

**Training of Trainers
For
Adolescent Sexual Reproductive Health
Using life skills Approach**

**May, 17-22, 2004-06-02
Ahmedabad**

**Organised by
Gender Resource Centre (GRC)**

**Supported by
United Nation's Population Fund (UNFPA) – India**

Content:

Sr. No		Content	Page No.
Day	Session		
0		Inauguration	3
		Objectives of training	4
	I	Introduction to workshop	6
	II	Introduction of participants	10
	III	Objectives and methodology	11
		Training design	16
I	IV	Internalising LSE	20
	V	Understanding personals: strength and weaknesses	26
	VI	Application of LSE in the context of ASRH	31
II	VII	Understanding adolescents	40
	VIII	Addressing adolescents' issues and concerns	46
	IX	Addressing adolescents communicating effectively	47
III	X	Group presentations	52
		- Growing up physical and emotional changes	52
		- Menstruation and nocturnal emissions	54
		- Adolescents' sexuality	57
	XI	Principles of counselling	59
	XII	Guidelines for planning a training session	63
IV	-	Mock sessions	65
		- Friendship	65
		- Conflict resolution and negotiation	66
		- Goal setting and planning	67
		- Addressing sexual harassment and violence	68
		- Having children by choice and not by chance (In school)	69
V		- Preventing HIV-AIDS	71
		- Having children by choice and not by chance (out of school)	71
		Planning	73
		Conclusion	74

Inauguration

The training of trainers on 'Adolescent Sexual Reproductive Health' (ASRH) using life skill approach was carried out during May, 17-22, 2004 at Ahmedabad. This training was formally inaugurated by Ms. Mrudul from UNFPA. The other dignitaries present were Shri. P. H. Sarvakar, Director GRC and Joint Secretary, WCD; Shri. Arvind Pullikar, Regional Coordinator, UNFPA; Smt. Mridul, Consultant, UNFPA, New Delhi. The key facilitators for the training were Dr. Patanjali Dev Nayar, Dr. Prema Sundarrajan, Smt. Vinita Nathani Executive Director, Prerana and Smt. Laxmi Murthy . Smt. Mridula in her inaugural speech shared the overall background of the training. She said, "UNFPA was working with adolescents for many years but the focus of work was education. On the review of UNFPA and its partners, it has been realised that adolescents need skills rather than information. Information is available in books, televisions, radio and in other sources; but skills are important to receive the right information and to take decisions. A core team of experts was formed at the national level to develop and impart a training programme with the perspective of Life Skill Education (LSE)" She stated that the training programme in Gujarat was the third of its kind after those conducted in Rajasthan and in Orissa. Therefore the design has been improvised on the basis of experiences in other states. The background of the participants in Gujarat was also different from that of the other states.

Shri. P. H. Sarvakar, Director GRC and Joint Secretary, WCD shared his views about the proposed training in his introductory speech. He said, "With broad vision of mainstreaming Gender in government and other programmes, Gender Resource Centre was established in July 2003. The proposed training of trainers is the beginning of an intensive process in future."

Shri. Arvind Pullikar, Regional Coordinator UNFPA, shared the significance of this training. He said, "The programme on adolescents has been conceptualised two years back during post earthquake interventions. 12 counselling centres were started to deal with the trauma faced by children. The requirements for counselling changed gradually when demand came for adolescent counselling. Adolescents are both boys and girls. They form an important section of our society. One-fifth of Gujarat population is occupied by adolescents. Unfortunately they are not benefited by any exclusive programme, either by the Government or by other non-governmental organisations, as they are neither children nor adults. Soon, organisation realised the limitation of skills and knowledge in the area of adolescent counselling. Various steps have been taken to

improve the techniques of counselling. The present training programme is an important step in that direction.” He expressed his gratitude towards the Government functionaries for their cooperation and greeted all participants and resource persons.

Participants shared their feedback on the last day of the training. It was perceived as an enriching experience. The training was satisfactory. This report is an outcome of an intensive process that has been undertaken during the programme. The present document is developed for the reference of the perspective trainers and therefore includes the process, methodology and outcome of each session. We hope that this report will help new trainers in their training programmes in the field.

Objectives of the training:

- To have a common understanding based on the concept of life skills in the context of ASRH
- To develop facilitation skills of the trainers to adopt participatory techniques for transacting ASRH content from LSE perspective
- To share LSE modules developed for in school and out of school adolescents by various agencies
- To discuss the process of monitoring ASRH intervention using LSE approach within the programme framework

Expected outcome:

- 1) Understanding of the life skill approach with focus on ASRH
- 2) Facilitation skills in using interactive methodologies for building life skills of adolescents with focus on ASRH.

Day 0

17 May 2004

Schedule:

Session I : Introduction to workshop

Session II : introduction of participants

Session III : Objectives and methodology

Day: 0

Date: 17 May 2004

Time: 1630hrs.

Session I

Introduction to workshop

Facilitator: Dr. Ptanjali Dev Nair

Introduction to workshop

Context: The facilitator set the context of training subject. His presentation on the significance of adolescents, their health status, myths related to adolescents, rational for working with adolescents, their sexuality, relation with HIV-AIDS, their needs, some facts and figures, risk and protective factors, ASRH issues and role of LSE helped participants to

understand importance of the issue that they were to use intensively over the next five days.

The first slide was based on the demographic profile of adolescents in India. The numbers related to population of adolescents helped to understand the spread of issues related to them.

1 Adolescents in India

- Children in the age group of 10-19 year constitute more than 22% of the Indian population
- That means there are more than 234 million adolescents in our country
- many of them are out of school
- Many of them marry at early age.

The facilitators asked participants to share their observation pertaining to health problems of adolescents from their field areas. Participants shared a number of problems like...

- Ignorance from family
- Sexual behaviour
- Misinformation and myths
- Social and cultural constraints
- Pressure and fear of society
- Lack of confidence
- Smoking and Chewing tobacco (Gutka)
- Anaemia
- Low Intelligence quotient (IQ)
- Reproductive Tract Infection (RTI)
- Drug addiction
- Unmarried pregnancy (abortion)

It was obvious to the participants that adolescents are important section of society, which face acute problems related to their personality, sexuality, identity, development and health

2 Adolescents' health

- Not all adolescents are healthy
- factors impacting their health are:
 - personal
 - socio-political
 - economic
 - inter-sectoral

The facilitator categorised the health problems faced by the adolescents and generated discussion over each of them problems. Participants discussed among themselves and came to a consensus that all adolescents are not healthy.

3. Not all adolescents are healthy

- sexual and reproductive health problem
- nutritional problem
- mental health problem
- substance abuse
- injuries and accidents
- acute and chronic disease like asthma, TB, Diabetes

Participants the fact of vulnerability of some adolescents who live in difficult circumstances. The nature of problems of such adolescents was higher than that of others.

4 Some are more vulnerable

- those living in difficult circumstances
- young sex workers
- victim of trafficking
- who share needles and syringes are at very high risk- HIV/AIDS

It was discussed that adolescents face a number of problems out of which, problems related to their reproductive health are comparatively less attended to and therefore the focus of the training would be on 'Adolescents' Sexual Reproductive Health'

5 The focus of this workshop ASRH

The facilitator generated discussion on the significance of working with adolescents. Participants shared different views such as the impact of health issues of adolescents on the productivity of nation. The young generation of the nation is shaped during adolescence and therefore it was essential to work with this group to expect more energetic, talented and creative youth.

7. Why?

- there is huge public health impact
- social and economic implications
- provide information 'alone' doesn't seem to work
- to strengthen the existing programmes (National/State) that address ASRH
- Advocacy for allocating resources to ASRH

The adolescent age-group is crucial. The physical development and arousal of sexual desire are important changes that take place during this period. Society gives limited scope to share sexual curiosities and therefore adolescents follow there ways to gain knowledge and experiment.

8. Most sexual activities begin in adolescence

Within marriage and out of marriage

The facilitator gradually led the discussion towards the implications of early sexual debut and its likelihood. Participants shared their views that in our society boys were granted social liberty in which they are prone to experiment sex. The facilitator further attempted to relate this nature to the status of HIV-AIDS with figures.

9. Implications of early sexual debut

Adolescents who start having sex early are more likely to have sex with

- high risk partners
- multiple partners

They are less likely to use condoms

The graphical presentation of AIDS shows that the present age of 70% of victims of AIDS patients is between 25 and 30, which indicate that they had an unsafe sex during their age of adolescence.

10. AIDS: Age and sex distribution in India

The facilitator also discussed issues related to early marriage and early pregnancy. He shared valuable information regarding adolescent child bearing and mortality, incidence of low birth weight (LBW) babies. 70% premature deaths among adults were largely due to behaviour initiated during adolescence.

11. Outcome of adolescents' pregnancy

Graph

Adolescents had their own needs. Their own world is full of queries. It was important to deal with these felt needs. Any grey area in their mind would affect the further process of life skills and sex education. The facilitator asked participants to identify the felt needs of adolescents. Some of them were listed out by the participants as follows...

12. Felt needs of adolescents- rural Areas

- Body image
- Frustration
- Masturbation
- Dual thinking
- Night fall
- High anxiety
- Attraction
- Size of condom
- White discharge

The facilitator discussed the risk and protective factors that are available for adolescents.

13. Risk and protective factors

The facilitator discussed the issue of sexual reproductive health of adolescents. Participants were asked to share their views. It was realised as an important subject for learning.

14. ASRH facts and issues

The facilitator shared the concept of Life Skill Education. He said, 'The capacity to take decision with an overall understanding of bad and good factors is basically a life skill'. Everybody had this capacity but making use of it to take good decision was part of skill, which could be learnt. Such capacity was useful in performing inter-sectoral roles, deciding on the age of marriage and other aspects of ones life.

15. Role of LSE in ASRH

Outcome: The session was perceived as essential to mark the beginning of the workshop. Participants had come with multiple questions in mind. The session on introduction could help them to find answers to their questions. The session also set the rational for such training programme and offered a valid justification to the need for working with adolescents. Life Skill Education has been applied as an approach to understand the issues of reproductive health and effectively deal with them. Therefore clarity on LSE would be developed gradually in the coming sessions.

Day: 0

Date: 17 May 2004

Time: 1730hrs.

Session II

Introduction of participants

Facilitator: Dr. Prema Sundarrajan

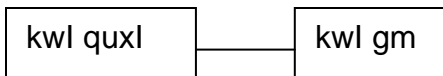
Introduction of participants

Participants were introduced to each other through an innovative method.

Step: I Cards containing broken names of Hindi films were stuck on the back of each participant. They were asked to move in the hall and find their partner to complete the name of the film. After finding the

partner, they sit together as pair.

E.g.



Step II: Introduce yourself to your partner and collect information about your partner in terms of...

- Name
- Age
- No. of family members
- Favourite cuisine
- Favourite film actor/ actress
- Where would he/she like to go on date with his/her favourite actor/ actress?

Step III: Introduce your partner to all participants.

Day: 0

Date: 17 May 2004

Time: 1830hrs.

Session III

Objectives and Methodology

Facilitator: Dr. Prema Sundarrajan

Ms. Laxmi Murthy

Objectives and Methodology

Objectives of ToT were displayed on chart paper. The facilitator rephrased all the objectives in a length to understand the meaning of each objective.

Objectives of the workshop:

- To have a common understanding established on the concept of life skills in the context of ASRH
- To develop facilitation skills of the trainers was to

adopt participatory techniques for transacting ASRH content from LSE perspective

- To share LSE modules developed for in school and out of school adolescents by various agencies
- To discuss the process of monitoring ASRH intervention using LSE approach within the programme framework

Expected outcome:

- 1) Understanding of the life skill approach with focus on ASRH
- 2) Facilitation skills in using interactive methodologies for building life skills of adolescents with focus on ASRH.

Setting Ground Rules:

The facilitator had marked out some ground rules and displayed them on cards. Participants were asked to share their opinions on them. The ground rules were...

- | | |
|---|--|
| - Being punctual | - Right to pass |
| - Respecting everyone | - Can ask any question, even irrelevant for others |
| - Listening to all | - Leave stripes at the door |
| - Allowing all to participate | - Not to leave in the midst of the workshop |
| - Keeping confidentiality | |
| - Only issues to be discussed not persons | |

In addition to these, participants added few more ground rules

- | | |
|-----------------------------|---|
| - Switch off mobile phones | - Participation in cultural programme is compulsory for Rule breakers |
| - No generalisation | |
| - Follow rules set by hotel | - Suggestions welcome |

Hopes and expectations:

The facilitator distributed two cards to each participant. They were asked to write their specific expectation on one and hope on the other. All cards were displayed on wall and read them out loudly.

Following are the expectations and hopes shared by the participants.

Expectations	Hopes
❖ To know more about adolescents	❖ About life skills
❖ Material in Gujarati	❖ Life skills with drop out adolescents
❖ Audio-visual material	❖ Everlasting energy to make work enjoyable
❖ No expectation Learning has no limit	❖ Method of training
❖ How to apply LSE in systems?	❖ How to involve most marginalise in this programme
❖ How to apply LSE in life?	❖ Certificate
❖ Should get training certificate	❖ Building self capacity
❖ About self development	❖ Mobilisation of adolescents
❖ Various ways of counselling	❖ How to make training interesting?
❖ Boosting confidence of adolescents	❖ In depth knowledge of LSE
❖ Reproductive health to be taught in the class	❖ To train senior people / staff
❖ How to conduct Tot?	❖ Action plan at village level on how to take benefit from MHU

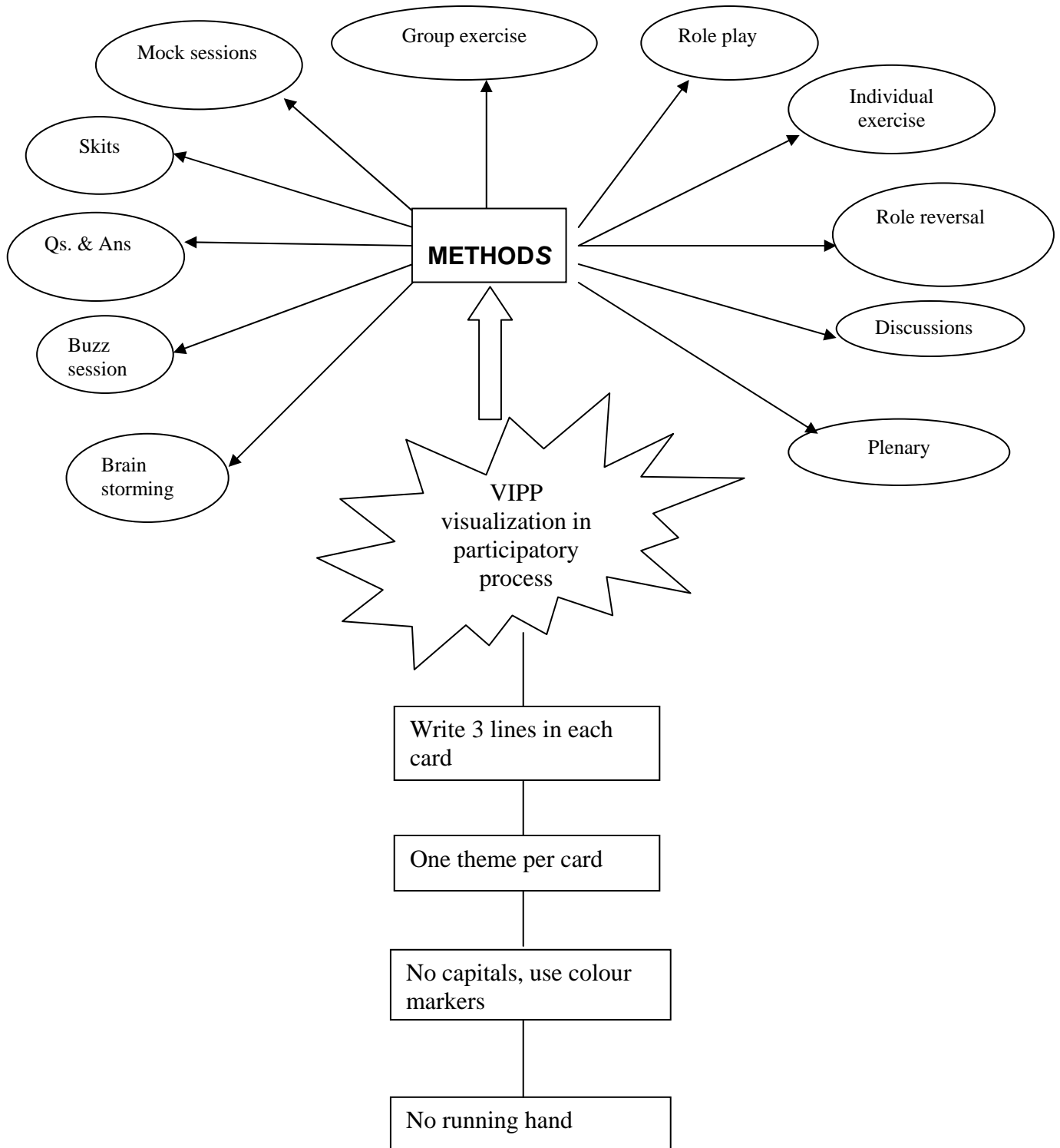
The facilitator assured to fulfil maximum expectations. Some expectations like the responsibility of giving certificates were handed over to the organisers of the workshop. The facilitator asked the participants to express any fear or reservation that they had? Few participants expressed the following concerns ...

- “we want to take something new which is of our level and according to our capacity to understand
- The Hi-tech technology should not take over the content
- English might make us withdrawn...”

Methodology:

Dr. Prema Sundarrajan explained the methodology that was adopted for the training. Different methods were noted on the cards, which were displayed on the side walls. The facilitator explained them one by one.

The method diagram:
Presentation I:

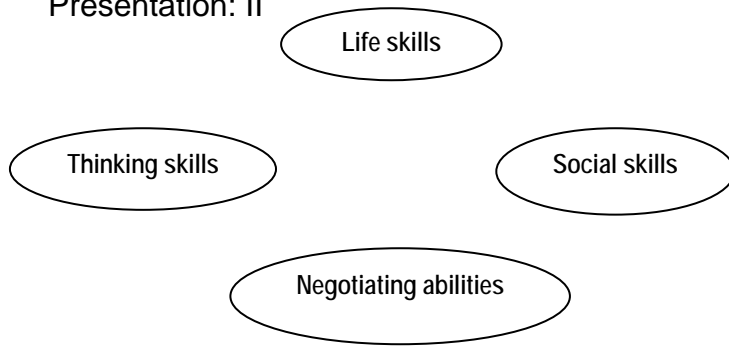


The facilitator explained that these different methods had been adopted for better understanding of the concepts in a simplified form and to demonstrate application so that participants could replicate them in the field.

- ❖ Brain storming: Brain storming could be group exercise or individual. It was used as a part of a continuous process. Some relevant and important questions, issues were focused during the flow of discussion to develop in depth understanding on a topic.
- ❖ Buzz Session: Buzz session was used for taking a quick stock of the learning. In this, each participant shared his or her opinion, learning, view, or understanding in one statement or in one word. The method saved time and also opened up different dimensions of learning.
- ❖ Question and answers: Questions and answers had also been part of a continuous process. All participants were encouraged to ask questions. They were given time at the end of each session to raise their questions. Provision of a question box and parking board was made to post their questions. They were also allowed to keep their identity confidential if they wanted to.
- ❖ Skits: Skits and role plays were given special importance to understand the ground realities. A role play generated different dimensions of the field reality to debate and to discuss. It was difficult to imagine such dimensions unless they emerged through dialogues between two characters.
- ❖ Mock Session: Mock sessions were important to review the capacity gained to conduct similar training programmes. Usually any training programme ends with a 'feel good' factor. Confidence on theoretical understanding disappears during training programmes at field. Therefore special importance was given to mock sessions so that all participants could understand their strengths and limitations and the learning acquired through this training programme.
- ❖ Individual exercise: individual exercises were thoughtfully placed in the training design to have maximum impact of particular sessions. Individual exercises were based on brainstorming and creativity.
- ❖ Discussions: Discussions were also used as part of continuous process of training. The entire training was participatory and discussions were used as the core means to ensure maximum participation of participants.

The second presentation on methodology was about the approaches that were adopted for the training. The facilitator explained these approaches through a small lecture.

Presentation: II



- Method of LSE approach
- Learner centred
- Experiential learning
- Interactive
- Based on their needs
- Participatory

- ❖ Method of LSE approach: The entire training programme is developed with the belief that adolescents need skills to use their knowledge. Therefore life skills were adopted as vehicles to carry the content of the training.
- ❖ Learner centred: The design of the training was developed with adequate flexibility to accommodate specific needs of the participants.
- ❖ Experiential learning: Sharing of real life experiences had been encouraged to relate the content to ground realities. The methods of mock sessions and role play were helpful in developing experiential learning.
- ❖ Interactive: The training designed was extremely participatory. The sitting arrangements made were in a way that participants could easily interact with each other.
- ❖ Need based: The design of the training has had adequate space for modifications according to the needs of the groups.
- ❖ Participatory: Every participant was encouraged to participate without compulsion. Space was created for everybody to note his/ her opinion.

Training Design

Day	Sn. No	Time	Content	Resource Person
0	-	1130-1230	Inauguration	-
		1300-1400	Lunch	
		1400-1600	Preparation time (zero hours)	
		1600-1630	TEA	
	I	1630-1730	Introduction to workshop	Dr. Patanjali D. Nayar
	II	1730-1800	Introduction of participants	Dr. Prema Sundarajan
	III	1830-1930	Objectives and methodology	Dr. Prema Sundarajan Ms. Laxmi Murthy
I	IV	0900-1100	Internalising LSE	Dr. Prema Sundarajan
		1100-1130	TEA	
	V	1130-1330	Understanding personals: strength and weaknesses	Dr. Patanjali D. Nayar
		1330-1430	Lunch	
	VI	1430-1800	Application of LSE in the context of ASRH	Dr. Patanjali D. Nayar
II	VII	0930-1100	Understanding adolescents	Ms. Vinita Nathani
		1100-1130	TEA	
	VIII	1130-1300	Addressing adolescents' issues and concerns	All (Guided group activity)
		1300-1400	Lunch	
	IX	1400-1800	Addressing adolescents communicating effectively	Ms. Laxmi Murthy
III	X	0930-1300	Group presentations	
		0930-1030	- Growing up physical and emotional changes	Participants
			TEA	
		1100-1200	- Menstruation and nocturnal emissions	Participants
		1200-1300	- Adolescents' sexuality	
			Lunch	
	XI	1400-1700	Principles of counselling	Ms. Vinita Nathani
		1700-1730	TEA	

Day	Sn. No	Time	Content	Resource Person
III	XII	1730-1830	Guidelines for planning a training session	Ms. Vinita Nathani
IV		0930-1830	Mock sessions	
		0930-1100	- Friendship	
		1100-1130	TEA	
		1130-1230	- Conflict resolution and negotiation	
		1230-1330	- Goal setting and planning	
		1330-1430	Lunch	
		1545-1700	- Addressing sexual harassment and violence	
		1700-1730	TEA	
V		1730-1830	- Having children by choice and not by chance (In school)	
		0930-1030	- Preventing HIV-AIDS	
		1030-1100	TEA	
		1100-1230	- Having children by choice and not by chance (out of school)	
		1230-1300	Planning	
		1300-1330	Conclusion	
	1330-1430	Lunch		

Outcome of Session I-III

The facilitator encapsulated previous three sessions. He asked all the participants to spot the achievements made during these three sessions. Participants gave different responses....

- To break ice and remove fear, to make comfortable atmosphere
- To understand participants' expectations
- communication skill use
- preparation of resource person (judging the level)
- Rapport building
- Opportunity to speak
- To create background and develop ownership
- Validation and agreement over issues
- Inter exchange of experience
- Knowledge level judge
- Making objectives clear
- entering in the subject- drawing outline
- methods demonstration
- understanding our capacities and limitations
- Sequence bit by bit-proceedings
- Presentations-skills and knowledge
- Understanding different dimensions and skill making with agenda
- Innovative ideas, culmination of thoughts

Group Formation

Four groups were formed to carry out different activities every day.

Group I: Recap: - This group was to start the day with recap of the previous day's learning.

Group II: Cleanliness of training room: This group was responsible for ensuring cleanliness of the training hall

Group III: Warming up: This group was to conduct warm-up sessions whenever required.

Group IV: Logistics: This group was to ensure logistic arrangements in terms of food and other facilities during stay in the hotel.

It was decided that the groups would be reshuffled every day so as to experience new task and responsibilities.

After formation of groups Mr. Arvind Pullikar obtained the consensus of participants on making a video documentation of entire training programme. All participants encouraged the idea and shared their views over it. According to participants such documentation would help them in learning from the body language of the resource persons; it would be a good tool to reflect.

Day I

18 May 2004

Schedule:

Session IV : Internalising LSE

Session V : Understanding Personals

- Strength and weaknesses

Session VI : Application of LSE in the context of ASRH

Session VII : Understanding adolescents

Day: 1

Date: 18 May 2004

Time: 0900hrs.

Session IV

Internalising LSE

Facilitator: Dr. Prema Sundarrajan

Internalising LSE

The facilitator began the session with an exercise of sharing a dream with burning match stick. Participants were asked to stand in a circular form. A match box was circulated to everybody and asked to burn a single match stick and share the dream till the stick is burning. Some of the dreams shared by participants are...

- Want to be good social worker
- Want to do phd, good counsellor
- Want to be a good person
- Want to earn good money
- Want to be happy and would like to spread happiness
- Want to be a good father
- Want to solve social problems
- Make a good career
- Want to be in good position
- Want to open an NGO
- Want to seek guidance if move in the wrong path

After the exercise participants were asked to share their reactions over the exercise. Some of the participants felt that sharing a dream was a serious exercise and the time permitted for it was not justified. However, some were of the opinion that it was a learning to have sweet and short dreams. Some expressed the feeling of fear of sharing a dream in a group.

Following this, the facilitator posed a question to the house.

- Does your learning in school or college have any relevance with your personal or professional life now?

Participants gave mixed responses to this question. Some of them said that knowledge never went waste. The learning in school or college was helpful in both personal as well as professional life but it was difficult to locate specific matters in which it was visible to show the way it had helped. A number of participants were of the opposite opinion. According to them experience was the only teacher, through which one could understand the difference between good and bad things in life. Some soft voices made

a mark with their opinion saying that knowledge was gained in schools and colleges but art of applying them in professional or personal life was neither taught nor learnt.

The facilitator offered a practical example to deal with the mixed responses of participants.

“A girl going to marry soon comes to your centre and asks help to know how to make her husband happy, how to make her in-laws happy?” Did our education have answer to her questions?

Participants replied in one voice saying “NO”. The answers to such questions were found in practical experiences of life. The facilitator explained that this experiential learning had the context of life skill.

What is life skill?

The facilitator made a power-point presentation on the concept of life skill. Prior to presentation she explained the general characterization of ‘life skill’ in brief. She said that life skills were abilities for adoptive and positive behaviour that enabled individuals to deal with the demands and challenges of every day life. A small discussion was followed by the presentation.

The facilitator explained the meaning of key words such as knowledge, attitudes, values and abilities. She said that knowledge was set of analysed information, attitude was behaviour and values are basically principles of life. Life skills were used in applying these three to take decision over questions like What to do and how to do it?

Slide I

Life Skills

- Life skills enable us to translate knowledge, attitude and values into actual abilities- i.e. “what to do and how to do it”?

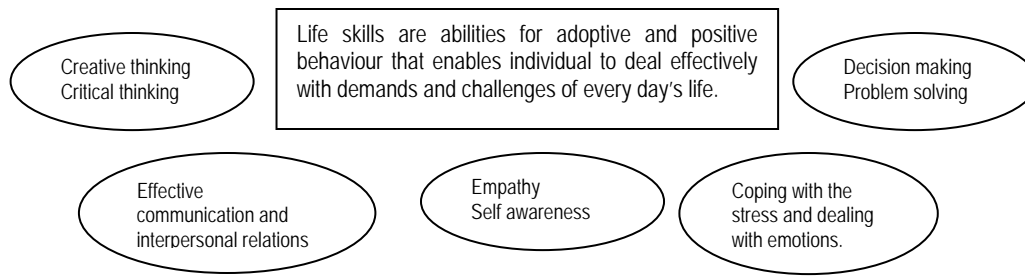
The facilitator explained the categorisation with flow diagram on wall. The diagram was developed with cards.

Slide II

Categorisation of life skills

- Life skills can broadly categorised as thinking social and negotiation skills. Negotiation skills are an outcome of thinking and social skills. These are interrelated and reinforce each other.

Diagram: Categorisation of life skills ^{Annexure 1}



The facilitator continued explaining each of those categories with the help of flow diagram. She elucidated the life skill under each of these categories and presented them in the form of slide show.

Slide III

Thinking and reflective skills

- Self awareness
- Social awareness
- Problem solving and decision making

The facilitator explained the meaning of each skill. She also gave some examples from real life to relate these skills in a better way.

Slide IV

What are thinking and reflective skills?

- Creative and critical thinking abilities
- Self awareness: the ability to understand our strength, weaknesses, values, our needs, desires, aspirations and opportunities.
- Social awareness: a reflective skill to understand social issues and concerns
- Problem solving and decision making skill

The facilitator shared the skill that came under the category of social skills.

Slide V

Social Skills

- Interpersonal relationships
- Communicating effectively
- Working in teams

¹ Categorisation of life skills: a power-point presentation

While explaining the meaning of each of these skills, she also emphasised on some important concepts like empathy and effective communication. According to her empathy was an important skill that could be effectively used during counselling.

She narrated the skills involved in the category of negotiation skills. Negotiation skills were also important as they reflect the personal behaviour of a person.

Further explanation on negotiation skills clarified that negotiation skills were an out come of thinking and reflective skills. These skills were applied through interpersonal communication and thus reflected through personal behaviour.

A group exercise followed. Participants were divided into three groups using standard method of number counting. Each of the groups was given a case story. ^{Annexure2} Each paper of the case study also contained relevant questions for participants to reflect and arrive at a decision. All the groups were given ten minutes.

Case study I

- Shabana is a 16 year old girl.
- Her cousin tries pestering her.
- On complaining to her mother, she was ignored and asked to take care of herself

Slide VI

What are social Skills?

- Effective communication verbal-nonverbal
- Interpersonal relationship
- Empathy
- Relationship with peers
- Resolve social conflicts
- Social self-confidence

Slide VII

Negotiation skill

- Refusal to peer/family pressure
- Assertiveness towards consensus building on issue of concern
- Self management, self monitoring

Slide VIII

What are negotiation skills?

- Negotiation skills are an outcome of thinking and social skills. Negotiation skill is a result of rational thinking based on informed choices and effective communication.

² Case studies No. 1,2 and 3

- Shabana goes into depression.

Group's decision:

Q. I) What should Shaban do to overcome this situation?

- Shabana should share her feeling with counsellor

Q.II) What could be the possible reactions to Shabana's actions as per answer to Q.I?

- Society around would blame Shabana as character-less person.

Q.III) How could Shabana overcome those reactions?

- Shaban needed to have positive attitude in such circumstances.

Case study II

- Ashok Rohan and Kishor are good friends of each other.
- Ashok has studied up to 7th Std. and presently working as helper in a local grocery shop
- Every Sunday they come together
- Rohan has also left the school and does petty works in nearby town.
- One day they discuss the masculinity
- Rohan offers an opportunity to his friends to take them to a sex worker.
- Ashok feels scared and guilty
- Kishor cautions them that it may be unsafe to have fun this way
- However, on continuous persuasion and ridiculing by Rohan both of them agreed to accompany him.

Group's decision:

Q. I) What do you feel; Ashok and Kishor would have done in this situation?

- All of them should understand the physical changes occurring within them.
- They should be aware of consequences of having unsafe sex
- They needed negotiation skills and information

Q.II) Why did Kishor and Ashok agree to go with Rohan finally?

- Lack of confidence and self control
- Curiosity
- Lack of decision making
- Peer pressure

Q.III) Should we do something to help Ashok and Kishor?

- Professional guidance
- Right information
- Alternative method

Case study II

- Sarita and Rohit are good friends
- Both are student's representatives in the school and spend lot of time together to carry out students activities.
- Rohit has expressed his feelings to be very closed friend of Sarita through offering small gifts and notes.
- One day he confesses that he is in love with Sarita
- Sarita is confused. She wants to concentrate on studies and not wants to involve herself in any relationship at the same time she doesn't want to lose her friendship with Rohit.

Group's decision:

Q. I) What should Sarita do in this situation?

- She should sit with Rohit and share her true feelings

Q. II) What would be the possible actions to Sarita's actions? (As per the answers to question I)

- Rohit might understand her and give more time
- He might insist that this relationship would not affect her studies

Q. III) How could Sarita overcome these possible reactions?

- She needed to set her priorities and be assertive to her stand.

Outcome: It was an introductory session on Life skills. The session was found useful to have orientation to life skills and their categories. The exercise of decision making based on case studies given enabled participants to understand the critical nature of problems faced by adolescents. Some times problems expressed by the adolescents appeared small but they had serious implications on their mental state.

Day: 1

Date: 18 May 2004

Time: 1130hrs.

Session V

Understanding personals:
Strengths and Weaknesses

Facilitator:

Dr. Patanjali Dev Nayar

Understanding personals: Strengths and Weaknesses

The facilitator continued with slide presentation on Life skills. He said that solving day-to-day problems or taking decisions in personal or professional life requires certain skills. People did it out of practice and personal experiences. Due to frequency of problems or occasions of decision making the process became subconscious. This session was planned to understand how life skills were used in day-to-day life of every person.

The facilitator asked a couple of participants to read out each skill for others. While explaining the importance of these skills he said that a skill gave strength to personality. The skills presented in the slides were placed in a pair with a purpose. The skills in one pair were closely linked to each other.

Slide I

<u>Core life skills</u> (Generic)	
- Empathy	- Self awareness
- Critical thinking	- Creative thinking
- Problem solving	- Decision making
- Effective communication	- Interpersonal relations
- Coping with stress	- Dealing with emotions

In order to understand the application of these skills he gave an exercise to all participants.

- Each participant was given two cards of red and green colours
- All of them were asked to write three life skills on red card that they used most frequently in their lives.
- They were also asked to write three life skills on green card that they used least in their lives.
- All participants were asked to paste their cards on the side wall
- They were given ten minutes

The cards were placed separately to indicate the most frequently used skills and least frequently used skills. After placement of all cards on the wall, the facilitator marked some of the most frequently mentioned skills on both sides. Meanwhile a group responsible for warming up took the charge of the house.

Warm up:
A comic story on elephant and ant
was shared by one of the group
members.

After arranging all the cards and making important marks the facilitator asked participants to get close to the presentation wall. He requested few lesser vocal persons to read out all the skills identified by the participants. The participants requested by him were reserved initially but groups supported them in reading all the responses noted by the group. It was found that almost all skills were collectively mentioned by the participants. However, skills like self awareness, critical thinking, decision making and problem solving were mention in high frequency than others in the category of most frequently used skills. On the other side, skills like dealing with emotions, coping with stress, empathy and interpersonal relationship were identified as least used skills. Participants debated over the different meanings of skills as they perceived and also shared their personal examples.

After this exercise the facilitator asked all the participants how they found the exercise useful.

The responses given were mixed. According to some participants it was difficult to choose only three skills. They perceived it as a stressful exercise. They said that the exercise gave them an opportunity to introspect. Participants also shared the skill that they use while doing this exercise such as critical thinking, self awareness and coping with stress. On asking about the pattern observed by them in responses given by participants, they said that the difference between personal psychologies reflect in the responses. However, some responses were common in all the cards.

The facilitator continued with this discussion and probed a question regarding reasons of using three skills most commonly and collectively?

Participants attempted to reply to this saying; these skills were closely linked to our lives. Some of them were of the opinion that people use skills according to the context, for e.g. a struggling person approach the issue as problem and use 'problem solving' while a person executing responsibility approached the issue to take decision on it and used 'decision making'. The discussion was leading to a common agreement that all the skills were important and were used by all people at different times.

The Facilitator steered the discussion towards adolescents. He asked the group whether adolescents were capable to take decision.

Participants responded in one voice saying, 'yes adolescents are capable of taking decisions'.

The facilitator asked them to articulate how adolescents were capable to take decision.

This question generated a debate among participants. Some of the participant affirmed to their stand stating adolescents were capable of taking decision. However some changed their opinions and said that they were capable only if they were provided conducive environment, right information and considered trustworthy. Some participants said that in some cases they were capable to take decision but in some cases they were not. Some discussed the social hurdles for adolescents to take decision. They said that due to social biases adolescents did not feel comfortable to take decisions. They were scared of societal pressure and consequences of breaking them.

The facilitator added another question to take the debate ahead. He asked, the ways to build capacities of adolescents to take decisions on the serious matters.

Participants suggested three core factors by which capacity of adolescents can be built to take decisions.

- Information: All adolescents were deprived of right and timely information. They not only needed information but authentic sources which could easily be accessible to them.
- Friendly parenthood: Family was the nearest system that adolescents could have. Strict and reserved parenthood forced them to seek information and ask their queries to external sources, which in many cases were not authentic. The peer group discussions added more confusion and lead them on unknown tracks. Therefore friendly parenthood was an essential component in building capacities of adolescents to take decisions.
- Safe and supportive environment: The decisions taken by adolescents were not generally respected. They were considered as minor and their decisions got least priority. In these circumstances the responsibility of their decisions lay with them. This either discouraged them to take any decision at all or take desperate decisions, which might prove harmful to them. Safe and supportive environment in family as well as in society could help them to understand the importance of their decision. Participants shared that very few adolescents in our society got such enabling environment.

During the discussion one of the participants shared her personal experience to articulate her opinion. She said that sometimes an information or belief that adolescents were given is wrong but it was purposefully done to preventing them to imagine things or to safeguard them from experimenting. For example, when adolescents asked about the pubic hairs? They were told that these hairs were God's gift to protect the skin on fragile parts of the body. The intention behind this information was to protect them from

experimenting razor on the genetic parts of their body. (The example is changed without detriment the essence of example shared by the participant) The facilitator did not agree to such practice. He articulated his argument. He said that right information was the right of adolescents. It was duty of parents to make them understand in a language suitable to their age. It became difficult later to unlearn some beliefs and learn new concepts. In some sensitive issues it might harm the relationship with parents.

The discussion was geared up again when the facilitator asked participants to identify the skills used in the personal sharing of the participant. Participants identified skills like...

- dealing with emotions
- Creative thinking
- Effective communication
- Critical thinking
- Self awareness

Some of them said that all skills could be linked to her sharing of personal experience.

While continuing the discussion the facilitator asked participants to point out the factors affecting adolescents taking decision.

Participants identified some of the factors like...

- Underestimating them by adults
- Over protective environment (especially for girls)
- Social conditioning
- Making of 'bonsai'
- Lack of opportunities to take decision

After discussing the skills that were used most frequently in life, the facilitator fetched the attention of group towards the skills that they have identified as least used. Few participants read out all the skills on card loudly. They observed the pattern of some common responses. 'Empathy' was one of the common responses given by participants in the category of least used skills. It was discussed in length. Participants shared different meanings of empathy as they perceived. The facilitator guided them to arrive at right meaning. He said that empathy was to experience similar feelings as of the person whom one was intended to empathise. Empathy was not possible without interpersonal relations. Interpersonal relations were shackled through communication. Communication is possible without language and words. Eye contact, touch were important mediums of non-verbal communications.

The facilitator also stressed on the medium of touch. He said that touch had an important value. Touch conveyed the inner most feelings that could be understood not only by human beings but also by plants and animals.

While concluding the session, the facilitator asked participants if they wanted to change their opinions about skills recorded in the categories as used most frequently and those used least frequently, at this point of time, after understanding them in length.

Most of the participants gave affirmative response.

Outcome: Life skills are important part of life. They are used by every person at different capacities. Skills can be used in isolation. All skills are inter-linked with each other. One skill may be used for several purposes. Skills are not gifted but they can be learnt, developed out of conscious practice and process. Reflection on skills offers an opportunity to introspect. Skills are also major determinants of the strengths and weaknesses of a person.

Dr. Prema Sundarrajan shared the methodology adopted for the session

Methodology:

- Lerner centre
- Experiential learning
- Interactive
- According to the needs of participants
- Participatory
- Self-disclosure

Day: 1

Date: 18 May 2004

Time: 1430hrs.

Session V

Application of LSE in the
context of ASRH

Facilitator:

Dr. Patanjali Dev Nayar

Application of LSE in the context of ASRH

The session began with an exercise. Six indicators of application of life skills were displayed on the chart paper. Participants were asked to select one indicator each. Five groups were formed on the basis of common selection of indicators. Cases were given to each group and they were asked to perform a role play.

½ hour was given for preparation.

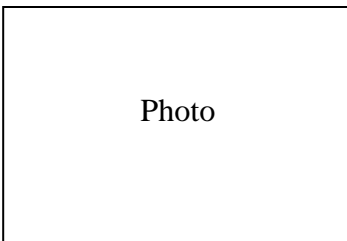
Some instructions were given prior to performance of role play.

- Viewers would act as observer.

They can make observations pertaining to...

- Message
- Communication
- Skills
- Quality of acting
- Problem solving process
- Decision making process
- Any additional points...

Performance I:



Story line: A family of traditional ruler background was engaged in marriage preparation of Chanda, who was 15 year old. A social workers visited the place and tried to convince the parents of Chnda not to get her married at that age. However, she failed and Chanda was forced for the

marriage.

After marriage Chanda experienced the cruel face of life. Her husband was addicted to alcohol and beat her frequently. She also experienced humiliation when her husband forced her for sex. She got no support from her in-laws. After crossing the limits of tolerance she returned to her parents. However, she was advised to stay at her husband's place. Chanda left her parent's place with determination of not going back to any of those families...

Social worker visited the place again. She discusses the matter with her parents and asked them what was more important to them, their own daughter or old rigid rituals set by the society? Chanda's father realised his mistake. He decided to get Chanda back at home. He promised to fight against the society for his daughter.

Observations:

The observations of the other participants are noted as below...

- Father's decision at the end completed the message that daughter was more important than old fashioned rituals
- Use of critical thinking
- Issue of early marriage
- Quality of acting was good
- Good communication skills
- Use of all life skills

The facilitator asked performers to share their feelings. The performers said that...

- Thinking and acting were two different things.
- It was an experience to deal with emotions
- Some fear was also perceived
- It was coping of stress
- Wanted to use abusive language to portray the realistic picture but did not use out of consciousness of the background of the audience.

Other participant also agreed to use the language that is used at the field. According to him such use not only makes the performance realistic but it also provokes the feelings of adolescents. The facilitator said that 'provoking' was also a technique of training but it required confidence and skills to control emotional outbreaks of participants. It was

<u>Essentials for effective role play</u>	
❖ Language	❖ Expressions
❖ Message	❖ Time slot
❖ Viewer's analysis	

advisable that provoking should be used only after some experience.

While emphasising on essential components of effective role play the facilitator rephrased them in the groups.

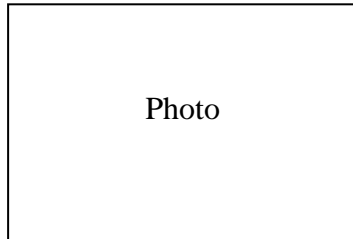
Following the discussion over role play and primary analysis, Dr. Patanjali Dev Nayar raised the question 'what are the reproductive health issues reflect in the role play'?

Participants identified the issues of early marriage, domestic violence and forceful sexual relations as reproductive health issues reflected in the role play. The participants added that the adolescent girls do not have any information of reproductive health.

While analysing the play in the view of life skills participants identified the skills used by different characters in the play such as coping with emotions, coping with stress, empathy and decision making. The facilitator shared an example of a girl from upmarket family. She was to marry soon and did not know about sexual relations. When she asked her mother about it, her mother gave her a book on this subject. This was the only communication what her mother has made with her daughter on such a delicate issue. That means issues of adolescents exist irrespective of class and caste background.

One of the participants shared her views on hard core nature of role play. She said that such a role play may push children in trauma. So the intensity of role play may be increased gradually. The facilitator qualified the same view saying that if the workshop is participatory then this question doesn't arise as the group will do it according to their capacity to digest it but if the role play is to be performed by external people then they need to be oriented on the background and capacity of participants prior to performance.

Performance II:



Story line: A middle class family consisting husband, wife, their four daughters and the only son is in acted. It has been shown that the only son has privileges of extra care, better food, more affection and love in comparison to what daughters get. The elder daughter has realisation of this fact that they are getting secondary treatment and she tries to make her parents aware of their discriminatory behaviour in an occasional discussions over dining table or during leisure. Parents neglect her comments initially but very soon they realise that the comments of their daughter are serious and would have long implications. They felt that they may loss their daughter if they leave home in search of love and care. They decide to change their behaviour and start giving equal treatment to their children.

Observations: Participants shared their observations in an organised way.

- The message of the play...
 - Kinds of gender discrimination
 - Son preference
 - Possibility of giving message of family planning
 - Affecting mentality of boy due to over protecting nature of parents.

- The skills used in the play
 - Self awareness
 - Decision making
 - Empathy

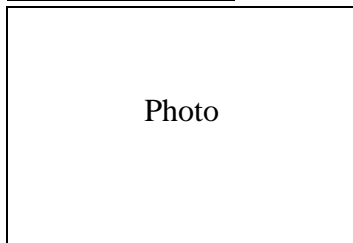
Participants acknowledged the role reversal technique used by the group, where role of woman character was played by a man. They also pointed out the conflicting situation of the elder daughter.

The facilitator rephrased the techniques identified by the participants and shared her views over the procedure of analysis. She said that no standard procedure can be formulated as analysis should be participatory and according to the need of subject. However some factors are essential to incorporate in the analysis, such as...

- Understanding emotions (allow viewers to experience silence)
- Parameters related to message
- The quality of transmission/ conveyance of message
- The quality of reception/ perception of message

The facilitator said that the perfect transmission of the message in shortest possible time is an art can be learnt through practice.

Performance III:



Story line: Shelly and her two friends are studying together in a college. Shelly is over charming, cheerful girl experience some uncomfortable advances from her teacher. She gets confused. One day her teacher asked her to meet alone in the evening time. Shelly shows her negation but one of her friends forces her. After having a humiliating experience with teacher Shelly faces depression in her life. In spite of having supportive father she refuses to go to college. Her friends are shown supportive, however one of them is cynical who motivate Shelly to lodge the complaint against her teacher and on the other side informs the teacher about Shelly’s plan. Shelly is aware of her friend’s behaviour and tries not to share her feelings with her but could not resist herself in front of the other trustworthy friend. Teacher calls Shelly and scolds her. Finally he dismisses her from the college.

Observations:

The performers shared their feeling to start with the analysis. Participant who had enacted the role of Shelly said that it was a good feeling in the begging to enact an adolescent girl. It was a jovial feeling of liberty, which turns into a suffocation at end.

Participant who had enacted the role of teacher said that her role was to portray some hidden things in the society. It was to realise that what happens with most of the girls. She added that these incidences are neglected in society and considered as minor but they have long lasting implications on the personality of the victim.

The viewers pointed out some realistic facts shown in the play.

- No support system except one friend
- Complaint was withdrawn in the fear of consequences
- Quality of acting was excellent
- Peer counselling: Peer counselling is important factor that had shown in the play. Peer group has important role to play in adolescents' life. It can be positively used for confidence building. Confidentiality is the core value that nurtures the quality of counselling. Non-judgemental attitude allows person to share to the maximum extent.
- The role of father shown in the play was perceived by the participants as important fact of life. Some parents are progressive. They treat their children equally but still they maintain a safe distance, which proves as hindrance in the age of adolescent to share the delicate issues like physical exploitation by teacher. Participants said that such parenting needs to be improved.

The facilitator rephrased the important outcome of the discussion.

Peer counselling:

- Support from peers: The peers' support has important role in adolescents' life. This support is essential for sharing each other's feelings and experiences. If this support doesn't get proper direction then in that case it may lead to another problem. Peers have strong influence on adolescents' behaviour.
- Non judgemental attitude: Being non judgmental is an important value that gives scope for maximum sharing. Adolescents are sensitive and any judgment about them or their beliefs makes them withdrawn from sharing.
- Confidentiality is also a core value that sustains the trust between relationships.

Warm up: Counting Numbers
All participants were asked to stand in a circular shape. They were asked to count numbers, dropping five, containing five and multiples of five.

Outcome: Role play is an effective medium of training. However it needs to apply in a scientific procedure, which includes message, quality of acting, time period and language. The role play should be analysed with participation of viewer's. It is important to understand

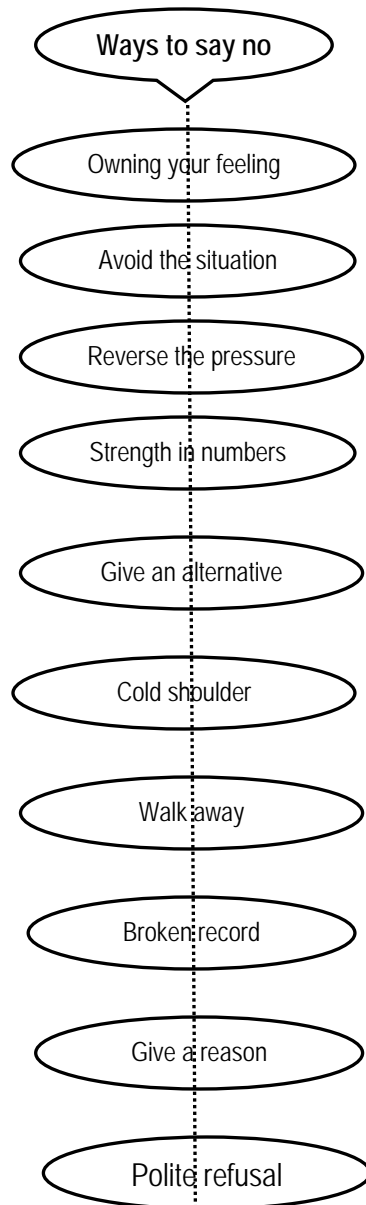
the feelings of performers especially in role reversal cases. The ASRH issues are common among all adolescents irrespective of their caste and class background.

Followed by this, Shri. S.C. Sanahi (IAS), Secretary Department of Women and Child Development (WCD), Government of Gujarat, came to address the participants.

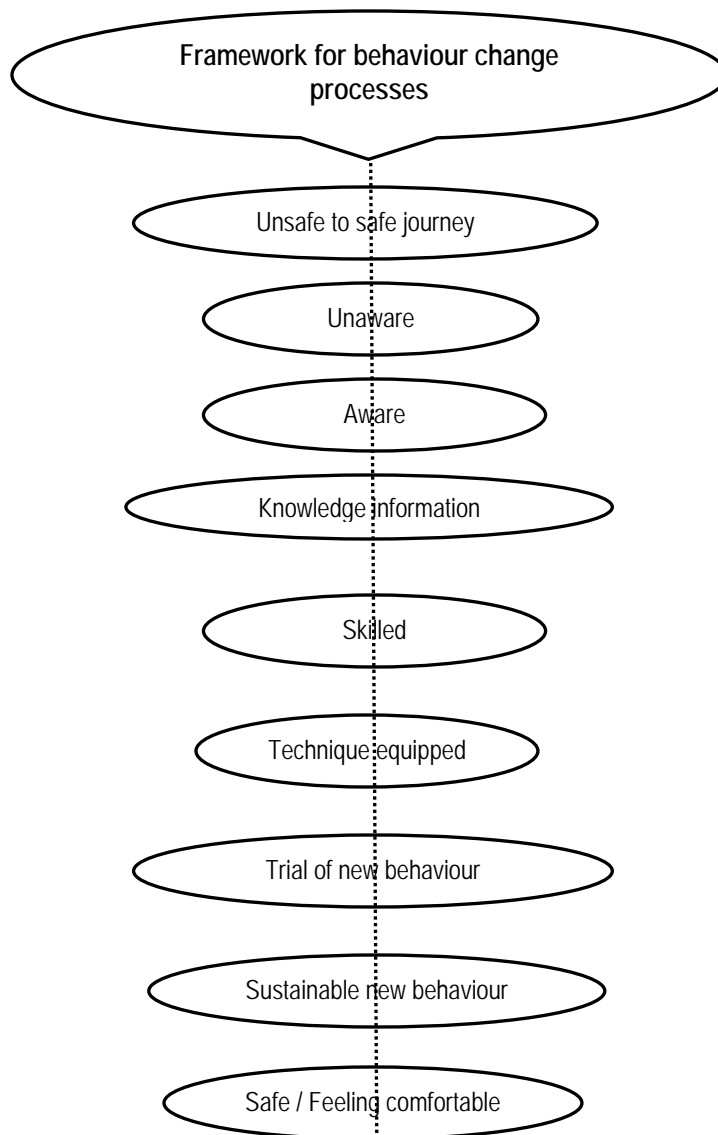
In his address, Shri. S.C. Sanahi (IAS), Secretary WCD shared his opinion on the need for building the capacity of grass-root functionaries so as enable them to cope with the changing situation. He said, "The nature of problems is changing according to the context and environment. To cope with these newly emerging problems we need to have greater capacities". He was of the opinion that such intensive training programmes would help to build that capacities. He also added that the content of the training need to reach grass roots. He shared his experiences of Sabarkantha during his services as collector of the district.

At end, Participants shared that they were felt encouraged and motivated with the presence of secretary of the department. The facilitators thanked for the address and an informal but valuable sharing by Mr. Senai.

VIPP:



VIPP



Day II

19 May 2004

Schedule:

Session VII : Understanding adolescents

- **By Ms. Vinita Nathani**

Session VIII : Addressing adolescents' issues and concerns

a) Growing up physical and emotional changes

- **By Ms. Vinita Nathani**

b) Menstruation, night fall and personal hygiene

- **By Dr. Patanjali Dev Nayar**

c) Reproductive organs and conception

- **By Laxmi Murthy**

d) Adolescents' sexuality

- **Dr. Prema Sundarrajan**

Session IX : Addressing adolescent communicating effectively

a) Understanding communication

b) Elementary of communication

c) Strengthening communication using audio-visual

d) Using communication tools effectively

- **Ms. Laxmi Murthy**

- **Dr. Prema Sundarrajan**

The day began with warm up exercise:



Recap: A group made a presentation on a chart paper on the sessions covered during the previous day and

overall learning.

- Life Skills : Understanding of life skills and their application with regard ASRH
- Negotiation skills
- Self analysis
- The exercise of listing of life skills was very interesting
- Role play and its significance

A quick buzz session was facilitated.

Participants were asked to stand in a circular form and they were asked to share one learning each in a statement.

They shared following learning...

- Different mediums of expressions
- Adolescents issues
- PMI was very good
- Peer counselling
- Self awareness
- In depth critical thinking
- Method of internalising LSE
- I perceived the team will challenge
- Observations skills
- Spelling out LSE
- Life skills
- Possibility of application of LSE
- Importance of critical thinking
- Self control
- Family planning and LSE
- Something has grown within
- I must care of team members
- Energy sustenance
- Policy level impact is possible
- VIPP method

The facilitator quickly recalled the characteristics of buzz session

- Flash thought
- Time saving
- Enriching information
- Mind showering

Getting into adolescents:

The facilitator introduced a theme for the day second. He said that the design of training enforce us to adopt adolescents' life and to analyse them critically. The sessions organised on the day second are enabling to get into adolescent's life. Therefore it would be a theme for the day.

Day: 2

Date: 19 May 2004

Time: 0930 hrs.

Session VII

Understanding adolescents

Facilitator:

Ms. Vinita Nathani

Dr. Prema Sunderrajan

Dr. Patanjali Dev Nayar introduced Ms. Vinita Nathani. Ms. Vinita Nathani has enriched her experience with adolescents as a teacher after completing her post graduation in social work from Delhi School of Social Work (DSSW). After serving as board member of 'Prerana' a Delhi based organisation, presently she has shouldered the responsibility of executive director. The area of ASRH is proficiency of Ms. Vinita Nathani.

Understanding adolescents

The facilitator began the session with an exercise. She asked all the participants to note down five words that occur immediately after listening to the word 'adolescence'.

After noting down those words discuss them in your group and form a definition of 'adolescence'. 15 minutes were allocated for the discussion.

Presentation I:

A group has made a pictorial presentation on a chart paper. According to them adolescence means...

- idl hE 7o3asa 7oi3sl Aaxa...
- Physical changes
- No scope of sharing of feelings
- Menstruation
- mE ma2url idi9t bnna Caahtl hU
- Stress of studies...

Presentation II:

Second group has also made a pictorial presentation. They had expressed their understanding of adolescence in a Gujarati poem.

- 2rma 2oDa pngne Aatm ivze pa>q
Aa`idnI lompr yOvn ma>De Aa>q.
- Identity crises
- Confusion with masturbation and day dreaming

Presentation III

The group had innovatively presented their understanding of 'adolescence' with enacting on the tune of relevant Hindi numbers like...

- merl mjIR

Scan poster

- 7o3a bCca smjke hmko
- Paapa kehte hE.....

Presentation IV:

The group performed a role play showing different changes in habits of girl and boy. The group had also used some Hindi songs.

The facilitator explained the age group of adolescents set by the international standards is 10 to 19. However it can be divided into two parts for better understanding of their problems and issues.

- Early adolescents 10 to 14
- Adolescents 15 to 19

Some scholars divide them in to three groups, i.e. early, adolescents and late.

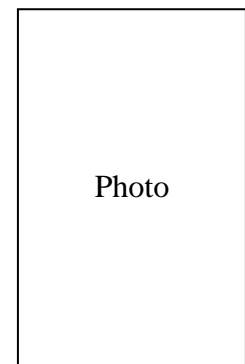
After formation of group definitions facilitator gave them another exercise. All the participants were divided into three groups by counting method. They were given charts, old colourful pictorial magazines, gum, scissor, pencils etc...

All groups were asked to make a collage on a theme given to them. They were given 30 minutes.

Presentation I: Theme “What is the societal attitude towards adolescents?”

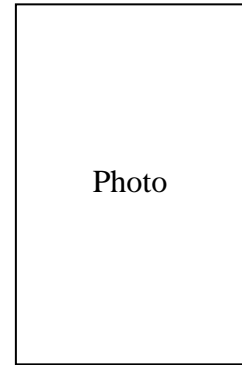
The group explained some of the important clippings and their significance. They found it stressful task to identify appropriate clippings and interpret them in the context of the given theme. The message they portrayed on the collage was...

- Societal attitude is doubtful
- According to society the role models for adolescents are film stars
- Opposite sex attraction
- Marriage is solution for every problem
- Society considers them as demanding
- The energy of adolescents can be identified with speed
- They are adventurous
- Society keeps them under pressure



Presentation II: Theme “The problems, needs and worries of adolescents”

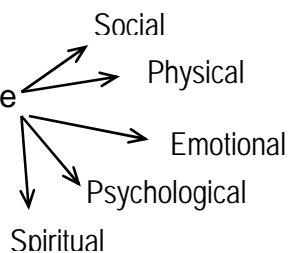
- anxiety related to career
- Need of warm love and touch
- Confusion related to body change, emotions and feelings
- Fragile body parts
- Walking on a back of crocodile
- Addiction
- Nights are bad-days are good
- Fantasy world
- Figure consciousness



Presentation III: Theme “Changes during adolescent age”

The group first tried to understand the perception of participants about their work. The participants tried to guess the topic. However the group admitted that it was difficult for them to show physical changes therefore they focused on the emotional and social changes among them.

- loss of childhood
- Developing tension
- Opposite sex attraction
- Addiction
- Feeling of “I have done it”
-
- Physical touch and attraction
- Physical and mental change
- Teenager’s pregnancy
- We don’t want money, we don’t want fame we want freedom
- Is anybody there?
- Aggressive – terrorism
- Identity crises
- Confused with role models
- Lack of role models
- Different aspects of change



The facilitator rephrased the understanding that had reflected in the sharing of participants. She said that the adolescence is a phase of transformation from childhood to adulthood. It is a phase when person is neither considered as child nor as adult. This phase is crucial as a person needs to deal with multiple roles, expectations and responsibilities. Life skills are important to deal with the emotional, social, psychological, and physical turmoil of the person. Not necessary that every adolescent face similar problems with similar intensity, it varies person to person and according to the conditions around but this phase of transformation is certainly not simple to overlook. She continued the session with another exercise. All participants were asked to stand in a circular shape. A ball was give to the group and asked them to throw it randomly. Whoever gets the ball will share...

“Who will address the concerns of adolescents and how?”

The responses were noted down as below...

Who	How
- School counsellors	- Application of LSE
- Teachers	- Guidance
- Parents	- Being friend
- Family members	- Problem solving
- Friends /youth groups	- Support
- School /home	- Space
- Self	- Self awareness
- Rural areas / counsellors	- Question box
- ANM	- Counselling /training
- Self	-
- Adolescent groups	- Camps
- Community	- Sensitisation rally
-	- Skits role play
-	- Different methodology
- Doctors/ Medical Staff	- Knowledge / awareness
- NGO	- Participatory method
- Services	- Help line
- Peer group	- Peer counselling
- School counselling	- In curriculum
- CBOs	- For sharing
- I will (as shared by the facilitator)	- Participation of adolescents in planning
- Government	- Policy space/ resource mobilisation

Outcome: After the buzz session the facilitator posed a fundamental question before the participants. She asked, “Who are we to decide for adolescents? Aren’t they important to participate in the process of planning?” The participants perceived it as thought provoking question. There was an agreement over the principle of adolescents’ participation in the process of planning but many of them were not clear on the feasibility of this idea. Normally the plans are made in absence of adolescents. It is essential to know the felt needs of adolescents before any plan of action proceeds for implementation. It is important for us to learn that instead of imposing our thoughts on ‘adolescents’ we need to develop life skills among them so that they can take decisions with skills.

Methodology: The facilitator wrapped the session with highlighting on the methodology used...

- Group discussion
- Game
- Role play
- Sharing
- Question box
- Collage
- PMI
- VIPP
- Buzz
- Brainstorming

The participants expressed their confusion between methods, tools and techniques. The facilitator asked participants to wait till the day sets. This confusion would be addressed in the coming sessions.

She asked participants to indicate the life skills used in the exercises...

- Critical /creative thinking
- Effective communication
- Interpersonal relationship
- Decision making
- Dealing with emotions
- Coping with stress
- Empathy
- Self awareness

Participants said that they used almost all skills during the session

During post session discussions participants raised their concern over couple of points.

- a) The age group of adolescents: The international definition has set the age group between ten and nineteen but according to the participants it should be between fourteen and nineteen.
 - In response to this the facilitator said that ‘all definitions are achieved by compromise. The definition is multi dimensional and universal. People arrived

- at this definition through rigours process of studies and observations. Yet this can be considered as the perfect one, perhaps close to it.
- The NCERT has further stratified the age group of adolescents into early (10-13), middle (14-16) and late (18-20) adolescence. The age groups are always contextual.
- b) Media is one of the important stakeholders missed in the list of stakeholders identified in the second exercise.
- The facilitator appreciated the participants for indicating the missing point. She said that the inter-sectoral collaborations are essential in any sector to make it as a success story. The realisation of this thought in the context of adolescents and their issues is a major outcome of this session.

Day: 2

Date: 19 May 2004

Time: 1130 hrs.

Session VIII

Addressing adolescents' issues and concerns

- a) Growing up physical and emotional changes
- b) Menstruation, night fall and personal hygiene
- c) Reproductive organs and conception
- d) Adolescents' sexuality

Facilitators:

- Dr. patanjali Dev Nayar
- Ms. Laxmi Murthy
- Ms. Vinita Nathani
- Dr. Prema Sunderrajan

Addressing adolescents' issues and concerns...

The facilitator introduced the method of guided group activity to commence the proceedings of the session. He said that the guided group activity is an intensive process of learning in small groups on assigned themes with the help of a guide.

Accordingly four groups were formed and topics were assigned to each group.

- Group I : Growing up: physical and emotional changes
Group II : Reproductive organs, functions and conceptions
Group III : Adolescents Sexuality
Group IV : Menstruation and Nocturnal emissions

The facilitator asked participants to identify facts and concerns with the help of guide. They were given 1 hour.

The group processes: All respective guides sat with the group and discussed the scope of the topic given. It was made clear to group members that the information should be clear, complete and adequate but not necessarily in a medico-language. The guides also consulted the group on their then level of understanding of the topic. The reading material and human anatomic figures ^{annexure³} were referred during the discussion. Participants were most attentive as they were in closed group and the facilitator's explanations were unfolding their interest into the subject. The thrust was given to understand the physical differences between men and women, factors that make men and women special due to these differences, functions of reproductive organs and myths breaking related to reproductive health system of both men and women.

The group presentations were scheduled on the next day.

³ Human anatomic figures

Addressing adolescent communicating effectively

Day: 2

Date: 19 May 2004

Time: 1400 hrs.

Session IX

Addressing adolescent communicating effectively

e) Understanding communication

f) Elementary of communication

g) Strengthening communication using audio-visual

h) Using communication tools effectively

Facilitators:

- Ms. Laxmi Murthy
- Dr. Prema Sunderrajan

Dr. Patanjali Dev Nayar introduced the facilitator Ms. Laxmi Murthy for the 9th session of the training on 'addressing adolescent communicating effectively'. He said, Ms. Laxmi is recognised for her expertise in the area or 'development communications'. After her professional training from National Institute of Design she moved to Rajasthan, where she came across development work. Very soon she developed her authority in designing training kits for institutes in Rajasthan. Before handing over the dais to her he spoke about her quality of having adolescence spirit.

The facilitator began the session with an exercise. Separate pairs were made of male and female participants. She asked participants to assume that they are in a dense forest with a 12 year old girl who suddenly attains her menstruation. Participants were further asked to design a sanitary napkin for the girl along with them with the help of given limited resources. Participants were given two pieces of cloths, a paper, a needle and a string. Time allocated was ten minutes.

After the exercise men participants were asked about their feelings over the exercise. The participants shared that they found it extremely difficult, especially those who were bachelor found it impossible. They wanted to take the help of married friends. Some of the participants were found it interesting. Some of them were in puzzle, whether is it really required to make napkin or only piece of cloth is sufficient? The reactions of women participants were different that of men. They had taken minor things in to account while designing the napkin such as looking at the rural background of a girl she might not have worn the undergarment. Girls were found themselves more confident of the task.

The facilitator asked the participants to guess the purpose of this session. Participants felt that the exercise was aim at sensitising men or developing empathy towards the specific needs of women. Some of them felt that it was to make them aware on the issues related to menstruation. The facilitator then asked that how many of the participants were thinking over this for the first time. Maximum number of participants

raised their hands to indicate that it was the first time that they were thinking over this. According to them it was coping to stress.

The facilitator continued with the second exercise. She distributed four different sealed packets to participants and asked them to guess the material within the packets without opening them. Participants gave various names of material that they could guess.

The facilitator asked them, what kind of communication that participants received through this exercise. Participants identified that...

- Smell
- Touch
- Taste
- Hearing

The facilitator drew a meaning out of the responses given by the participants. She said that the communication start from ourselves. She further asked participants that what words immediately occur in their mind when the listen to a word 'communication'

Participants gave different reactions

- Analysing
- Dialogue
- Conversation
- Exchange of ideas
- Eye contact
- To feel

Followed by this, the facilitator explained the basic concept of communication through a small lecture. She said that, to have complete communication it is required to have an audience and a speaker. The facilitator used transparencies for referring focus areas of the subject. She explained the definition of communication with the help of second transparency. According to her, 'communication is a two way process of sharing ideas and information in active participation of both information sender and receiver, which lead to modification of ideas/information. The life skills of communication and interpersonal relationship are important to have effective communication. She distributed different posters in four groups of participants to explain the effectiveness of communication. The participants were asked to answer the questions mentioned below each of those posters.

Group I had received the poster in which two fashions of latrine were shown. One was of passing stool in an open space and the other was of constructed toilet box.

The group members answered the questions...

Q.) Where this can be used?

- In villages
- For women in villages

Q.) How can this be used?

- Poster
- Slide
- Wall painting

The facilitator shared her experience from Rajasthan with the same poster. She said that this poster was misinterpreted in the villages. The message carried by these posters was not reaching to the target group in its true spirit. After having such experience in the beginning facilitator decided to collect the methods of communication from the villages itself and developed a new poster. The drawings in the new posters were created by Sonabai a village person. The facilitator shared the similar experience from Surendranagar district of Gujarat where women from little Rann had shared their health problems through a poster, which is difficult for other people to interpret. The facilitator said that the interpretation of visual may vary person to person. Therefore pre-testing is essential before mass printing of posters.

Application of communication skills:

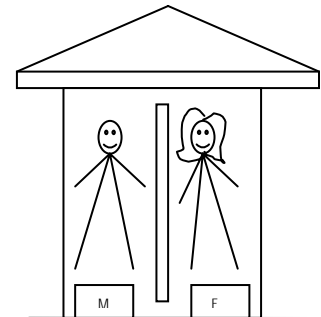
After the tea break, facilitator continued with the session explaining the applications of communication skills. She distributed four sketches of a boy and a girl and named them as Sundar and Sundari. Participants were asked to complete the picture with colours, wherever they find it incomplete. Participants completed both sides of the pictures with colouring the cloths of Sundar and Sundari. After colouring clothes, participants were asked to draw inner parts of the body of Sundar and Sundari. The facilitator also explained the method of conducting this session with adolescents. Adolescents may be asked to draw the track of a Roti that they had munched in the morning. She said, adolescents find fun in this exercise.

At end of the exercise the facilitator explained the objectives behind it. She said that it is important to respect our body. Nobody has right to discuss the body and its functions without respecting feeling of people attached to it. Therefore the exercise of this kind helps understanding body by gradually removing the covers. The process of dressing and undressing gives respect to feelings of people. The gradual process also helps removing reservations, barriers and feeling of shy among group of adolescents. There is a special reason to give names to the characters / figures. Personalisation of figures,

animations, sketches play significant role of altering ego. Participants can relate themselves with the sketches with help of having names.

The facilitator also explained different methods of conducting the same session.

- Body mapping: Body mapping is possible with the help of big size sketch of male and female body. The facilitator displayed the kit she has design. Participants can also draw a body of a person on floor.
- Kevadiya Box: This is a traditional box, which has multiple doors. Each door contains a picture of a body with the information. The front doors display the picture of well dressed Sundar and Sundari. The inner doors show the organs of body and its functioning. The facilitator can open the box and close it at end of the session. Such box can be developed on different themes such as physical growth at different ages in male and female body.



The facilitator shared her challenges in translating some themes into training aids such as 'night fall'. After rigorous research she developed an audio cassette with an interesting script. The cassette proved great success in the field.

At end of the session the facilitators asked participants to identify the skills used in the session. Participants shared that all ten skills were used the session. The facilitator made group to think much harder and asked to identify only three skills which were used maximum. Participants identified...

- creative thinking
- Effective communication and
- Critical thinking as maximum used skills

The day was closed with this session

Outcome: Communication is an important part while dealing with adolescents' issues. They do not communicate all their problems in a clear language neither they bear the clear language to make them understand. The social dogmas attached the issues restrict us to provide information in a straightforward manner and it restricts them to share their problems as they are. Therefore communication plays an important role in understanding their problem and explaining them the facts. It is important to use different tools for building their capacities of communication to reach the real issues and their true feelings about them.

Day III

20 May 2004

Schedule:

Session X : Group presentations

- Group I : Reproductive organs, functions and conceptions
- Group II : Menstruation and Nocturnal emissions
- Group III : Adolescents Sexuality

Session XI : Principles of counselling

- **By Ms. Vinita Nathani**
- **By. Dr. Prema Sundarrajan**

Session XII : Practice in preparation 'mock sessions'

- **By Ms.Vinita Nathani**

Day: 3

Date: 20 May 2004

Time: 0930 hrs.

Session X

Group Presentations

- a) Growing up: physical and emotional changes
- b) Reproductive organs functions and conceptions
- c) Adolescents' sexuality
- d) Menstruation and Nocturnal emissions.

Warm up:

- Asked participants to stand in a circular formation
- Asked them to observe the person besides them carefully with regard to:

- Physical attraction
- Behaviour
- Attitude

Share two good things that you have observed with regard to each of above factors

The day began with warm up session. Participants shared their observation about their partners standing besides them. Participants felt it

was an interesting round of session.

The assigned group recap the previous day...

Group Presentation

A) Growing up: physical and emotional changes

The group presented physical changes that occur in the age of adolescence and anxieties related to them.

MALE		FEMALE	
Physical changes	Anxiety	Physical changes	Anxiety
<ul style="list-style-type: none">- Hair growth on chest, hands, legs and underarms.- Beard and moustache growth.- Growth of pubic hair	<ul style="list-style-type: none">- Is it only with me?- If it continues growing then what do I do?- Are these hormonal changes? Do they affect my health?- I am not having beard. All my friends tease me. Am I abnormal?	<ul style="list-style-type: none">- Growth of hair underarms- Growth of pubic hair	<ul style="list-style-type: none">- Is it only with me?- If it continues growing then what do I do?- Are these hormonal changes? Do they affect my health?- How do I shave these hairs? Is it dangerous to use razor or hair remover?
<ul style="list-style-type: none">- Change in voice modulation (Adamou epee)	<ul style="list-style-type: none">- My voice is like a girl am I abnormal?	<ul style="list-style-type: none">- Breast formation	<ul style="list-style-type: none">- Size of breast is too small /too big?- Colour of nipple is dark?- Growth of few hairs around nipple- Getting a bra feeling shy

MALE		FEMALE	
Physical changes	Anxiety	Physical changes	Anxiety
- Night fall	- What is it? - Feeling shy? Is something wrong with my body?	- Menstruation	- Why is it only with girls? - Dirty days of life - Fear of stain - High bleeding/ spotting what is normal? - Is anybody there to listen to me?
- Growth of all reproductive health organs	- Size of penis?	- Growth of all reproductive health organs	-
- Pimples hormonal change	- I am not looking handsome - Is it hormonal abnormality?	- Pimples hormonal change	- I am not looking beautiful
- Height and weight gain slow	- Why am I not looking robust?	- Height and weight gain fast	- Am I looking attractive?

Doctor's words: Dr. Patanjali Dev Nayar qualified the presentation with his views and additional information. He also answered some of the queries from the participants.

- ❖ Hair growth: There are equal numbers of hairs on both male and female body. However their nature is different. Chest and other body hairs on male body are black in colour, long in length and harder than of hairs on female body. Both hereditary and hormonal factors influence the nature and pace of hair growth on both male and female body.
- ❖ Pace of growth: Girls attain puberty faster than boys. It is a normal phenomenon. The physical growth is determined by the sleep and not the physical exercise. However exercises are good and necessary for relaxation of mind and body.
- ❖ Size of penis: Human being is the only mammal having proportionately bigger penis than other mammals. The size of penis can vary from person to person. The size of the penis has no relation with sexual satisfaction.
- ❖ 'I have lot of pimples what do I do?' a case for counselling:- The focus are of counselling this case should be...
 - It is natural
 - All body structures are different
 - Hygiene. Do not bust them.
 - The pimples grow and set within six days

- Pimples have no relation with constipation
- It has relation with stress, stress can act as contributory factor

❖ Why do pimples grow only on cheeks?

- Pimples grow on back also but their proportion on cheek is higher than that of back.
- Sebaceous glands cause the growth of pimples which has high presence under the skin of cheeks. Therefore the proportion of pimples on cheeks is higher than back.

B) Menstruation and Nocturnal emission:

The group presented the facts and factors of anxiety with help of charts and transparencies.

Part I: Menstruation

Facts	Anxiety
- Menstruation is a natural process	- I may become mother now
- It is same as of tears or nose secretion	- Others will come to know
- It is important to maintain hygiene	- Stomach pain, heavy bleeding, irritation, spotting depression
- It is natural having pain and not necessary it will common in all	- I won't be able to play in ground
- Possibility of RTI in absence of hygiene	- It is dirty and infectious

The facilitator showed the method of locating uterus and continued with addressing issues related to menstruation.

❖ What is a normal period?

The definition of normal period varies from person to person. However a period with regular cycle and same nature is considered as normal. Four divisions can be made with regard to regularity of period.

- Regularly regular
- Regularly irregular
- Irregularly regular
- Irregularly irregular

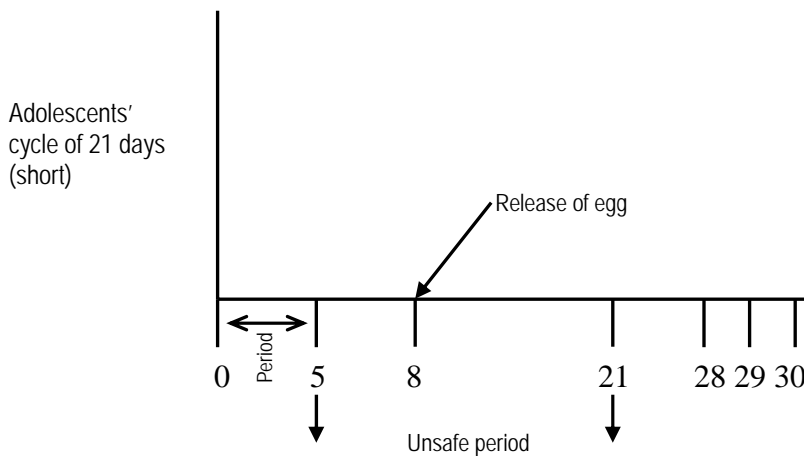
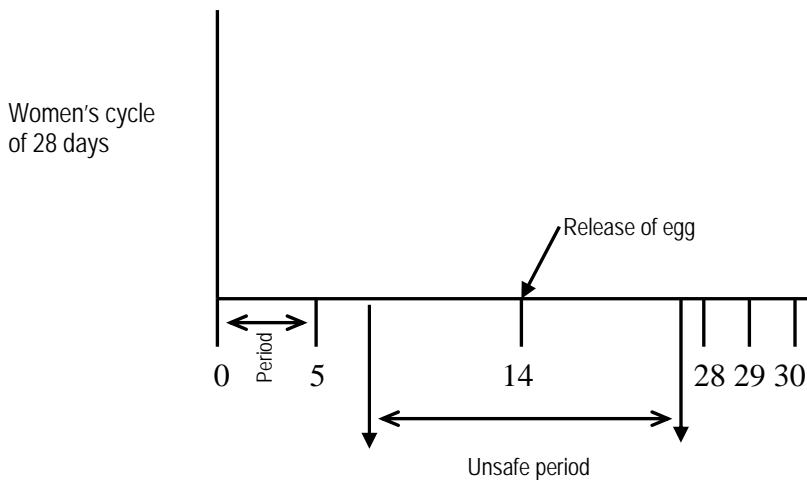
The normal duration of period is 3 days to 5 days but in some cases it goes up to 7 days. Normalcy of such period can be decided only after consultation with a doctor. It takes 6 months to 3years to get the cycle regularised.

❖ Why does blood stinks

The blood secret during period is pure in nature. However after coming into contact with air bacterial formation occurs, which cause the stink to the blood. Unhygienic condition of vagina also causes the stink.

❖ Is pregnancy possible if intercourse happens during menstruation?

The possibility of pregnancy in the case of intercourse during menstruation is determined by the number of days in a cycle and regularity of the cycle. The menstruation starts 14 days after releasing the egg and according to recent research an sperm has a life of 8 days. In account of these two facts one can calculate the possibility of safe period. If the periodic cycle doesn't permit the safe period based on above facts then the pregnancy is possible if intercourse happen even during menstruation.



The graph shows that period is absolutely safe. Uncertainty of period and life of sperm add the chances of fertility.

❖ What makes sperm to live for eight days?

After entering into uterus sperm get hide under cervix of uterus. There they get necessary nutrition, which make them living for eight days.

❖ The participants showered the question related to spotting, pregnancy, medicines and pain during menstruation. Most of the questions were related to adults and not concerning to adolescents. The areas of anxiety for adolescents were...

- Spotting: Spotting is different than bleeding. Occurrence of spotting during pregnancy is not common in all women but it is not an abnormal phenomenon also. A doctor can certify the normalcy of spotting only after medical check up. Spotting during age of adolescence irrespective of menstruation is not necessarily menstruation. Therefore it is essential to explain the nature of bleeding all the time while consulting doctor on regularity or irregularity of period.
- Pregnancy: Doctor said that it is difficult answer al the questions related to pregnancy as many of them were person oriented and not applicable to all. Many questions were required medical check up to answer them. However, he focused on the questions related to adolescents' pregnancy. He said that the pregnancy in early age is dangerous due to inadequate growth of vaginal path and uterus. The age of 21 to 28 is considered as best fertility period. There could be various reasons for infertility. It can be temporary or permanent and both male and female can develop infertility. It has been observed that the men are loosing the capacity to produce enough quantity of sperms these days due to stressful life style and style of clothing (tight under wears do not allow scrotum to reduce its temperature, which affect the production of sperms.) The knowledge we have is to guide the person and not to treat. It is always advisable to seek doctor's help on the grey areas.
- Pain: Pain during menstruation is normal depending upon the intensity and nature of the pain. If the pain is unbearable and continues for long time then before treating it self it is better to consult the doctor.

C) Adolescent's sexuality:

The group used role play as method for presentation. The presentation was divided into three sections according to the age groups of adolescents. The first section of early adolescence was enacted. The characters of boy and a girl were enacted indicating change of feelings. Both were shown as getting mirror conscious. Girl was shown taking care of her skin and beauty and boy was shown experimenting with cigarette.

In section two both were shown with the physical changes i.e. menstruation and night fall.

In third section the group enacted the reproductive organs of the body and performed the process of conception.

After the presentation participants identified the areas of concerns related to sexuality for adolescents.

- | | | |
|--------------------------|---------------------------|-----------------------|
| - Secret signs / signals | - infatuation | - being together at |
| - Curiosity | - liking | lonely place |
| - Sharing interest | - loving | - skin to skin touch |
| - Fantasy | - going around | - friendly patting |
| - Hug/ embrace | - sexual desire | - sexual exploits |
| - Hand holding | - sexual urges | - exchanging letters/ |
| - Impulse | - sex: to be or not to be | note |
| - Masturbation | - intimacy | |

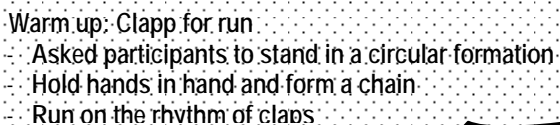
The facilitator performed a small role play while emphasising on 'friendly patting'. He said that in the age of adolescents the physical attraction for opposite sex sometimes overpowers the relationship. 'Feeling good' takes serious turn. In the complex situation it becomes difficult to avoid. However, it is important for adolescents to understand the first step of such physical advances and resist them in that stage. Early resistance would aware the perpetuator about his/ her conduct and also maintain the relationship.

The facilitator showed the way perpetuator wins the territory over other person's body.

Story line: A boy and a girl are good friends of each other. Boy sits besides the girl and start praising her. He takes her hand to see the new ring. Slowly he rubs the palm to clean it so that to see her fortune lines. The girls get attracted to the skill of a boy and she also feels good about the touch. Gradually boy moves up to the shoulders of a girl and pat her. Eventually he attempts to cuddle her. The girl feels uncomfortable at end but by then she has lost her power to resist. The game is named as territory.

After performing the way perpetrator wins territory over others body, the facilitator asked participants to perform how it can be resisted at the beginning. Participants performed on the same script and showed that the girl shows discomfort while keeping her hand in boy's hands. She straightforwardly tells the boy that she doesn't like such advances and it is better to maintain the physical distance.

Outcome: Adolescents' sexuality is a significant matter of study which unfortunately not dealt in the field. Scholars' studies in this area need field based trialling. Sexuality is not mere penetration but it is more beyond that. The complex issues like home sexuality, lesbianism, multiple attraction, sexual phobias etc. encompass the sphere of adolescents' sexuality. It is important for a counsellor not to be judgmental while dealing with the cases related to sexuality. The methods of self disclosure, motivation, touch can be used to covert stress into positive energy of adolescents. It is important not to impose the decision but enable the adolescents to take right decisions.

- 
- Warm up: Clapp for run
 - Asked participants to stand in a circular formation
 - Hold hands in hand and form a chain
 - Run on the rhythm of claps

Day: 3

Date: 20 May 2004

Time: 1400 hrs.

Session XI

Principles of counselling

Facilitators:

Ms. Vinita Nathani

Dr. Prema Sundarrajan

Principles of counselling

The facilitator shared the objective of this session. She said that the session is designed to streamline the flow of information so that participants can make use of it for mock sessions in the next day. It is also a preparatory session for proposed mock sessions.

The facilitator asked participants to share their views on tools, method, aids and techniques. Participants shared different things and categorised them as tools, methods, aids and techniques. The facilitator explained that there is no much difference between aids and tools and there is a thin line between tools and methods.

While shifting on counselling principles the facilitator began with an exercise. Three groups were formed and they were assigned roles.

Group I : Authoritative parents

Group II : parents who have internalised LSE and practising with adolescents

Group III : Adolescents

The third group was asked to list out issues for themselves and distribute them among their members. Asked each member to approach first group I with the issue and then group II. The group of 'authoritative parents' was asked to deal with adolescents without understanding of LSE and group of parents, who have internalised LSE, was asked to reflect an understanding of LSE in their conduct with adolescents. The performance of behaviour of both types of parents is recorded as below...

No.	Issue posed by adolescents	Parents without understanding of LSE	Parents internalising LSE
1.	Want to have a sleeveless dress	Rejects abruptly	Promise to get it later
2.	Want to go out for night out parties	Not allowed, scolds	Shows concern and ask details about it. Ask to experiment once but cautions about the risks involved
3.	Want to marry a girl of my choice (Boy)	Rejects, gets upset	Consults, ask details about the girls and her family. Decides to meet girl's family

No.	Issue posed by adolescents	Parents without understanding of LSE	Parents internalising LSE
4.	Want to enjoy life and don't want to go to school	Get annoyed asks to leave house	Keep conditions, enjoyment is assured only in vacations and on Sunday after satisfactory study. Explains the importance of study
5.	Want to marry a girl of my choice (Girl)	chaos at home, get upset threats to girl, emotional blackmail	Ask about boy and his family promise to meet the boy and his family
6.	Want to enjoy Navaratri with boy friend	Scold prohibits to go	Lets enjoy it together parents also accompany girl
7.	Problem of night fall	Extremely judgmental and doubtful	Makes the boy relax and explain the scientific reason behind it

The facilitator then asked the life skills used during the exercise. Participants identified that the mostly used skills were, coping with stress, problem solving, creative thinking, and dealing with emotions.

The fundamental question emerged during the discussion that is fulfilling demands of adolescents indicate the internalisation of LSE? In order to answer this question the facilitator asked participants to repeat the role play on the issue of demanding money for party. The understanding father discusses the demand of an adolescent and explain him/her the consequences of such expenditure. The discussion goes the way below...

Character	Dialogue	Verbal communication	Non-verbal communication	Impact
Son	Papa I want Rs.100/-	Requesting tone	Avoids eye contact	Catching attention of father
Father	You want Rs.100/-?	Surprising tone	Eyebrows are stretched? Utter surprise. Also concern on face	Demand of Rs.100/- is not common and it is big amount for you
Son	-	-	Nodding affirmatively	Pleads, catching sympathy

Character	Dialogue	Verbal communication	Non-verbal communication	Impact
Father	Fine I can but for what purpose you want this money?	Normal pitch, shows confidence on child	Move towards the child, full attention and get him close. Put hands on shoulders.	Child feels comfortable and relax to discuss further
Son	I want to go out with friend tonight	Straight answer, in a requesting tone	Keeps eye contact, shows comfort	True answer
Father	Ok. But will 100Rs. Enough?	Simple question, normal tone	Shows understanding, we are together	Child feels closed to father
Son	I think it will be enough	Straight answer	Gets closed to father	Father understands the urgency
Father	What will you do if you go short with this money?	Simple question	Concern for both of us	Child starts thinking about it
Father	You know our situation. I trust you. You are a responsible child.	Explains	Non judgmental. No direct decision	Makes child to think the consequences on the family.

The facilitator explained the micro indicators of non-verbal communication. She said that the foundation of counselling is based on empathising. The father was shown fully empathised with a child. The characteristics of good counselling are...

- Non judgemental
- Patience
- Listening
- No conclusions
- No direct decision

The same characteristics lead to the principles of counselling. They are...

- Unconditional positive regard
- Non judgemental
- Without labelling
- Congruence
- Listening
- Patience and tolerance
- Empathy
- Confidentiality
- Effective verbal and non verbal communication
- Pose and gesture

Outcome: The principles of counselling are important to understand the issues impacting the client. Listening is an important principle. It is different than hearing. Listening involves 100% involvement. Empathy is fundamental skill essential for counselling. A good counsellor enables client to take right decisions and not the one who gives decision.

The facilitator continued the session with another exercise. The exercise was named as 'make a bid'. Eight offers were listed on the board as...

- A well paid job
- A great sense of humour
- A happy marriage
- Great looks and body
- Becoming PM for ten years
- Ten years of good health
- Rs. 1 crore
- Attractive to other sex

The facilitator asked participant to bid for the above listed offers. It was assumed that all the participants were having Rs. 50/- After individual level bidding participants were asked to form three groups. All three groups were asked to discuss the individual opinions and form group priorities for bidding. After the results the facilitator asked few questions related to the exercise.

1) What was the process in group?

The group process was different in all three groups. One group had a consensus to apply statistical method of mean to come out with the group's priorities. In other two groups it was the process of sharing, articulating and justifying the opinion.

2) Whether group outcome was totally different than individual?

In many cases the group outcome was different than the individual outcome. However, for some participants it was totally different and for others it was partially different. The group outcome was accepted by all members as in a virtue of group benefit and not an individual benefit.

3) What was the purpose of group activity?

The group activity of such kind promotes participation, negotiation, articulation among adolescents. They also experience the group dynamics.

4) Can you think of similar game for adolescents on different topic?

It would be creative idea to develop such games.

Day: 3

Date: 20 May 2004

Time: 1730 hrs.

Session XII

Practice in preparation 'mock sessions'

Facilitators:

Ms. Vinita Nathani

Guidelines for planning a training session:

The objective of mock sessions:

- To strengthen the facilitating skills
- To understand the level of understanding of participants.

Guidelines:

- Study the list of objectives
- Understand identify training techniques to be used for conducting session
- sequence the activities to be undertaken
- select appropriate training tools and aids to be used
- arrange material
- rehearsal

Guidelines for conducting participatory training session:

- Create a learning environment
 - ❖ Announcement of the session
 - ❖ Discuss the utility of the subject
 - ❖ Discuss the main points of the subject
- Present the objectives of the session

Mock session schedule:

Date	Time (hrs)	Group members	Topic
21/05/04	0930 – 1045	Shilendra/ Shilpa/ Darshana	Friendship (out of school)
	1045 – 1200	Dr. Meena / Kamal / Karan	Conflict resolution and negotiation skills (in school)
	1200 – 1315	Himmat / Hemaxi / Trupti / Bhavana	Having children by choice and not by chance conception (out of school)
	1415 – 1530	Neela / Tejas/ Florins / Jayantibhai	Addressing sexual harassment and violence (In school)
	1530 – 1645	Pranav / Harish / Shraddha	Having children by choice and not by chance conception (In school)
	1645 – 1800	Rajendra / Jagruti / Harshad	Goal setting and planning (In school)
22/05/04	0930 – 1045	Prashant / Jivraj / Geeta	Preventing HIV-AIDS (Out of school)

Day IV

21 May 2004

Schedule: Mock Sessions day

Day: 4

Date: 21 May 2004

Time: 0930 hrs.

Session I

Friendship (out of school)

Facilitators:

Shailendra / Shilpa / Darshana

Before the session commenced the facilitator asked participants to adopt the role of adolescents and at the end of the session give critical and constructive feedback.

Friendship:

The facilitator introduced herself and the other two facilitators. She began with an exercise. She distributed colour cards to all participants and asked them to note all words that occur immediately after listening to the word 'friendship'. She gave ten minutes to all participants. The participants shared different concerns of adolescents adopting their role that they didn't know reading/writing. One of them wanted to go home. The other one said that her mother would scold her. Some one said that he wanted to go to loo. All the participants enacted the realities that they face with adolescents in the field. It was challenging for the group to handle the situation in a class. However, they were keeping themselves cool and patient. In the second exercise the facilitator asked participants to develop the role play on the theme of friendship. It was found stressful process for them to control the adolescents and get the show going. However, one of the group pf participants developed a role play on the story that 'a genuine friend helps at bad times'. In the second performance participants had shown the relationship between boyfriend and a girlfriend. The third group had projected the peers' pressure for gambling and other addictions. After these performances the facilitator asked participants to analyse the qualities of best friend. She further categorised those qualities as best qualities, modest qualities and poor qualities. She gave different colour codes to each of these categories and distributed the cards of those colours to all participants.

Here the session was closed and house was made open for the discussion.

The discussion was facilitated by Ms. Vinita Nathani. First of all she congratulated the group and asked them to share their feelings. The group shared their concerns...

- Time limitation
- Lots of stress
- Could not receive expected cooperation
- Little preparation gave confidence

After understanding the concerns by the group of session facilitators, participants were asked to give their feedback. The participants appreciated the skills of facilitation and handling adolescents and identified the positive things.

- Group work

- Synchronisation among facilitators
- Method of role play
- Addressing special needs of adolescents
- Use of interpersonal relations
- Ability to manage the challenges and keeping the mind cool

The critical factors shared by the participants were...

- loss of control over emotions
- Balance between the process and content was loss
- The beauty of first role play was loss as no motivation given
- Long sighted vision of encouraging children was miss
- Little guidance is required during role play
- Too many activities in 45 minutes.

Day: 4

Date: 21 May 2004

Time: 1125 hrs.

Session II

Conflict resolution and negotiation (in school)

Facilitators:

Dr. Meena / Kamal / Karan

Conflict resolution and negotiation

The facilitator commenced the session with warm up exercise. He asked participants to laugh in different tones.

The facilitator shared the objective of the session:

- How to understand the problem of adolescents and solve them?

The other facilitator took the charge of the session and participants started making noise as adolescents in class.

The second exercise was initiated by the facilitator. Three groups were formed. The facilitator gave three stories and asked participants to develop a skit based on the stories given to each group.

Story I: A boy tries to smock a cigarette while his mother looks at him. He is scared with the consequences and consulting friends

Story II: A boy's family is on visit to a girl's family to discuss the marriage while girl wants to continue her education and wants to wait. The girl's family share the wish of her and solve the issue

Story III: A girls fails in exam. Her mother is upset but father encourages her and friends support her to study hard.

After the performances fall out discussion started. The facilitator asked participants about their feelings after the performances. All the participants were feeling good as the stories were giving sense of an ideal situation. They shared that the performances were portraying ideal situation but not the reality.

The session was closed and made the house open for critique...

The facilitator asked participants to volunteer for conducting the analysis.

Prashant volunteered and facilitated the process of analysis. HE asked participants to give positive feedback. The feedback was...

- time management
- Used problem solving skill
- The themes for the role play were fitting into the context
- Groups were well guided
- First exercise was good to build an environment.

The group also shared the critical factors...

- the objective of the session was shared but not explained
- The body language was showing stress
- The content was relevant but not complete.
- How to address adolescents? They don't like to call as baccha or beta or chhotuu etc. they like to call themselves by name.

Day: 4

Date: 21 May 2004

Time: 1230 hrs.

Session III

Goal setting and Planning

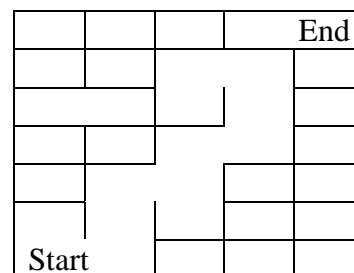
(In school)

Facilitators:

Rajendra / Jagruti / Harshad

Goal Setting and Planning

The facilitators began the session with an exercise. The facilitator displayed a puzzle on board and asked participants to find out the right path to reach the destination.



In the second exercise three groups were formed and they

were asked to solve a jig-saw. In the third exercise

participants were asked to share their goal and the way they will achieve it. After three exercises outcome was discussed. The participants were asked to give feedback on the learning gained in the exercises. The facilitator tried to relate it with content of the session.

Jayantibhai volunteered for the analysis of the session. The participants gave positive feedback stating that the beginning was good to ensure involvement of all participants. However later on it lost the track with content. It also lost to catch the magic moments. The facilitator explained the magic moments. These are the moments or reactions by participant which lead the context. It is a skill of facilitation to catch such moments and utilise them.

Day: 4

Date: 21 May 2004

Time: 1545 hrs.

Session IV

**Addressing sexual harassment
and violence (In school)**

Facilitators:

Neela/ Tejas/ Florins / Jayantibhai

Addressing sexual harassment and violence

The facilitator shared the objective of the session to understand the sexual harassment and violence.

The facilitator began the session with an exercise. Three groups were formed and asked them to develop a definition of sexual harassment based on the words that occur immediately after pronunciation of the word 'sexual harassment' The second exercise was given in

which three stories were shared with three groups of participants. The stories were based on the incidences of sexual harassment with adolescent girl and boy. The stories were analysed in the larger group. Participants shared that they felt bad about the incidences written in the story. They identified the categories of sexual harassment as psychological and physical. The session was closed and Kiran came forward to facilitate the analysis of the session.

The participants identified the positive factors of the session.

- the session was well organised
- the case stories were relevant to the subject
- The facilitator was confident

The critical factors were

- the subject were overlapping on each other
- Diverting on a controversial issue
- Personalisation while explaining crucial concept of homosexuality
- Objective did not serve in its complete sense.

Dr. Patanjali said that the state of mind of a participant is more important than any of our session. Being human is more important than being skilful and expert. Therefore depersonalisation of session is essential unless it is therapeutic.

Day: 4

Date: 21 May 2004

Time: 1740 hrs.

Session V

Having children by choice not
by chance (Out of school)

Facilitators:

Himmat / Hemaxi / Trupti / Bhavana

Having children by choice not by chance

The facilitators shared the objective of the session.

- to understand the reproductive system

First of all, the facilitator asked the group to share their opinion on the subject.

The participants shared that they know nothing about the subject. Having a child was according to them is God's gift. Some of them said that mother are

responsible for child birth and some of them were of the opinion that father are responsible. The facilitator then asked the participants whether they know about conception or not? Large number of them said no.

The facilitator then started sharing information in method of lecture. He said that jeans determine the sex of the baby. The combination of x and y chromosomes was explained with colour coding.

The facilitator carried out an exercise of body mapping in the group and explained the reproductive organs with the help of slide.

The session was closed.

The participants felt that the hard work and preparation of exercises is worth appreciable. The group needs to work on the facilitation skill, the confidence level was low and they were coping with stress during the session.

Day V

22 May 2004

Schedule: Mock Sessions day
Conclusion

Day: 5

Date: 22 May 2004

Time: 0930 hrs.

Session VI

Preventing HIV-AIDS (Out of school)

Facilitators:

Himmat / Hemaxi / Trupti / Bhavana

Preventing HIV-AIDS

The facilitators enacted different cases based on the causes of HIV-AIDS in a role play.

- Unsafe sex
- Receiving unsafe blood
- Use of unsafe syringe
- From affected mother to child

After role plays facilitator displayed some transparencies to break the myths related to HIV. The song was composed by the group on the feelings of HIV affected people.

During the analysis, participants found the song was interesting and touching. The method of role play was appreciated. However, the critical factors as shared by the participants were...

- Imposition of opinion
- Inadequate information
- Sharing results of the test with affected person was required serious attention in the role plays.

The skills of empathy, effective communication and creative thinking were used. Some participants gave suggestion that role play could have done participatory. The content was limited.

Day: 5

Date: 22 May 2004

Time: 1100hrs.

Session VII

Having children by choice and not by chance conception (In school)

Facilitators:

Pranav / Harish / Shraddha

Having children by choice and not by chance conception

The group commenced the session with Bhavai- a Gujarati folk music. This folk are famous in villages and normally used for delivering the social messages.

The group shared the information on contraception

- There are two methods of contraception
- One is permanent and the other one is temporary

Permanent		Temporary
Male	Female	Copper T
Cut the carrier of sperms. It is a five minute operation.	Fallopian tube is blocked by operation.	Only for married women who have one child - for 2 – 5 years - for 10 years Insert only after five to ten days of menstruation
		Pills - Kills all sperms - Pills should be started from the last day of menstruation
		Condom It prevents sperm to enter in vagina

The participants appreciated the method of the presentation. They felt it was very friendly to the village culture. It was very live and interest sustaining method. Participants found it the perfect method to focus on the subject and divert the irrelevant topics. It was well wrapped, focused and clear presentation on a given subject. The groups also gave some suggestions that demonstration of contraceptives would have been better way than drawings. If the ANM or Doctor would have accompanied then many questions would have been answered in the session itself. Voice modulations and balance over content and method would have made it perfect.

At end the film was screened:

'Badhate Badhate Kuchh Kuchh hota hai'

Doctor Patanjali Nayar answered some of the medical questions of the participants.

Q.) Why do pubic hairs grow even after trimming them?

- Growing of pubic hair is natural process as of other hairs. The pubic hairs have strong relation with smell. It is advisable that the hairs can be trimmed but not shaved.

Q.) Why does it odour/stink during menstruation?

- All secretions have smell compounds
- Specific smell during menstruation may be related to other perennial areas' secretion not necessarily blood

- Q.) Uterus contain fibroids, does that have any relation to menstruation?
- Fibroid is a knout in the uterus. They may be one or two big knouts or hundred small knouts.
 - If they are more in numbers then uterus is removed
 - Breast fibroids are common in girls therefore knowing self examination technique is must for all girls above 20
- Q.) Excess bleeding after family planning operation reason?
- There is no relation between both. The reason can be diagnosed only after medical check up.
- Q.) Why the cycle of menstruation varies from person to person is it normal?
- It is normal. However the definition of normalcy can not be generalised for all girls. it can be decide only after medical examination
- Q.) Menopause and body heat, low eye sight any relation?
- It is psychosomatic. There is no logical relation between the two.
- Q.) If the mouth of uterus is contracted then would pregnancy possible?
- Pregnancy would be possible but it may cause pain during delivery and intercourse
- Q.) Infertility is increasing why?
- Due to environmental cause
 - Pollution-led poisoning
 - Increasing hit
- Q.) What is delayed pregnancy?
- There is no such terminology in medical science. However if it is related to the period to attain pregnancy, then in that case medical science consider two years period is normal to attain pregnancy.

Day: 5

Date: 22 May 2004

Time: 1230hrs.

Planning

Facilitator:

Mr. Arvind Pullikar

Mr. Arvind Pullikar facilitated the session on planning. He asked participants that how would they like to take this learning ahead?

Participants shared different views and gave ideas to translate this training into a programme. They said that district level seminars can be planned. Formation of district level teams and development of district level training module and manual is required. Pilot training programmes in couple of blocks can be

arranged to see the impact.

Mr. Pulikar suggested that the final district wise plans can be developed later with adequate time and concentration and submitted to GRC. The participants also expressed the need to have follow-up meet. Mr. Pullikar agreed to organise such meeting tentatively on August 2004.

Conclusion:

The training programme was formally concluded. Participants shared their experiences feelings and feedback. They felt that the programme was successful in bridging life skills and self life. It was an opportunity to learn different methods of conducting participatory sessions. They said the programme gave them room to share their personal issues, queries. All the participants were appreciating the qualities of trainers. They said that in the beginning they were nervous to see high profile people in front of them but the facilitator made the programme so live that participants forgot the distance between them. In spite of all good things participants also shared their concerns over late evening session. They said that one more day could have been scheduled to keep the sessions in time bound frame.

Resource persons shared their views. Dr. Prema Sundarrajan rated the success of training programme as 50%. They expressed their satisfactory remarks over cooperation and participation of the participants. They felt proud to see enthusiastic and energetic group. They assured the group that this group deserves the bright future.

Ms. Vinita Nathani appreciated the adolescence spirit that the participants were carrying. She praised the group for its learning attitude and solidarity. She also found that the group was introspective. She extended her best wishes to the group.

Ms. Laxmi Murthy made special request to participants to use the training material and tools. Let them get spoiled while using them, distribute them. There are no copy rights over them. She said that the material is not developed to lock it and preserve it.

Dr. Patanjali said that although they had come as facilitator but eventually became the part of the group. He found the group was very creative and hard working. He was touched with kind of affection and care he received from the group. He adored this affection as gift from the group. At end he expressed hi sincere gratitude towards Secretary GRC, The director GRC, Mr. Arvind Pullikar, regional coordinator UNFPA and other support staff of GRC for granting them an opportunity to facilitate this training. It was considered as successful and satisfactory programme.

At end first version of the film on the training programme was screened.