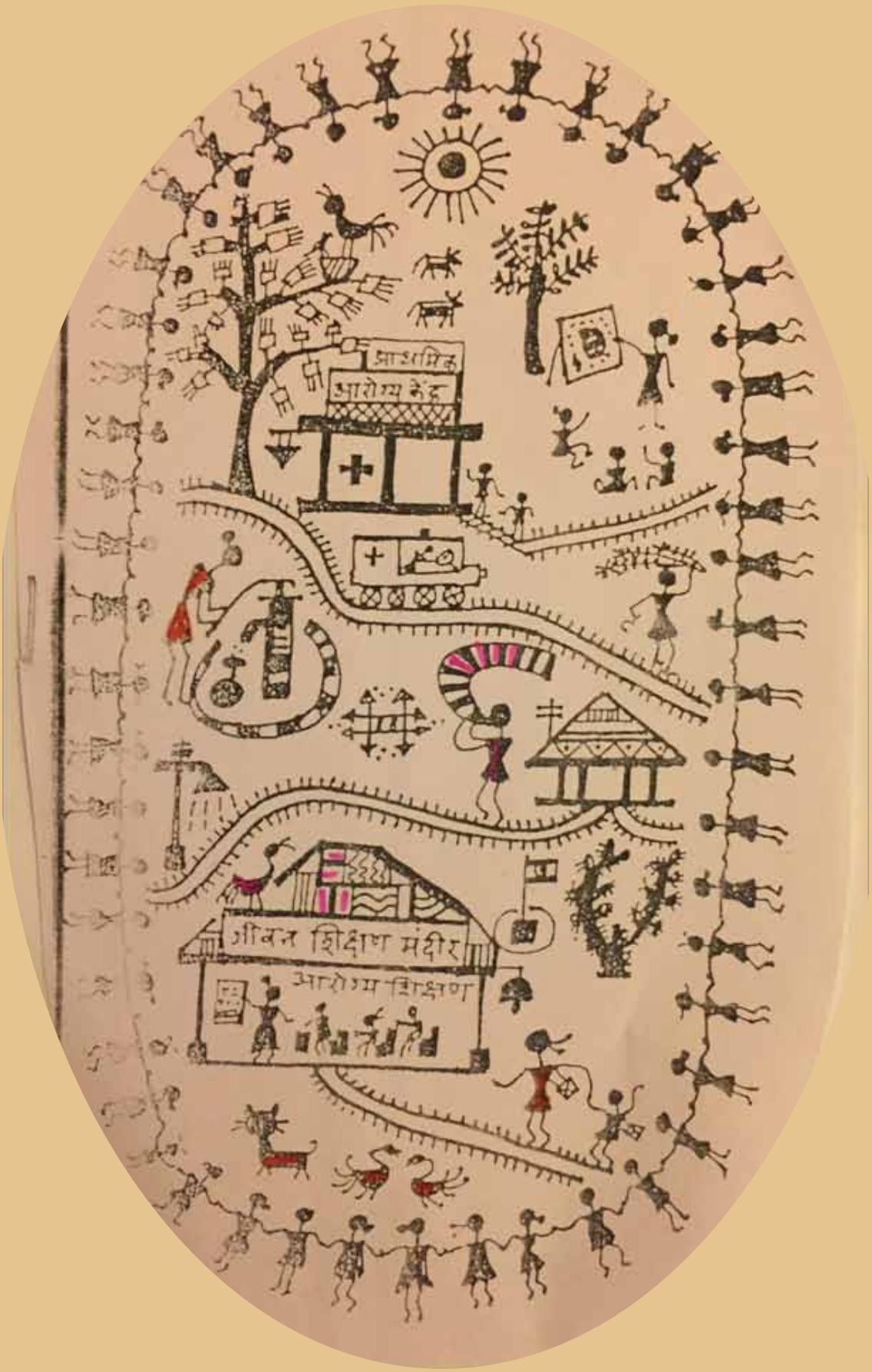


Life Skill Education and Nutritional Health Education

My nutrition is important to me, I will learn and share with my family and my community

Introduction

Giving greater attention and investment on adolescent health is vital for today and the future. This cohort is at an age where the foundation laid in terms of health, education and skills will have profound implications for social and economic development. A healthy, educated, skilled adolescent is important not only for the future but also for the present. They are being considered as an asset and resource, with great potential to contribute to their families, communities and countries .

The adolescent physical, psychological and emotional development continues until early adulthood, hence the interventions need to be tailored for this segment of the population taking into account their social, economic conditions. The needs and concerns of adolescents are manifold and they find themselves in utter confusion and many at times fall into crisis and troubles due to lack of proper guidance and support. The adolescents are vary of asking their parents, teachers or significant others for clarification of their doubts which affect them physically, socially or mentally. The physical concerns of adolescents like health and hygiene- personal hygiene, body growth and function-puberty period, body image and size, idolizing styles of famous personalities, concern about skin, colour, complexion, nutrition and food habits, fashion, reproductive health, sex and sexuality and responsible sexual behaviour and physical changes and coping disabilities warrant immediate attention . Adolescent girls have a greater need for life skills given the social customs and practices which create hurdles in their full development

In this regard, this module designed for adolescent girls uses various interactive exercises, songs, games, activities using role play, discussion to help adolescent girls to help them critically think, assess their abilities thus making them aware of their surroundings and helping them to plan their future path. The module hopes to empower them to make effective choices to help their development in the adolescent years to realize their full potential. This module has been customized using existing modules available by SABLA, NHM Peer Educator Modules, PRAVAH, CEDPA among others.

http://apps.who.int/adolescent/second-decade/, WHO
http://www.iosrjournals.org/iosr-jhss/papers/Vol.%2021%20Issue7/Version-5/M2107059299.pdf, Life Skills Education: A Strategy for Handling Adolescents' Risk Behavior, Aarti Bardhan, School Counselor, New Delhi.Radhakrishnan Nair. A, Founder President, IALSE, Chennai

Role of a facilitator

1. Leads Learning Activities and Processes

- Sets the task, the setup
- Provides clear, concise, comprehensive instructions
- Checks for clarity
- Sets and manages the time
- Applies presentation skills, for example is articulate, confident, prepared, and succinct
- Invites, formulates, and clarifies decisions
- Summarizes and checks conclusions
- Clarifies who has decision-making authority, how decisions are made (consensus, majority, etc.)
- Clarifies roles and content of each task, as needed

Acts flexibly!

Seeks and accepts feedback openly

2. Facilitates Dialogue

- Listens
- Practices active listening
- Uses corresponding body language
- Provides sincere and consistent positive feedback and encouragement
- Engages in dialogue, for example echoing, paraphrasing
- Waits, is comfortable with silence, gives participants time to think
- Expresses thanks for contributions
- Sits back so others can be heard
- Contributes own expertise to the dialogue
- Manages conflict in respectful, safe, and deliberate ways through dialogue
- Celebrates accomplishments (process over product)
- Calls participants by name
- Acknowledges value of earlier comments by using participants' own
- examples and experiences
- Stimulates critical thinking, for example asking open questions, kicking questions back to group, stepping back
- Keeps focus on participants
- Celebrates resistance!
- Addresses power relations
- Has awareness of and acknowledges differences
- Works toward safety, respect, and inclusion of all

About the module

This facilitation guide suggests trainers use interactive methods to motivate active participation and ensure that learning objectives are met. These methods include:

Materials Required

The following materials will be needed throughout the training:

- Training manuals
- Flipcharts for noting points visible to all
- Time keeper
- Paper, markers
- Copies of the training schedule
- Sets of BCC Materials prepared (Flipbook, Dart games)

Tips for Facilitators

- ✓ Summarize important information at the beginning and at the end of each session.
- ✓ Review important ideas/key points with participants more than once to ensure recall
- ✓ Try to simplify concept and explain the linkages with different concepts.
- ✓ Emphasize key words and phrases to point out important information and re-emphasize main points.
- ✓ Encourage dialogue/interaction between the participants and trainers, ask questions and encourage participants to ask questions for collaborative learning and participation
- ✓ Limit each session to 50 minutes to 1 hour by providing breaks or engaging in activities.
- ✓ Ensure refreshments daily
- ✓ Every month you have to organize events based on the suggestions provided

Before every session remember to do the following

Introduce yourself
Play an ice-breaker
Tell them the agenda for 1.5 hour
Introduce the topic
Play game and activity
Take question answer at the end of each activity
Summarize

Health and Nutrition – An Overview

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or susceptibility to illness. Health is multidimensional, continuous interaction among the various dimensions such as physical, mental, social, spiritual, emotional, vocational and political is important for ensuring good health.

Defining each health component:

Physical Health: Physical health, which is one of the components of the definition of health, could be defined as the absence of diseases or disability of the body parts. Physical health could be defined as the ability to perform routine tasks without any physical restriction.

Social Health: The social component of health is considered to be the ability to make and maintain “acceptable” and “proper” interactions and to communicate with other people within the social environment. This component also includes being able to maintain satisfying interpersonal relationships and being able to fulfill a social role

Emotional Health: Emotional health is not simply feeling happy all or most of the time but experiencing a large variety of emotions (positive and negative). Positive emotional health requires the appropriate emotion to be experienced according to the event that has occurred i.e. sadness/grief with loss, fear at a time of danger. Emotional health includes the ability to regulate and demonstrate feelings in a safe and healthy manner and that will not result in harm to one self or others.

Cognitive Health: Cognitive health includes multiple factors which when combined, create an individual's intelligence. These factors are necessary to develop and/or maintain independence. Important factors include the ability to learn, memory, intuition, judgement, language, reason, concentration, planning and organization.

Spiritual Health: Spiritual health is a combination of social, emotional, cognitive and cultural health and has the strong potential to positively and negatively affect emotional and physical health, as spirituality can be a strong motivational factor for improving and/or maintaining all other forms of health.

Thus, to ensure a healthy body one needs to nourish the body well so that it can function holistically.

Defining Nutrition

Nutrition is the intake of food, considered in relation to the body's dietary needs. Good nutrition is one with an adequate, well balanced diet combined with regular physical activity and is a cornerstone of good health. Health and nutritional status of a population is a crucial indicator of the progress of a nation.

National level data on health and nutrition indicators provide clear evidence of the poor state of health and nutrition in India. In India 20 per cent of children under five years of age suffer from wasting due to acute undernutrition. More than one third of the world's children who are wasted live in India.

Forty three per cent of Indian children under five years are underweight and 48 per cent (i.e. 61 million children) are stunted due to chronic undernutrition, India accounts for more than 3 out of every 10 stunted children in the world. According to recent data (NFHS 2015-16) from Gujarat, children under 5 have been found 38 percent stunted and 36 percent underweight. This indicates that children who are underweight and stunted will lack proper growth and development for their age if their nutrition and health needs are not addressed.

The sessions in this module will provide you information, tools and activities that can be used to educate the community in the target area of Banaskantha designed for a health and nutrition intervention by Smile Foundation.

Instruction to facilitator

It is important to understand and learn the background given above to provide an introduction to the audience. The audience should be made aware of the purpose and the process at the outset of the program.

Setting the context

Objectives:
To create a comfortable and easy environment for communication
To know the participants and their aspirations

Time: 1 hour

Materials: Chart papers (enough for each participant), balloons, pens

Session 1: Getting to know each other

Facilitator steps:

- Distribute 2 balloons each to the girls; ask them to blow it one by one
- Place all balloons in the center
- Now ask them to take one balloon and remember the color and follow your instructions
- Now tell them to throw the balloon in the air; now ask them to balance it on their head; on their shoulders, thighs
- Then ask them to blow another one and try and balance it with their head and hands behind

Facilitator notes:

Begin the discussion by asking them if they enjoyed the session. Now ask them specific questions

- The first time they felt it was easy
- The second time was it hard to balance
- Was it possible to help each other
- Were you able to find your balloon or did get mixed up

Now tell them life is about learning to overcome challenges by learning new skills. Beginning today in the next few months they are going to meet every week and learn new information on different topics that will help us in our every-day life and plan our future.
Tell them in order to get to know each other better we will do another exercise. Ask them if they are excited

Now distribute chart papers to the participants and ask them to write the following

- Name, village, age
- Favourite color
- Favourite movie star
- Favourite food
- Favourite place of visit
- My hobby
- What I hope to learn from these sessions

Once completed, ask them to place on the floor and read with each of them. Then take the chart papers and save them to use at events in the future.

Topic 1: Being Self – aware

Objective:
•Adolescence is an age of questions, the session will help them find answers to some of them and how to find solutions

Time: 1 hour

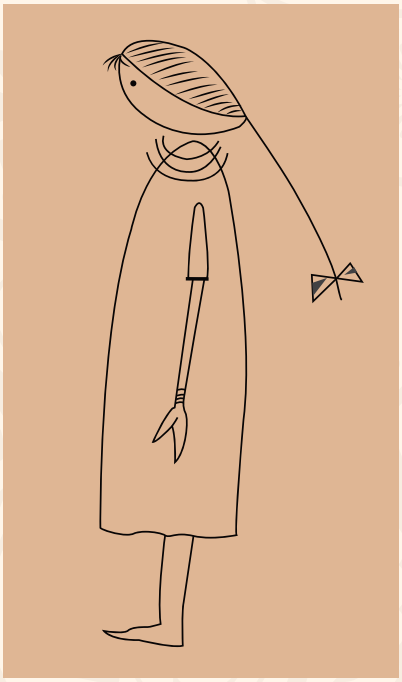
Materials: Paper, pens, pencils, markers

Preparation: On a chart paper draw a the image of a bent girl and place it on a wall before the session begins

Session 1: Knowing ourselves and our feelings

Facilitator notes:
Today we are going to learn about Life Skill Education – it about learning to balance life, studies, relationships – friends, parents, school and many more situations in life. As you will progress through the sessions you will learn more. It is important that you do not miss any sessions. Remember, this is not going to like school but learning with some fun. In this section, follow steps from Part I to Part IV to complete the exercise

Part I
Now divide the girls in two groups or more depending on the number of children and ask them to discuss the following questions:



- What did you see in the image ?
- Who is she according to you ? What is her name? How old is she? Where is she from ?
- Why is she the way she is ?
- Do you see such girls in the village ? What do you think of them ?

Facilitator makes notes on a chart paper

Part II

Now ask them to stand up and stand like the girl in the image.(Facilitator makes notes on the chart paper)

- Ask them how it feels like standing like that ? Is it comfortable ? How does it make them feel?

Part III

Now ask them to go back in their groups and present a role-play on the situation of adolescents in their village. (Facilitator makes notes on the issues raised in the play)

Facilitator Notes:

Adolescence is a vulnerable period in one's life. Of the 1.2 billion adolescents aged 10–19 years worldwide, 243 million, roughly 20 % live in India. Despite their numbers, adolescent girls are a largely invisible and highly vulnerable population:

- Nearly half the adolescent girls in India are married before the age of 18.
- At 51% of the global share, India has the highest number of adolescent pregnancies – a leading cause of death among adolescent girls.
- Newborns of adolescent mothers are 1.5-2x more likely to die than those born to mothers aged 20-29.
- Adolescence is a period of rapid growth from childhood to adulthood. All boys and girls attain physical and sexual maturation during 10-19 years – some of us experience these changes earlier or later than others. Along with physical changes, we also undergo changes in emotions, intellectual abilities and social behaviours. All adolescents have to deal with pressure from peers as well as adults around, including parents.
- Given the changes in the body and mind, it is important to enable individuals to deal effectively with the demands, challenges, and stress of everyday life.
- Childhood and adolescence are the developmental periods during which one acquires these skills through various methods and people. To transition smoothly through this adolescent period, we need support and understanding of others to realize what we are going through and at times, someone to guide us.
- By learning skills in critical thinking and creative thinking; decision making and problem solving; communication skills and interpersonal relations; coping with emotions and stress; self-awareness and empathy we develop our personality and become individuals who can make the right choices thus averting any risks in their future path.

Part IV - Concluding the session – I feel I am ….

- Now facilitator asks each one to share an image of themselves (drawing) with the top end with a statement (I feel I am …..
- Ask the girls to form a circle and sit
- Each one shares the image with the statement…
- Facilitatordiscusses and brainstorms, in case there are any negative images he checks for the reason.
- After the session the girls should pin the picture in the room or in their workbook/diaries

Facilitator notes: After the session play the song

Song: Mere chey utsuk seheliyan(My six curious friends)

Chey Saathi Mujhe Miley Hain
Badbad badbad karne waale

Bahot jaankari denewaale (2)

Sawaal isko usko poochkar denewaale
Jawaab doondkar denewaale

Mujhe laakar denewaale (2)

Hoshiyaar mere chey saheli unkey naam bataaon kya
Dhyaan deke aap suniye, dhyaan deke aap suniye
Naam hai pehle ka – yeh kya woh kya
Naam hai doosre ka – yeh kyun woh kyun
Naam hai teesrey ka – yeh kab woh kab
Naam hai chuathey ka – yeh kaise woh kaise
Naam hai paanchve ka – yeh kahaan woh kahaan
Naam hai chhathe ka – yeh kaun woh kaun

Aise mere chey saathi (2)

Kya?, Kyun?, Kab?, Kaise?, Kahan?, Kaun?

Kahan rehtey hain; Kya poochtey hain
Man mein mera unka ghar
Isliye hoti hai meri kathin padaai bahut aasan

Facilitator notes:
After the song, tell the girls that curiosity is good and should never stop. Always ask questions, clarify doubts, if you are not comfortable talking in the group then reach out to anyone else you are comfortable with.

Topic 2 Understanding Social Norms, Attitudes and Gender Roles

This section will discuss dimensions of gender, beginning with the definition, followed by understanding gender roles and how it affects relationships including our actions, behaviours and beliefs. The session will help to breakdown current stereotypes and promote greater equality especially promoting the importance of health of the girl child.

Objectives:
- To help adolescents break existing stereotypes based on gender and sex
- To help them understand that men and women are equal and it is unfair to discriminate against women
- To understand gender roles that exist in society and its influence on our behaviour
- To break stereotypes on gender roles and encourage equal participation in each area

Time: 1 hour

Materials: Chart paper, pens, pencils, chart paper

Session 1: Understanding gender roles, gender differences and existing bias

Facilitator notes:

- Tell them if they are curious for the session and they are about to learn something new about them
- Tell them in the game following we will learn about each others views on what they think about being a **man** and a **woman**.
- Divide them into two groups – give a chart paper between both the groups; alterna tively you can discuss with the whole group
- To conduct a word association exercise on 'Man' and 'Woman', take a chart paper three columns. Write 'Man' in the extreme left column and 'Woman' in the extreme right column. Leave the middle column blank for now.

Some of the likely responses are as follows: [This is a sample sheet with possible responses. Add any new responses received from the participants. The sheet should have three columns and Man and Woman mentioned, rest of the responses should be filled in as suggested by participants/within the group]

Man		Woman
Tough/Strong		Soft
Cruel		Beautiful
Smart		Shy
Adventurous		Giving Birth
Anger		Affectionate
Moustache		Sensitive
Tall		Breastfeeding
Father		Gossiping
Earns Money		Mother
Decision maker		
Leader		

Facilitator notes:

- Ask the members to say words they associate with men and write them in the column under 'Man'. Explain that these words may reflect good or bad characteris tics.
- Once the list is ready, ask the participants to say words that they associate with women and list them in the column 'Woman'.
- Now interchange the column heads 'Man' and 'Woman' as shown below. Go through the list once again but review each listed word or expression in the context of the opposite sex and check if the words associated with women are applicable to men and vice versa. For example, you can ask the participants if it is possible for women to be tough, cruel, smart, adventurous or angry and for a man to be emotional, sensitive, shy, quiet or charming. You can use examples from real lives (like sport spersons, film stars, celebrities, political leaders, freedom fighters and others) to c onvey this more effectively.

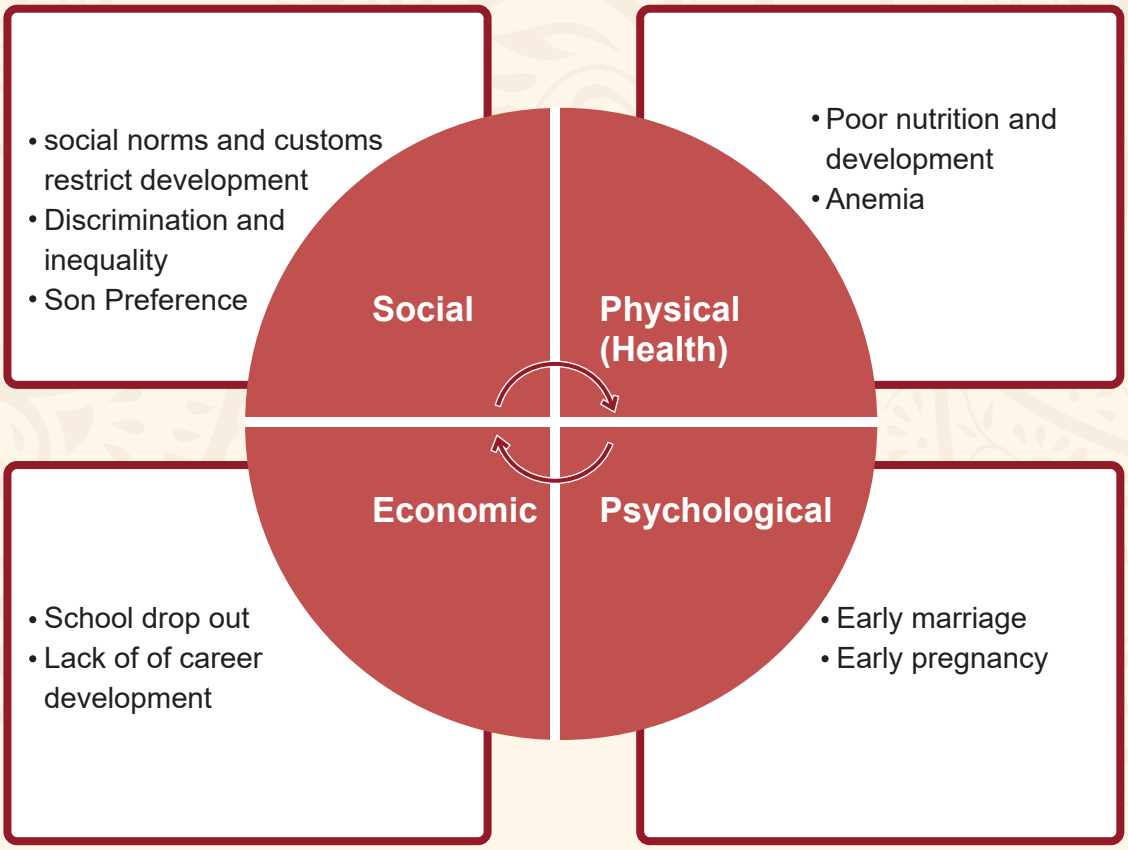
Man Woman	Sex	Woman Man
Tough		Soft
Cruel	Giving Birth	Beautiful
Smart	Breastfeeding	Shy
Adventurous	Moustache and penis	Giving Birth
Anger	Menstruation	Affectionate
Moustache		Sensitive
Tall		Breastfeeding
Father		Gossiping
Earns Money		Mother
Decision maker		Menstruation
Leader		Wear frock, sari, salwar kameez
Wear Trouser		Long hair
Short Hair		

Facilitator notes

- In the central column, help the participants to list the words or phrases that are specific characteristics of either men or women and are not applicable to both. These could be words like beard, moustache, giving birth, breastfeeding, menstrua tion, testicles, ovary etc. At the end of the exercise add a heading to the central column 'Sex'.
- Then shift them to the middle column, after which explain to them the below table

Sex	Gender
Sex refers to biology and anatomy. People are often said to be of 'male' or 'female' sex as determined by three sets of characteristics: external sex organs, internal sex organs, secondary sexual characteristics (as learnt in the session 'Growing up – Pubertal changes in male and female).	It identifies the socially and culturally constructed relationships between women and men, including their roles, privileges, responsibilities and power. Gender relations are context specific and change in response to changing situations.
Sex is biological	Gender is socially constructed. It is not biological, hence can change depending on the situation and its needs.
Sex is constant	Gender is culture specific. Gender roles may change. For example, in some cultures women are the breadwinners in the family or women wear clothes like men.

Gender impacts girls/women more than boys/men in the many ways such as:



Key Message

- Gender is socially constructed while sex is biological/natural.
- Except for biological characteristics, men and women are alike.
- Gender-based characteristics and roles for a man and a woman vary with time and culture.
- Gender roles may create biases and discrimination.
- Gender roles may influence our behaviour and restrict our life options.
- Though the majority of people are born male or female, there are some whose gender role is not in agreement with their biological sex. They may be fewer in number but they are normal and valued members of society.
- Some people have a preference for people of the same sex for love and/or sexual relationship. They are normal and have the right to choose their partners just as anyone else.
- Irrespective of our biological gender or sexual (choice of partner) identity, we are equal and deserve the same love, respect, information, education, services, employment opportunities or any other institutional benefit.

Facilitator invites the participants to sing the song below

Song: Beti Hoon Men Beti

Beti Hoon Mein Beti Mein Tara Banoongi
Tara Banoongi Sahara Banoongi
Gaganpar chamke chanda mein dhartipar chamkoongi
Dhartipar chamkoongi ujiyara karoongi

Beti Hoon Mein Beti Mein Tara Banoongi
Tara Banoongi Sahara Banoongi

Padoongi likhoongi mein mehnat bhi karoongi
Apne paanv chalkar duniya ko mein dekhongi

Beti Hoon Mein Beti Mein Tara Banoongi
Tara Banoongi Sahara Banoongi

Mehnat bhi karoongi mein paisa kamaoongi
Sabke saath acha sa naata mein jodoongi
Nata jodongi mein acha saathi banoongi

Beti Hoon Mein Beti Mein Tara Banoongi
Tara Banoongi Sahara Banoongi

Beta hoon mein beta mein chanda banoonga
Chanda banoonga mein acha banda bananga
Gaganpar chamke suraj mein dhartipar chamkoonga
Dhartipar chamkoonga andhera mitaoongi

Beta hoon mein beta mein chanda banoonga
Chanda banoonga mein acha banda bananga
Ladkiyon ka sammaan mein karoonga
Samman karoonga unsey dosti rakhoonga

Bhrashtachar hinsa se khoob ladoonga
Apni mehnat se milta hai wahi paaoonga
Ghar ka karne se acha samjhoonga
Koi kaam halka aisa nahi manoonga
Beta hoon mein beta mein chanda banoonga
Chanda banoonga mein acha banda bananga

Session 2: Understanding beliefs and attitudes; breaking stereotypes

Facilitator notes:

- Now begin with the recap of the last session; ask participants what they remember from the previous session
- Once you hear from them, summarise it using the key messages from the previous session
- Now tell them we are going to learn some more about our society and how we differentiate between men and women
- Read out the following job/professions/job holder and ask the participants to tell who does that work, man or a woman. Tick the column based on majority response as given below. Also, ask some of the participants to tell why they think that a particular work can be done only by a man or a woman.

Job/Profession	Men	Women	Both	Job/Profession	Men	Women	Both
Tailor	✓			Police			
Doctor			✓	Nurse			
Carpenter	✓			Painter			
Priest	✓			Singer			
Henna decorator		✓		Dancer and Actor			
Leader (political and social)	✓			Cycle mechanic			
Astronaut			✓	Electrician			
Engineer				Mobile repair			
Teacher				Soldier			
Car mechanic				Domestic help			
Cook				Fridge mechanic			
Cobbler				Taxi/Truck driver			
Shopkeeper				Agricultural labourer			
Vegetable seller				Milk based activity			
Athletics				Athletics			

Facilitator summarizes the activity

- Tell the participants that the gender roles society expects from us also influence and restrict our choice of profession/job.
- The majority of work options (whether related to household chores or employment) are possible and permitted for people of both genders.
- One should explore all possible opportunities based on one's interests and abilities and not on roles expected by society.
- Learning and practising skills whether at home or outside makes us more independent and expands our income opportunities in life. For example, a boy or a girl who is interested in cooking may take up cooking-related professions such as becoming a chef; similarly girls may like to learn driving or household equipment repair work.

Discuss the expected role of a boy and girl one by one and ask members how they can influence our behaviour positively or negatively. Using the chart given below help them understand some of the gender roles and their impact.

Gender Roles	Impact	Fact
Boys are smarter, know everything	• **May never seek information from right source for fear of being identified as ignorant and inexperienced** • **May indulge in high risk activities – sexual initiation at an early age** • **May give in to peer pressure for substance abuse or unsafe sexual behaviour** • **May approach misleading sources such as quacks, cheap literature, pornography, uninformed peer groups etc.**	**Girls are also smart and know everything but may not speak for fear of rebuke and strong opposition. In our society girls are not encouraged to speak in public or give their opinions freely. Girls who argue and talk back are often considered 'tomboyish' and harassed for these 'boy-like attributes'.**
Girls are innocent, shy and simple	• **Prevents boys/men from expressing their anguish** • **May resort to anger and violence to vent their pain** • **May not be able to seek support even in coercive and abusive situations and continue with the stress for a long time** • **May not concentrate on other work and study** • **May even resort to sub stance abuse**	**Boys also cry but are not encouraged to do so because crying is considered girl-like behaviour. That is how tough and rough masculinities are formed and socialized. Crying is an emotional outlet and often good for mental health as it allows venting and sharing of feelings.**

Boys never cry	• **Prevents boys/men from expressing their anguish** • **May resort to anger and violence to vent their pain** • **May not be able to seek support even in coercive and abusive situations and continue with the stress for a long time** • **May not concentrate on other work and study** • **May even resort to substance abuse**	**Boys also cry but are not encouraged to do so because crying is considered girl-like behaviour. That is how tough and rough masculinities are formed and socialized. Crying is an emotional outlet and often good for mental health as it allows venting and sharing of feelings.**
Men are brave and successful	• **Prevents boys from exploring different learning opportunities in life** • **May mislead them on expected parameters of success** • **May feign bravery and courage through unfair means like fight, anger, violence, rash driving, unsafe behaviour such as not using condoms, smoking etc.**	**Girls also are brave and successful.**
Husbands control wives and wives should be submissive to their husbands	• **This is one of the key reasons behind wife beating** • **This prevents women from resisting unreasonable demands of husbands and in-laws** • **Women don't raise their voice against exploitation and coercion (rape, domestic violence)** • **Women have poor control on their reproductive health and may be vulnerable to unwanted pregnancy, sexually transmitted infections like HIV**	**Wives can be controlling and husbands may also face violence, but this happens in fewer cases.**
Boys work hard and so need better food	• **Household chores are not recognized as hard work** • **Poor nutritional status of women (anaemia)** • **Low nutritional intake during pregnancy that results in complications and low birth weight babies**	**Girls also work hard. In fact they need better nutrition than boys as they to go through the menstrual cycle and later, child bearing.**

Daughters are the family honour while sons carry forward the family name	• **Son preference and bias** • **Girl child faces discrimination** • **Load of household chores to prepare her to adjust with husband's family** • **Undue restriction on girl child in the name of family honour** • **Early marriage to transfer related responsibility to husband and in-laws**	**The term 'honour' is often used to mean 'power' and unfortunately girls and women are 'used' to establish power. They are given in marriage irrespective of their choice. Girls/women are raped or subjugated to establish one's power, reducing them to commodities/objects for establishing power and settling enmities and disputes.** **Sons and daughters have responsibilities towards their parents and can make the family proud by their good work and achievements.**

Quick quiz:

1. Women give birth to babies, men don't
2. Little girls are gentle, boys are tough
3. Women can breastfeed babies, men can bottle feed babies
4. Men's voices break at puberty, women's do not

Ans: 1) Sex; 2) Gender; 3) Sex; 4) Sex

Facilitator summarizes

- Thus, from the above discussion we realize men and women must be treated equally and given equal opportunities.

- **Gender Equality** (i.e. Equality between women and men): refers to the equal rights, responsibilities and opportunities of women and men and girls and boys. Equality does not mean that women and men will become the same but that women's and men's rights, responsibilities and opportunities will not depend on whether they are born male or female. Gender equality implies that the interests, needs and priorities of both women and men are taken into consideration, recognizing the diversity of different groups of women and men. Gender equality is not a women's issue but should concern and fully engage men as well as women. Equality between women and men is seen both as a human rights issue and as a precondition for, and indicator of, sustainable people-centered development.(UN Women)

- In the next session, we will further understand how society has held certain stereotypes which has led to inequality among men and women

Topic 3: Nutrition and Growth

This section will help to develop the facilitator's capacity on the intertwined relationship between health, body and mind – and the importance to knowing about the significance of each for the overall balance of mind and body. This session uses cases studies, games/activities to conduct the session with adolescents.

Session Objectives:

- To help adolescents recognize the changes inadolescence (knowing different phases of human development);
- To help them understand the human body and explain the importance of change
- To encourage curiosity among them to ask questions and explore their potential
- To provide knowledge on the nutrition-related factors that influence health conditions in adolescents
- To create awareness on traditional practices and modern lifestyle that may influence adolescent health

Session 1: Setting the context: Understanding the linkages of health, body and nutrition

Time: 1 hour

Materialsrequired: Chart paper, pens, pencil, flip book

Facilitator notes:

- Begin the session by asking what are the different stages in life since the time one is born
- As the group mentions add them on the flip chart
- In order to initiate discussion, share a few cues on the list of changes to initiate the activity: e.g. growth in height, learning to talk, learning to walk, onset of menstruation, growing of beard, going to school, voice breaking, becoming shy, becoming responsible, being economically independent etc.
- At the end of the discussion share that some changes may continue through more than one stage of life (e.g. being economically independent) and that all changes may not occur in all individuals (e.g. boys will not get menstrual periods).

Infant	Infant	Infant	Infant	Infant
Crawl Can't talk No teeth	Start walking Increase in height Attend school	Growing beard Cracking voice Start menstruating Development of breast	Economically independent Marriage Child bearing	Wrinkles Falling of teeth Menopause

Facilitation notes

- Tell the participants that they have to listen carefully to a story and share their thoughts
- Share a case given below and discuss it with the help of the points given.

Case Study: Sarita's Story

Sarita is a cheerful 13-year-old girl. She has two brothers aged 15 and 12 years. She is very popular in school and very dear to her brothers. When she plays kho-kho, even boys are not able to match her energy level. She can challenge her opponents with "Kho, kho, kho.." for a long time. All children want to be in her team. But, for the past few days Sarita's grandmother has been objecting to her playing. One day she tells Sarita's mother, "Why does your daughter always run around? Can't she walk slowly? Can't you get her a salwar kameez with a dupatta?"

One evening, when Sarita's friends call her out to play, her mother refuses and asks her to make chapatis and take care of her grandmother. Further, her mother tells her that she can only visit the neighbour's house in her free time or start knitting a sweater for her father. However, Sarita's brothers are not given any such instructions and they continue going out with friends. Sarita is sad and confused. She stands in front of the mirror and thinks "Am I different? If so, how?"

Discussion Points:

1. How does Sarita feel?
2. Why does her grandmother oppose her playing and want her to wear a salwar kameez with dupatta?
3. What will she feel, as her brothers have not been stopped from running or going out with friends or asked to change the way they dress?
4. Are such restrictions imposed by Sarita's grandmother and mother unfair? Why?
5. Do you think her grandmother and mother should talk to Sarita on pubertal changes during adolescence?
6. What are the other concerns among adolescent girls?

Facilitator summarizes the session:

- The story of Sarita highlights the growth phase of adolescence.
- Adolescence is the period between 10 and 19 years of age marked by physical, physiological and emotional changes.
- Refer to the flip book for images here
- These changes are also called ‘pubertal changes’. All adolescents go through them; some may experience onset of puberty early while some may experience it later, as the age for onset of such changes is not the same for all adolescents.
- Lack of information and knowledge on pubertal changes makes this phase stressful for adolescents.
- Some experience anxiety due to either early or late onset of puberty in comparison to peers. Besides, reactions from elders and friends who themselves may be unin formed add to unnecessary stress.
- Hence, it is important for every adolescent to know the process of growing up to overcome unnecessary anxiety and deal with the challenges in a scientific way.
- Lets us now forget the stress and now sing a song !

Session 2: Understanding the physiological system

Time: 1 hour

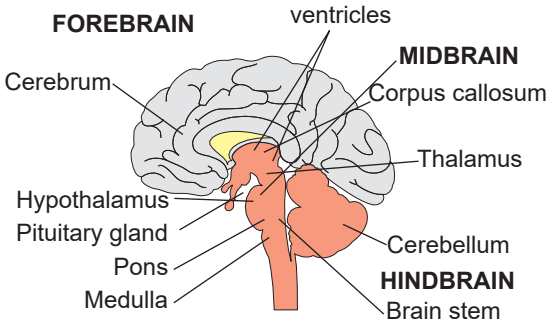
Materialsrequired: Chart paper, pens, pencil, flip book

Facilitation notes:

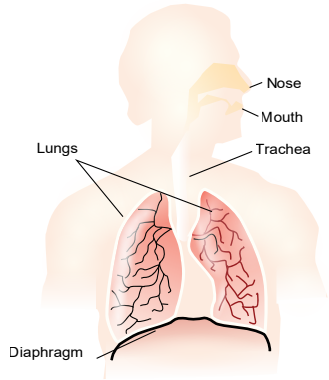
- Make two groups and ask the group to volunteer one member to lie down
- Providing chalks/pen ask the members to draw the sketch of the human body and name the part of the body [one group names the male body parts and the other female]
- Ask the group members to discuss among themselves and draw the important body parts and write their names with a chalk on the outline drawn.
- Discuss each body part from head to toe with the help of a volunteer.
- Help group members learn scientific terms for sexual and reproductive organs and related physiological processes.

Parts of the Human Body

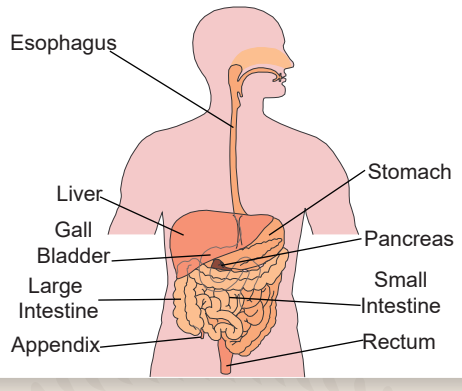
Nervous system



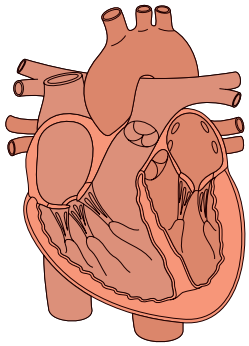
Respiratory system



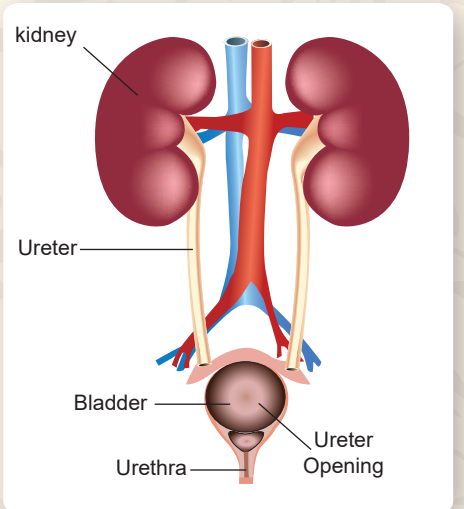
Digestive system



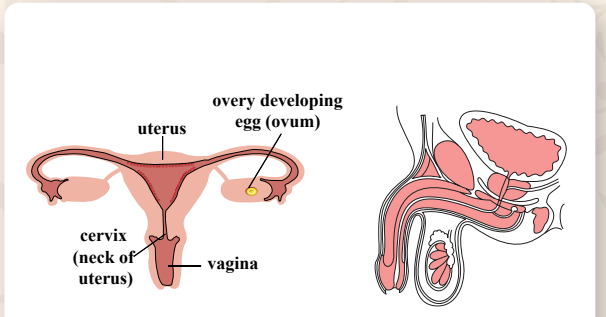
Circulatory System



Urinary system



Reproductive system



Facilitator notes: [Using the following description explain the above images]
Our bodies consist of a number of biological systems that carry out specific functions necessary for everyday living.

- The **nervous system** controls both voluntary action (like conscious movement) and involuntary actions (like breathing), and sends signals to different parts of the body. The central nervous system includes the brain and spinal cord. The peripheral nerv ous system consists of nerves that connect every other part of the body to the cen tral nervous system.

- The **circulatory system** is responsible for moving blood, nutrients, oxygen, carbon dioxide, and hormones, around the body. It consists of the heart, blood, blood vessels,arteries and veins.

- The **respiratory system** allows us to breathe in vital oxygen and expel carbon dioxide in a process we call breathing. It consists mainly of the trachea, the diaphragm and the lungs.

- The **digestive system** consists of a series of connected organs that together, allow the body to break down and absorb food, and remove waste. It includes the mouth, esophagus, stomach, small intestine, large intestine, rectum, and anus. The liver and pancreas also play a role in the digestive system because they produce digestive juices.

- The **reproductive system** allows humans to reproduce. The male reproductive system includes the penis and the testes, which produce sperm. The female reproductive system consists of the vagina, the uterus and the ovaries, which produce eggs. During conception, a sperm cell fuses with an egg cell, which creates a fertilized egg that implants and grows in the uterus.
  In the next section, the focus is on the physical changes linking it with the changes in the reproductive system will be explained.

Facilitation summarizes the session (IMPORTANT):

- Tell group members that just as we learn about the physical changes during adolescence, we should also learn about the specific changes in anatomy and physiology related to our reproductive system. It is important for older adolescents (15–19 years) to learn about changes in both the male and female bodies as they prepare for adulthood.
- Tell them our body is like a jewellery box and it needs to kept safely and securely so that all the body functions works properly.

- With the help of the table given below or other job aids such as the flip book provided to you, help adolescents understand changes pertaining to reproductive health.
- It is very important for every child to know about the human body. This helps children to know the various body parts and their vital functions and to learn to respect their bodies by taking care to maintain good health.
- Many parents do not educate their children about sexual and reproductive organs. Some of them feel that sexual and reproductive organs are private parts and hence any talk about these is shameful, while some may feel ashamed as they do not know an acceptable manner in which to talk about these organs and related concerns.
- This may have negative consequences such as children not communicating any ailment related to their private parts or fearing to complain or protest if being sexually abused or being touched in an inappropriate or unwanted manner. Children may fear criticism or being misunderstood and may suffer in silence.
- One should learn the correct and scientific terms used for body parts including our private parts like breast, vagina in females and penis in males, and practice using them to express our concerns firmly and in an acceptable manner.
- Explain the below chart to help them understand the changes in both male and female.

Facilitator notes:
Post the above discussion, now ask the participants to sit in a circle and discuss the below table with personal examples and ask them to share theirs too.

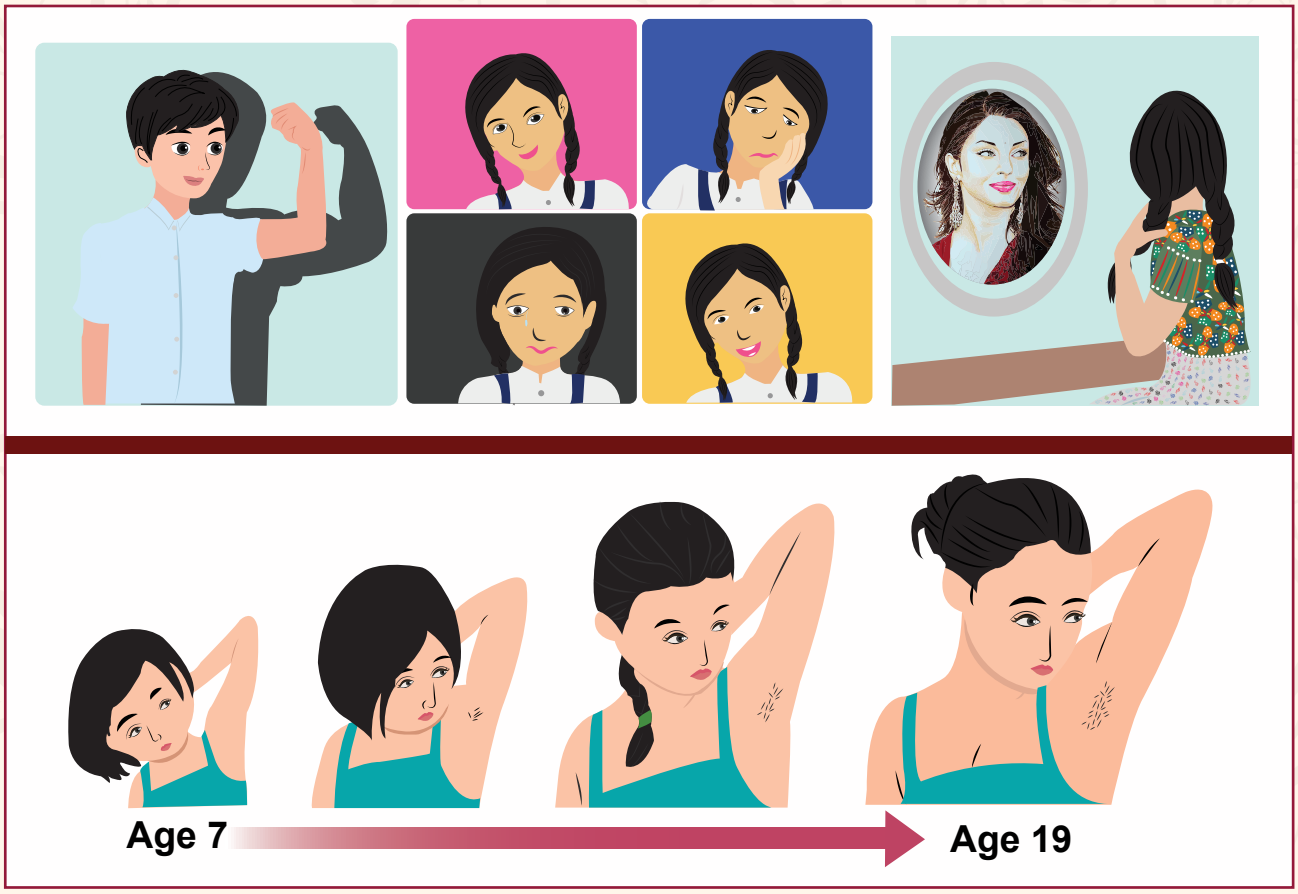
Table 1. Description of changes in the body

Changes	Major Changes in Females	Major Changes in Males	Key Messages
Skin	Hormonal changes make skin oily and result in pimples or acne	Skin becomes oily, sometimes with acne	• It is not related to eating oily food or fantasizing. • Proper medical treatment is now available with doctors. • Acne usually stops appearing by late adolescence (after 18 years of age).

Hair	Hair growth under arms and in pubic area	Hair growth on legs, chest, face, underarms and in pubic area	• The distribution of body hair is di erent in boys and girls due to the e ects of male and female sex hormones. • The amount of hair which grows and the age at which it grows is di erent for every young man and woman.
Breasts	As breasts begin to grow in size and shape, the girl may initially feel some discomfort. Sometimes there can be tenderness in the initial phases	Sometimes the breasts can become prominent; however this usually will subside on its own	• In girls, the size of the two breasts may vary. This is normal and not a cause for concern. • The phenomenon of male breasts being prominent is called gynaecomastia (enlargement of breast tissue in males) and needs medical treatment. • Extreme obesity can also lead to apparent enlargement of male breast tissue.
Body size	Widening of hips, enlargement and development of breasts, weight and height increase	Shoulders and chest broaden, weight and height increase	The height of an adolescent is in uenced by the height of the parents, nutritional status and many other factors.
Voice	No change	Voice starts to crack	This happens due to growth of the larynx (voice box)

External genitalia, sexual and reproductive organs and associated physiological processes	Hair appears on external genitalia and becomes pigmented. Internal organs also enlarge. Menstruation begins, there may be a whitish discharge due to physiological changes; ova are released	Hair appears on external genitalia which enlarge in size and become pigmented. Semen is a body fluid that carries sperms and seminal fluid. Sperms are formed in huge numbers and flow out through the semen. One may experience spontaneous emissions and erections. Sometimes spontaneous emission occurs during night or when one is sleeping, which is normal. This is commonly known as a wet dream or nightfall.	**In Females:** It shows that hormonal changes lead to maturation of an egg in the ovaries and that the girl has potential to become pregnant (but onset of menstruation does not mean that the girl is physically and mentally ready to carry pregnancy as the uterus has not matured fully). **In Males:** Wet dreams/nightfall and erections are physiological processes and denote sexual maturity in the males. They do not require any medical treatment.
Emotional and psycho-social changes	Level of intelligence, cognitive abilities increase Frequent mood swings and temper Emotional vulnerability increases Voice starts to crack		Adolescents may behave differently and at times their behaviour is not understood by adults. No matter how di cult, they need continued love, guidance and emotional support from peers and elders to get through this tough phase successfully.

Illustration on changes in body



Session 3: Why 'food' is so important for our body

Time: 1 hour

Materialsrequired: Chart paper, pens, pencil, flip book

Facilitator Instructions:

- Now ask the participants to summarize their understanding of the body and the changes related to it.
- Now ask them as we grow what do we do most – Let them guess, then share
- Run, play, study more isnt't it ? and what we need to run and play ?
- Now allow them to make some points
- We eat more 'food', we start with breast milk from our mother and then today what do we eat.
- Now explain to them the importance of food and the changing reqiorement of food and nutrition in the different stages of life.

Food is required to:

Thus, become healthy adults…….

Importance of Nutrition During Various Stages of Life Cycle

Food is essential for normal physiological functions. As an individual passes from one stage of the lifecycle to another, the requirement for nutrients changes in order to meet the growing needs of the body.

For being phyxically active and healthy,

Nutrient - dense low fat foods.

For maintaining healt,productivity and prevention of diet-related disease and to support pregnanfy/lactation.

Nutritionally adequate dietwith extrafood for child bearing / rearing

For growth spurt, maturation and bone development.

Body building and protective foods.

For growth, development and to fight infections.

Energy-rich, body building and protective foods (milk, vegetables and fruits).

For growth and appropriate milestrones.

Breastmilk, engery-rich foods(fats, Suger).

Facilitator notes

Explain to the participants every stage – infancy, childhood, adolescence, adulthood and old age the food requirements change and we need to make sure our body receives the given nutrition.

Nutrition Requirements for adolescent girls

Appropriate nutrition during adulthood is essential for maintaining both physical and mental health.

Proper nutrition ensures good health until old age.

The key to a healthy mind and healthy body is good nutrition and physical activity

Facilitator notes:

- Adolescence is largely understood as a very healthy phase of life. However, it has been found that adoles cents too have health issues that need immediate attention.
- Though you may be at risk for many infections – like any adult – such as malaria, viral fever, air- and water-borne infections, there are factors other than infections that may turn into a health concern for an adolescent.
- Some of these factors have roots in behaviours learnt during adolescence and may impact the health of the person for life if not addressed as early as possible.
- The common but serious conditions are those related to malnutrition, overweight/obesity and dependence on substance abuse.
- The factors identified with some of these conditions are linked to poverty, harmful practices and ignorance on the one hand, while on the other they are related to a lifestyle that promotes unhealthy eating, sedentary lifestyle, stressful routines and in some cases, misuse of substance like alcohol and tobacco in some form or the other.

Adolescence is the time to learn and practice healthy eating habits. If eating habits and other lifestyle factors are not addressed at this stage, it may lead to health conditions and diseases that are seen more in adulthood such as diabetes, cardiovascular problems, respiratory problems etc.

IMPORTANT TO SHARE

A diet with low levels of essential nutrients like proteins, carbohydrates, fats, vitamins and mineral elements like calcium and iron causes under-nutrition in an adolescent. On the other hand overeating or eating a particular food in a quantity more than required may lead to obesity.

Case Study

Kamala, a 14-year-old student of Class 9, is very popular in her school as a fast runner. Last year she won the 1,000 metre run in the district level inter-school games. Kamala's teacher tells her that she will become very popular one day. If her performance continues the way it is, she will represent her state in the national games. Only three months are left for the state level annual games to begin in the capital city. The school has high hopes and expects to be in the top three on overall performance. Kamala will represent her school for the 1,000 metre run and the 100 metre relay. But for the last few months Kamala has been feeling tired and does not want to go for practice after school hours. The sports teacher is very angry with her for not being regular for practice. One day the teacher tells her that she is mature enough to understand her responsibilities and that she will be letting her team and school down if she does not practise regularly. He also tells her that he cannot listen to any more excuses and will replace her with some other deserving girl. Kamala does not want to be out of the team and so she comes for practice. She starts running and completes her first round. In the second round she is slower. The teacher observes that Kamala is not able to perform as in the past. She is exhausted and gives up after two runs. Her friends and teacher try to build her con dence and ask her to complete the distance, but Kamala is unable to complete even half the distance. Her teacher is concerned and discusses the matter with her class teacher. The class teacher informs him that Kamala's performance in studies has also deteriorated. The sports teacher feels he should talk to her parents.

Discussion Points:
1. What do you think is the reason for Kamala's poor performance in games?
2. Do you know about others who have complained of tiredness or dizziness like Kamala?
3. What should the teacher do to help Kamala?
4. How can Kamala's situation improve?
5. How may Kamala's situation worsen?

Facilitator notes:
Kamala's poor performance may be due to not eating well and hence her physical weakness. She may be suffering from anaemia, a form of under-nutrition common among adolescents in our country. The teacher should take or send Kamala and her parents for a medical test. Kamala and her parents need to be counselled on her nutritional requirements. Her condition will improve with good dietary intake and iron and folic acid (IFA) supplements as advised by the doctor or ANM. Kamala's condition may worsen if she ignores her nutrition, leading to other health problems due to early marriage and early pregnancy or other illnesses or infections.

Session 4: Eating right and learning essential nutrients

Time: 1 hour

Materials required: Chart paper, pens, pencil, flip book; containers with pulse, names of food items from food groups

Ask the participants to write down what they ate in the last week in the following format: (Please ask them to write whatever they eat starting from the time they wake up

	Monday	Tuesday	Wednesday	Thursday	Friday
Early Morning					
Morning (Breakfast)					
Lunch					
Evening					
Dinner					

Facilitator notes:

- Nutrition is a very significant indicator of the overall well-being and development of an adolescent.
- This is explained by the fact that it is during this period that adolescents gain up to 50% of their adult weight, more than 20% of their adult height and 50% of their adult skeletal mass.
- Girls require additional iron supplementation to make up for the blood loss during menstruation and calcium to strengthen bones.
- Good nutrition supports timely sexual maturation.
- Balanced nutritional habits since adolescence prevent weak/brittle bones, obesity, heart disease and diabetes.
- In fact it is during the spurt in growth during adolescence that mal-nutrition can be remedied – a fact little recognized even today.

Referring to chart explain the requirements of the body with the help of the below Tables provided.

Table 2: Recommended dietary requirements

RECOMMENDED DIETARY ALLOWANCES FOR ADOLESCENTS				
	Boys 13-15 yrs	Girls 13-15 yrs	Boys 16-18 yrs	Girls 16-18 yrs
Net Energy Kcal/d	2450	2060	2440	2060
Protein (g/d)	70	65	78	63
Fnt (g/d)	22	22	22	22
(mg/d)	600	600	600	600
Iron (mg/d)	41	28	50	30
Vit A ug	600	600	600	600
Vit C ug	40	40	40	40


Let us learn what our food contains – the key nutrients, what w should eat to stay healthy

Table 3: Nutritional Requirements and Food Items

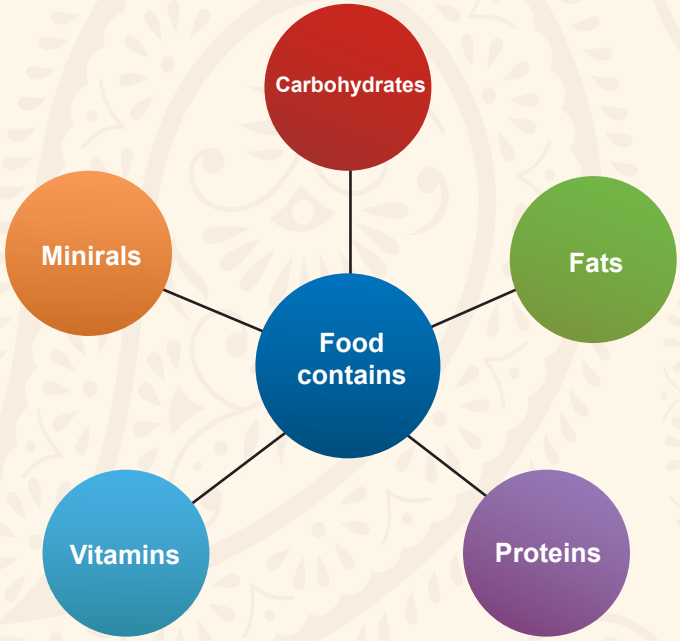
Energy-giving nutrients and foods	Growth-promoting/body- building nutrients and food	Protective and supportive nutrients and foods
Carbohydrates: Cereals (wheat, rice, maize), starchy vegetables like potatoes, sugar	Proteins Animal source: Milk and milk products, eggs, cheese, fish, meat Natural source: Pulses/legumes, beans (rajma, soya bean), chana, groundnut	Vitamins: Milk and milk products like paneer, curd; vegetables and fruits of different colours; meat; leafy vegetables (spinach, bathua, methi); raisins, fresh or dried; amla; dates; citrus fruits like orange, lemons, food made with fermented dough like idli and dosa
Fats: Groundnut oil, mustard oil, butter, ghee		Minerals Iron: Green, leafy vegetables, jaggery, meat Calcium: Milk and milk products, egg, sh and most of the cereals Zinc: More in animal protein

IMPORTANT

Facilitator Instructions:

In order to make the session more interesting carry the different pulses mentioned in the food group tables in small pouches or bags. In addition, also carry local foods, which can be classified in the food groups.

Essential nutrients required for the body



CARBOHYDRATES and FATS provide energy to our body

Carbohydrate rich foods include: Rice, wheat, potato, sugar, honey, bajra, jowar

Wheat

Rice

Bajra

Jowar

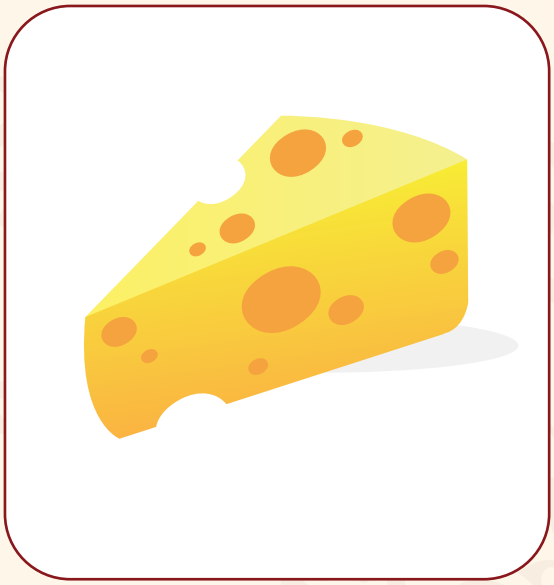
Facilitator notes:
Showing the image ask the children what all do they eat
Listen to them and know about the common food items from the list above

FAT rich foods include – oil, ghee, butter, nuts

Ghee

Oil

Butter



Nuts

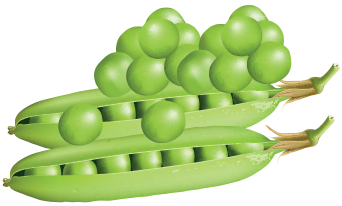
Proteins are the building blocks of our body – muscles ad other organs are made up of proteins mainly

Protein rich foods – pulses, peas, beans, soyabeans, milk, egg, fish, meat

Pulses

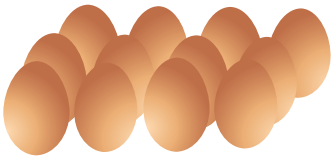
Milk

Peas



Soyabean

Egg



Facilitator notes

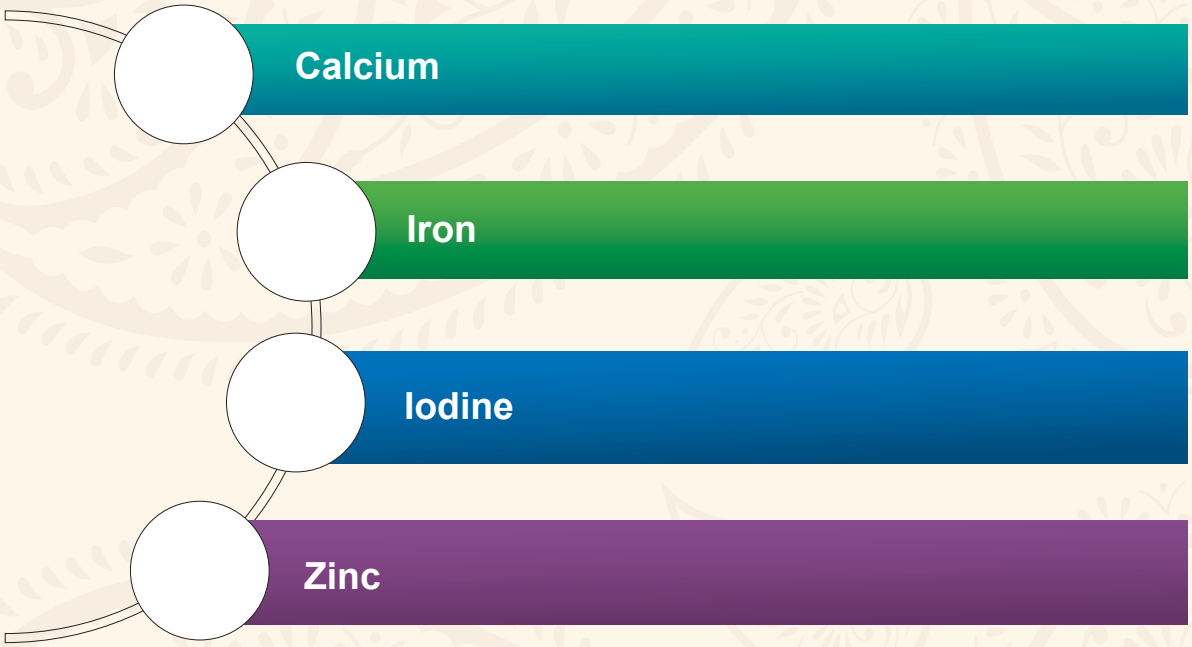
Now advice them to have protein rich vegetarian food if they do not consume eggs or non-vegetarian food

They should use variety of pulses in their diet, sometimes make sprouts of chick peas, green pulses other than yellow pulses

Minerals are needed for:

- **Bones, teeth**
- **Healing wounds**
- **Fighting infections**
- **Convert food into energy**
- **Repairing the body**

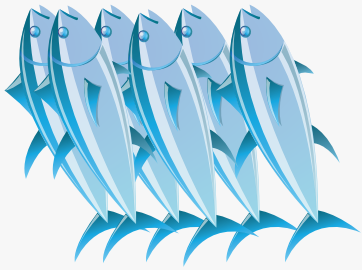
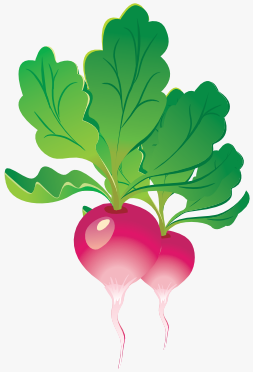
Important minerals needed for the body



Calcium is needed for strong bones and teeth Calcium rich foods include- milk, pulses, cauliflower, turnip, mustard seeds, cumin seeds, curry leaves	**Iron** is needed for healthy blood and brain development – Iron rich foods include – Bengal gram, spinach, mint, mustard leaves, turmeric, coconut dry, amaranth	**Iodine** is needed for brain development, body growth,maturation, bone growth Iodine rich foods include– Iodized salt, fresh fish, fish oils, potato, milk





IMPORTANT - REMEMBER

- **Iodine deficiency leads to hypothyroidism, goiter and growth retardation**
- **Iodine deficiency in pregnancy affects the fetal growth and its mental development.**
- **One should use iodized salt daily in the diet to prevent IDD.**

- Zinc is an important aspect of nutrition.
- Zinc deficiency can occur if there is not a high enough consumption from diet or supplementation.
- Deficiency in children can lead to growth impediments and increased risk of infection.
- During pregnancy and lactation, women may need extra zinc.
- The best sources of zinc are beans, animal meats, nuts, fish and other seafood, whole grain cereals, and dairy products