The learner

- Differentiates between various media platforms on the basis of reach and advantages;

- Analyses that each media is unique and is used for different purpose;
- Recognises media as a platform which promotes positive and useful information.

TIME REQUIRED

- One Period

LIFE SKILLS ENHANCED

- Decision-making, Critical thinking, Effective communication and self – awareness

RESOURCES

- Blackboard, Chalk, Notebook and pen, News Articles from the Local newspaper, Projector, computer and smart phone(Optional)

Guidance for the facilitators

- All channels of communication may provide some information that may be useful, some irrelevant and some harmful.
- Do read the fact sheet given at the end of the module. All the discussion points and examples have been provided to assist you. The internet links of most of these have been provided, do try to see the examples on computer or smartphones to be better prepared.
- If available, download some of these on the computer or a smart phone, so that you can share these with the learners.
 - Inform the learners that they will discuss the power of media in portraying positive messages. Positive messages are those which inform, motivate and give accurate information and useful messages to the audience.
- Form four groups, namely Internet, TV, Radio and Newspaper group
- Let the learners decide the group they wish to join. Encourage the groups to be evenly distributed
- Share the specific group work given below and give the learners 10 minutes to discuss.
- Invite each group to present and discuss their group work in the classroom in 2–3 minutes.

Group

Television Group

Enact an advertisement on education. Focus on how education can lead to break gender stereotypes and make right choices.

Discussion questions

- What makes the message, presented by the group, a positive message?
- Do you often find programmes on TV which have positive and relevant messages? Please provide examples.
- What kind of messages do you usually get from TV?

Radio Group

Make a 30 second jingle encouraging children not to smoke. All the group members should take part in conceptualising and making the script. Present it in front of the class

Discussion questions

- What makes the message, presented by the group, a positive message?
- Do you often find programmes on Radio which have positive and relevant messages? Please provide examples.
- What kind of messages do you usually get from Radio?

Newspaper Group

Headlines often influence readers' opinions. Compose a catchy headline for each of the following topics relating to lives of children, one reflecting a positive aspect. For example, India being a young nation can be presented as follows: A younger India, poised for growth (Positive)

Topics

- Relationships
- Gender Equality
- Fashion
- Nutrition and Health
- Peer Pressure
- Films

Discussion questions

- Which headlines, presented by the group were positive in nature?
- Do you often find text in newspaper which have positive and relevant messages? Please provide examples.
- What kind of messages do you usually get from newspapers?

Internet Group

Be a social change maker - Challenge your friends online, in not more than 50 words, to stop use of plastic for a week (poly bags, plastic disposables, containers, etc.). Those who accept the challenge should in turn challenge their friends to form a chain of awareness. You can give a name to this challenge like #NoPlasticWeek #SayNoToPlastic.

Did you know – The symbol # is called hashtag. A hash sign (#), written before a word or phrase and used on social media helps to identify messages on a specific topic.

Discussion questions

- Do you think message, presented by the group is positive in nature?
- Do you often find content of internet which have positive and relevant messages? Please provide examples.
- What kind of messages do you usually get from Internet?
- Share specific group work given below and give the learners 10 minutes to discuss. Invite each group to present their group work to the class in 2 -3 minutes each and discuss

Discussion

- Media is not just a source of entertainment but also a very important source of new and useful information.
- Each media platform is unique and can be used for various purposes as we discussed in the group work. We must be mindful while accessing the information from different sources and question the information.
- Internet is a relatively new media platform that has revolutionised our worlds. It allows us to choose and decide the kind of information we wish to access at any given time and at our convenience.
- Media also allows us to engage constructively in addressing issues important and relevant to us. For example, citizens could click pictures or make videos of unsafe areas in their neighbourhoods/cities, initiate discussions on common concerns such as corruption and so on, and forward to media channels, and government departments to raise public awareness, highlight common concerns and seek redressed from appropriate authorities. This can be done by writing into local newspaper columns, using apps, Facebook and twitter accounts of departments or sending emails. This is also referred to as Citizen Journalism that allows citizens to take actions and participate actively.

Reflection questions

- What are some of the advantages and disadvantages of living in an age where different media sources are able to churn out a lot of information on different topics all the time?

Take-home messages

- Media is a source of both - information and entertainment
- Internet especially allows access to content at our convenience
- Citizen journalism helps citizens to contribute in good governance and take constructive action in solving relevant, local issues.

Suggested Activities

- Be a health ambassador - Collect newspaper articles on measures to prevent lifestyle diseases. Pick any two measures which you would adopt and promote for leading a healthy life.

Activity 11.4 **Real or Fake: Finding it Right**

LEARNING OUTCOMES

The learner

- Demonstrates skills to investigate the authenticity of messages
- Demonstrates skills to distinguish between positive and negative messages
- Decides what to access and use from the various messages being delivered by the media

TIME REQUIRED

- One Period

LIFE SKILLS ENHANCED

- Decision-making, Critical thinking, Problem solving

RESOURCES

- Chart paper, Pen, Photocopy of the Handout given on 3 real and 3 fake news from different media, Photocopy of/Copy of parameters to check authenticity of news

Guidance for the facilitators

- The aim of this session is to enable learners to distinguish between real and fake news.
- The news items provided in the module are deliberately a mix of false news and real news.
- All odd numbered news items are real (1,3) and even numbered are fake (2,4)
- As the news items are detailed, these are provided at the end of this activity.
- It may be useful to make handouts of news items on small cards, or chart paper. Once made these can be used each time this session is conducted.

Transacting the activity

- Divide the learners into six groups.

- Tell learners that in this session, we will develop the skills to find out if a news item available on different media, is real or fake.
- Provide one news article to each group. Ask each group to read the news item carefully.
- Now ask the group to discuss whether the news item is true or fake, and arrive at a decision within 5-6 minutes.
- Invite each group to present their decision, and the analysis leading to it, to the whole class
- Following each presentation, ask the groups how they arrived at their decision?
- After all the groups have made their presentation, tell them that you will share some parameters that can help in finding out if news is real or fake.
- Share with them the following parameters—

- What is the source of the news? Is the source usually associated with authentic news reporting? Agencies like Press Trust of India (PTI) and The Asian News International (ANI) are some authentic sources. Most of the fake news would show a source you have never heard of, or no source may be mentioned.
- Check if the same news has been reported by any other reputed newspaper/web news sites, etc.
- If you notice spelling mistakes, lots of ALL CAPS, or dramatic punctuation?!?! It is probably fake. Authentic sources have high proofreading and grammatical standards.
- Check if the news contains some survey or poll without any authentic source or details.
- Note that the same data/information can be presented in multiple ways. Hence, if any information appears to be insensitive or hurtful to the feelings of some sections of society, it is important to check it from more than one source.
- The information is probably unreliable, if the content is something that is unheard of, or too dramatic, or promotes unscientific behaviour.
- A website with an odd domain name may be unreliable.
- If the story presents only one viewpoint on a sensitive or controversial topic, it is likely to be biased and unreliable news.
- The story is probably fake if it is a little too funny or interesting and is seen only on social media platforms, but not reported on other serious news platforms.
- The news is fake if the website carries a disclaimer (e.g. Onion news, Faking news, etc.

Ask the learners to re-assemble in their sub-groups and evaluate the news on the parameters given above in 5-6 minutes.

- The groups will now re-identify the given news item as real or fake. They have to justify and support their arguments.
- After all the groups have shared their findings, the facilitator will reveal which news item was real and which was fake.
- At the end of the discussion the facilitator may share some examples of extreme consequences of inability to identify real news such as:
 - lynching of innocents on suspicion of being child-lifters,
 - Promoting food items that supposedly reduce weight or cure diseases.

Summing up

- In today's digital world, news spreads rapidly. It is important for us to identify reliable information, and fake information.
- Inability to identify real news from fake, can lead to dangerous situations, for example, false information was spread through mobile phones that some men have come to kidnap children, due to which local people lynched these innocent people (beat them until they died). (e.g. February 2018, Uttar Pradesh).
- On the other hand, real and factual information can be of immense benefit to society. For instance, media reports about abuse of girls and women within shelter homes in Bihar, has led to law courts taking up the issue.
- It is important to verify authenticity of any information before reacting to it, or forwarding it on social media. This will protect you from being party to spreading misinformation, which is an offence.

Reflection questions

- How did you discover if the news is real or fake?
- What are the two most important things you will keep in mind if any news flashes before you to check its authenticity?
- What do you do, if you find out the news you had forwarded is a fake news?

Take-home messages

- The news and messages received through different modes of media may be real or fake.
- Real messages help make positive changes, while fake messages may lead to dangerous situations, as well as divert attention from real issues.
- It is important to question whether news is real or fake, before believing it
- Before forwarding or propagating any news, try to check its authenticity, especially if it doesn't seem right to you.
- If fake news is identified, never spread it further.

Suggested Activities

- Share what you learnt about fake news with your family and at least two friends in your neighbourhood. Teach them the skills to find out if news is real or fake.
- Therefore, it is necessary to examine any news before believing it.

NEWS ITEM 1

जार्ने पहाड़ तोड़ने वाले शख्स दशरथ मांझी के बारे में

aajtak.in [Edited By : ऋचा मिश्रा]

नई दिल्ली, 17 अगस्त 2016, अपडेटेड 12:35 IST

दशरथ मांझी, एक ऐसा नाम जो इंसानी जज्बे और जुनून की मिसाल है. वो दीवानगी, जो प्रेम की खातिर ज़िद में बदली और तब तक चैन से नहीं बैठी, जब तक कि पहाड़ का सीना चीर दिया.

जिसने रास्ता रोका, उसे ही काट दिया:

बिहार में गया के करीब गहलौर गांव में दशरथ मांझी के माउंटन मैन बनने का सफर उनकी पत्नी का ज़िक्र किए बिना अधूरा है. गहलौर और अस्पताल के बीच खड़े जिददी पहाड़ की वजह से साल 1959 में उनकी बीवी फाल्गुनी देवी को वक्त्त पर इलाज नहीं मिल सका और वो चल बसीं. यहीं से शुरू हुआ दशरथ मांझी का इंतकाम.

अकेला शख्स पहाड़ भी फोड़ सकता है!

साल 1960 से 1982 के बीच दिन-रात दशरथ मांझी के दिलो-दिमाग में एक ही चीज़ ने कब्ज़ा कर रखा था. पहाड़ से अपनी पत्नी की मौत का बदला लेना. और 22 साल जारी रहे जुनून ने अपना नतीजा दिखाया और पहाड़ ने मांझी से हार मानकर 360 फुट लंबा, 25 फुट गहरा और 30 फुट चौड़ा रास्ता दे दिया

सौजन्य: NEWSFLICKS

NEWS ITEM 2

सचिन की BMW के 6 गियर खराब, ट्रैफ़िक और गड़दों की वजह से दो साल में बस 2 ही गियर यूज़ हुए

02, Aug 2018 By [बगुला भगत](#)

मुंबई. मास्टर ब्लास्टर सचिन तेंदुलकर ने बड़े अरमानों से दो करोड़ रुपये में 8 गियर वाली BMW 760Li खरीदी थी। कंपनी ने अपने विज्ञापन में कहा था कि ये कार 5 सेकेंड में ही 0-100 किलोमीटर की स्पीड पकड़ लेती है। लेकिन आज 2 साल हो गये हैं, सचिन की BMW कभी 20 से ज़्यादा की स्पीड नहीं पकड़ पायी है।

और इसकी वजह है मुंबई का ट्रैफ़िक और उसके गड़दे। इनकी वजह से सचिन को अपनी BMW दो साल से पहले और दूसरे गियर में ही चलानी पड़ रही थी और यूज़ ना होने की वजह से उसके ऊपर के 6 गियर खराब हो गये हैं। इसका पता ब्लास्टर को तब चला, जब कल आधी रात को थोड़ी दूर तक सड़क खाली दिखी और सचिन ने कार दौड़ानी चाही। लेकिन जैसे ही उन्होंने एकसीलेटर पर पैर दबाया, तो कार दूसरे से तीसरे गियर में पहुँची ही नहीं! आज सुबह जब वो कार लेकर सर्विस सेंटर पहुँचे तो मैकेनिक हनीफ़ ने बताया कि जो चीज़ यूज़ नहीं होती, वो पड़े-पड़े खराब हो ही जाती है। इस बारे में सचिन का कहना है कि मैं तो अब पुणे शिफ़्ट होने की सोच रहा हूँ, ताकि कार की स्पीड का मज़ा ले सकूँ। इसकी अधिकतम स्पीड 250 किमी प्रति घंटा है, जिसे अभी तक मैं बस सपने में ही पकड़ पाया हूँ! आइला!"

NEWS ITEM 3

Nutrition for adolescent

Appropriate guidance

Adolescence is the time to inculcate food and exercise habits with ensure good health forever. There are simple methods of taking care of health during this period.

Eat at least two to three meals of fruits in a day for a glowing complexion and to keep constipation away.

Coconut water and fresh fruit juice will improve immunity and also provide vital vitamins

A minimum of two glasses of skimmed milk is a good midnight snack when it is exam time or when awake late for projects.

A milkshake is a better choice as compared to an aerated drink

Breakfast is the most important meal, as it ensures minimum brain damage due to an overnight fast

A water intake of three-four liters per day clears all toxins from the body and keep the skin healthy and glowing

Sit and eat peacefully, because body absorbs nutrition under minimum anxiety and stress from food we eat.

NEWS ITEM 4

Engineering still the Number 1 choice of students who don't know what they want to do in life

05, Jan 2018 By [Sandeep Kadian](#)

New Delhi: A recent survey has shown that engineering college is still the most preferred destination of students who don't know what they really want to do in life. After many engineering colleges closed down in some states during the last few years, there was some speculation that clueless teenagers are no longer interested in doing engineering while they figure out what to do with their lives. However, this survey has proved them wrong and shown that engineering retains its charm.

Activity 11.5

Online Safety: My Responsibility

LEARNING OUTCOMES

The learner

- Identifies safe and unsafe situations common in the virtual world
- Uses media safely by recognising unsafe situations
- Plans how to respond in unsafe situations

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Critical thinking, Problem solving, Effective communication

RESOURCES

- Blackboard, Chalk, Notebook and pen, Situations written on blackboard or on slips of paper

Guidance for the facilitators

- Do read the fact sheet to understand situations which can be unsafe for the learners in the fast growing world of internet as well as gadgets, mobile phones, games, apps and soon.
- Ask the learners about the different purposes for which they use phone and internet.
- Ask learners if they had ever indulged in making crank calls just to have fun. Tell them that all this and much more comes under unsafe online and media behavior.
- Tell them that although different types of media can be used for the same purpose, all forms of media cannot be used for all purposes e.g., newspaper is not the correct media for sending information to a small group of people.
- Divide the class into 8 groups. Assign one of situations to each group.
- Readout the Discussion questions, asking each group to note them down. You could also write the questions on the blackboard.
- Give 8-10 minutes to the groups to discuss the situation.
- Now invite the groups to make their presentations. Ask each the group to first readout the situation given to them, and then present their views.

- Ask other groups to add to the discussion, giving their opinions on each situation, and whether they agree/disagree with the group's presentation.

Situation-1

Riya receives a call on the landline number. The caller informs Riya that a company has shortlisted this number for a free gift. They need to confirm the address to deliver the gift. They also ask what would be the best time to come when someone will be there to receive the gift.

Situation-2

Dev is chatting online with someone he has never met. However, they have some common friends, and share a common interest in music. So, Dev thinks it is alright to share the phone/ WhatsApp number so that Dev can receive a rare version of the favourite song.

Situation-3

Lalit has been chatting with Priya over phone for several months. Lalit says they are both the same age, and live nearby. Lalit wants to meet Priya and take her out for shopping.

Situation-4

The teacher asked the class to work on an assignment for which Mayank had to find information on the internet and from magazines. Mayank worked very hard on it but when the teacher returned the assignment, he had very poor marks. At many places, the teacher had written, source not acknowledged or copied.

Situation-5

Naresh receives a trail of messages on social media from his friend, Rohan, which are abusive, insulting and threatening.

Situation-6

Aastha likes sharing location on a social networking site. Wherever Aastha goes—to a restaurant, travel, visiting friends or family, she is in the habit of adding location. One day Aastha noticed someone following. She got scared and entered a shop for protection. A few days later this happened again.

Situation-7

Rehana gets a call from a close friend informing that the friend has lost baggage in a foreign country. The friend gives an account number to send some money which would be returned when the friend returns to India.

Situation-8

Tara sees an inappropriate film clip in Wendy's mobile. Wendy informs that the mobile shop in the village has many more and uploads on mobile for a small amount of money. Tara is tempted.

Discussion questions

- Is the given situation safe or unsafe?
- What would you do if you were in a similar situation?

After each group has made their presentation, the facilitator may conclude by sharing the following answers to situations:

Situations 1 and 2: Giving out a lot of personal information/ address on the internet or phone to either someone who is known or unknown can be unsafe. Therefore, before sharing such information we need to think about the possible consequences. Be careful about what kind, how much and with whom are you sharing the information. People may misuse this information to harm or harass you.

Situation 3: while chatting there is no way to ascertain the real age of someone as people can easily lie over phone. This is called tricking (refer to fact sheet). People who trick on the internet or over phone may try to do it by flattery, expressing understanding or empathy, or making false promises. Agreeing to meet someone face to face or on video call is potentially an unsafe decision.

Situation 4: Always give reference of the source from where the information has been taken. As per Intellectual Property Rights (IPR) laws, it is not allowed to copy and paste entire information. This is considered cheating and you can be punished for it. Please rewrite it in your own words and with your point of view.

Situation 5: The first step is to remove the person from the contact list and block the sender of the message. Naresh must recognise that this is cyber bullying. Based on his comfort level, Naresh may want to discuss with Rohan and take an informed decision about their friendship. Naresh can also inform a trusted adult and seek help.

Situation 6: Adding location on social media may reassure the family about your whereabouts, but it exposes you to potentially unsafe situations. For e.g. It is not a good idea to always share location or other personal details on your profiles. If Aastha really likes doing that, she should first move to some other location and then share the previous location. Aastha should avoid adding location of places where she spends maximum time, like home, school, tuition, etc.

Situation 7: If you receive such a call first inform your parents. Then try and make contact with the friend's family, by doing this you will get to know whether they are lying or telling the truth. Remember that instead of a call you may receive an email or an online message.

Situation 8: A lot of content is available online and all of it might not be age appropriate. Tara needs to be sensitized that online media can be used for many useful things rather than watching inappropriate content.

Note: Although the world of internet and media has made our life easier in some ways, it may sometimes put us in harm's way.

- Safe situation means when there is no physical or emotional threat to you and when you feel happy and comfortable. Unsafe situations are those when there is either an emotional and/or physical threat. We may feel scared, sad, angry, confused and uncomfortable.
- Just as in real life, some people in the virtual world may also commit all sorts of crime. These could be as simple as a crank call to using smart phone camera to click pictures of people without their knowledge. We need to be prepared, know what to do if we get caught in such a situation and respond quickly.
- Cyber crime can cause inconvenience, financial loss, or may threaten a victim's personal safety. It is better to be well informed and ready to face such challenges.
- We should also make sure that we never to take part in such crimes!

Reflection questions

- What are some other unsafe situations related to internet, that you might have experienced or heard about?
- How would one get out of such situations safely?
- If you have been in any such situation, how did you feel? What did you do? Would you respond differently to such a situation now?

Take-home messages

- Conclude the session by saying that even virtually there can be times when we feel unsafe. As users, we should be mindful of the potentially unsafe situations and be prepared to deal wisely with them.

- Though phone (landline or mobile), gadgets, apps make our lives simpler, be mindful of your own and other’s safety. Try never to indulge in any harmful activity even if it is “just for fun.”
- Do not worry if you have already shared something that you now think you should not have done. Instead of hiding and facing it alone, tell a trusted adult about it.

Suggested additional activities

- Check all your social accounts, emails accounts and profiles. Edit and remove any personal information that might put you at risk.
- Share the safety measures you have learnt today with at least five people from family or friends who are keen users of smart phone or internet.

Activity 11.6 **Time Diary: My Virtual Life**

LEARNING OUTCOMES

The learner

- Discerns how much time to spend online and on gadgets;
- Plans to regulate time spent online and on gadgets;
- Distinguishes and accesses age appropriate content online and offline

TIME REQUIRED

- One period

LIFE SKILLS ENHANCED

- Decision-making, Critical thinking, Problem solving

RESOURCES

- Blackboard, Notebook, Pen

Guidance for the facilitators

- In order to use your time, you first need to become aware of how exactly you are spending every minute and hour of the day.
- It is for this we will all be making a time diary.
- Do you remember doing an activity on time diary previously? What did you notice? We will again do a similar activity but this time along with the time we will also look at the content we watch and activities we do on internet and gadgets.

- Draw the following table on the blackboard

(1) Time	(2) Activity	(3) Media/ Gadget that you access during this time	(4) Time you spent on media/gadget	(5) The type of news item/ content that you accessed
E.g., 6.00- 7.00 a.m.	Wake up and get ready	Newspaper	15 minutes	Read news on first page and sport news

- Ask the learners to draw the table in their notebooks.
- Tell them to think over their day and recall all their activities.
- Ask the learners to think through their everyday life, breaking a day into activities/routine from the time they wake up to the time they sleep. Tell them they can make rough notes if they want, on another page of their notebook. Tell them to fill the four columns as follows:

Column 1, Time – Please fill this column according to your daily schedule. The time slabs can be flexible and may vary from one learner to another.

Column 2, Activity – Write the activity against each time slab. For e.g., watching TV, travelling, reading etc.

Column 3, Media/gadget –Media gadget that you access during this time – include all kinds of media or gadgets, cell phone, TV, newspaper etc.

Column 4, Time spent – Specify time spent, number of minutes/hours and what did you do in use of these gadgets. For example, 10 minutes, saw trailer of a new film and a played an old Hindi song

Column 5, The type of news item/ content accessed – Specify the type of content accessed

- Generate a discussion for about 10 minutes on the type of content learner’s access in these hours.
- Ask them what they do when they see pop-up advertisements while they are online.
- Ask them if the time spent online is disturbing their normal routine and relationship with their family and friends.
- Encourage everyone to participate actively in the discussion.

- Explain that spending too much time online and in playing games can be addictive. It can lead to negative impact on sleep pattern, health, studies and relationships.
- Conclude the discussion by saying internet and media, could be one of the most useful tool to get authentic information. Internet provides a lot of freedom to all to express themselves. Some people use it irresponsibly to spread misinformation and biases.

Discussion questions

- Do you think the content you accessed justifies the time spent on internet and gadgets?
- How does this content influence your thinking and impact your life?
- Have you ever forwarded content without verifying its authenticity? If yes, why?

Summing up

- Time is precious, therefore it is very important to see how productively we spend our valuable time. It is healthy to go out, play, do exercise, pursue hobbies, rather sitting inside the home, watching TV.
- It is important to have a check on what are you accessing through media. Ensure that the information is appropriate for your age. If you encounter any kind of uncomfortable message which you are unsure of, please talk to a trusted adult before talking to your peers.
- Your information can be misleading to others. Hence, it is important to share it with others after authenticating it.
- If you feel that the time spent online or on playing games online, is disturbing your sleep pattern, isolating you from others, or considering taking a potentially dangerous challenge, seek help from trusted adults immediately.

Reflection questions

- Do you think adults should supervise young people's access to media?
- Who according to you bears the responsibility of accessing the type of content available in media?
- According to you what kind of support should be made available to young people for developing their skills to access age appropriate content online and offline?

Take-home messages

- People need to regulate the use of media and internet. Overuse of media can lead to impact on our physical as well as mental health.
- Overuse could also lead to addiction which may have harmful effects.
- We need to use media in safe, responsible and self-regulated ways.

Suggested additional activities

- Show your time plan to a trusted adult at home and take their help in making a plan. Focus not only on the time spent but content reviewed too. Try to include content with positive messages.
- Try to follow the plan for one week. Record any difference in your learning and performance in school. Check improvement in hobbies, skills as well as physical and mental health. Share the changes with your peers.

FACT SHEET

The facilitator may want to review the fact sheet before conducting the activities. The information below is pertinent to Activity 1 and should ideally be utilised for expanding on the discussion proposed in Activity 1.

Discussion points for Television Group

Let's understand how one topic can be portrayed in two different ways.

Positive messages on disability – *Like Taare Zameen Par, life of persons with disabilities shown with sensitivity in films like Barfi, Black, Koi Mil Gaya, Iqbal*

Negative messages on disability – *Same issues have been portrayed in an insensitive manner in films like Golmaal, Housefull, Tom Dick and Harry etc.*

Some more examples of positive messages

Positive example of an TV Advertisement	Right to Education https://www.youtube.com/watch?v=bz2_XJbKVD0&list=PLYB95NCpY207DfiPpbM2ricxlifs-Ybtq&index=1 Are you a 'Khota Sikka' for taking dowry? https://www.youtube.com/watch?v=zCxypxlyKrs
Positive example of an TV Show:	Main Kuch Bhi Kar Sakti Hoon <i>Satyamev Jayate</i>
Positive example of a Film:	<i>3 Idiots</i> <i>Taare Zameen Par</i>

Discussion points for Radio Group

Farm and Home programmes are broadcast by all stations of All India Radio (AIR). Programmes are designed based on the local day to day needs of the farming community incorporating latest information and technology for best agricultural output, weather forecast, food preservation etc. The programmes are broadcast daily in the morning, noon and evening with average duration of 60 to 100 Minutes per day for Rural Women, Children and Youth. The Farm and Home units of AIR broadcast composite programmes including equal segments of rural development scheme and hard-core agriculture programmes like animal husbandry, fisheries, dryland and wasteland agriculture and also on segments dwelling on employment schemes, loan and training facilities, sanitation, health hygiene and nutrition, etc. Environment - All the AIR stations are giving wide publicity to the legal factors concerning environment and forestry.

Health and Family Welfare programmes are regular broadcasts of All India Radio. All regional and Local radio stations produce and broadcast these programmes in their respective regional languages. Subjects covered in these programmes are

related to T.B., leprosy, reproductive tract infections (RTIs) and sexually transmitted infections (STIs), AIDS, drug abuse and many more. Some programmes focus on maternal and child care, breast feeding, adverse child sex ratio and to alter the negative mindsets leading to sex selective abortions etc. Health campaigns on disability, immunisation, Polio, blood disorders like Thalassemia, eye donation are publicized widely in these programmes.

Children programmes are broadcast from all regional and local radio stations of AIR on weekly basis in their respective regional languages. These programmes are designated for age group 5-7 years and 8-14 years. Special programmes for rural children are also broadcast on AIR stations. Plays, short stories, features, choir, interviews, stories from epics etc are part of these broadcasts. Children's Day is celebrated on November 14 as Baal Diwas with special children activities, stage shows and invited audience programmes.

Women programmes of AIR covers subjects related to socio- economic development of women, health, family welfare, food and nutrition, scientific home management, women entrepreneurship, education including adult education, women empowerment, gender issues etc. Special programmes focusing on the status and importance of the girl child are broadcast throughout the year to create social awareness to welcome the girl child's birth. These programmes also aim at creating social awareness about the rights and privileges of women through the propagation of legal literacy. Different traditional folk forms are used to communicate with the rural women audience.

Discussion points for Newspaper Group

STEPS TO DEAL WITH THE PROBLEM



EARLY TALK

Have conversations about digital citizenship, online behaviour, sexuality and peer pressure early and often with the kids

EQUIP YOURSELF

Read about the internet and new cellphone apps to empower yourself with the knowledge and tools to initiate conversations with the kids

WHAT TEACHERS CAN DO

Besides sex education, teach kids about the internet and the responsible online behaviour

If you notice a drastic change in a child's behaviour, talk about it with the child while keeping the parents in the loop about it

DON'T FREAK OUT

If you find your child is sexting, understand it's a fairly normative behaviour. It doesn't mean your kid is deviant or in a life of crime

TRACING ONLINE HABITS

According to technology consultancy Counterpoint Research, there were about 650 million cellphone users in India in 2017, and just over 300 million of them had smartphones

On an average, a user in India spends 200 minutes a day on mobile apps, lower than the US average of 300 minutes a day, a 2017 report by investment firm Omidyar Network stated

GAIN CONTEXT

Find out more about your child's relationship with the person s/he sexting. Is it used to flirt or maintain the relationship? Talk through risk and consequences of sexting

70% The total time Indians spend on social and entertainment activities on their phones

38% This is the time Indians spend only on social media (out of the 70%)

सात दिवसीय प्रशिक्षण

युवाओं ने जाना स्वास्थ्य केन्द्र का काम-काज

कलकत्ता न्यूज नेटवर्क



दिल्ली: इंटरनेट पर बहुरंगीय वेबसाइटों के विकास ने नए दिग्दर्शकों को जन्म दिया है। इन वेबसाइटों के माध्यम से युवाओं को स्वास्थ्य केन्द्रों के बारे में जानकारी दी जा सकती है। इस दौरान शिक्षकों को भी प्रशिक्षण देना होगा, जिससे वे युवाओं को सही दिशा दे सकें।

एनडीए सरकार के अंतर्गत ही स्वास्थ्य केन्द्रों के माध्यम से युवाओं को जानकारी दी जा सकती है।

युवाओं ने स्वास्थ्य केन्द्रों के काम-काज को जाना। इस दौरान शिक्षकों को भी प्रशिक्षण देना होगा।

IT'S NOT ENOUGH TO SAY NO TO DRUGS

ADDICTION SHOULD BE VIEWED AS A DISEASE, REHABILITATION AS TREATMENT AND AVOIDANCE AS PATIENTS



Medicine involves not just the patient but also the family. It's a family normative behaviour. It doesn't mean your kid is deviant or in a life of crime.

It's always hard to say "No" to drugs. It's not enough to say "No" to drugs. It's not enough to say "No" to drugs. It's not enough to say "No" to drugs.

It's not enough to say "No" to drugs. It's not enough to say "No" to drugs. It's not enough to say "No" to drugs.

In case local newspaper articles are not readily available with the facilitator, some newspaper articles covering adolescent issues are given on the next page:

Discussion points for internet group

Some examples of positive messages on internet

Example of Positive Websites

<http://hi.vikaspedia.in>

<https://swayam.gov.in>

Example of Positive Websites

<https://www.microsoft.com/en-us/p/e-pathshala/9nblggh5x1xw?activetab=pivot%3Aoverviewtab>

www.nhp.gov.in/healthyliving/adolescent-health-10-19-years

Example of Positive Applications (Apps)

HELP app of NACO, Saathiya, Anaemia Mukta Bharat, eMitraatc Umang

Example of Positive Online Social Campaigns

The Rice Bucket Challenge was conceptualised by ManjulathaKalanidhi, a journalist from Hyderabad. This challenge was all about donating one bowl of rice (or if anyone wants to donate more) to any person or family in need. Participants were required to take a picture and post it on social media (Rice bucket Challenge's Facebook Page), if they wished they could also tag their family and friends. For this initiative Manjulatha has been awarded the Karmveer Chakra Award.

Dark is Beautiful

In India there is a liking towards the 'fair' skin and pressure is more on Indian women. This thought is further endorsed in media especially through advertisements of fairness creams. Job promotion, employment, marriage alliance is shown dependent on the colour of the skin. To counter the ill effects of this mindset, Kavita Emmanuel, Founder-Director of the Women of Worth movement, launched the 'Dark is Beautiful' campaign with an aim to create awareness about harmful effects of discrimination people face based on skin colour. The campaign received appreciation and ASCI (Advertising Standards Council of India) came up with stringent guidelines for advertisements of fairnesscreams.

To seek further help for control of online activity, facilitators may want to refer learners to the SHUT Clinic (Service for Healthy Use of Technology), NIMHANS Centre for Well-Being, NIMAHNS, Bengaluru, Karnataka.

E-mail:shutclinic@gmail.com

Additional useful points on recognising addiction to internet and online platforms and tips for safe use of internet and online platforms are provided in the fact sheet at the end of the module on the same theme for upper primary grades. Facilitators should familiarise themselves with that information and use it in their transactions, as appropriate.

It is useful for facilitators to know and also help learners recognise addiction to internet. Some of the symptoms are summarised below:

- Craving (continuous desire to use online platform)
- Loss of control (continues to use them even when does not intend to)
- Coping (use media to relax or to feel good)
- Compulsion (unregulated habit to use media)
- Bearing consequences (feel pain in eyes/neck/fatigue due to media use), feel disturbed if not allowed to use media
- Spending more time on media and reduced play or offline activities; lesser interaction with family; grades are going down etc.)
- Some useful tips for safe use of internet and online platforms are summarised below. The facilitator may share this information with the learners as appropriate.
- Avoid sharing personal details (name/address/school name etc.) on online platforms.
- Take a break if your use of media exceeds more than 30 minutes. During the break:
 - slowly blink your eyes 10 times (it will reduce the strain/fatigue in your eyes),
 - move your head forwards and backwards—5 times each as well as right and left—5 times each (it will help relieve the stress in the neck),
 - move your wrist clockwise and anticlockwise—5 times each (it will help in relaxing hand).
- Avoid use of internet/ any online platform 30-40 minutes before sleeping time.
- Follow some of your daily activity like meal times, newspaper reading, sharing details of day at school/college with family/friends without using internet and/or an online platform simultaneously.
- Ensure about 30-40 minutes of physical activity everyday.
- While using various online media, ensure the following:
 - Distance not less than 50 cms from computer,
 - Distance not less than 40 cms from Tablet
 - Distance not less than 30 cms from Smartphone

LAWS AND POLICY TO SAFEGUARD INTERESTS OF CHILDREN AND ADOLESCENTS

DIFFICULT SITUATIONS FOR ADOLESCENT	AVAILABLE SUPPORT MECHANISMS (Laws/Policies/Key Programs/Schemes)	PEOPLE/BODIES WHO CAN HELP
Discontinued education	Free and compulsory education at a nearby school under Right to Education, Mukhyamantri Ladli Laxmi Yojna; Child Helpline 1098; Anganwadi and ICDS Centres; Kasturba Gandhi Balika Vidyalaya Scheme (KGBV Scheme)	Women Helpline 1091; child Helpline 1098; parents–family; schools (teachers, school management committees, village education committees); Dai/midwife/ASHA workers; ICDS centres, Anganwadi workers; neighbours–communities; panchayat members; religious institutions (priests); police stations (chowkidars, child protection officers); MLA, MPs; local NGOs; administrative officers (BDOs); local media groups
Lack of livelihood	Vocational training courses run by NGOs Pradhan Mantri Kaushal Vikas Yojana (PMKVY): Ministry for Skill Development & Entrepreneurship (MSDE) has been formed to focus on enhancing employability of the youth through skill development. Skill India is certain to bring a lot of advantage and opportunities for these young Indians	
Child marriage	The Prohibition of Child Marriage Act, 2006 (PCMA), Mukhyamantri Kanyadaan Yojana, Mukhyamantri Kanya Vivaah Yojana.	
Dowry and domestic violence	Protection of Women against Domestic Violence Act, 2005 (PWDVA) Indian Penal Code —Punishing Rape (Article 376)	
Sexual violence/ physical abuse	The Juvenile Justice Act, 2000, amended in 2006—Includes redress mechanisms and protection measures for victims.	
Forced pregnancy	The Protection of Children from Sexual Offences Act (POCSO), 2012—Comprehensive law expanding the scope and range of forms of sexual abuse. It also defines guidelines for child-friendly police and courts. Section 498A of IPC—Indian Penal Code provides for criminal complaint in cases of domestic violence Contraception measures	

DIFFICULT SITUATIONS FOR ADOLESCENT	AVAILABLE SUPPORT MECHANISMS (Laws/Policies/Key Programs/ Schemes)	PEOPLE/ BODIES WHO CAN HELP
Forced sex selection in babies	<p>The Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994.</p> <p>Right to survival: According to Government of India, a child life begins after twenty weeks of conception. Hence the right to survival is inclusive of the child rights to be born, right to minimum standards of food, shelter and clothing, and the right to live with dignity.</p> <p>Contraception measures</p>	
Development and growth	Right to Development	Family, community and systems
Child Labour	Child Labour (Prohibition and Regulation) Amendment Act, 2016 of India	Police and local NGOs; administrative officers (BDOs); local media groups
Substance abuse	<p>1987: Prevention of Illicit Traffic in Narcotic Drugs and Psychotropic Substances Act.</p> <p>COTPA: Cigarettes and Other Tobacco Products Act: 2003- The Act prohibits smoking of tobacco in public places.</p> <p>Advertisement of tobacco products including cigarettes is prohibited where tobacco products are sold.</p> <p>Tobacco products cannot be sold to person below the age of 18 years, and in places within 100 metres radius from the outer boundary of an institution of education, which includes school colleges and institutions of higher learning established or recognized by an appropriate authority.</p>	<p>Police and local NGOs;</p> <p>administrative officers (BDOs); local media groups and schools</p>

DIFFICULT SITUATIONS FOR ADOLESCENT	AVAILABLE SUPPORT MECHANISMS (Laws/Policies/Key Programs/ Schemes)	PEOPLE/ BODIES WHO CAN HELP
Protection of children online	<p>Information Technology Act, 2000</p> <p>The Indian Information Technology Act, 2000 (amended in 2008) is the main law dealing with cybercrimes and technology-related issues. It lists various crimes and their punishments. Many of these crimes are also punishable under other statutes such as the Indian Penal Code</p>	Family, community and systems
HIV/AIDS	<p>Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome (Prevention and Control) Act, 2017 in force from 10th September, 2018.</p> <p>The Act, safeguards the rights of people living with HIV and affected by HIV. The provisions of the Act address HIV-related discrimination, strengthen the existing programme by bringing in legal accountability, and establish formal mechanisms for inquiring into complaints and redressing grievances.</p> <p>Every HIV infected or affected person below the age of 18 years has the right to reside in a shared household and enjoy the facilities of the household. The Act also prohibits any individual from publishing information or advocating feelings of hatred against HIV positive persons and those living with them.</p>	

REFERENCES

- An Assessment of Adolescence Education Programme in India.* 2016–17. NCERT, Regional and Country Offices of UNFPA and UNESCO.
- Convention of the Rights of Child.* 1989. General Assembly, UN.
- Cyber Safety and Security.* Guideline for School. 2019. Central Institute of Educational Technology (CIET), NCERT, New Delhi.
- Health and Physical Education, Textbook for Class IX,* 2017. NCERT, New Delhi.
- Indian Society.* 2015. TextBook for Class-XII, Department of Education in Social Sciences (DESS), NCERT, New Delhi.
- International Institute for Population Sciences (IIPS) & ORC MACRO. 2016. *National Family Health Survey (NFHS 4).* 2016–17.: India: Volume I. IIPS Mumbai.
- 2007. *National Family Health Survey (NFHS -3), 2005–06:* India: Volume I, IIPS, Mumbai
- International Institute for Population Sciences (IIPS) & Population Council .2007. *Youth in India: Situation and Needs, (2006–07),* IIPS, Mumbai.
- Ministry of Women and Child Development of India. 2007. *Study on Child Abuse in India,* New Delhi.
- National Curriculum Framework-2005.* NCERT, New Delhi.
- National Report on Role Play and Folkdance Competitions. 2018. *National Population Education Project(NPEP),* DESS, NCERT, New Delhi.
- National Sample Survey Office (NSSO), 66th Round, 2013.* Ministry of Statistics and Programme Implementation, Government of India.
- Office of the Registrar General and Census Commissioner, India. 2001. *Census of India, Primary Census Abstract, India, Series-1,* New Delhi.
- 2011. *Census of India, Provisional Data,* New Delhi.
- Science,* Textbook for Class-VI. 2012. Department of Education in Science and Mathematics, NCERT, New Delhi.
- Science,* TextBook for Class-VIII. 2008. Department of Education in Science and Mathematics, NCERT, New Delhi.
- Social and Political Life-II.* 2018. Textbook for Class-VII, Department of Education in Social Sciences (DESS), NCERT, New Delhi.
- Training and Resource Material: *Adolescence Education Programme for Secondary and Senior Secondary Stage.* 2012. National Population Education Project (NPEP), DESS, NCERT, New Delhi.
- Training and Resource Material: *Adolescence Education Programme for Upper Primary Stage.* 2012. National Population Education Project (NPEP), DESS, NCERT, New Delhi.

- Training and Resource Materials: *Population Education*. 2018. National Population Education Project (NPEP), DESS, NCERT, New Delhi.
- United Nation's Population Fund and NCERT. 2011. *Concurrent evaluation of the adolescence education programme, 2010-11*, NCERT, New Delhi.
- Yoga: A Healthy Way of Living (Secondary Stage)*.2017. NCERT, New Delhi.
- Yoga: A Healthy Way of Living (Upper Primary stage)*. 2017. NCERT, New Delhi.

GLOSSARY

Adolescence	The period of life, when the body undergoes changes, leading to reproductive maturity. Adolescence begins around the age of 10 and lasts up to 19 years of age. However, the age of adolescent may vary in diverse context and from country to country. It may also begin little early.
Adolescent Pregnancy	You might be knowing that in our country, the legal age for marriage is 18 years for girls and 21 years for boys. This is because teenage mothers are not prepared mentally or physically for motherhood. Early marriage and motherhood cause health problems in the mother and the child. It also curtails employment opportunities for the young woman and may cause mental agony as she is not ready for responsibilities of motherhood.
Balanced Diet	The food we normally eat in a day is our Diet. For growth and maintenance of good health, our diet should have all the nutrients that our body needs in right quantities. Not too much of one or too little of other. The diet should also contain a good amount of roughage and water. Such a diet is called a Balanced Diet.
Communicable Diseases	These are diseases that are spread from one person to another in many ways such as through water, food, air, etc.
Community	A general term for any distinctive group whose members are connected to each other by consciously recognised commonalities and bonds of kinship, language, culture and so on. Belief in these commonalities is more important than actual proof of their existence.
Discrimination	Practices, acts or activities resulting in the unjustified exclusion of the members of a particular group from access to goods, services, jobs, resources, etc., that are normally accessible to others. Discrimination has to be distinguished from prejudice, although the two are usually quite closely associated.
Discrimination	When we do not treat people equally or with respect we are indulging in discrimination. It happens when people or organisations act on their prejudices. Discrimination usually takes place when we treat someone differently or make a distinction.
Diversity (Cultural Diversity)	The presence within the larger national, regional or other context of many different kinds of cultural communities such as those defined by language, religion, region, ethnicity and so on. A multiplicity or plurality of identities.
Family	Is a group of persons directly linked by kin connections, the adult members of which assume responsibility of caring for children.
Fertility	In the context of human population, this refers to the ability of human beings to reproduce. Since reproduction is primarily a female-centered process, fertility is calculated with reference to the female population, that is, in the child-bearing age group.

Gender	In social theory, the term reserved for the socially and culturally produced differences between men and women. (As different from 'sex' which refers to the physical-biological differences between men and women) Nature creates sexes, society creates genders.
Lifestyle	Refers to people's lives identified by products they own, the clothes they wear, the places they eat and the practices they follow etc.
Marriage	A socially acknowledged and approved sexual union between two adult individuals. When two people marry, they become kin to one another.
Menstruation	If fertilisation does not occur, the released egg, and the thickened lining of the uterus along with its blood vessels are shed off. This causes bleeding in women which is called Menstruation.
Prejudice	The holding of preconceived ideas about an individual or group, ideas that are resistant to change even in the face of new information. Prejudice may be either positive or negative, but the common usage is for negative or derogatory preconceptions.
Puberty	The human body undergoes several changes during adolescence. These changes mark the onset of puberty.
Sexual harassment	This refers to physical or verbal behaviour that is of a sexual nature and against the wishes of a woman.
Son preference	The social phenomenon where members of a community prefer to have sons rather than daughters, i.e., they value sons more than daughters. The existence of son preference can be established by observing social behaviour towards sons and daughters, or by asking people directly about their preferences and perceptions.
Stereotype	When we believe that people belonging to particular groups based on religion, wealth, language are bound to have certain fixed characteristics or can only do a certain type of work, we create a stereotype. For example, how boys and girls are made to take certain subjects not because he or she has an aptitude for it, but because they are either boys or girls.
Violation	When someone forcefully breaks the law or a rule or openly shows disrespect, we can say that he or she has committed a violation.

You may add on to this Glossary as and when required. This is based on NCERT textbooks.

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APPENDIX-I

Feedback / Comments / Suggestions For training And Resource Materials On Health And Wellness

The National Council of Educational Research and Training has developed the training and resource materials on Health and Wellness of School Going Children under the School Health Programme of Ayushman Bharat. We need your feedback / comments / suggestions to further improve the material to respond to concerns and needs of children effectively.

Your feedback / comments / suggestions are extremely valuable to us and will be considered at the time of finalisation of the material. The final version of this material will be available by end of April,2019.

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