



ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH & RIGHTS CURRICULUM

By Aspen New Voices Fellows in association with Barefoot College International

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This resource is for information sharing and not medical advice for adolescents. For all medical related issues, adolescents should be referred to the health facility of their choice where they will get services as required.



What is the Objective of this curriculum?

To enable the community leaders / teachers / health service providers to share information on Sexual and reproductive health and rights (SRHR) with adolescents.

Sexual reproductive health information is an extremely sensitive topic, and many community leaders lack resources which can enable them to share information about SRHR. This has led to teenage pregnancies, increased Sexually Transmitted Infection (STI) including HIV (Human Immunodeficiency Virus) among adolescent and the lack of facts have prevented adolescents to make informed sexual & reproductive health decisions.

1. Who is going to benefit?

The developers of this curriculum intend that in- and out-of-school adolescents will be trained in SRHR using this curriculum.



2. Who is going to use this?

This curriculum is designed to be used by community leaders such as teachers, health workers, religious leaders, opinion leaders and youth advocates as facilitators. It is also envisaged that this curriculum is used in health clubs and safe spaces where adolescents meet for social activities.

3. What is the expected outcome?

Empowered adolescents who are able to discuss SRHR with right knowledge, voice opinions and are informed to make decisions about their own health. Trained adolescents will be able to challenge myths and misinformation that abound in their communities. Retrogressive traditional and cultural beliefs which negatively affect adolescents will be challenged with facts using this curriculum.



Introduction

This curriculum has been developed to support teachers, parents, community leaders and youth leaders for training adolescents in SRHR. The designers of this curriculum believe that investments in adolescent health bring a triple dividend of benefits for adolescents now, for their future adult lives, and for the next generation. Their health and well-being are engines of change in the drive to create healthier and more sustainable societies.

The total population of adolescents aged 10-19 years is 1.2 billion globally. This is the largest generation of young people in history. 85% of these adolescents live in developing countries. In some countries they form 30% of the population. Every year and globally about 78,900,000 adolescents continue to suffer from sexual and reproductive health related conditions, 3000 adolescents die from preventable and avoidable causes related to sexual reproductive health problems every day. Some challenges faced by adolescents in accessing health services include:

- Inadequate SRHR services provided to adolescents which increase the risks of unwanted pregnancies, unsafe abortion, HIV, STIs, and mental health problems.
- The under-utilization of the service package leading to adolescents, especially girls, getting inaccurate SRHR information from their peers and uninformed lay people.
- Taboos surrounding sex education, early marriage, norms and traditions, and lack of promotion of comprehensive knowledge of SRHR by public campaigns/entities/government.

- Lack of comprehensive Adolescent SRHR services at community level and in many health facilities due to shortage of trained and skilled personnel.
- Lack of friendly and conducive environment and open space for adolescents to freely seek for services.
- Lack of evidence-based information on the existing services, cultural mores and myths, religious beliefs, and peer pressure.
- Unfriendly delivery of adolescent health services which discourage adolescents from seeking healthcare.

Many adolescents have scanty information on reproductive health. Health care workers provide reproductive health services in a way that discourages adolescents from seeking them. Teachers have a load of examinable lessons to cover and do not find time or are not trained to educate adolescents in areas of reproductive health. As a result, adolescents are left with no option but to rely on resources that are sometimes misleading and inaccurate.



Purpose of this curriculum?

This curriculum is designed to assist teachers, community leaders, health service providers and parents to support adolescents to transition well into adulthood. It covers a variety of topics that are fundamental in teaching adolescents facts about SRHR. It includes activities and guided discussions that reinforce learning and ensures that adolescents can feel comfortable asking questions that are otherwise thought to be taboo.

It is the hope of the designers that with proper training, facilitators can use this resource in the health clubs & other community settings allowing adolescents to lead the discussion groups with an adult observing how the lessons are passed on and eventually enabling adolescent leaders to take on the role of facilitator.



How to read this curriculum

A brief explanation of the different terms/headings used in the curriculum is given below:

- **Module:** This will have the name of the specific module
- **Summary:** Summary provides information about the module which the facilitator should know before conducting the session.
- **Objective:** The overall aim of the module i.e. what we are trying to achieve from the module.
- **Key Learning:** Major learning for the adolescents after going through the module
- **Time:** Average time required to conduct the module
- **Topic 1:** This will have the name of the topic or name of the activity
- **Resources Required:** Resources required for conducting the activity or facilitate discussion
- **Facilitator Tips:** Tips for the Facilitator to conduct the specific activity or guide the discussion
- **Time:** Average time required to conduct the activity
- **How to conduct the activity /How to conduct the guided discussion:** Detailed guidance on conducting the activity and/or discuss the topic



Facilitation Tips

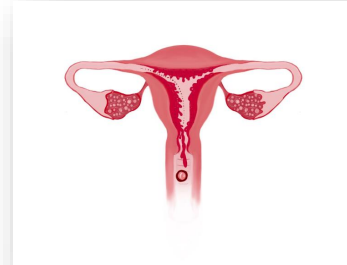
1. Facilitator guide: Teachers / community leaders/ youth leaders and parents should familiarize themselves with the topic they intend to teach.
2. Teaching aids and other preparation should be in place beforehand to assist in demonstrations and activities.
3. The facilitator should give ample time to cover the lesson they intend to teach and leave time for questions and areas of clarification from the learners.
4. As much as possible the facilitator should make sure that the learning atmosphere is conducive, and **no learner is shamed for any reason.**
5. Encourage as much participation as possible and self-discovery throughout the discussions.
6. Apply effective communication skills and strategies while conducting counseling and behavior change education sessions on safe sex and healthy relationships among adolescents.
7. Within the content, there are videos that can be shown where the facilities allow learning picture cards, visual aids and all other items that make it easy for the facilitator to pass on this information.
8. The designers have included a few activities to support and reinforce learning. The participants should be encouraged to take part in the activities and discussions which will demonstrate real life situations and reinforce learning.



Modules



1. Changes during Adolescence



2. Menstruation



3. Personal Hygiene



4. Sexual and Reproductive Health Rights

Module 1

Changes during adolescence



"Growing up is fun, yet confusing and challenging but it is an important part of our lives !!"



Summary

Adolescents experience many changes as they go through puberty/teenage years. The changes include physical such as increase in height, broadening of hips, growth of pubic hair, hair in the armpit, acne, onset of menstruation for girls and growth of beard and voice box (Adam's apple) in boys. Emotional changes include mood swings, becoming attracted to others, being conscious of their looks, valuing peer approval and many other emotions. These changes are normal and an important part of growing up. During this session, the facilitator should aim to get the adolescents to appreciate these changes, understand their emotions and be able to withstand the pressure from the community to act on these physical and emotional changes.



Objectives

Enabling adolescents to understand and appreciate the ongoing physical and emotional changes taking place and not be ashamed of these developments.

Key Learning

By the end of this session

- Adolescents will be informed about the changes to expect while growing up
- Adolescents will know, understand and appreciate that changes taking place in their bodies are normal and they should feel comfortable in their body.



Time : 2 hours

Topic 1: What are some of the Physical Changes ?

Time: 40
minutes

Resources Required

1. Picture cards on a pen-drive/SD card
2. Laptops/Smartphones to watch the videos
3. At least two sets of picture cards, printed and laminated to be used in the absence of technology.

How to Conduct the Activity

1. Begin by sharing an anecdote of you growing up. Make it relatable.

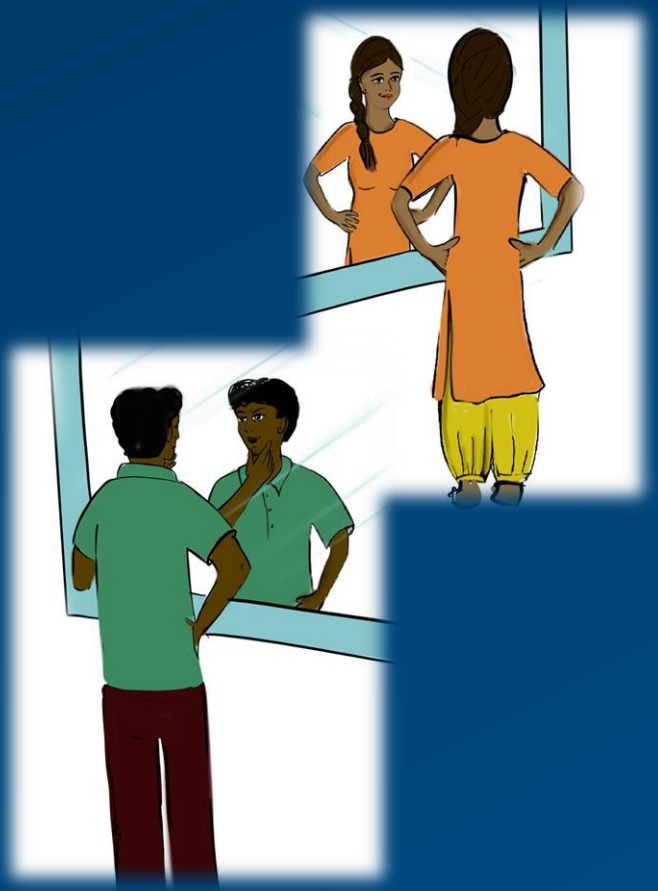
Some Prompts

I outgrew my old clothes very quickly that time

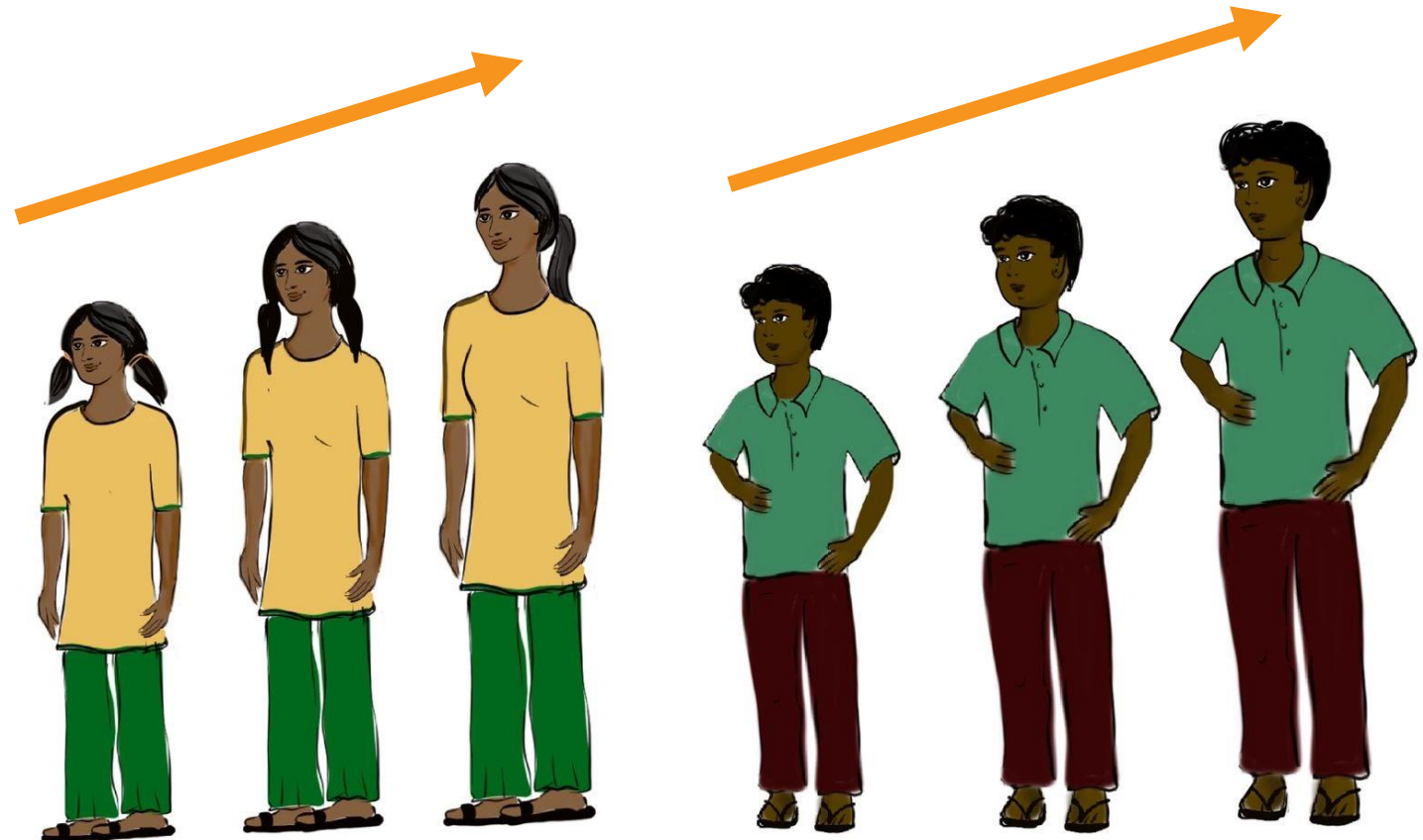
I loved spending more time with friends

My body started experiencing changes and I was scared " who should I ask about these changes"

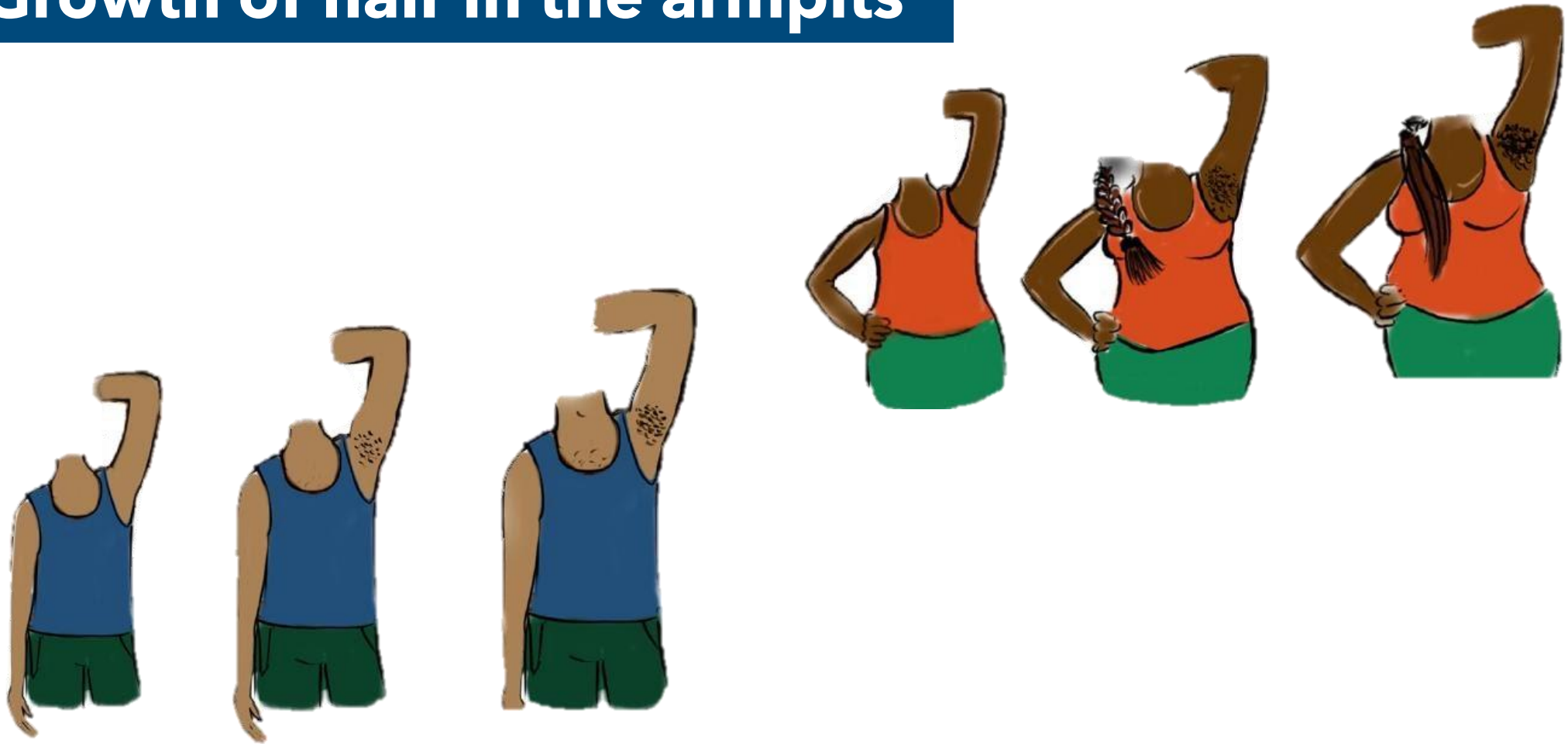
2. Once you find that the participants are ready to open up, request them to share some of the changes they have noticed within themselves and among their friends.
3. Write these on a flip chart or black board as they are mentioned.
4. Use the picture cards to show them all the physical changes



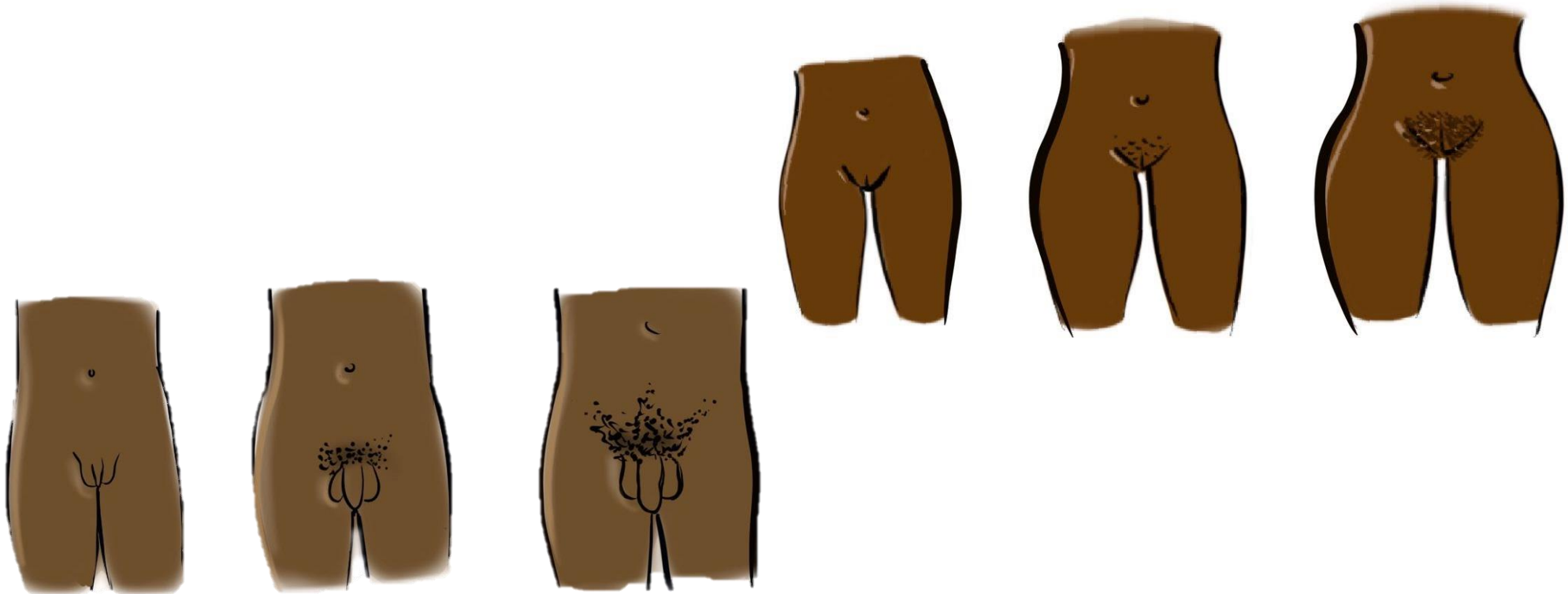
1. Increase in height



2. Growth of hair in the armpits



3. Growth of pubic hair & matured/enlarged genitals



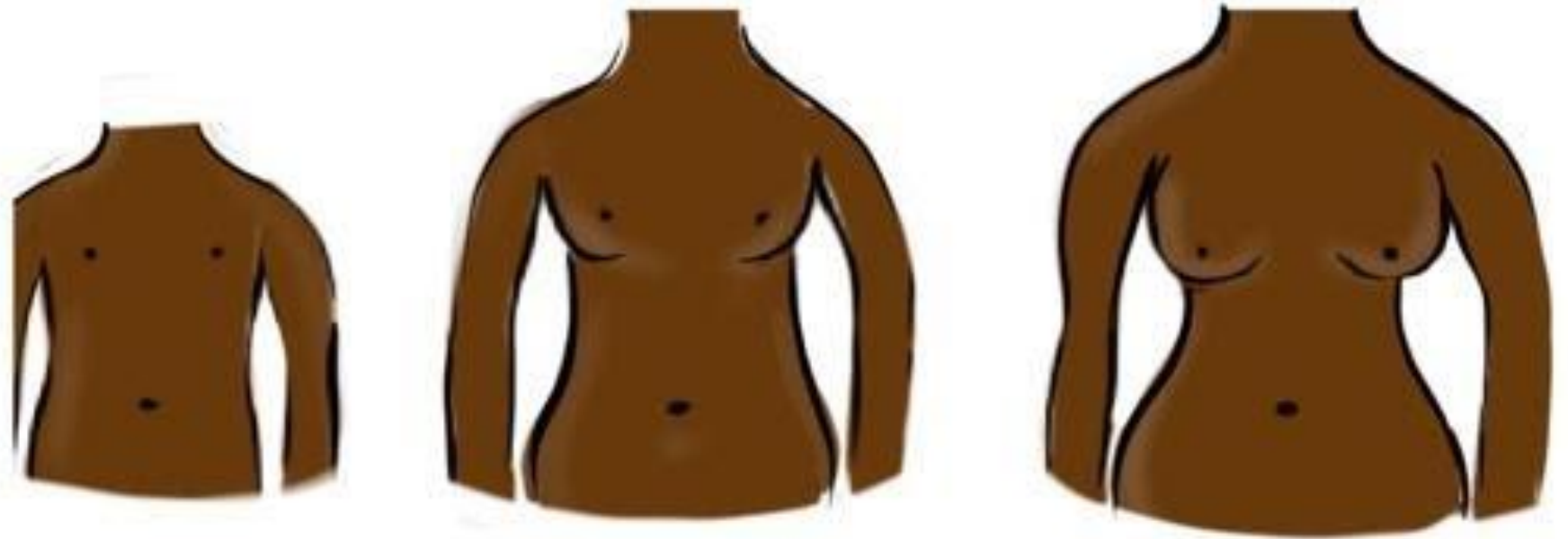
4. Acne



5. Widening of hips in girls



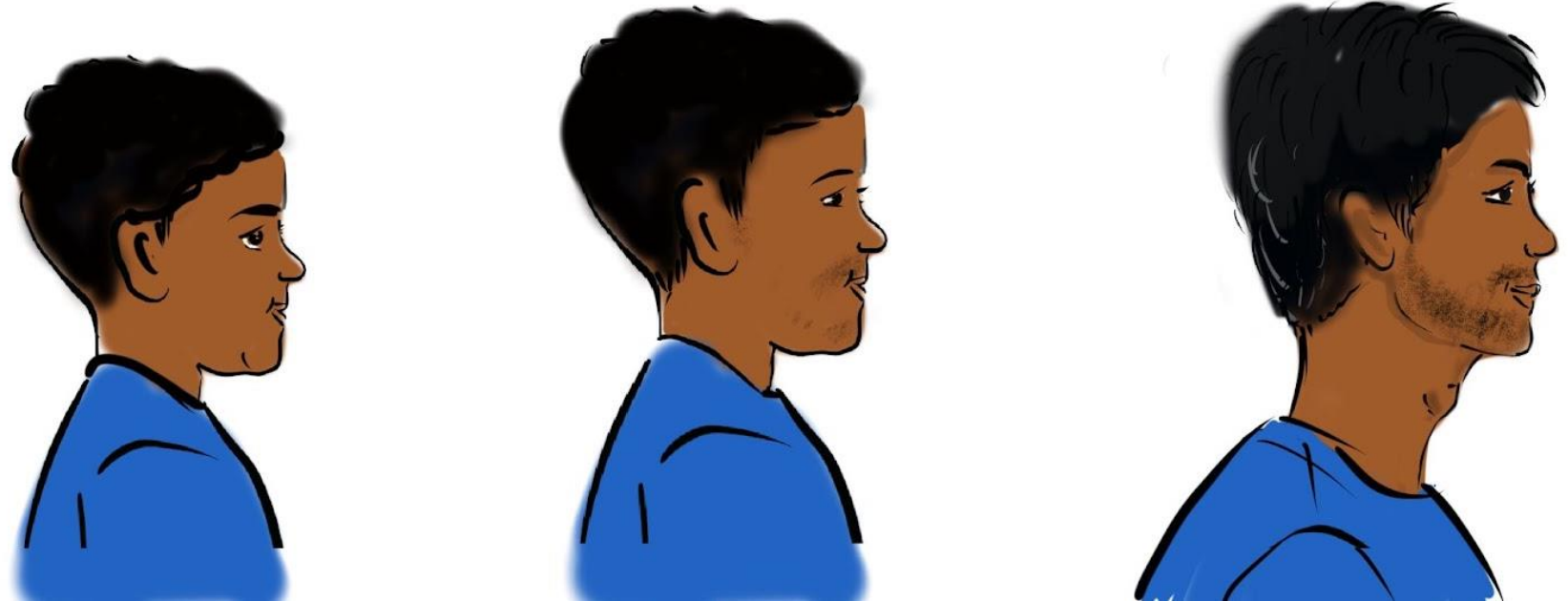
6. Growth of breasts in girls



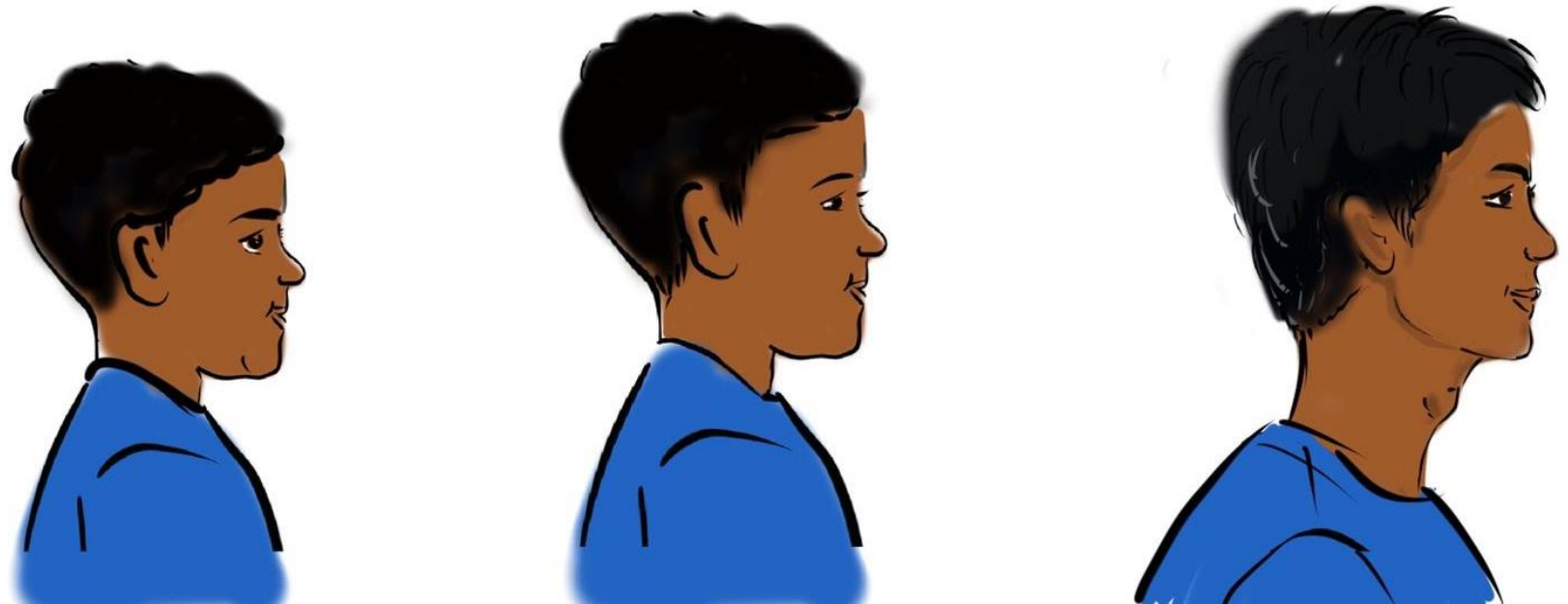
7. Onset of menstruation in girls



8. Growth of beard in boys



9. Growth of voice box in boys



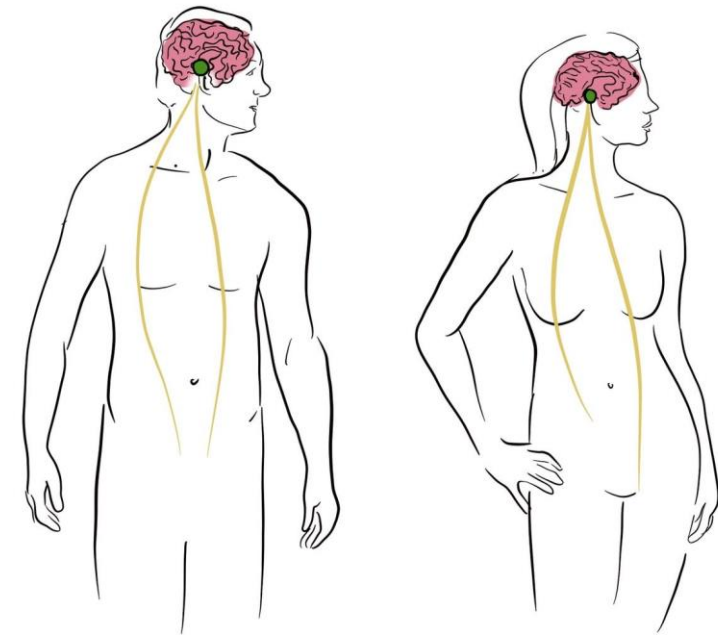
10. Erection in boys



5. Discussion : Let's discuss briefly why these changes occur

Our body has a pituitary gland which releases something called "hormones". These hormones are responsible for these changes. Many of the changes help us to grow and function, a lot of these changes are reproductive maturity including menstruation.

An important thing to note here is that adolescence is the first phase of reproductive maturity, but this does not mean that an adolescent boy/girl is ready to have a baby by that time. The maturation is completed by 18-20 and only after that the body is ready to bear a child. Bearing a child at an early age when the body is not ready can have harmful physical and emotional impact.



Topic 2: What are some of the emotional and social changes

Time: 40 minutes

Resources Required

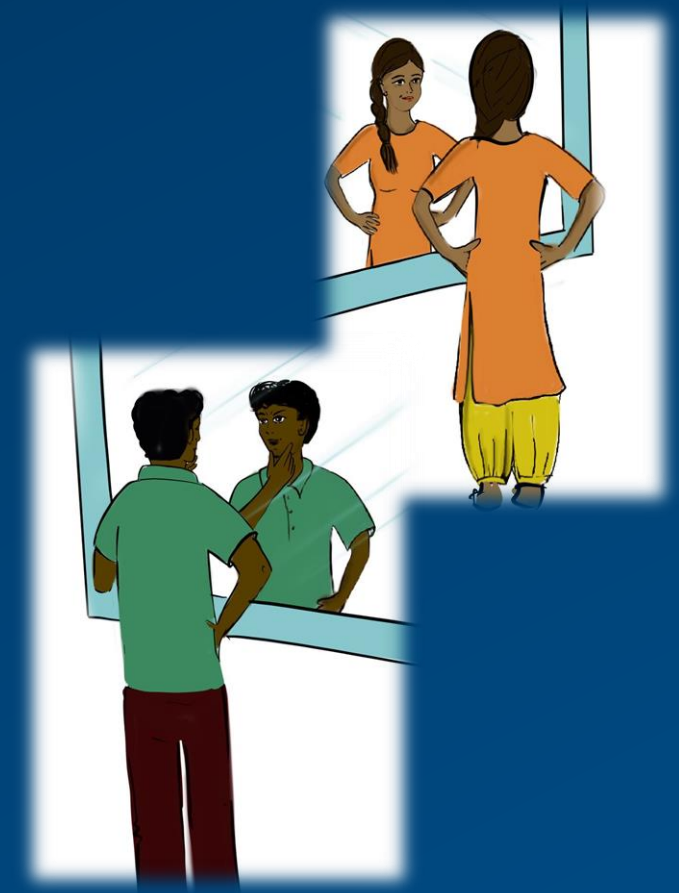
- I. Picture cards on a pen-drive/SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology.

Facilitator Tips

Sharing emotional changes might not be easy for the adolescents, Please note that you can gently nudge them but never force them to share if they are not comfortable.

How to Conduct the Activities

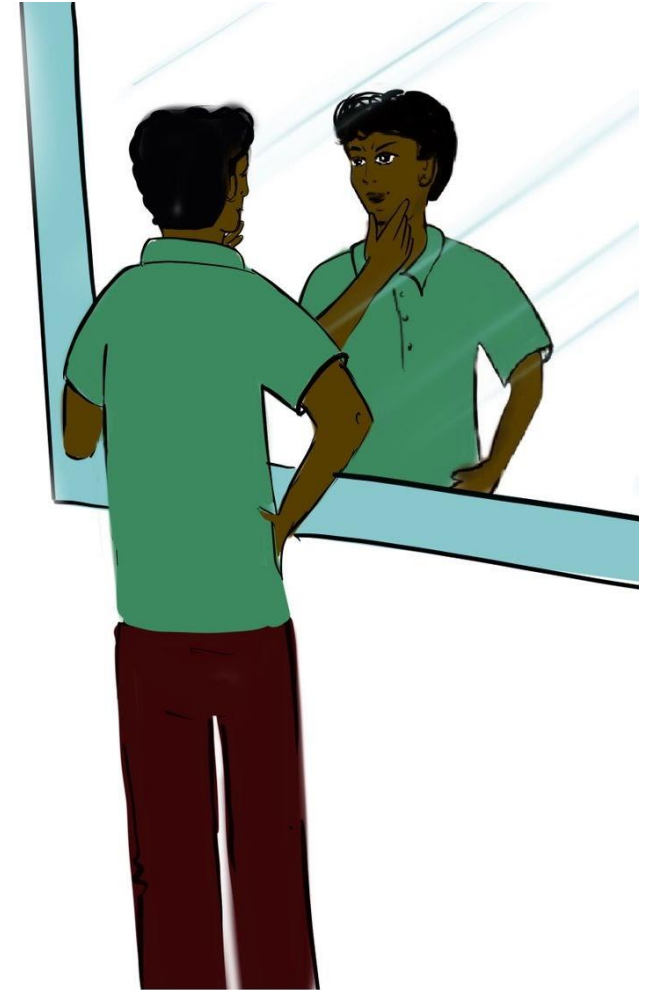
1. Begin the session by asking the group, 'Do we only see physical changes?'
2. Based on the response, request the group to share some of the emotional and social changes they are experiencing.
3. Once they have shared, please use the picture cards to discuss all the emotional changes.



1. Mood Swings



2. Self Consciousness



3. Feeling attracted to others



4. Spending more time with friends and peer groups



5. Getting sexual feelings or sexual excitement



4. Discussion :

There are other emotional and social changes like getting conflicting thoughts, influenced by friends or feeling peer pressure to do certain things or believe in certain things. It is important to know that these changes are normal and every adolescent goes through these changes. One should not be ashamed or feel guilty about it and express/share concerns, questions, dilemmas with someone the adolescent is comfortable with or in safe spaces.

During adolescence or even later, it is common to feel very uncomfortable /shy to discuss about sexual feelings. And because of this, most often adolescents resort to unverified sources of information. Therefore, it is necessary to have safe spaces and access to a community leader, frontline workers, doctor or a counsellor who can provide accurate information with a friendly approach.



Topic 3: Everyone is unique

**Time: 40
minutes**

Resources Required

- I. Picture cards on a pen-drive/SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology.

How to Conduct the Activities

1. Use the picture card and narrate the stories (Story 1 & 2)
2. Encourage adolescents to respond to each of the questions asked.
3. Discussion of Story 1: Girls start to experience adolescent changes as early as 8 years and boys by 9/10 years. However, some start a little later than others while some start a little earlier than others. Some will become taller than others. What is important to know is that everyone is unique, and it is not a good idea to compare the changes during adolescence and it is absolutely not ok to make fun of someone because of their changes during adolescence or physical appearance. If someone has not developed any changes by 13-14 years or have started developing changes before 8 , then it is advised to consult a doctor.



Story 1

Rita , Anita, Sam, Rahim ,Yona just entered into adolescent stages. They have started noticing changes in themselves and in their friends as well. Anita suddenly started growing taller than her friends of the same age, some started teasing her, some started comparing their height with her. Do you think it is right? Should people be worried that they are not as tall as Anita? Should Anita feel bad that she is tall?



Story 2

John is worried that he does not have a beard whereas his friend Shamin has. He is scared that others would tease him. He wants his beard to grow as soon as possible. Do you think people should tease someone if the person has not developed a beard. Should John be worried about beard?

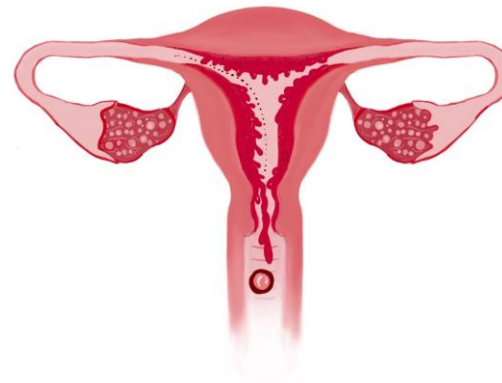


4. Discussion for story 2: Everyone develops beard at different ages and should not be compared. It is absolutely wrong to tease someone because they have not developed a beard or because they have a beard.
5. All the changes during adolescence are natural processes of growing up, it is healthy and prepares adolescents to transition well into adulthood. Again, if someone has changes before 8 or has not developed changes until 14 or develops changes after 13-14 years, then please refer to a doctor.



Module 2

Menstruation



“Menstruation is a natural process; it is not a taboo, and I am not ashamed about it!”



Summary

Menstruation (also termed as period or bleeding) is the process of discharging (through the vagina) blood and other materials from the lining of the uterus at about one monthly interval from puberty until menopause (ceasing of regular menstrual cycles), except during pregnancy. This discharging process lasts about 3-5 days. There are various menstrual care products such as disposable sanitary pads or cloth sanitary pads which can be used during menstruation. It is important to use these products in a hygienic way which means not using the product for more than 6-8 hours and if cloth pad is used, washing it with soap and drying it under the sun.



Objectives

Empower adolescents with the knowledge of menstruation/ menstrual cycle and understand the importance of menstrual hygiene management.

Key Learning

By the end of this session participants will:

- Have learnt how menstruation occurs
- Appreciate that it's a natural process and part of growing up
- Have facts that dispel myths and misconceptions about menstrual cycle
- Be able to manage menstrual cycle by hygienic use of menstrual care products
- Understand how reproduction occurs



Time : 2.5 hours

Topic 1: Understanding menstruation and menstrual cycle

Time:
1 hour

Resources Required

- I. Videos/Picture cards on a pen drive/SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology.

Facilitator Tips:

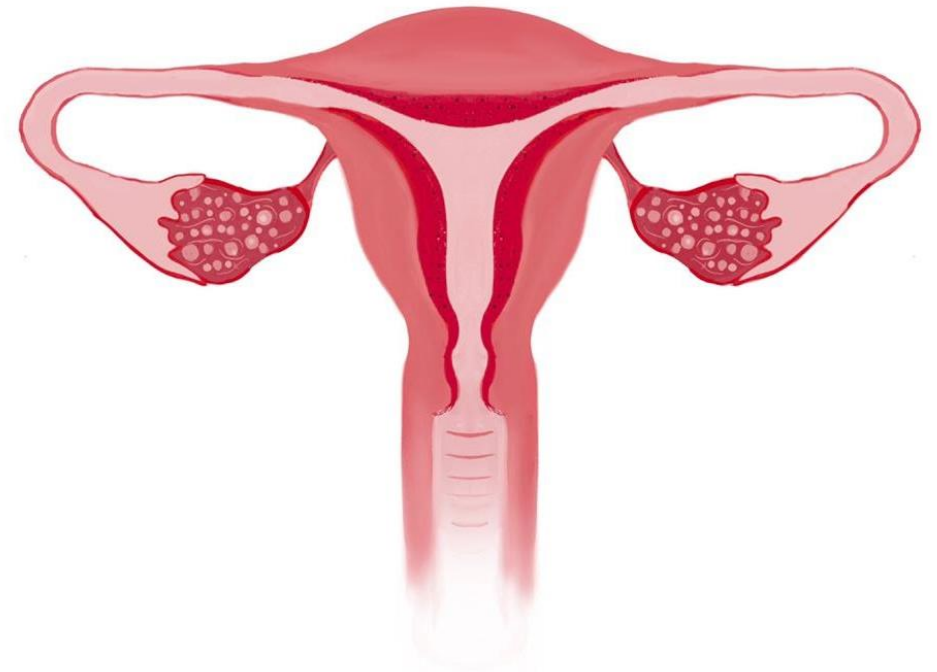
There are many taboos and myths around menstruation, Please try to address them by understanding their perspective and then provide them with accurate information.

How to discuss

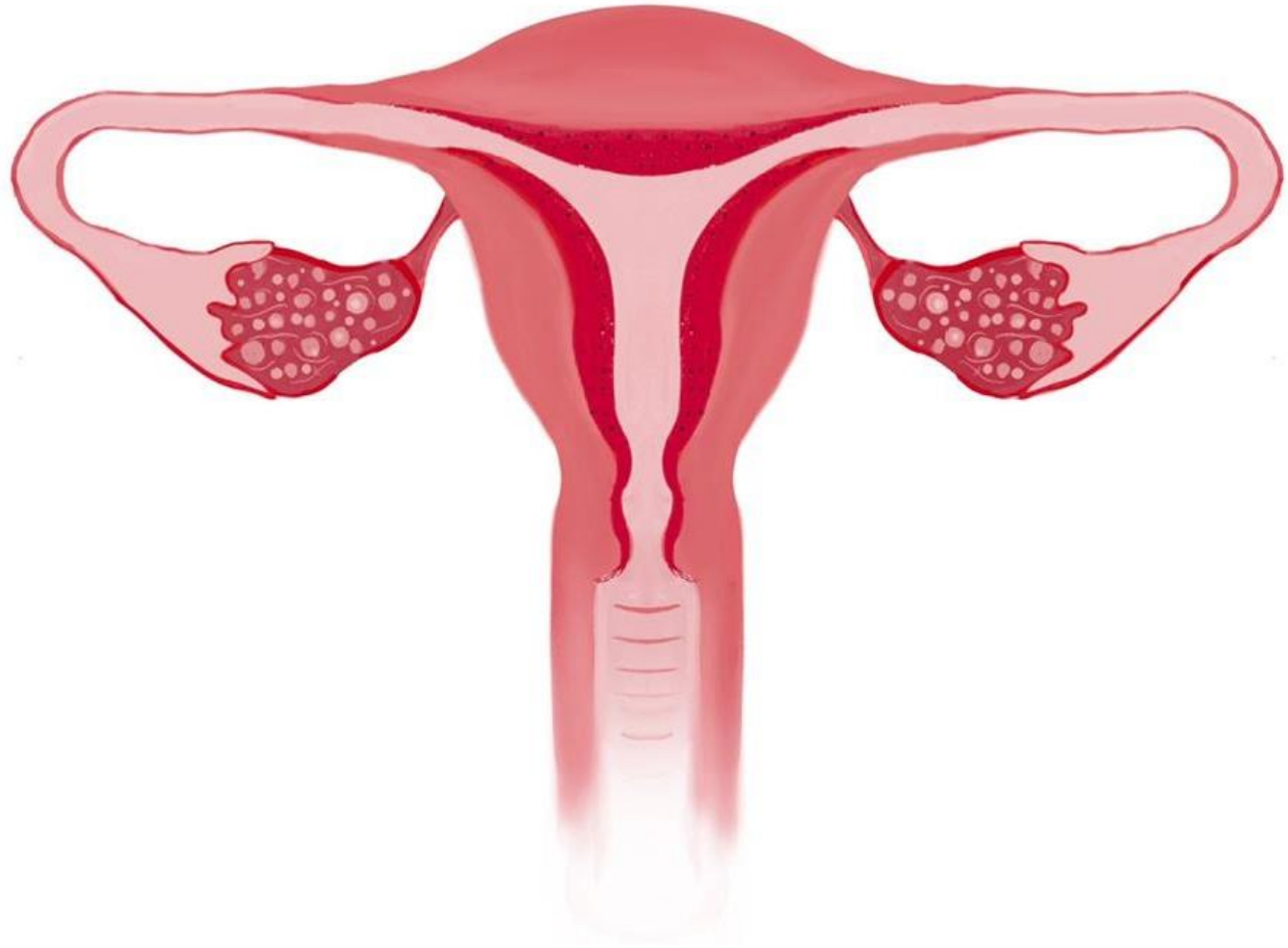
1. Begin by sharing about the first time you had menstruation. This will help adolescents feel comfortable, better connected and open-up about menstruation.
2. Gently encourage the participants to share their experience if they feel comfortable
3. Then start explaining about the menstrual cycle - Every month a girl/woman/menstruator bleeds for around 3-5 days. **The menstrual cycle** is the period beginning on the first day of a woman's period until the day before she begins her next period. Since this happens regularly, it is called a "cycle." The length of time between one period and the next varies for each woman. For some, the cycle is 21 days (or fewer). For others, it could be 35 days or more. The average cycle length is 28 days.



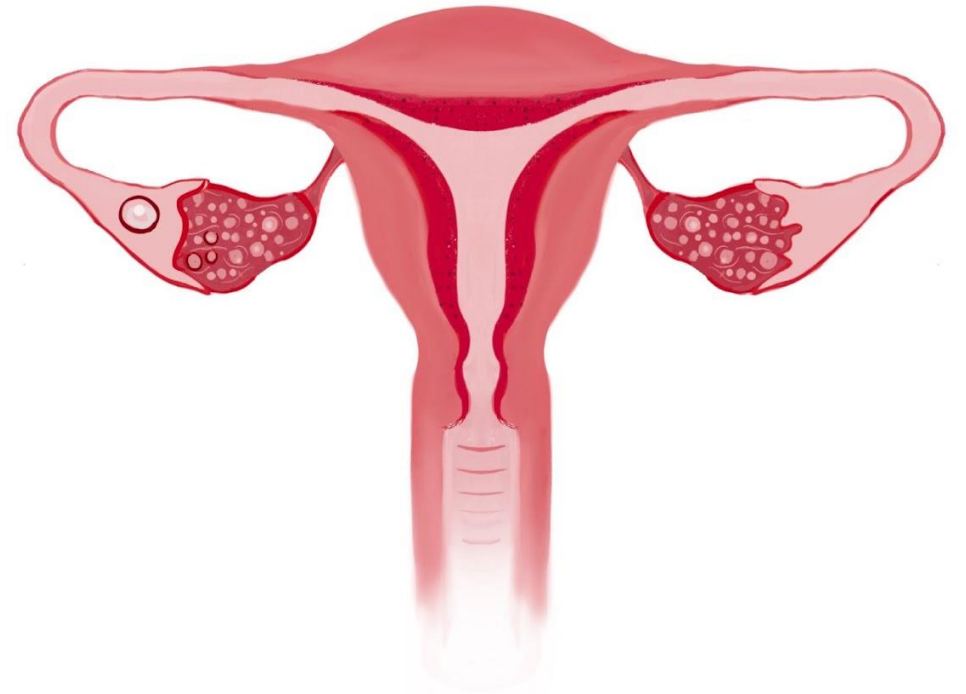
4. Irregular periods are common in girls who are just beginning to menstruate. It may take the body a while to adjust to all the changes taking place. For example, a girl may have the same length cycle for two months, then miss a month, or have two periods with fewer days in between them. During adolescence, girls' bodies change and there are hormonal changes that take place.
5. Girls and women experience menstruation until menopause. Menstruation is interrupted by pregnancy in most cases or a medical condition that may need medical intervention.
6. After the discussion on the menstrual cycle, introduce the topic of menstruation. You can begin by asking "Can someone share what is menstruation and how it occurs?"



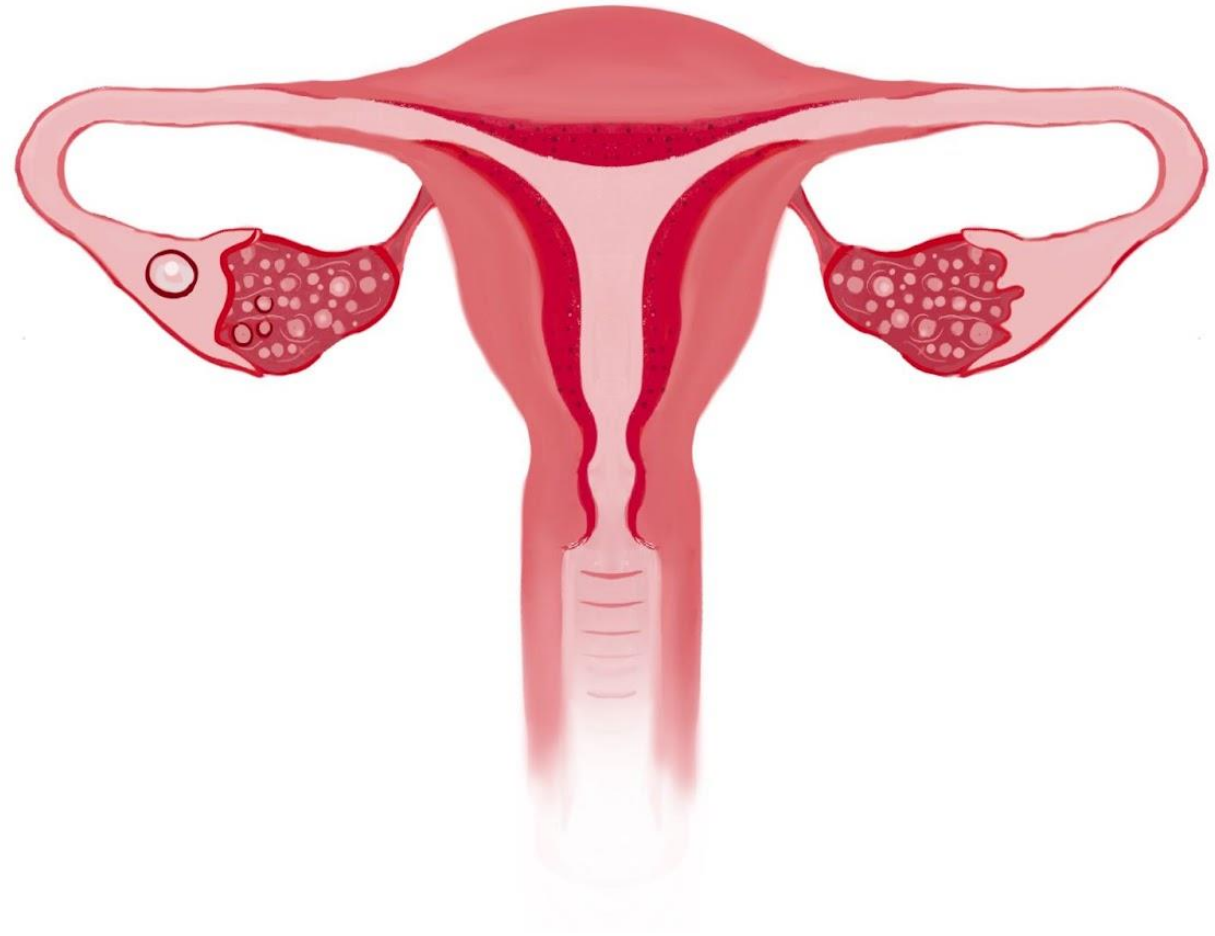
**Thousands of
eggs in ovary**



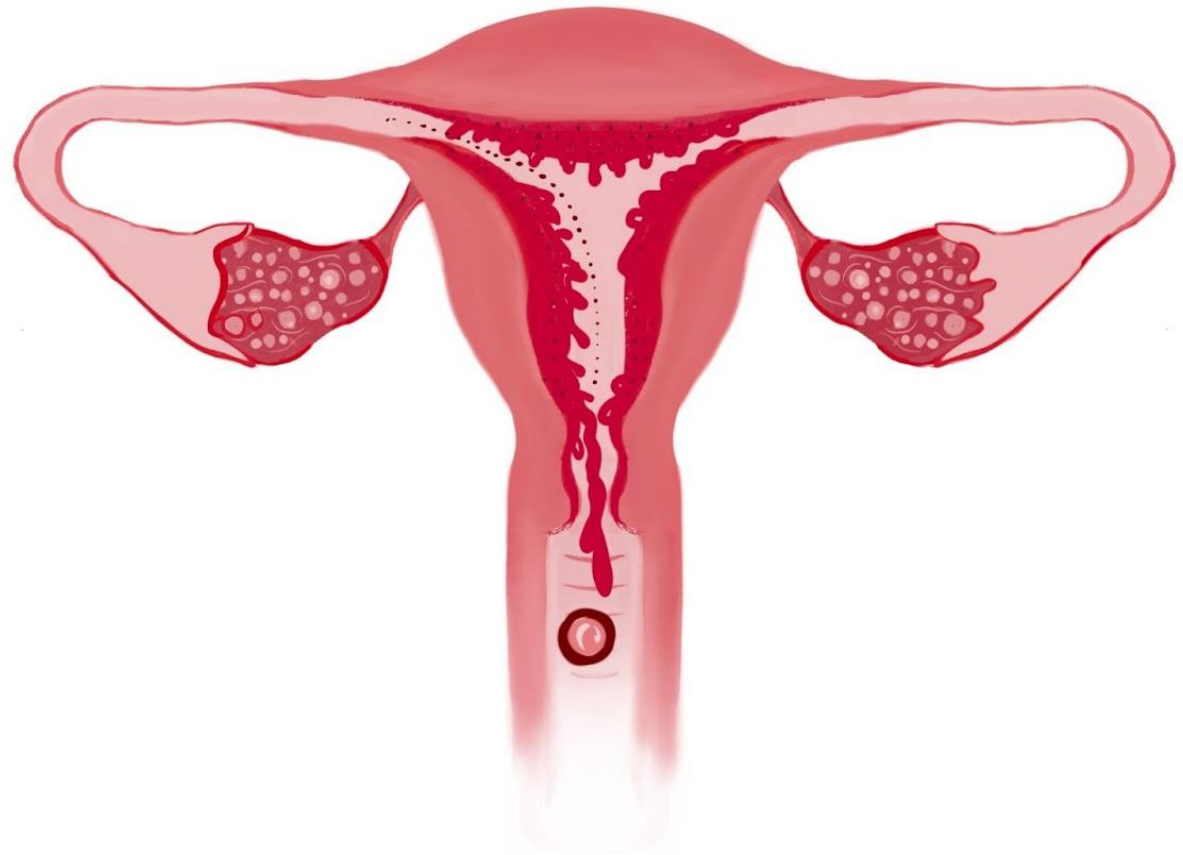
7. After the participants have shared, please use the picture cards to describe the process of menstruation in an interactive manner.
8. Each ovary holds hundreds of thousands of eggs. Girls are born with all the eggs they will ever have.
9. After puberty, one ovary releases a mature egg about once a month. This process is called ovulation.
10. Before ovulation, the uterus builds up a lining made of tissue and blood. This lining is like a nest for the egg if pregnancy happens. It provides nutrition, oxygen and supports the growth of the fetus (in simple terms , the baby inside the uterus) .



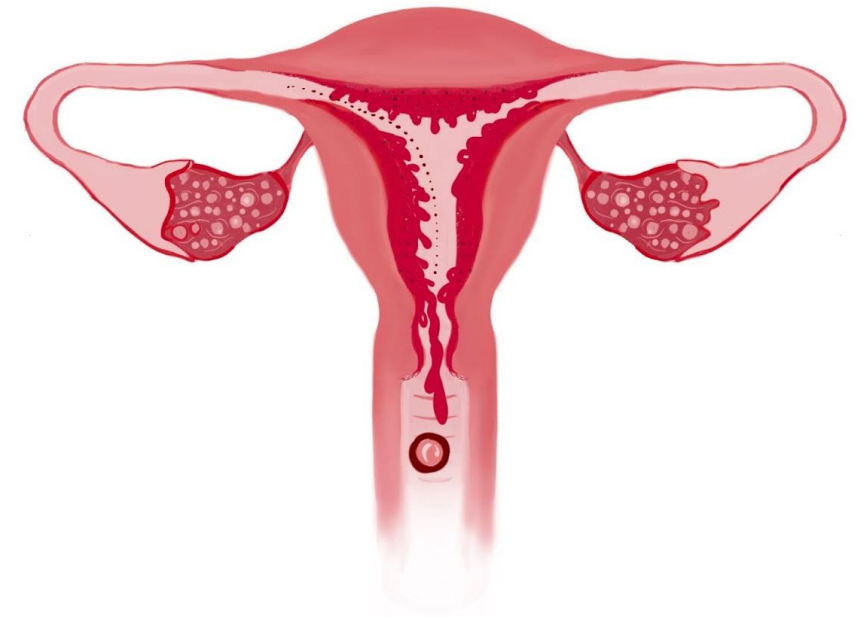
**Ovary releases a
single egg every
month**



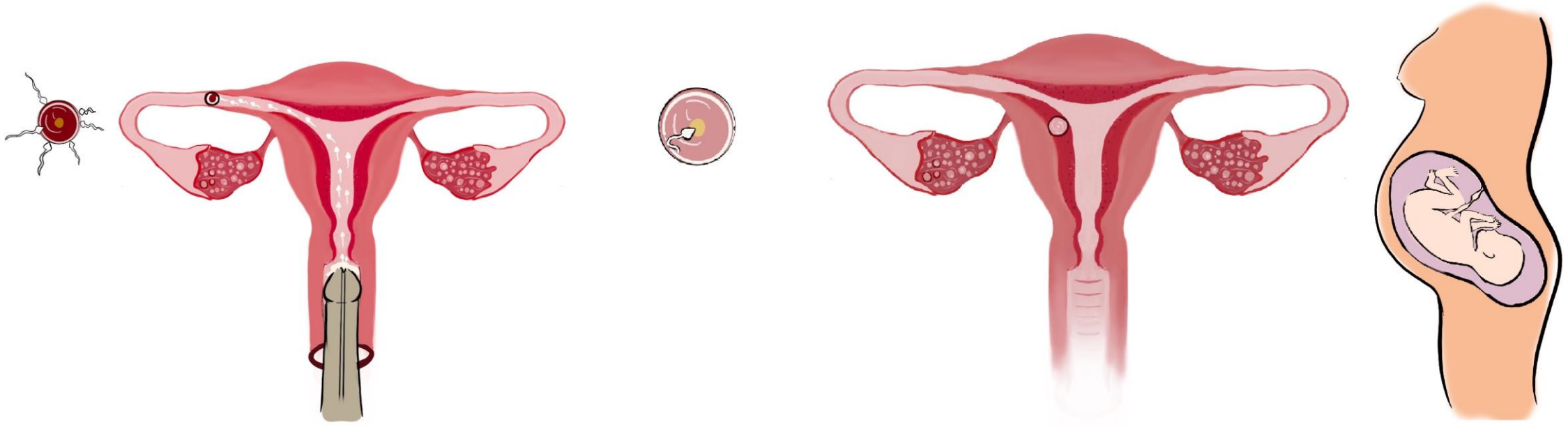
Menstruation



11. After ovulation, the egg moves through one of the fallopian tubes toward the uterus. Most of the time, when the egg is not fertilized, it breaks apart. The lining of the uterus that has been built up is no longer needed and hence disintegrates. It begins to flow out of the uterus, through the cervix and vagina out of the body. This is called menstruation or a "period."
12. After the menstruation process is discussed, you can request some of the participants to use the picture cards to explain the process to the entire group or you can divide the group into two teams and give some time (15 minutes) to them to discuss the process, ask any questions and clarify any doubts. Then they can nominate one team member to share it with the entire group. If something is missing in the explanation, team members can provide support to them in a collaborative manner.

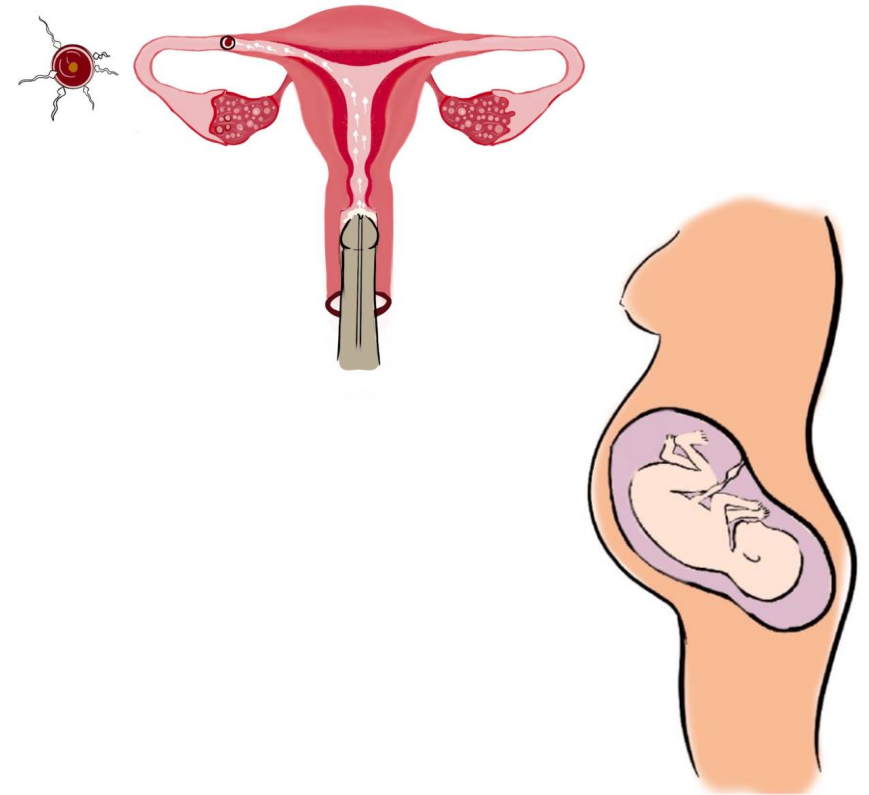


Pregnancy



13. After this, discuss what happens during pregnancy. If the girl or woman has had sex in the last few days before or the day after ovulation, then by the time the egg arrives in the fallopian tube, there might be some sperm waiting to unite with the egg. The sperm remains active for a maximum of 4 days and the egg for a day.

14. If the arriving egg is united with the sperm, (called fertilization) the fertilized egg travels to the uterus and attaches to the lining of the uterus (the process is called implantation) and a pregnancy begins. The pregnancy lasts for around 9 months and during this time the lining of the uterus nourishes the embryo/fetus (baby in the uterus). This means that for these nine months, menstruation does not take place.



Topic 2: Premenstrual Syndrome

Time: 30
minutes

Resources Required

- I. Videos / Picture cards on a pen drive/SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology



How to discuss

1. Girls, women and menstruators experience physical or emotional symptoms before their menstruation. These include:

- Aches and feeling heavy
- Acne
- Fever
- Bloating
- Cramps/ abdominal pain
- Mood swings and anxiety
- Increased clear vaginal discharge
- Temperature rise
- Sore breasts



2. Discuss that these are the steps they can take to ease premenstrual syndrome.

- Medical attention: seek medical attention when you have painful cramps. The medical professional will give you medicine to reduce these pains.
- Avoid taking in a lot of salt as it adds to their feeling of heaviness
- Exercises to ease stress and pain
- Avoid deep-fried foods and consume more fruits and vegetables
- Take painkillers



Topic 3: Menstrual Hygiene Management

Time: 45
minutes

Resources Required

- I. Videos/Picture cards on a pen drive/SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology.
- IV. Disposable and cloth sanitary pad (if available)



How to conduct the activity :

1. Invite a participant to demonstrate others how to use a sanitary pad. The person can use the picture card or available sanitary pad.
2. Ensure that the following steps are covered while demonstrating the correct usage of cloth pad.



Correct way to use a disposable sanitary pad

Step 1: Wash your hands then remove the sanitary pad from the package.

Step 2: Sit on the toilet, unfold the sanitary pad and pull your underwear down to just above your knees.

Step 3: Remove the strip to reveal the adhesive on the back of the sanitary pad. If you are using a sanitary pad with wings, there will be three strips-the main one and one on each wing.

Step 4: Press the sanitary pad, adhesive side down, onto the crotch of your underwear. Fold the wings around the sides of the crotch of your underwear and press them against the underneath of your panties.

Step 5: Pull your underwear up and check to see if the sanitary pad is in the right position. It should cover the entire opening of your vagina. If not, pull down your underwear, pull off the sanitary pad, and reapply it more forward or back in your underwear whichever is appropriate.

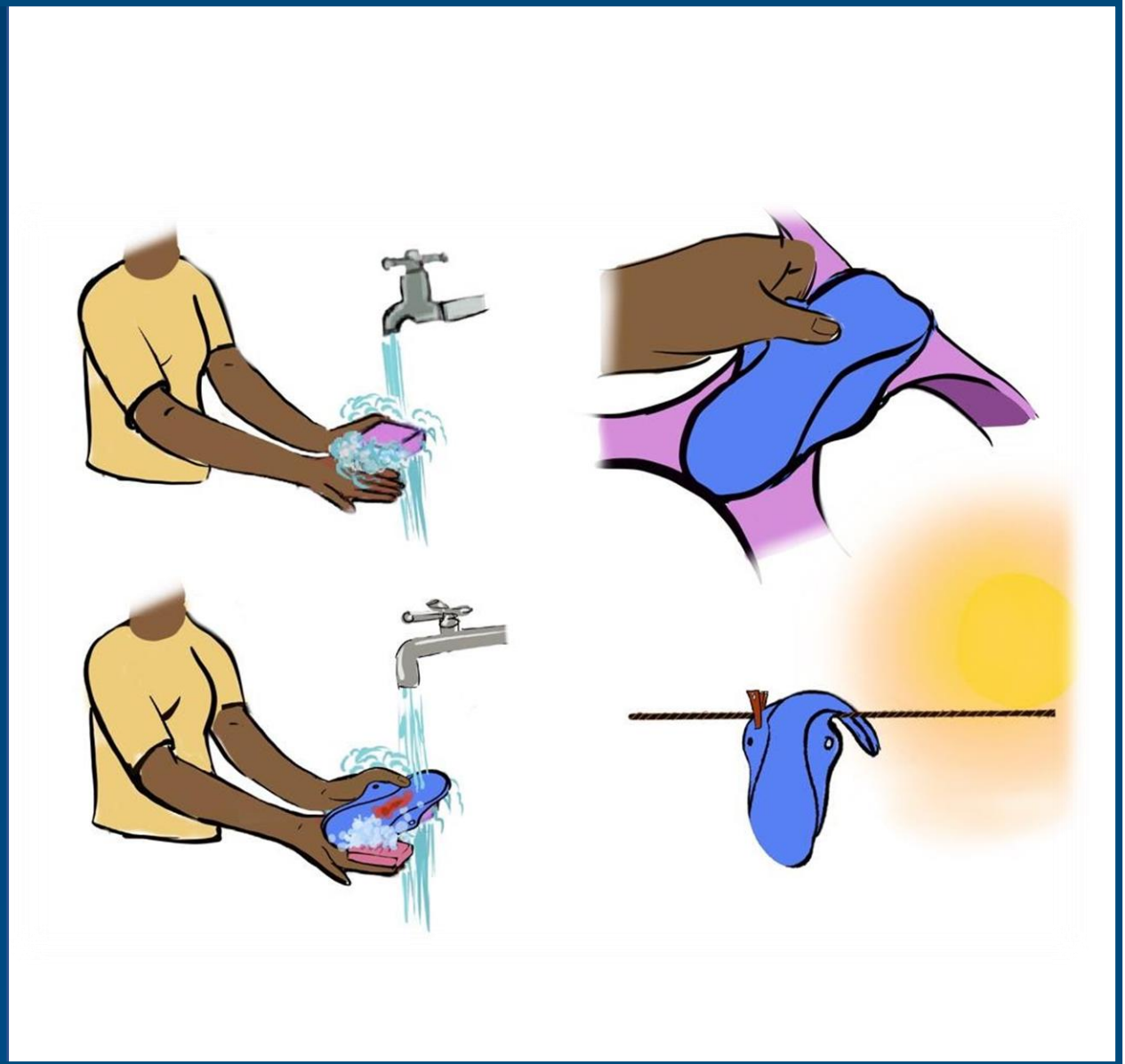
Step 6: Check your sanitary pad every two hours to see if it needs to be changed. If the sanitary pad is wet on the surface and no longer absorbing menstrual fluids, it is time to change it. Do not use a sanitary pad for more than 6 hours even if it is not completely wet.

Step 7: Fold your used sanitary pad up like it was when you first removed it from the package. Wrap toilet paper around the sanitary pad and throw it away in a trashcan.

Usage of disposable sanitary pad



3. Repeat the activity for the cloth sanitary pad. Invite a participant to demonstrate to others how to use a cloth pad.
4. Ensuring the following steps are covered



Correct way to use a cloth pad

Step 1: Wash your hands then take out the cloth pad

Step 2: Sit on the toilet, unfold/unbutton the cloth pad and pull your underwear down to just above your knees.

Step 3: Press the cloth pad, the waterproof layer down, onto the crotch of your underwear. Fold the wings around the sides of the crotch of your underwear and press them against the underneath of your panties.

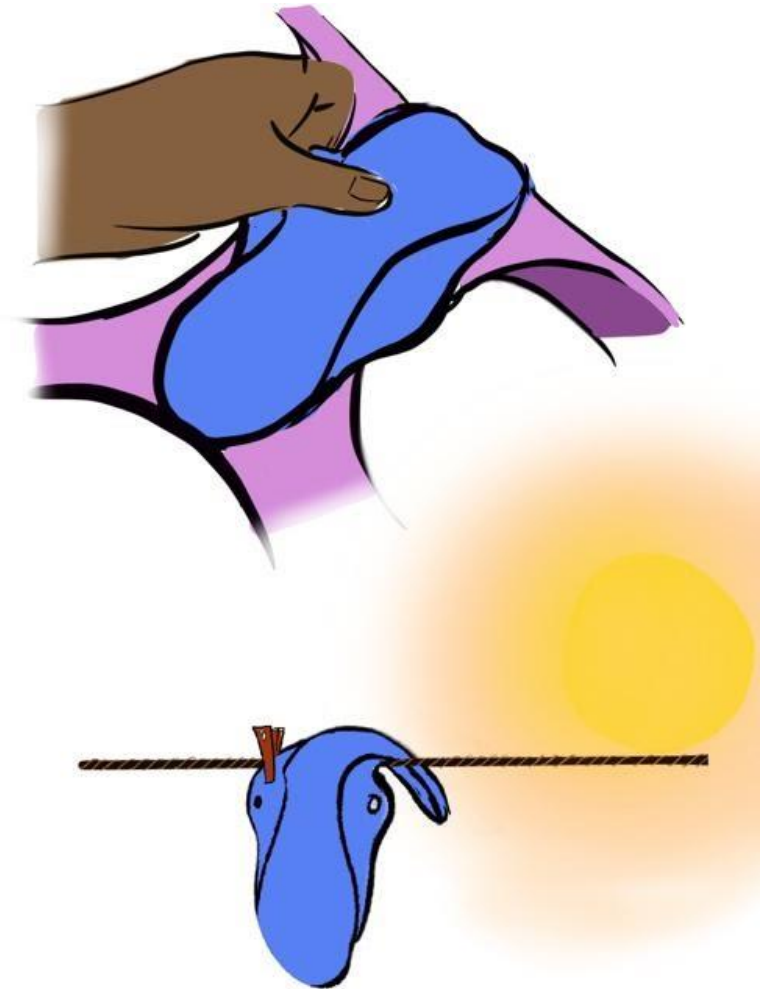
Step 4: Pull your underwear up and check to see if the cloth pad is in the right position. It should cover the entire opening of your vagina. If not, pull down your underwear, take the cloth pad off, and reapply it more forward or back in your underwear whichever is appropriate.

Step 5: Check your cloth pad every two hours to see if it needs to be changed. If the cloth pad is wet on the surface and no longer absorbing menstrual fluids, it is time to change it. Do not use a cloth pad for more than 6 hours even if it is not completely wet.

Step 6: After you change your cloth pad, soak the used cloth pad in clean water. Wash it using soap and rinse properly.

Step 7: Dry the washed cloth pad directly under the sun. Never dry the cloth pad in closed spaces, beneath the clothes or under shade. The sunlight dries the cloth pad completely and prevents infection

Usage of a cloth pad



4. Conclude the discussion by reinforcing the need to follow hygiene such as

Washing your vagina with only water, do not apply soap or other products. While washing the vagina, always wash it from front to back to prevent infectious particles present around the anus from entering into the vagina. It is also important to take bath everyday.



Always wash your hands with soap before and after washing your vagina and before and after using pad

Module 3

Personal Hygiene



“Practicing personal hygiene has made me self-confident. I can now smile and speak confidently in a group.”



Summary

Adolescents should take all the necessary steps to practice good hygiene. Instilling personal hygiene among adolescents has positive health outcomes and leads to self confidence, self esteem and acceptability among peers and other people in the community. The facilitator should encourage the adolescents to bathe, brush their teeth, wash their clothes, regular hand washing and body grooming. The facilitator should also emphasize, it is not too difficult to practice personal hygiene regularly. Using water, soap, toothbrush and taking care of their clothes will all ensure that the adolescent is well groomed and eliminates any body odors that are produced during this period of growth.



Objectives

To enable adolescents to develop and practice good personal hygiene

Key Learning

By the end of this session, participants will be able to:

- Appreciate the need to follow personal hygiene.
- Describe the parts of the body which need to be attended to in order to maintain good hygiene
- Describe oral and body hygiene
- Recognize how personal hygiene affects good health and self esteem



Time : 1 hours

Topic 1: Why and How to Practice Personal Hygiene?

**Time: 45
minutes**

Resources Required

- I. Videos/Picture cards on a pen drive / SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology.
- IV. Soap, water, hand washing basin (if available or else bucket/mug)

How to Conduct the Activity

1. Begin the activity by asking some questions around hygiene practices such as
 - Can you share some good hygienic practices
 - What do you use for bathing at home?
 - Do you have toilets/pit latrines that your family uses?
 - Where do you get water that you use at home? How far is the water source?
 - Who is responsible for ensuring there is water for the family's use?
2. You can direct the discussion towards adolescence and hygiene practices by asking questions such as
 - Have you experienced a heightened need to follow personal hygiene practices during adolescence?
 - If yes, why is that?
3. Share with participants that during adolescence girls and boys experience physical, emotional, cognitive, sexual, and social change which also includes increased production of sweat or onset menstruation etc. This means it becomes all the more important to follow hygiene practices that can lead to better health.
4. Below are some helpful tips to support the adolescents:

a. Bathing and showering everyday

- Encourage adolescents to bathe everyday with soap. This practice will address the overactive oil and sweat glands that are produced due to hormonal changes. Oils and sweat generate body odor which in turn increases the risk of infections.
- While having a shower, adolescents must pay attention to all body parts including hands, nails, feet, hair, groin, armpits and bottom.
- After having a shower, adolescents should use a clean cloth or towel to dry the body, especially the underarm, groin area and feet.
- Advise them to always wear clean and dry underwear.



b. Oral hygiene

- Adolescents should brush their teeth twice a day to avoid poor oral hygiene.
- It's important to brush the teeth after drinking tea/coffee or eating sweet and sugary food. This practice will lead to good oral hygiene and eliminate tooth decay which can be very uncomfortable.



C.

Handwashing

- Encourage adolescents to wash their hands before and after eating food, after using the toilet, and with the current COVID 19 they should wash their hands frequently.
- Where there is no facility of running water tap, fabricated tap like a tippy-tap can be built in school and at home using locally available material. This ensures that they have running water at all strategic points that enables them to practice handwashing.
- Explain to the participants that handwashing is important in eliminating infections that could cause sickness including stomach aches, flu, scabies etc. By this simple act of washing hands, one can prevent many diseases.
- The facilitator can request participants to show how they usually wash their hands.
- Then the facilitator should demonstrate the ten steps of handwashing.



5. Conclude the discussion by emphasizing that it is common to have body odour during adolescence, it is not any kind of sickness but part of growing up. Bathing everyday, washing clothes, brushing teeth, washing hands after using the toilet, before eating and after eating food and airing your beddings all contribute to reducing this odor. Maintaining hygiene in most of the cases is not difficult but a practice that is easily cultivated and has health benefits. It also contributes to self esteem and confidence.



Module 4

Sexual and Reproductive Health Rights



"Adolescents have every right to know about their sexual and Reproductive health rights."

Summary

The adolescents should be aware of bodily autonomy and sexual and reproductive health & rights including healthy sexual relationships. They should also understand the mutual benefits in safe sexual relationships and unintended, harmful and dangerous outcomes that result from unsafe sexual behaviors and activities. The facilitator should engage the participants in discussion around sexual relationships including social-cultural myths, gender-based stereotypes, social constructions of reality in sexual relationships. They should also explain safe sex practices including the use of condoms, contraception options and other SRHR services.

Objectives

Support and Enable adolescent to exert their sexual and reproductive health rights.

Key Learning

By the end of the lesson, participants will be able to:

- Understand their sexual and reproductive rights
- Identify societal pressure, myths and taboos associated with sexual and reproductive health
- Understand unsafe and safe sexual activities
- Demonstrate understanding the personal boundaries to make sexual relationships safe



Time : 2 hours

Topic 1: What is Sexual and Reproductive Health Rights

Time: 45
minutes

Resources Required:

- I. Videos/Picture cards on a pen drive/SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology.

Facilitator's Notes:

Facilitators should strive to guide and educate teenagers and adolescents about their sexual and reproductive health rights, empower them with information to make informed decisions about their sexual and reproductive health, and develop resilience against myths and taboos that are harmful.

SRHR



How to discuss

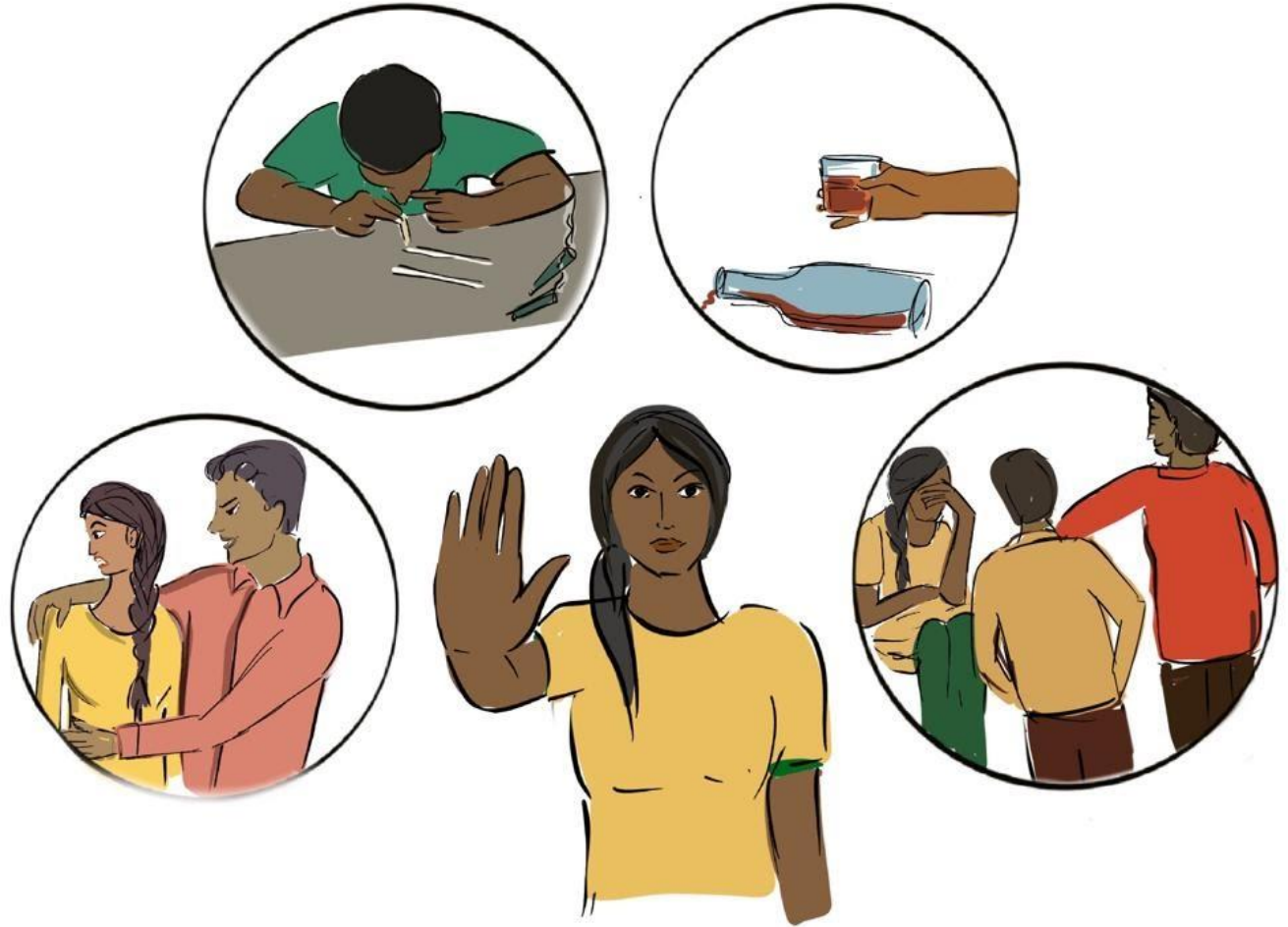
1. In this session, the facilitator should share the rights of adolescents under the international conventions and the country's laws. Adolescents like any other age group have human rights including rights to information and health services, whether to engage in sex or not and many others that should be respected.
2. Many adolescents are ignorant of their human rights and for this reason , they are taken advantage of leading to suffering.
3. In sexual and reproductive health, the adolescents should be made aware of the following SRHR among others.



- Right to their bodies and no one should force them into sexual activity without their consent.
- No one should touch them inappropriately.
- Rights to voice their concerns if they feel their life is in danger.
- Rights to contribute to discussions that affect them.
- Rights to refuse performing any activities that endanger their lives including engaging in sex, taking drugs, taking alcohol or associating with people they do not trust.
- Rights to the health services without discrimination due to age, marital status, sexual orientation or religion.
- Right to confidentiality while accessing health services.



4. The facilitator should emphasize that these rights are enshrined in the international conventions for human rights and in the constitution of many countries. With this knowledge, adolescents should defend themselves and not feel afraid of exercising their rights especially when it's harmful to their health.

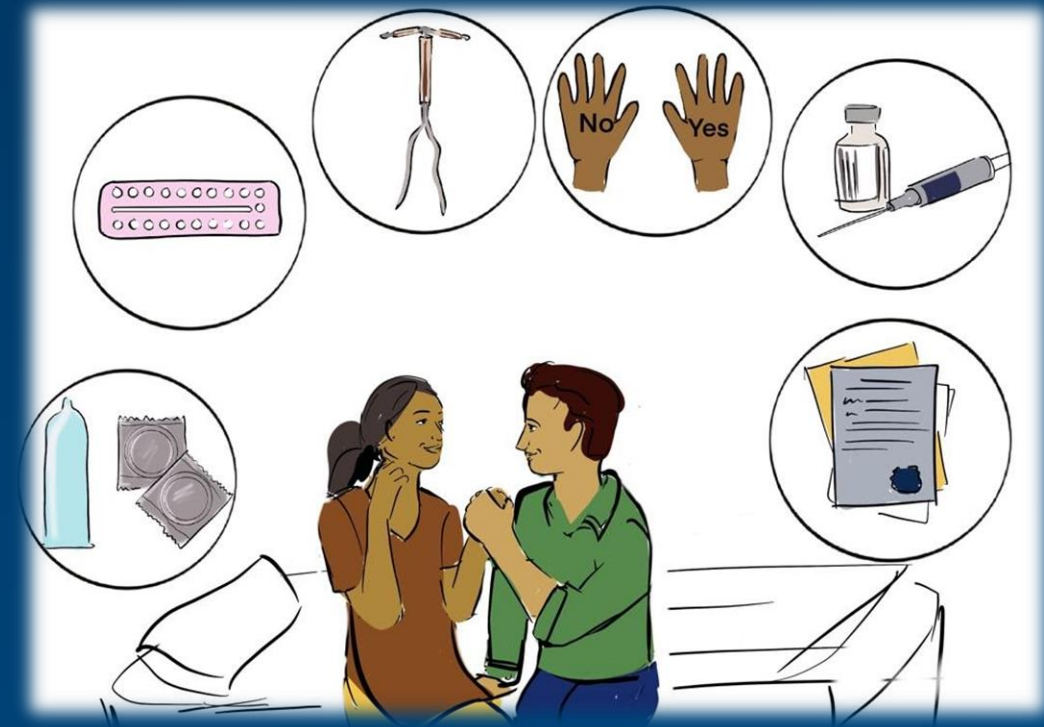


Topic 2: What does 'safe sex' reflect?

Time: 45
minutes

Resources Required:

- I. Videos/Picture cards on a pen drive/SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology.



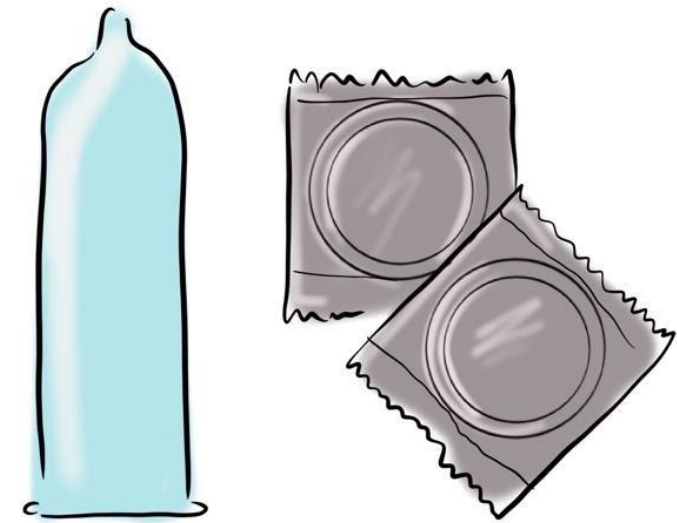
How to discuss

1. Start the discussion by asking the participants that whether they know about "safe sex", and if some of them will be willing to share (It might happen that some of the participants are not comfortable sharing. Gently nudge then and never force them).
2. Based on the responses , share about each of the following points about "safe sex" using the picture card
 - Safe sex is about consent
 - Safe sex means looking after your emotional and physical health.
 - It means caring for your own and your partner's health.
 - It's about protecting yourself and your sexual partner from STIs.
 - It's about having sex in a respectful manner
 - It's about knowing laws, consent, and the risks of unsafe sex
 - It means avoiding unplanned pregnancy.
 - It's about making sure you're both ready and prepared.
 - It's all about preventing any regrettable outcomes from sex activity
 - It means using protection/contraception to avoid unplanned outcomes such as unplanned pregnancy or STIs. There are different kinds of contraception that can be used such as pills, Copper T, injectables, condoms etc. Condoms not only prevent pregnancy but also are effective in preventing STIs

Safe Sex



3. The facilitator should also discuss about the usage of condom. The best way to make condoms work effectively is to use them correctly and every time for vaginal, oral, and anal sex. This means keeping the condom during the entire duration of sexual activity and making sure it is rolled on the penis the right way before there's any skin-to-skin genital contact. Read more about how to use condoms correctly.



4. It is very important to let the participants know that they have the right to say **"No"**. When a person is not ready or willing to have sexual intercourse, they have the right to say No to it. This can be for various personal reasons, such as, if they do not want to engage in sex, want to focus on their education, want to avoid unwanted pregnancies and sexually transmitted diseases, or would like to wait until they are married, etc. These reasons might differ from one person to another. But we should all know that it is okay not to engage in sexual activities if one has decided not to. There should be no sexual activity without consent.



5. The Facilitator then can use the “Myth-Fact” activity to address the various myths associated with “safe sex”. The facilitator can share the myths written below and can ask the participants to mention if this is a myth or a fact. Please ensure to share the fact corresponding to the myth.



Common misunderstandings about safe sex

MYTH: Safe sex is when there is no risk of pregnancy

FACT : "Pregnancy isn't the only risk of unsafe sex. Sexually transmitted infections are also a risk for all parties engaging in unprotected sexual activities, and teenagers, and adolescents are at higher risk of falling into unsafe sexual activities."

MYTH: Condoms reduce the good feeling from sexual intercourse

FACT: Condoms does not reduce the feeling from sexual intercourse additionally, it also prevents unplanned outcomes.

MYTH : Circumcised men don't get and/or transmit STIs

FACT: Circumcision does not prevent transmission of STIs

MYTH: STIs are transmitted through vaginal sex only

FACT: STIs can be transmitted orally, through vagina and sharing of bodily fluids.

MYTH : If I ask for a condom, s/he will judge me as a prostitute

FACT: People have every right to use various contraception including condom

Topic 3: What is 'unsafe sex'?

Time: 30
minutes

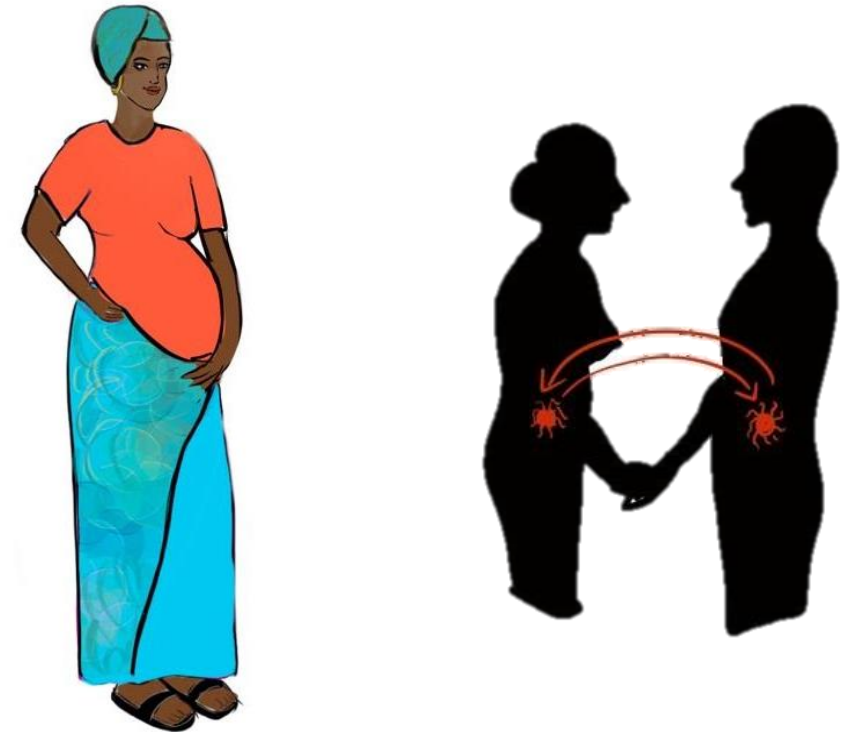
Resources Required:

- I. Videos/Picture cards on a pen drive/SD card
- II. Laptops/Smartphones to watch the videos
- III. At least two sets of picture cards, printed and laminated to be used in the absence of technology.



How to discuss

1. Start the discussion by asking whether “Sex without consent and without use of protection such as condom when the intention is not to get pregnant)” is unsafe sex.
1. Share that both are examples of unsafe sex.
2. Now move the discussion to “implications of unsafe sex”
 - Pregnancy (If it is not planned)
 - STIs such as HIV
 - Harmful health outcomes including death



4. Most importantly discuss the actions to be taken after “unsafe sex

- Emergency contraceptives
- Post exposure prophylaxis
- Test for STIs with registered medical services
- Reporting to authorities or someone you trust if the sex is forced
- Refer to health facilities and seek further medical and emotional support



References

1.Availability, accessibility, and quality of adolescent Sexual and Reproductive Health (SRH) services in urban health facilities of Rwanda: a survey among social and healthcare providers

2.What Does Not Work in Adolescent Sexual and Reproductive Health: A Review of Evidence on Interventions Commonly Accepted as Best Practices



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