

IMPROVING THE LIVES OF ADOLESCENTS



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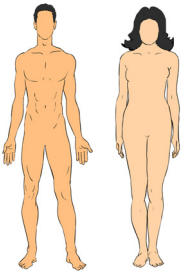
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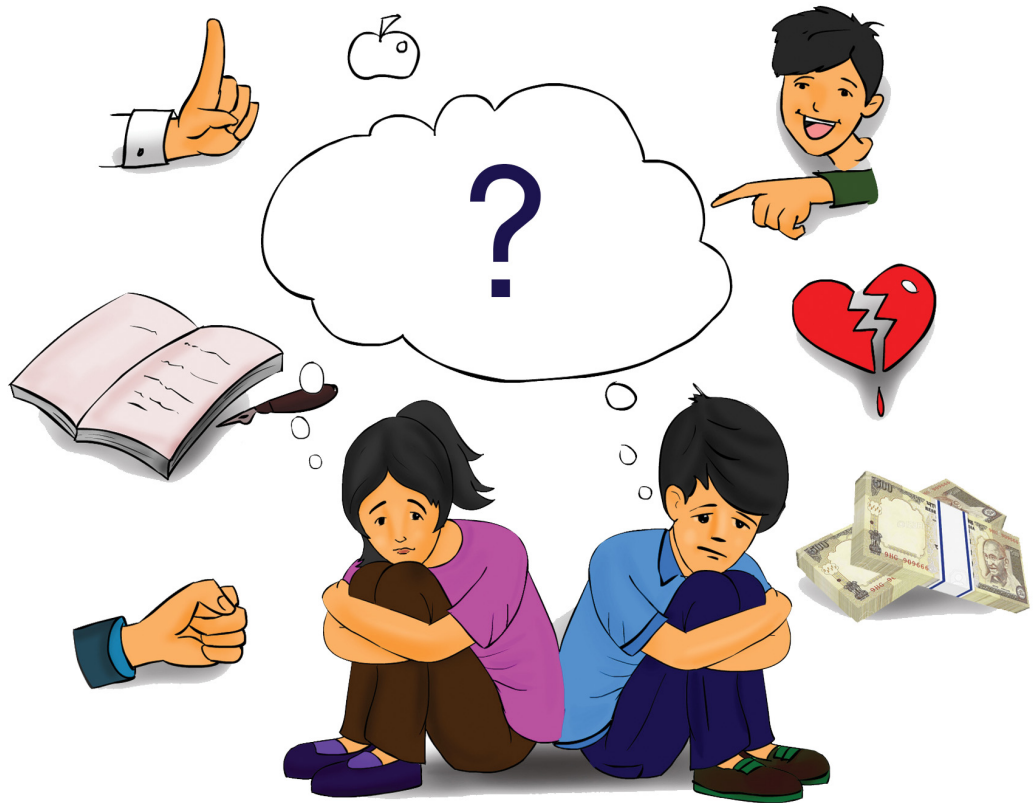


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ISSUES OF ADOLESCENTS



Activity 1

NAME DANCE (25-30 minutes)

- Peer leader can motivate the group he/she is addressing with an Ice-Breaker and a getting to know technique.
- The group stands in a circle holding hands initially.
- The leader starts with a name dance to introduce oneself.
- The leader involves body-movements, like stretching, dancing, clapping, turning around etc. for as many syllables as they are in his or her name.



Ex: Srinivas has sri-ni-vas 3 syllables and so 3 steps.

Naga Jyothi has na-ga- jyo- thi, 4 syllables, hence 4 steps.

- This will enable the participants to shed their inhibitions and energize the whole group.
- Once the group is energized and have known each other the Peer Leader/Group leader can start the session by posing a few questions like
 - i. What are the names given to different stages of growing?
For Example: 0-2year old kids are called Infants
3-5 year old kids are called Toddlers
6-9 year olds are known as Preadolescences
10-19 year olds are known as Adolescents
 - ii. Does the group know/heard of the word adolescent/s?
 - iii. What does Adolescence mean to them?



Introduction:

Today, 1.2 billion adolescents stand at the crossroads between childhood and the adult world. Around 243 million of them live in India. Over the next 2 decades the number of adolescents in proportion to the total Indian population will be very large. In spite of this, they do not get the attention they deserve. Since adolescents comprise a major part of reproductive age group they play a significant role in determining India's population, economic development, and societal concerns like gender equality, social harmony and improving the quality of life of our people. Hence this phase of life needs special attention.

The word "ADOLESCENT" means a young person in the process of developing from a child into an adult. Adolescent stage is a crucial and significant period which extends from 9 (early adolescence) -19 (late adolescence) years.

Adolescents are a heterogeneous group with diverse needs that vary depending on factors such as age, gender, marital status, place of residence and educational attainment. There has been an intensive effort on the part of the government to address the needs of young people through programs and policies directed specifically at them. However, most legal policies, legislations and programs define adolescents differently, often combined with children or young adults. Despite these efforts, adolescents continue to face a number of vulnerabilities and challenges, highlighting the gaps in the implementation of programs and policies.

In order to make every adolescent equipped with appropriate information to handle the changes and challenges that occur during these years of growth and to make every child understand and enjoy this phase of life this discussion on the Issues of Adolescents is essential.



Activity 2

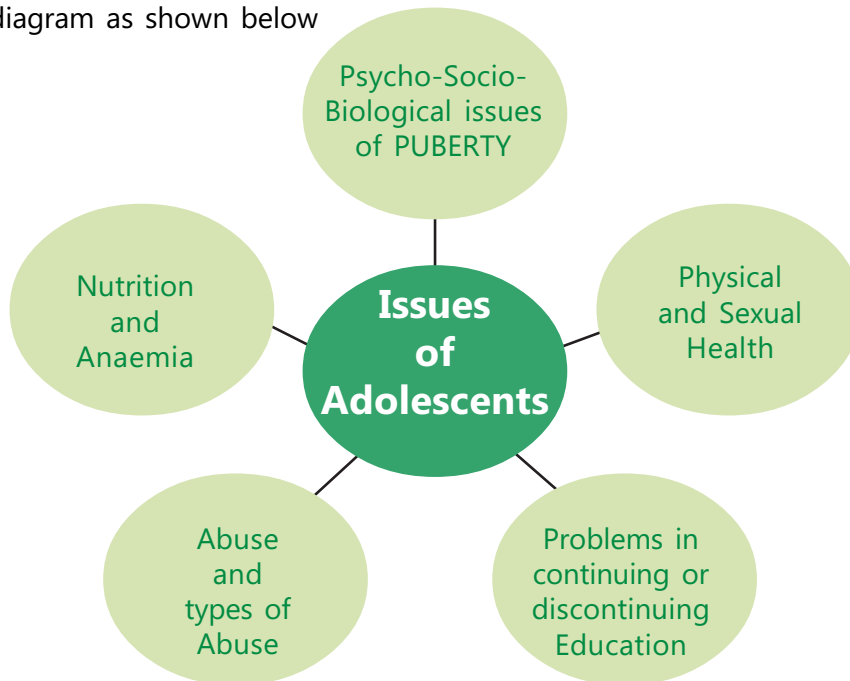
THE CONFUSED "ME" (15-20minutes)

- Leader initiates the discussion by asking if the group has any issues with themselves or in the family, in the context of the physical and emotional changes they are going through in this growing up years. (16-20yrs.)
- Leader can invoke responses from everybody, by sharing his/her own experience about one or two issues of adolescents.

EX: Leader, "I am worried that, I am already 17 and haven't grown tall enough compared to the other friends in my class."

" I get irritable and angry very often these days"

- From the responses that he/she gets from all other peers, the leader can summarize the issues faced in the growing up years in the form of sunrays diagram as shown below



- This helps the group to understand that like their own being, other girls and boys of their age group are also facing certain issues and all of them need help to combat them.

Adolescence is an age of confusion, it is at this age when key aspects of growing are introduced and experienced. Most of these issues include sexual and reproductive health, education, nutrition, and other challenges such as child labor, physical and sexual abuse, substance misuse, trafficking, the lack of autonomy and decision making in important areas of their lives and impact of media on adolescent behavior. These vulnerabilities impact adolescents' health and well-being and create obstacles to their growth and development.

It is believed that by empowering adolescents, creation of safe platforms and a facilitative environment where adolescents can participate in decision making with proper knowledge we can adopt positive practices, access preventive, curative and protective services and enhance their skills. At the same time, it is crucial to engage with the community, who can promote adolescent participation in various decisions taken at individual, family and community levels.

There could also be other social exploitations and evils that the children/adolescents face, and these could be Child Marriages, Child Labour, Exploitation and Gender Discrimination

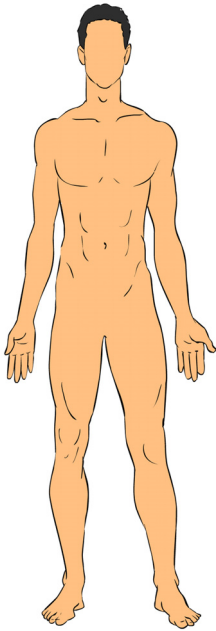
To help the group understand the changes that occur in body and mind during the growing years and what is Puberty (leading to adolescence), the leader should take the peers through the following activity:



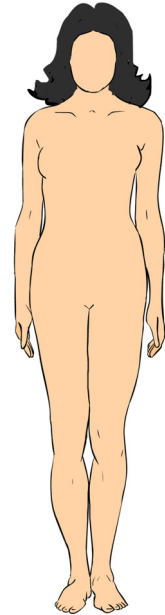
Activity 3

BODY MAPPING (45 minutes)

The purpose of the activity is to make the group understand the changes which take place during Puberty in one's body and in the parts where the changes occur during adolescent years of growing.



- Leader asks for 2 members from the group to come forward for the activity.
- S/He displays 2 cards with the picture of a female body outline and male body outline
- Peer group members are given colorful stick notes and are asked to label the parts of the body including male and female genitals and private parts.
- These notes are then to be pasted on the cards in the appropriate places on the outlined body
- Once all the post-it's are pasted , check if all the parts of the body are labeled.(It is usually observed that adolescents/children hesitate to name the private organs and the genitals)
- The leader could supplement where ever it is necessary.



It is the leader's duty to lead the discussion towards the changes that occur in one's body. Leader could start the discussion through questions such as

- i. Has anybody put on weight or lost weight during 6-7 grades of schooling?
- ii. Have they observed any changes in their body? If, yes what are they? (May be slight traces of hair in armpits, acne/pimples on the face etc)
- iii. How did they feel about these changes?
- iv. Were any restrictions imposed by their families during these years and after?
- v. Were they informed or spoken to about these changes at home or school?



The leader can then explain about **PUBERTY** and the change that takes place during puberty in boys and girls.

Usually, puberty starts between ages 9 and 13 in girls and ages 10 and 15 in boys. This wide range in ages helps in explaining why some look like young kids whereas others look more like adults. It is initiated by hormonal signals from the brain to the gonads: (the ovaries in a girl, the testes in a boy). In response to the signals, the gonads produce hormones that stimulate libido and growth, function and transformation of the brain, bones, muscle, blood, skin, hair, breasts and sex organs. Physical growth, height and weight accelerate in the first half of puberty and are completed when the child has developed into an adult body.

Until the maturation of their reproductive capabilities, the pre-pubertal physical differences between boys and girls are the external sex organs.

On an average, girls begin puberty between ages 10 and 11; boys between ages 11 and 12. Girls usually complete puberty by ages 15 to 17, while boys usually complete puberty by ages 16 to 17. The major landmark of puberty for females is menarche, the onset of menstruation, which occurs on an average between ages 12 and 13. For males, it is the first ejaculation, which occurs on an average at age 13.

Notable among the morphologic changes in size, shape, composition and functioning of the pubertal body, is the development of secondary sexual characters, the "filling in" of the child's body, from a girl to a woman and a boy to a man.

When the body is ready to begin puberty, **pituitary gland** (a pea-shaped gland located at the bottom of the brain) releases special **hormones**. Depending on whether it is a boy or a girl, these hormones go to work on different parts of the body. These changes are known as "**Secondary Sexual organs**" development.

The changes one sees during puberty are discussed in detail below.

Puberty

(say: PYOO-ber-tee)

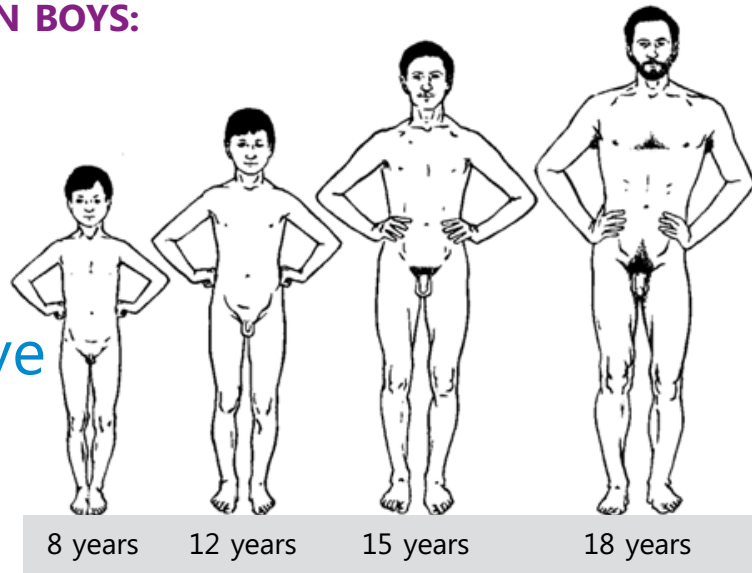
is the process of physical changes through which a child's body matures into an adult body.

During puberty, the body grows faster than at any other time in life, except for when one was a baby.



PUBERTY ONSET IN BOYS:

Male Reproductive Organs



Penis: The male organ for sexual intercourse.

Scrotum: The pouch located behind the penis which contains the testicles, provides protection to the testicles, controls temperature necessary for sperm production and survival.

Testis: Two round glands which descend into the scrotum produce and store sperms starting in puberty. In boys, testicular enlargement is the first physical manifestation of puberty (and is termed gonadarche). Testes in pre-pubertal boys changes little in size from about 1 year of age to the onset of puberty. Testicles reach maximal adult size at about 6 years after the onset of puberty.

Seminal: A sac like structure lying behind the bladder secretes a thick milky fluid that forms part of the semen.

Prostrate Vesicle: A gland located in the male pelvis which secretes a thick milky fluid that forms part of the semen.

Changes that take place:

Pubic hair

Pubic hair often appears on a boy shortly after the genitalia begin to grow. The pubic hair is usually visible at the dorsal (abdominal) base of the penis. The first few hair is described as stage 2. Stage 3 is usually reached within another 6–12 months, when



the hair is too many to count. By stage 4, the pubic hair densely fills the “pubic triangle.” Stage 5 refers to the spread of pubic hair to the thighs and upward towards the navel as part of developing abdominal hair.

Facial hair of a male

In the months and years following the appearance of pubic hair, other areas of the skin may develop hair. The usual sequence is underarm (axillary) hair, perianal hair, upper lip hair, sideburn (pre-auricular) hair, peri-areolar hair and the beard area. As with most human biological processes, this specific order may vary among some individuals. The arm, leg, chest, abdominal and back hair become heavier more gradually.

Voice change and Adam’s apple

During adolescence the voice box, or larynx, grows in both sexes. This growth is far more prominent in boys. Before puberty, the larynx of boys and girls is about equally small. Most of the voice change happens during stage 3-4 of male puberty around the time of peak growth. Adult pitch is attained at an average age of 15 years, although the voice may not fully settle until early twenties. It usually precedes the development of significant facial hair by several months to years.

Male musculature and Body shape

By the end of puberty, adult men have heavier bones and nearly twice as much skeletal muscle. Some of the bone growth (e.g. shoulder width and jaw) is disproportionately greater, resulting in noticeably different male and female skeletal shapes.

This muscle develops mainly during the later stages of puberty and muscle growth can continue even after boys become adults biologically. The peak of the so-called “strength spurt”, the rate of muscle growth, is attained about one year after a male experiences his peak growth rate.

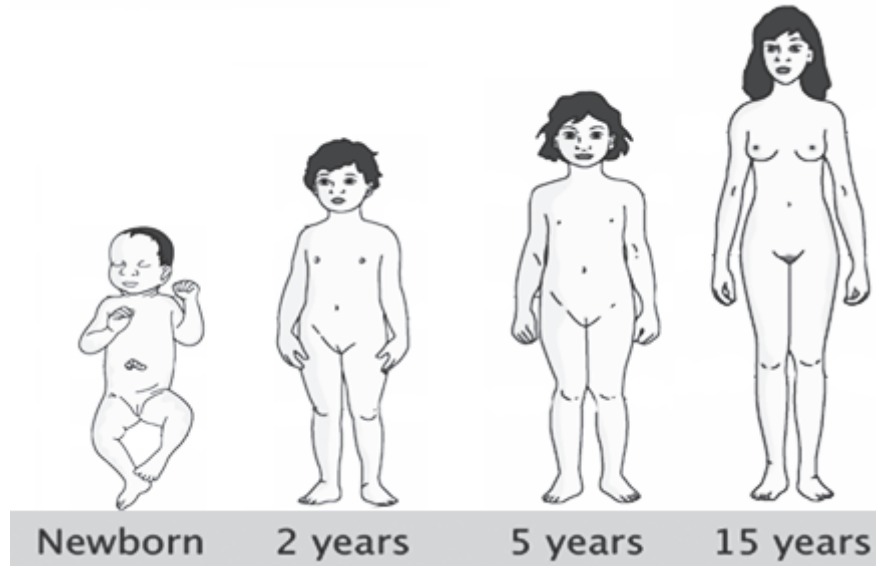
Often, the fat pads of the male breast tissue and the male nipples will develop during puberty.

Body odor

Rising levels of androgens can change the fatty acid composition of perspiration, resulting in a more “adult” body odor.



PUBERTY ONSET IN GIRLS:



Breast development

The first physical sign of puberty in girls is usually a firm, tender lump under the centre of the areola of one or both breasts, occurring on an average at about 10.5 years of age. This is referred to as “thelarche”. By the widely used Tanner staging of puberty, this is stage 2 of breast development (stage 1 is a flat, pre-pubertal breast). Within 6 to 12 months, the swelling has clearly begun on both sides, softened and can be felt and seen extending beyond the edges of the areola. This is stage 3 of breast development. By another 12 months (stage 4), the breasts are approaching mature size and shape with areola and nipples forming a secondary mound. In most young women, this mound disappears into the contour of the mature breast (stage 5), although there is so much variation in size and shape of adult breasts that stages 4 and 5 are not always separately identifiable.

Pubic Hair

Pubic hair is often the second noticeable change in puberty. The pubic hair is usually visible first along the labia. The first few hairs are described as stage 2. Stage 3 is usually reached within another 6–12 months, when the hairs are too numerous to count and appear on the pubic mound as well. By stage 4, the pubic hair densely fills the “pubic triangle.” Stage 5 refers to spread of pubic hair to the thighs and sometimes as abdominal upward towards the navel. In about 15% of girls, the earliest pubic hair appears before breast development begins.



Vagina, Uterus, Ovaries

Perineal skin keratinizes due to the effect of estrogens, increasing its resistance to infection. The mucosal surface of the vagina also changes in response to increasing levels of estrogens, becoming thicker and dull pink in colour (in contrast to the bright red of the pre pubertal vaginal mucosa). Mucosa changes into a multi-layered structure with superficial layer of squamous cells. Estrogens increases glycogen content in the vaginal epithelium, which in future plays an important part in maintaining vaginal pH. Whitish secretions are a normal effect of estrogens as well. In the two years following thelarche, the uterus, ovaries and the follicles in the ovaries increase in size.



Menstruation and Fertility

The first menstrual bleeding is referred to as menarche, and typically occurs about two years after thelarche. The time between menstrual periods (menses) is not always regular in the first two years after menarche. Ovulation is necessary for fertility, but may or may not accompany the earliest menses. In post menarche girls, about 80% of the cycles were an-ovulatory in the first year after menarche, 50% in the third year and 10% in the sixth year. Initiation of ovulation after menarche is not inevitable. A high proportion of girls with continued irregularity in the menstrual cycle several years from menarche will continue to have prolonged irregularity and an ovulation, and are at higher risk for reduced fertility.

Body shape, fat distribution, and body composition

During this period, in response to the rising levels of estrogens, the lower half of the pelvis and thus hips widen (providing a larger birth canal). Fat tissue increases to a greater percentage of the body composition than in males, especially in the typical female distribution of breasts, hips, buttocks, thighs, upper arms and pubis. Progressive differences in fat distribution as well as sex differences in local skeletal growth contribute to the typical female body shape by the end of puberty.



Body odour and Acne

Rising levels of androgens can change the fatty acid composition of sweat, resulting in a more “adult” body odour. At this time of the age there is increased secretion of oil from skin. As in girls, another androgen effect is increased secretion of oil (sebum) from the skin and the resultant variable amounts of acne. Acne cannot be prevented or diminished easily, but it fully diminishes at the end of puberty.

Apart from these physical changes, adolescence is also the **age of attraction and the age of compassion**. This is the phase of life when attachment for a friend or a person of opposite sex or same sex is felt and needed. It is natural to have special feelings for someone special. It is good to express feelings to the person one feels for, but it is also important to base these relations on mutual consent, trust, and commitment and respect. One should also be prepared to accept the other person’s decision to not be friends with dignity and decency.

Along with being aware and informed of the changes about self, adolescents should also be aware of their Rights and also what they are legally entitled to. This enables them to lead well-informed, empowered and safe adulthood.

Boys and girls should know that when the other person says “No” it means “No”. One should learn to respect the personal space. Feelings during these growing years change over time. Adolescents should try and understand one another and help each other pursue their educational and professional dreams.

While the leader has dealt in detail with the secondary sexual characteristics in both girls and boys during puberty helping the young ones also to understand how the changes in their body is a necessary phenomenon to attain “Adulthood”.



CHILD RIGHTS AND ENTITLEMENTS

What are Child Rights?

A right is as an agreement or contract established between the persons who hold a right (often referred to as the "rights-holders") and the persons or institutions which then have obligations and responsibilities in relation to the realization of that right (often referred to as the "duty-bearers".) Child Rights Child rights are specialized human rights that apply to all human beings below the age of 18. Child Rights

Universally child rights are defined by the United Nations and United Nations Convention on the Rights of the Child (UNCRC). According to the UNCRC Child Rights are minimum entitlements and freedoms that should be afforded to all persons below the age of 18 regardless of race, color, gender, language, religion, opinions, origins, wealth, birth status or ability and therefore apply to all people everywhere. The UN finds these rights interdependent and indivisible, meaning that a right cannot be fulfilled at the expense of another right.

The purpose of the UNCRC is to outline the basic human rights that should be afforded to children. There are four broad classifications of these rights. These four categories cover all civil, political, social, economic and cultural rights of every child.

- **Right to Survival:** *A child's right to survival begins before a child is born. According to Government of India, a child life begins after twenty weeks of conception. Hence the right to survival is inclusive of the child rights to be born, right to minimum standards of food, shelter and clothing, and the right to live with dignity.*
- **Right to Protection:** *A child has the right to be protected from neglect, exploitation and abuse at home, and elsewhere.*
- **Right to Participation:** *A child has a right to participate in any decision making that involves him/her directly or indirectly. There are varying degrees of participation as per the age and maturity of the child.*
- **Right to Development:** *Children have the right to all forms of development: Emotional, Mental and Physical. Emotional development is fulfilled by proper care and love of a support system, mental development through education and learning and physical development through recreation, play and nutrition.*



What is Child Protection?

UNICEF considers child protection as the prevention of or responding to the incidence of abuse, exploitation, violence and neglect of children. This includes commercial sexual exploitation, trafficking, child labour and harmful traditional practices, such as female genital mutilation/cutting and child marriage. Protection also allows children to have access to their other rights of survival, development, growth and participation. UNICEF maintains that when child protection fails or is absent children have a higher risk of death, poor physical and mental health, HIV/AIDS infection, educational problems, displacement, homelessness, vagrancy and poor parenting skills later in life.

Understanding the Difference between Child Rights and Child Protection

It is important to understand the difference between these two concepts. Child rights are a set of principles or ideals. They are entitlements and some of them are justifiable in a court of law, but they are not tangible. Protection is one of these rights. But Child Protection is more than a right. It is a framework or system by which the rights of a child can come to be. The framework consists of various duty bearers such as the departments of the government, police, school, civil society, who all have roles to play to ensure that a child's rights are met, and in the case that a child's rights are violated that the violator be brought to justice and care be provided to the child. Child protection is not only treatment, but should also be preventive. Risk management needs to take place to reduce the risk of violation of child rights in any given circumstance or space.

Child protection is hence the means through which all other rights of a child can be upheld. For example a child has a right to live a normal childhood in a family environment. The child protection framework need to first take steps to ensure families are able to survive by providing them when health, education, and food for free or at minimal cost. The next step is to address the needs of children who have fallen through the cracks such as destitute, abandoned, and orphan children. The framework includes the mechanisms to relocate these children into caring families either through adoption or foster care and provide these children with access to health and education services. Hence the framework is not a single ministry or single government body it is the interlinking functions of all ministries and sectors.



YOUTH RIGHTS

Children's rights cover all the rights that belongs to children, when they grow up they are granted with new rights (like voting, consent, driving, etc) and duties (criminal response, etc). There are different minimum limits of age at which youth are not free, independent or legally competent to take some decisions or actions, some of this rights that come with age are:

- Voting age,
- Age of candidacy,
- Age of consent,
- Age of criminal responsibility,
- Drinking age,
- Driving age,
- Legal working age,
- Right to work,
- Student rights



After youth reach these limits they are free to vote, have sexual intercourse, buy or consume alcohol beverages or to drive cars, etc.



Entitlements for Adolescents by Government of India

Midday Meal Program

- **Objectives:**

The primary objective of the scheme is to provide hot cooked meal to children of primary and upper primary classes with other objectives of improving nutritional status of children, encouraging poor children, belonging to disadvantaged sections, to attend school more regularly and help them concentrate on classroom activities, thereby increasing the enrollment, retention and attendance rates.

- **Beneficiaries:**

Provision for free lunch on working days for children in Primary and Upper Primary Classes in Government, Government Aided, Local Body, Education Guarantee Scheme (EGS) and Alternate Innovative Education (AIE) Centers, Madarsa and Maqtabas supported under **Sarva Shiksha Abhiyan** and **National Child Labour Project (NCLP)** Schools run by Ministry of Labour

- **Entitlements:**

Provision of cooked free meals including micro nutrients (Vitamin A and Iron-Folate) tablets and de-worming medicines.

Weekly Iron and Folic acid supplementation (WIFS)

- **Objectives:**

The Weekly Iron and Folic Acid Supplementation (WIFS) Programme has been launched to meet the challenge of high prevalence of anemia amongst adolescent girls and boys and break the intergenerational cycle of anemia

- **Beneficiaries:**

13 crores adolescents – 6 crore girls and boys enrolled in class VI-XII of government and government aided school and 7 crore out of school girls will be covered. Programme has been launched in 19 states namely Orissa, Tripura, Andhra Pradesh, Telangana, West Bengal, Maharashtra, Chandigarh, D&N Haveli, Uttarakhand, Haryana, Andaman Nicobar, Daman and Diu, Puducherry, Kerala, Mizoram, UP, Gujarat, Jharkhand, Himachal Pradesh and Arunachal Pradesh.



- **Entitlements:**

- i. Administration of supervised Weekly Iron Folic Acid Supplements of 100mg elemental iron and 500mg Folic acid.
- ii. Screening of target groups for moderate/severe anaemia and referring these cases to an appropriate health facility.
- iii. Biannual de-worming (Albendazole 400mg), six months apart, for control of helminthes infestation
- iv. Information and counseling for improving dietary intake and for taking actions for prevention of intestinal worm infestation.

Sarva Shiksha Abhiyan

Sarva Shiksha Abhiyan or **SSA**, is an Indian Government programme aimed at the universalization of elementary education "in a time bound manner", as mandated by the 86th Amendment to the constitution of India making free and compulsory education to children between the ages of 6 to 14 as a Fundamental rights.



- **Objectives**

- i. To provide useful and elementary education for all children in the 6-14 age group.
- i. To bridge social, regional and gender gaps with the active participation of community in the management of schools.
- ii. To allow children to learn about and master their natural environment in order to develop their potential both spiritually and materially.
- iii. To inculcate value-based learning this allows children an opportunity to work for each other's well being rather than to permit mere selfish pursuits
- iv. To realize the importance of Early Childhood Care and education and looks at the 0-14 age as a continuum.



Integrated Child Development Services (ICDS)

It is Indian Government welfare programme which provides food, preschool education, and primary health care to children less than 6 years of age and their mothers. These services are provided from *Anganwadi* centers established mainly in rural areas and staffed with frontline workers. In addition to fighting malnutrition and ill health, the programme is also intended to combat gender inequality by providing girls the same resources as boys.

• Objectives

- i. To raise the health and nutritional level of poor Indian children below 6 years of age.
- ii. To create a base for proper mental, physical and social development of children in India.
- iii. To reduce instances of mortality, malnutrition and school dropouts among Indian children.
- iv. To coordinate activities of policy formulation and implementation among all departments of various ministries involved in the different government programmes and schemes aimed at child development across India.
- v. To provide health and nutritional information and education to mothers of young children to enhance child rearing capabilities of mothers in the country of India.
- vi. To provide nutritional food to the mothers of young children & also at the time of pregnancy period.

The following services are sponsored under ICDS to help achieve its objectives:

1. Immunization
2. Supplementary nutrition
3. Health checkup
4. Referral services
5. Pre-school non formal education
6. Nutrition and Health information



Protection of Children from Sexual Offences Act (POCSO Act 2012)

- To deal with child sexual abuse cases, the Government has brought in a special law, namely, The Protection of Children from Sexual Offences (POCSO) Act, 2012. The Act has come into force with effect from 14th November, 2012 along with the Rules framed there under.
- The POCSO Act, 2012 is a comprehensive law to provide for the protection of children from the offences of sexual assault, sexual harassment and pornography, while safeguarding the interests of the child at every stage of the judicial process by incorporating child-friendly mechanisms for reporting, recording of evidence, investigation and speedy trial of offences through designated Special Courts.

Above mentioned and many other Schemes and Entitlements are provided by the Government of India, for a holistic and safe living of a girl and boy.



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Notes





Improving the Lives of Adolescents