

TAKE CONTROL ...  
**YOUR** Health,  
Rights,  
Lives !!!



Sexual and  
Reproductive  
Health and Rights  
**Manual**



AMPLIFYCHANGE



MAHILA SASHAKTIKARANDWARA  
GRAMIN NEPAL KO  
GARIBI NIWARAN

# INTRODUCTION

## Background:

The current population of Nepal is 29,819,877 as of February, 2019, based on the latest United Nations estimates. Of them, adolescents constitute 24% of the total population. Nepal has invested a significant amount of time and effort developing National level strategies to address adolescents needs that focus on Sexual and Reproductive Health Rights (SRHR) but has failed to follow through with strong Implementation and Action plans that are well funded that would result in positive outcomes. Despite Nepal making considerable progress in reproductive health outcomes in the past 20 years, specifically in advancing reproductive rights of adolescents, child bearing begins early and teenage pregnancies are highly prevalent.

Adolescent girls in Nepal face many sexual and reproductive health problems and challenges, amidst gender disparity and other discriminatory social norms in Nepali society. Thirteen out of hundred women in Nepal are married by age 15. About one in four women are already mothers or pregnant by age 18. Nearly half of married women have given birth by age 20. Yet most adolescents do not use contraceptives (77% of married adolescents aged 15-19) and have the highest unmet need for family planning (about 32%).<sup>1</sup> The adolescent fertility rate in Nepal is relatively high and the second highest, after Bangladesh, in the South-East Asia Region. The unmet need for contraception at more than 41% (largely for spacing methods) is highest in this age group as compared to other age groups in the reproductive span. It is concerning that 62 out of 100 women under 20 who had an abortion mentioned that delaying child bearing was one of the major reasons for undergoing abortion.

Another issue is gender-based violence (GBV). Nepal has a high incidence of gender-based violence. And while everyone, regardless of their sex, can be affected, women remain by large the main victims. In 2017, 149 people were killed as a result of GBV in Nepal. Of these victims, 140 were female, 75 of whom were killed because of domestic violence. However, such cases are generally unreported due to the stigma attached to GBV. In this bleak context, it was heartening to hear about an integrated platform that addresses GBV issues and has helped improve response and support to the victims. With assistance from the World Bank's State and Peacebuilding Fund (SPF), the government of Nepal has set up a helpline and a network of service providers for GBV victims. The National Women Commission (NWC), a government body that protects and promotes women rights and interests, has been at the forefront to address the problems of women who are victims of GBV.

Nepal has experienced a profound and impressive social change in just one generation with improvements in literacy, schooling, health and political participation. There has been a shift from a deeply hierarchical social order, where gender differences were supported by a combination of ritual, law, political economy and state, to one where the call for women's rights is widespread. However, a stereotypical representation of Nepali women persists. The prevalence of stereotypical representation of Nepali women is reflective of lack of space for their voices. As such, these actors offer very little space for women's own experiences,

<sup>1</sup> <http://www.worldometers.info/world-population/nepal-population/>

<sup>2</sup> <http://blogs.worldbank.org/endpovertyinsouthasia/addressing-gender-based-violence-nepal>

perceptions, aspirations and achievements, and Nepali women are automatically considered victims of unchanging patriarchy, in particular due to dominant Hindu religious and ritual order. This is most evident in the widespread representation of chhaupadi, dowry, gender and sexual violence and preference for male child, amongst others. The creation of a political space that allows women's voices to be heard is key to understanding the diversity of women's lives in Nepal .

Another Menstrual hygiene management (MHM) is a challenge in developing countries like Nepal. MHM is a subject that is taboo in Nepalese society, even among mothers and their girls. Lack of appropriate sanitary installations at homes, but also in schools, hospitals and public places makes it difficult for women to manage menstruation hygienically. During menstruation, a majority of girls (89%) also experienced some form of restrictions or exclusion. One extreme form of menstrual seclusion practice is called Chhaupadi, a common social tradition in the far and mid-western hills and mountains that requires menstruating women to leave home and live in a chhau goth (cowshed or hut). Menstrual restrictions and traditional beliefs vary by ethnicity; for example, Hindu ethnic groups such as Brahmin, Chhetri, and Newar, have more restrictions than Janajatis (ethnic Nepalis) . Nepal Government's National Sanitation and Hygiene Master Plan have identified and addressed the need of including MHM facilities in schools (gender-separated and gender-friendly toilets and incinerator) however this Master Plan has not yet been enforced. Not only social stigma and taboos related to menstruation are barriers for change in the communities and schools, but also water and sanitation facilities at some schools are insufficient inhibiting proper implementation of MHM in schools.

Education plays a vital role in empowering adolescents for acquiring knowledge and information, accessing services and practicing positive behaviors. Evidence suggests that it also has a critical role in improving sexual and reproductive health outcomes. Adolescents face higher barriers to access health care and information about fertility awareness, reproductive and reproductive health. They lack comprehensive information and access to wider choices of family planning methods and conversations about fertility, sexuality, reproductive decision-making, and family planning as these subjects are still considered taboo in Nepali culture.

## APEIRON and its focus

APEIRON is an Italian NGO established in 1996, it works for Gender, Equality and Social Inclusion (GESI). Its ultimate goal is women's empowerment. Apeiron began its operation in Nepal since 2004. Since then, Apeiron has been dedicated to needs-based projects across Nepal that empower women and reduce gender-based violence (GBV), understanding that this approach results in long-term impacts such as increased self-awareness, vocational skills, and equality in households. Apeiron registered itself as an NGO named Mahila Sashaktikarandwara Gramin Nepal ko Garibi Niwaran (APEIRON) in 2013. Currently, APEIRON has operations in 13 districts of Nepal.

Against this background, APEIRON has piloted a project **“The Change (Pariwartan)”; Preventing GBV through Awareness and Public Education project in Sindhuli with**

<sup>3</sup> <https://www.nepalitimes.com/uncategorized/stereotyping-women-as-victims/>

<sup>4</sup> 2017 Scoping review and Preliminary Mapping, Menstrual Health and Hygiene Management in



**support from** Amplify Change. This is a one year project that started since December 2018. The main objective of this project is “ increased individual awareness of SRHR as human rights with stronger/ more inclusive movements for SRHR”. This project covers Kamala Mai Municipality, Sindhuli. This project works with female and male members in group, community and school children for the awareness in Sexual Reproductive Health as human rights and gender based violence. Under this project, the project has developed this adolescent friendly Sexual Reproductive Health and Rights (SRHR) package

This manual aims to improve sexual and reproductive health and rights specifically focusing on young people, women and vulnerable groups in 6 schools in Sindhuli. The project aims to address knowledge gaps around SRHR, fertility and family planning methods, as well as the social and gender barriers that prevent open discussion of family planning and reproductive health.

Under this project, this manual has been developed as a toolkit that teaches adolescent boys and girls about sexual and reproductive health and rights. This package will empower the participants to start conversations about SRHR in their families and communities.

## Introduction to the Guide:

This document is developed as guide manual for undertaking School based sessions focusing on four key topics:

1. Sexual and reproductive health and rights
2. Gender based violence
3. Gender and Stereotypes
4. Menstrual Health Management

These sessions will be delivered by APEIRON community facilitators at 6 schools in Sindhuli. The facilitators that are to deliver this training will be capacitated through the Master Training of Trainers (MToT) by Apeiron. The facilitators shall be well versed and must have practiced on utilization of tools to be used for the school sessions. The sessions included here are based on evidence- and rights-based tools developed by Rutgers WPF, USAID, Save the Children.

**Table 1. Summary of the activities**

S.N	Activity	Time	Reference
<b>Session 1 : SRHR</b>			
1	Defining Sexual and Reproductive Health and Sexual and Reproductive Health and Rights- Pyramid Game	40 Mins	Rutgers WPF
2	Young People and Sexual Health (Facts and Myths)	20 Mins	Rutgers WPF
3	Son/Daughter Game	30 Mins	USAID Pragati
4	Hopscotch Game	30 Mins	USAID Pragati
<b>Session 2: SRHR</b>			
1	Family Planning Method Matching Game	60 Mins	USAID Pragati
2	Unplanned Pregnancy , Gender and Choices	60 Mins	IPPF
<b>Session 3: SRHR</b>			
1	Rights Exercise	60 Mins	IPPF
2	Do the Right Thing- STDs	30 Mins	Rutgers WPF
3	STDs True or False	30 Mins	Rutgers WPF
<b>Session 4: Gender Stereotypes</b>			
1	Gender and Sex	30 Mins	Youth4Youth
2	It's a boy/girl thing	30 Mins	Youth4Youth
3	Gender in a box	60 Mins	Youth4Youth
<b>Session 5: Gender Stereotypes</b>			
1	Power/Status and Rights	60 Mins	Amnesty International
2	Gender Swap Videos	60 Mins	UNDP/ The Kathmandu Post



S.N	Activity	Time	Reference
<b>Session 6: Gender Based Violence</b>			
1	Growing Up Boy/Girl	30 Mins	Restless Development
2	Power, privilege	30 Mins	Restless Development
3	Types of GBV	30 Mins	Amnesty International
4	Case Study	30 Mins	Amnesty International
<b>Session 7: Gender Based Violence</b>			
1	Consequences	60 Mins	GBV Manual Government of Rwanda
2	Pathways to Justice	60 Mins	Amnesty International
<b>Session 8: Gender Based Violence</b>			
1	The Laws	60 Mins	Restless Development
2	Video	60 Mins	Save the Children
<b>Session 9: MHM</b>			
1	Snakes and Ladders Game	60 Mins	USAID Splash
2	Quiz	60 Mins	USAID Splash
<b>Session 10: MHM</b>			
1	Menstrupedia Video	60 Mins	Mesntrupedia
2	Match Game	60 Mins	USAID Splash
<b>Session 11: MHM</b>			
1	Menstrual Cycle Game	60 Mins	USAID Pragati
2	Role Play	60 Mins	USAID Splash
<b>Session 12: MHM</b>			
1	Action Plan	60 Mins	USAID Splash
1	Myths and Facts	60 Mins	UNFPA Khulduli

# Chapter 1 : Sexual and Reproductive Health and Rights

## Introduction :

Sexual and reproductive health and rights (SRHR) incorporates the rights of all people, regardless of age, gender and other characteristics, to make choices regarding their own sexuality and reproduction, provided that their rights do not infringe on the rights of others. Thus, it promotes reproductive decision-making; freedom from forced abortion; access to information and appropriate reproductive education; freedom from harmful traditional practices and gender based violence and freedom to express one's sexuality. Sexual and reproductive health and rights in a patriarchal society like Nepal is surrounded by taboo. The main traditional message shared by a traditional Nepalese society is that sexuality is something for heterosexual married adults, dominated by males, to be practiced within marriage and meant for reproduction. Based on this bias, young people are often limited to abstinence messages which do not acknowledge the practical reality and the right to choices of young people to practice and enjoy sexuality whenever they are ready for it.

Young people are in need of comprehensive sexuality and reproductive health education, not only to fight problems such as teenage pregnancies, sexually transmitted diseases and unsafe abortions but also to meet their real needs and rights to complete information and to have a satisfying and safe sexual practices whenever that will start.

This session on SRHR for young people will make participants familiar on defining SRH and SRHR, key policies in reproductive and sexual health and rights, status of SRHR in Nepal and roles that young people can play to address SRHR.

## Session 1: SRHR

### Activity 1: Defining SRH and SRHR (Expected time 40 Mins)

**Preparation:** 3 papers (half A4) and one marker per person, WHO definition of Reproductive Health and Sexual Health (either printed out or written on flip chart, but not shown to participants until the end of the session).

#### Objective:

- Define Sexual and Reproductive Health and Rights

#### Instructions

1. Give each participant three papers (half A4 format) and a marker. Do not explain the purpose of the exercise yet. Let the participants think they have leisure time and try to get in a relaxed and informal mood.



2. Ask participants to individually write spontaneously in capitals one word per paper, that pops into their minds when they hear the term SRH without (too much) thinking.

3. Form a circle with participants, in which SRH will commonly be defined by clustering participants' papers on the ground in the form of a pyramid. Appoint the place at the ground which represents the top (here fit spiritual, philosophic, abstract terms like health, rights, love etc) and which place represents the more concrete basis (where words in related order will be laid down like STIs, pregnancy, safe sex, et cetera).

4. Invite one participant who would like to share as first his/her thought with the group. This person lays one of his/her papers down on the ground and explains why this word relates to SRH.

Participants can pose clarifying questions:

- What do you mean with this word and how does it relate to SRH according to you?
- Is it a gender difference or a practice?
- What kind of practice? (etc)

5. Start a group discussion. Discuss and arrange with the participants the exact place of the paper in the imaginary pyramid.

6. Invite participants to join papers with a similar or same word. Be critical about this similarity and ask them about the similarity.

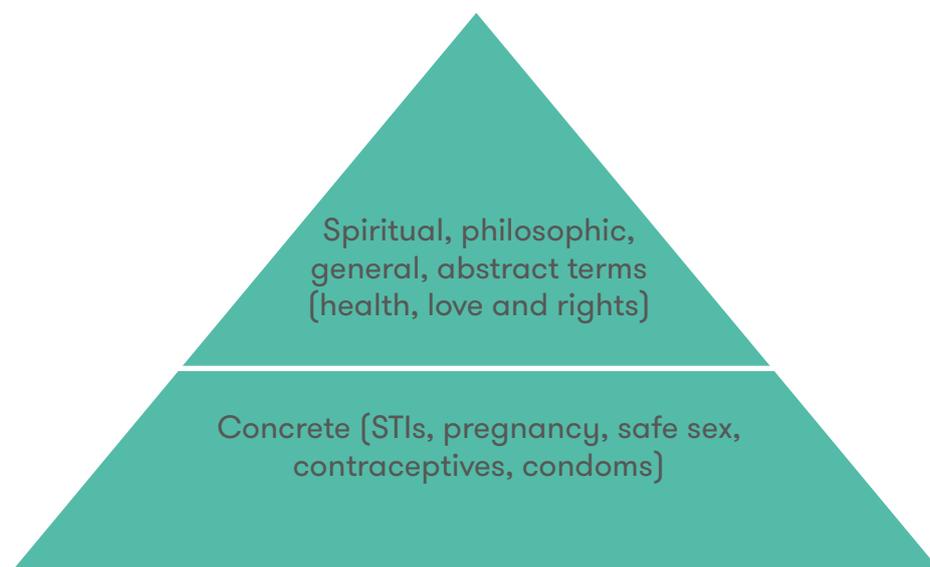
7. Invite a new participant to share his/her view with a new aspect of SRH and repeat the procedure of explaining, clarifying questions, defining the exact place and joining with similar words. Cluster the different words/aspects of SRH and arrange them during the procedure with participants (as displayed in figure 1).

8. Discuss the overall pictures as a definition of SRH and look at important or missing aspects like relationships, interaction, intimacy, love, gender, pleasure, excitement, et cetera. Consider with participants together if there are differences in the input of both genders. Conclude with participants together on their own definition by making an overall summary of the different aspects of SRH, brought forwards by participants themselves.

9. End the exercise with comparing participants' definition with the definition of WHO on reproductive health and the draft definition on sexual health; use the PowerPoint slides on Defining Sexual Reproductive Health.

The World Health Organization defines sexual health as: "**Sexual health** is a state of physical, mental and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. "**Reproductive health**" is a state of complete physical, mental and social well-being, and not merely the absence of reproductive disease or infirmity. Reproductive health deals with the reproductive processes, functions and system at all stages of life. "**Sexual and reproductive health and rights or SRHR** " is the concept of human rights applied to sexuality and reproduction. It is a combination of four fields that in some contexts are more or less distinct from each other, but less so or not at all in other contexts. These four fields are sexual health, sexual rights, reproductive health and reproductive rights. In the concept of SRHR, these four fields are treated as separate but inherently intertwined.

10. Conclude on a final definition to be further used in the training and in the development and implementation of sexuality education, so also used for young people without skipping the aspects such as rights, gender and pleasure.



**Figure 1: SRH pyramid**



## Activity 2: Young people and Sexual Health (Facts and Myths – (Expected Time 20 Minutes))

**Preparation:** Statements on Young People and Sexual Health on flip char, paper or PowerPoint

### Objectives

- Explore different norms, values, and opinions regarding young people and sexual health
- List the differences between opinions and facts
- Discuss sensitive issues related to sexuality

### Instructions

- 1) Introduce the exercise and explain:

### Norms and opinions on young people and sexual health

- We all have grown up with norms, values and opinions on life issues, especially when it comes down to young people and sexual health. As time flows, life issues change and cultural norms need to be adapted. Opinions can be rooted traditionally or can be adapted to today's young people. Remember that opinions are never wrong or right. However, they can be reasoned by people, based on incorrect information and not on evidence.
- Evidence and facts can never be wrong or right. It is important to make the distinction between norms/ values/opinions at one hand and facts at the other hand.
- Norms/values/opinions should be based on facts and evidence. Talking about young people and sexual health might be a sensitive issue for most people.
- An important step in talking openly about sexuality is to analyse our own norms and opinions on sexual behaviour: Where do they come from? What we perceive as socially accepted sexual behaviours influenced, for example by:
  - ✓ Health – Is the behaviour healthy (does evidence exist?), seen from the perspective of the individual (and his partner)?
  - ✓ Rights – Is the behaviour in line with the human rights?
  - ✓ Cultural/Societal/Religious norms – Is the behaviour in line with social norms (religion, society, culture)?
  - ✓ Law – Is the behaviour in line with the law?

- 2) Define three corners in the training room; one is the corner “AGREE”, one is “DISAGREE” and the third one is “I DOUBT or DON’T KNOW’. Tell participants that you will read statements about young people and sexual health one by one and that they should choose after each statement read out, to go standing in the corner that is most fitting with their opinion about the statement which has been read out.
- 3) Share the first statement (see below) on the flip chard, paper or PowerPoint with the participants and read it out loud.
- 4) Ask participants to choose to go standing in the corner that is most fitting with their opinion. When all participants have chosen a corner, then ask them to convince participants standing in the other two corners, to join them in their own corner by using as valid as possible arguments. The statements about young people and sexual health are:
  - It is OK for young people to experiment with sexuality and their sexual feelings.
  - Masturbation is unhealthy.
  - Premarital sex is so common that we should accept it as healthy.
  - Sexuality has a different meaning for men and women.
  - Homosexuality is a disease or mental disorder.
  - It is ok to have sex without protection
  - It is ok to have multiple sex partners
  - It is ok to drink and try drugs if I am sad
- 5) Summarize after each statement the way how participants think about it and which facts and evidence are supportive to the differences in opinions.
- 6) Facilitator’s Notes: Guide the debate in a way that everybody speaks only one by one and that everybody listen to each other. Correct arguments which are based on misconceptions or myths and give, if needed, facts and evidence.

### Activity 3: Son/Daughter Game (30 Minutes)

#### Preparation:

Seed game cards (Sperm and Ovum cards), 20 or 30 small seeds, beads, or small paper balls of the same size in two different colors (example: green and yellow)

#### Objective:

To show how a baby’s sex is determined by the man’s sperm, even though the man and woman both contribute to a pregnancy.



## Introduction:

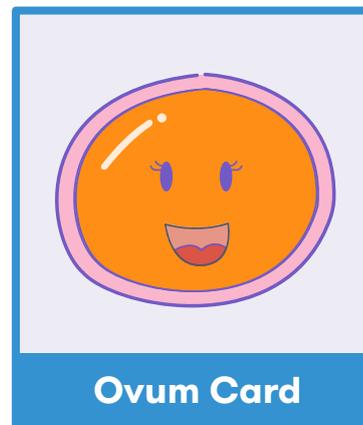
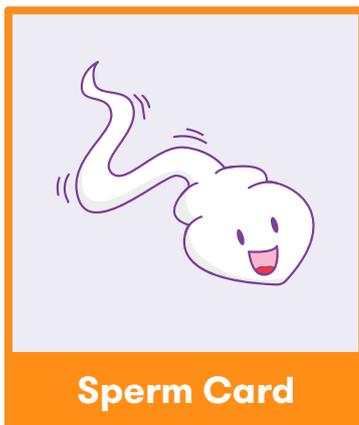
- 1) Today we are going to focus on an important issue in the community - having a girl or boy, and what we expect and want related to having children. We are going to play a game which shows us that the sperm of the man determines the sex of the child.

## Discuss:

- What happens if a family has sons and no daughters?
- What happens if a family has daughters and no sons?
- Why do you think the reaction is different?
- What kinds of challenges do women and men face when they have no children?

## 2) How to Play:

- Gather participants in the center of the room. Explain that this game will show how a baby becomes male or female.
- Hold up the sperm card (Red) and the ovum card (Blue)



- Tell participants that in order to make a baby; the sperm from the man has to meet the ovum, or egg, from the woman, inside the woman's womb.
- Hold up the ovum card and tell participants that the ovum from the woman can only be female.
- Hold up the card (example: yellow) and say that this represents the female egg.
- Hold up the sperm card and tell participants that the sperm from the

man can be female or male.

- Divide participants in half and have them stand in two lines facing each other. If the group is mixed and if it is possible, it is most clear if men and women represent their own sex. Either way, one half of the participants are representing women while the other half is representing men.
- Explain that the “women” has two seeds of the same color because women only produce “female” seeds. The “men” have two different seeds because men produce sperm, which can be male or female.
- Give all the “women” 2 yellow seeds. Give all the “men” 1 yellow seed and 1 green seed.
- Have the “women” stand in one line and hold one seed in each hand behind their backs. Tell the “men” also to stand in another line facing the “women” and hold one seed in each hand behind their backs, so that they don’t know which seed is in which hand.
- Ask the “woman” and “man” at the front of the line to demonstrate:
  - First, ask both the “woman” and the “man” what sex of baby they want, a boy or a girl.
  - Then the “man” without looking at the seed he has, should give one seed to the woman.
  - The woman should hold the seeds so that all people can see them.
  - If the two seeds match, the baby will be a girl. If they are different, it will be a boy.
- Go down the line and have each “couple” that is facing each other “make a baby” by asking the “man” to give one seed to the “woman” without looking at the seed color. The “woman” should now have two seeds. Once all of the couples have made their baby, ask them to come back to the center of the room.
- Using cards, explain that while women and men both contribute to the sex of the baby, it is the man’s sperm that determines whether the baby will be a boy or a girl. Ask the “men” if they knew which seed they were contributing: explain that because each sperm can be either male or female, no one can control or know which the baby will be.

### 3) Discuss:

- Earlier we discussed how some women are treated poorly when they don’t have sons.



#### 4) Take Away Message:

What is one thing you learned today that you would share with a friend or family member?

The sex of the baby is determined by the sperm of the man, which can be male or female. Women's eggs are all female.

#### Activity 4: Hopscotch Game (30 Minutes)

##### Preparation:

Chalk or something to mark the ground where you are playing. A small pebble or stone. (Outdoors preferred)

##### Objectives:

To discuss how women and men make decisions about their health and family planning and how these decisions may change throughout different times in their lives.

##### Instructions:

- 1) **Introduction:** Today we are going to play a hopscotch game to begin discussing choices people make in their lives around when to get married, and whether or when to have their first child.
- 2) **How to Play:** Draw a series of 10 boxes on the ground in a line, with boxes next to each other, like this:

##### Statements to be called out

- Learn about sex and reproduction
- Learn about family planning methods
- Start using family planning
- Start a job
- A girl learns about menstruation
- A boy learns about menstruation
- Develop an interest in romantic relationships
- Leave school
- Get married
- Have first child

1 - 5	6 - 10	11 - 14	15 - 19	20 - 25	26 - 35	36+
		11 - 14		20 - 25		36+

- 3) Write numbers in each box with the following age ranges as shown above. Boxes that are next to each other should have the same age in them.
- 4) Explain to participants that each box represents an age range in a person's life and that we will use the hopscotch game to discuss important life choices. Tell participants that you will call out a common life event, and that they should place the stone into the box **they think** represents the age at which that life event should happen. They should then hop, from zero, across the boxes to where the stone has landed.
- 5) After the participant places the stone and hops to the box, ask:
  - Why do you think this is the right age for this event?  
Is it the same age for boys and girls? Why?
  - Do you think this is the age people in your community think is the right age? Why is it the same or different from what you think?
  - Does anyone else here feel differently? Why?
- 6) As each participant comes up for a turn, call out a different common life event from the list below. The person will follow the same steps: place the stone, hop to the square, and answer the same questions. You should feel free to choose the events that are most interesting to you or your community. Continue until everyone has had a turn, or until 15 - 20 minutes have passed.

### Additional Discussion if there is interest and time:

- Are life events like pregnancy something people can always control? What kinds of things determine when these things happen?
- Would anyone like to share their experience with planning for when to have children or how many children to have?



## Take Away Messages:

- What is one thing you learned today that you would share with a friend or family member?
- A person's choice whether to use family planning and which method to use will be influenced by their age and when or if they want to have children.
- Delaying a first birth has many benefits for women, couples, and families.
- Young people need reproductive health and family planning information in order to choose when they want to get pregnant.

## Session 2: SRHR

### Activity 1 – Family Planning Method: Method Matching Memory (60 Mins)

**Preparation:** Methods Cards – ,Two sets

#### Objectives

- To learn about and become comfortable discussing various methods of family planning that are available in Nepal.

#### Instructions

**1) Introduction: Introduce the game to the participants as below:**

Today we are going to learn about different kinds of family planning methods and when to start as well as how fertility returns. Different methods work for different people.

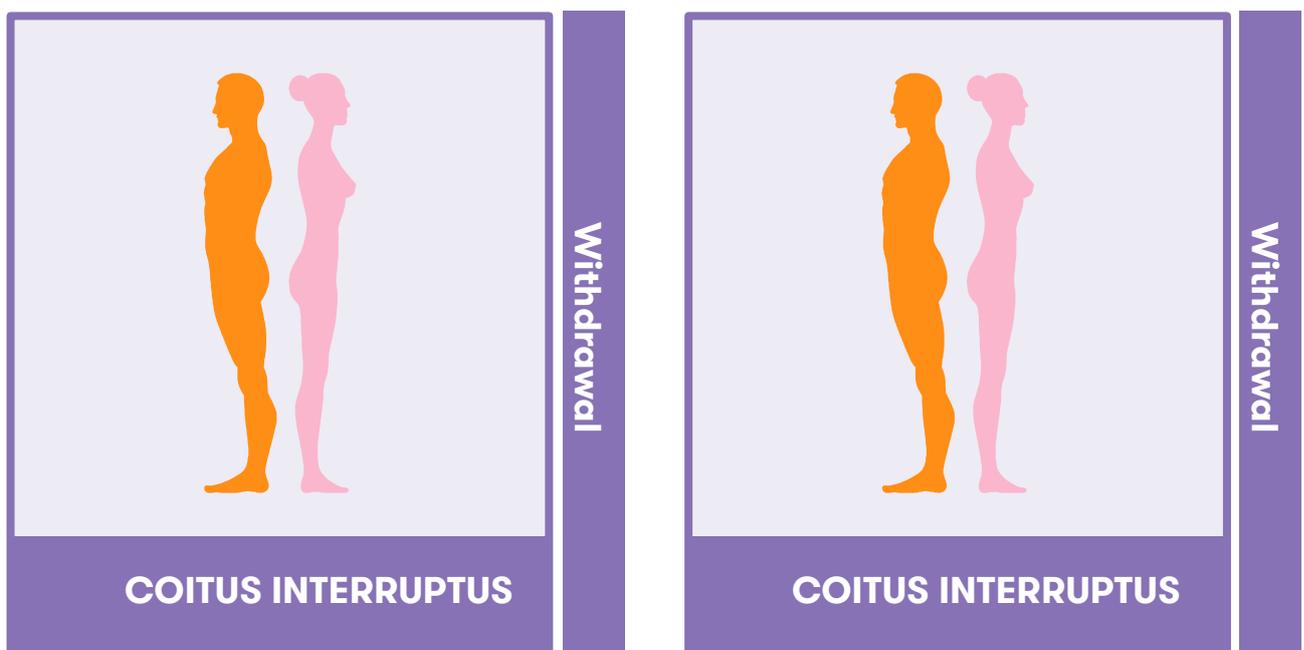
- 2) Mix together the two sets of method cards.
- 3) Have participants sit or stand in a circle. Spread the cards out with the family planning images facing down on the ground.
- 4) Have participants take turns. The first participant should turn over one card and name the family planning method. (Hint: The name of each method is written on the card)
- 5) Once this person has named the family planning method, they should



share one thing they know about the method or read the information on the card to the group. If they cannot read then get help from someone else. (Hint: There are some basic facts about the methods included on the cards for participants who are unfamiliar with any of the methods pictured.)

- 6) Once the participant has named the family planning method and shared a fact, they may turn over another card from the ground to see if it “matches.” If the cards match, they have “won” their turn. If the cards do not match, they should turn both back over and return to their place in the circle or sit where they were, and another participant should take their turn.
- 7) Each time a participant “wins” by matching their new card with one of the face up cards a pair of cards with the same method, leave the matched cards face up. Keep playing the game, with participants taking turns one by one, until all nine methods have been matched and discussed.
- 8) After the game, discuss: What would make it easier or harder for people in your community to use a family planning method?
- 9) Next Steps: What is one thing that you learned today that you would share with a friend or family member?

## Game Cards





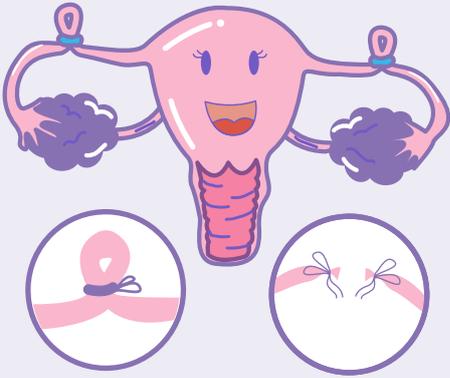
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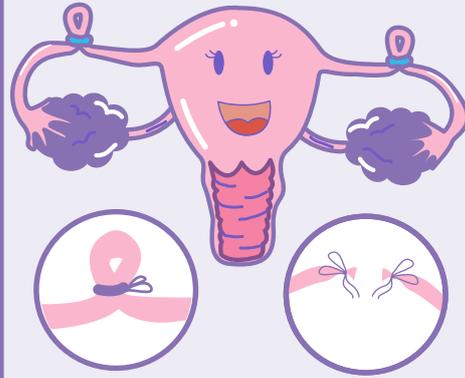
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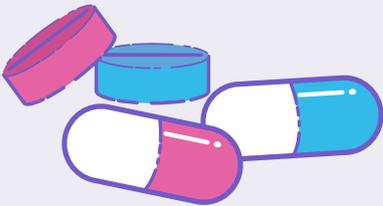
FEMALE STERILISATION

STERILIZATION



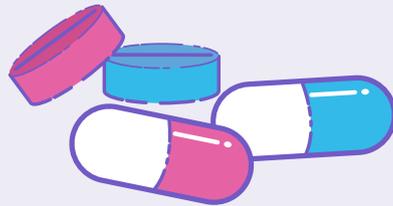
FEMALE STERILISATION

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CONTRACEPTIVE PILLS

CONTRACEPTIVE PILLS



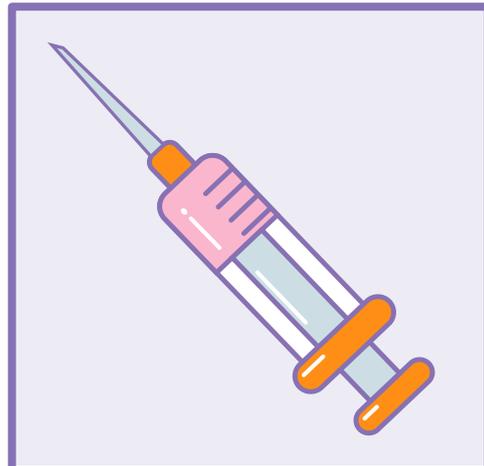
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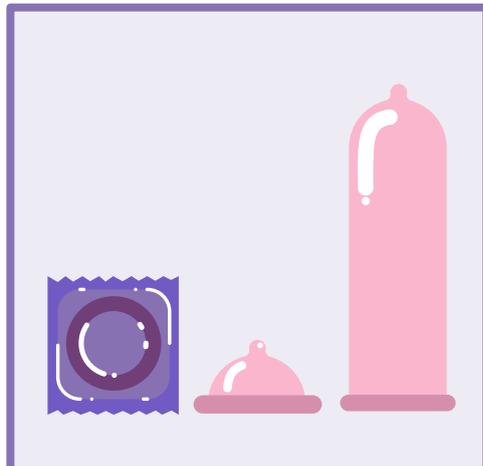
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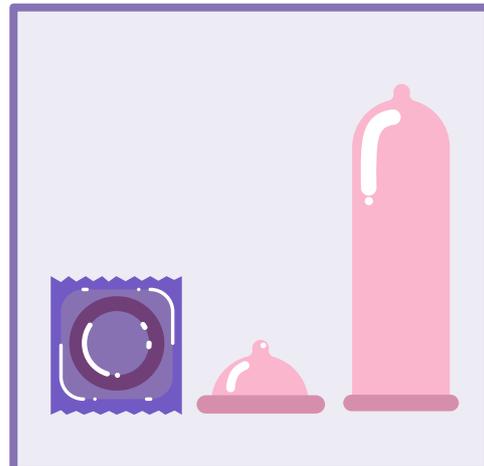
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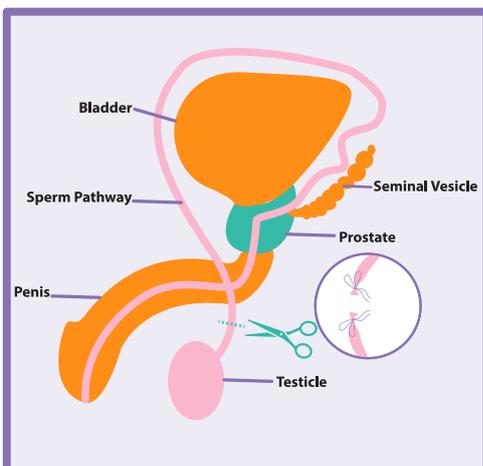
**MALE CONDOMS**

**CONDOMS**



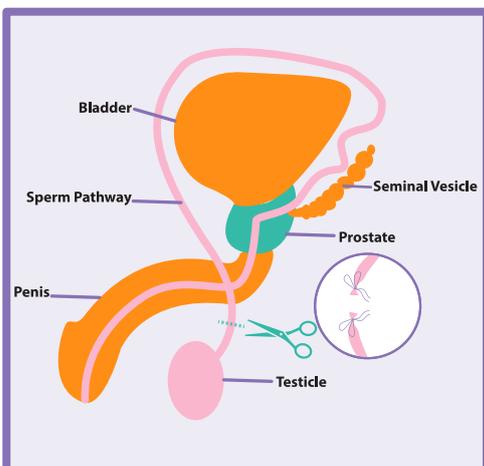
**MALE CONDOMS**

**CONDOMS**



**MALE  
STERILISATION-VASECTOMY**

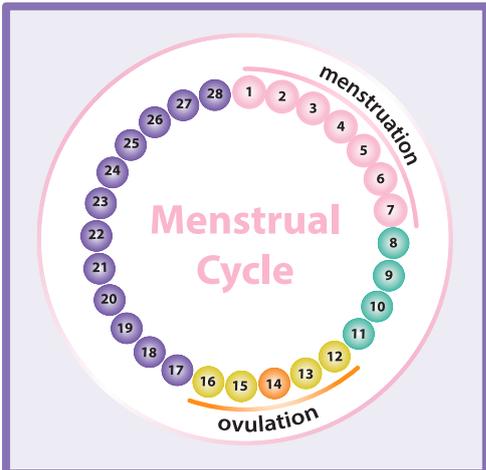
**MALE  
STERILISATION-VASECTOMY**



**MALE  
STERILISATION-VASECTOMY**

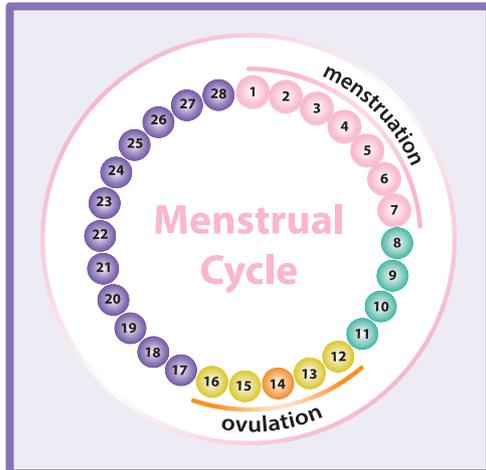
**MALE  
STERILISATION-VASECTOMY**





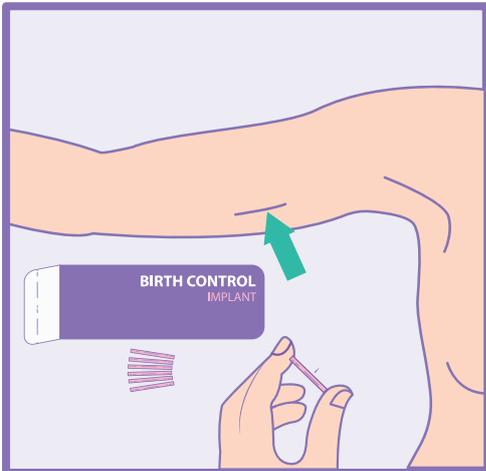
RHYTHM

RHYTHM



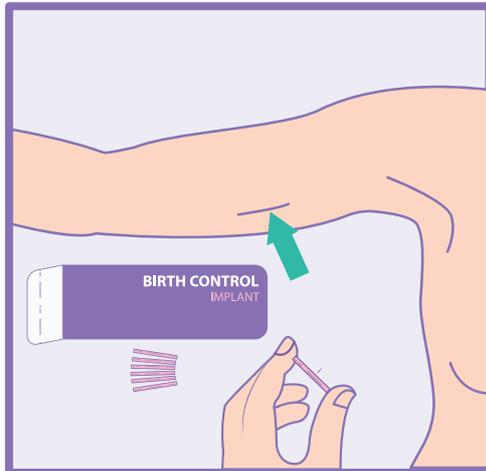
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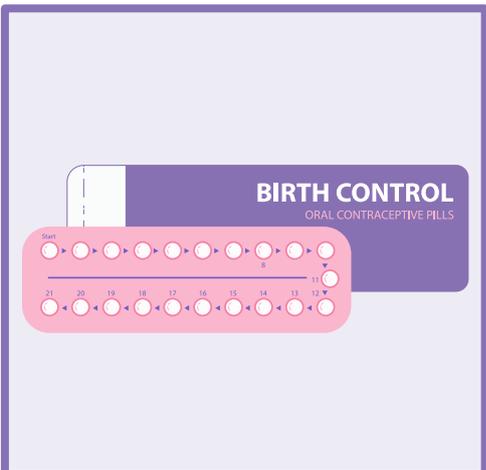
NORPLANT-IMPLANT

NORPLANT-IMPLANT



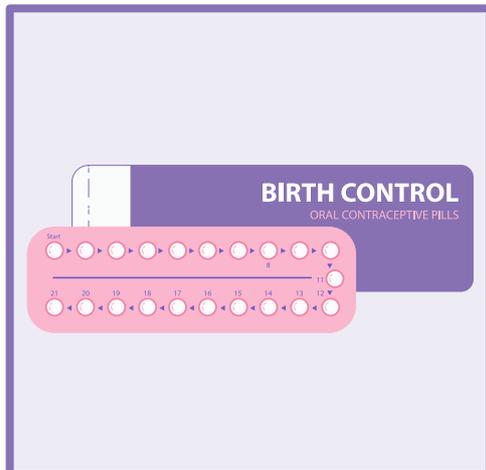
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EMERGENCY CONTRACEPTION

EMERGENCY CONTRACEPTION



EMERGENCY CONTRACEPTION

EMERGENCY CONTRACEPTION



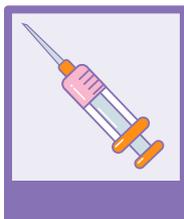


## Temporary Contraception

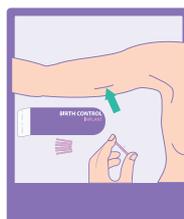
**Hormonal contraceptive methods** include oral contraceptives pills, injectables, and implants. They all prevent pregnancy mainly by stopping a woman's ovaries from releasing eggs. Hormonal methods contain either one or two female sex hormones that are similar to the hormones naturally produced by a woman's body.



**Oral contraceptive** pills should be taken one pill every day. They are most effective when no pills are missed, the pill is taken at the same time every day, and each new pack of pills is started without a delay.



**Injectable contraceptives** contraceptives are given by injection into a woman's arm or buttocks once every 1, 2, or 3 months, depending on the type of injectable. Injectables are most effective when women remember to come back for re-injection on time.

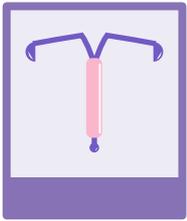


**Contraceptive implants** are inserted under the skin of a woman's upper arm and provide continuous, highly effective pregnancy protection for 3 to 5 years, depending on the type of implant. When this time is over, new implants can be inserted during the same visit that the old set is removed.





**Emergency contraceptive pills (ECPs)** can help prevent pregnancy if taken within 5 days after unprotected sex. The sooner they are taken, the more effective they are. They are NOT meant to be used for ongoing contraception, in place of a regular method. removed

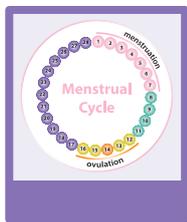


**Intrauterine contraceptive devices (IUDs or IUCDs)** are small, flexible plastic devices that are inserted into the woman's uterus. The most common IUDs contain copper, and they work by preventing sperm from reaching an egg. Depending on the type, IUDs can provide protection for 5 to 12 years.



**Barrier methods** are either devices (male and female condoms) that physically block sperm from reaching an egg, or chemicals (spermicides) that kill or damage the sperm in the vagina. The effectiveness of barrier methods greatly depends on people's ability to use them correctly every time they have sex.

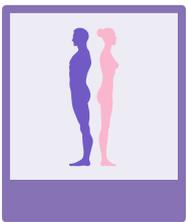
## Natural Methods:



**Fertility awareness methods** require a couple to know the fertile days of the woman's menstrual cycle — the days when pregnancy is most likely to occur. Ovulation happens when your ovaries release an egg. Ovulation happens about 14 days before your period starts. If your average menstrual cycle is 28 days, you ovulate around day 14, and your most fertile days are days 12, 13 and 14. If your average menstrual cycle is 35 days ovulation happens around day 21 and your most fertile days are days 19, 20 and 21.

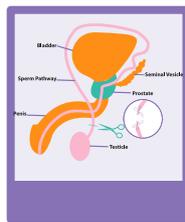
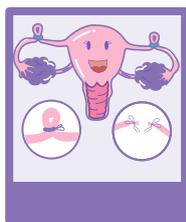


**Breastfeeding** provides contraceptive protection for the first 6 months after delivery if certain conditions are met. This approach is called the Lactational Amenorrhea Method or LAM.



**Withdrawal** involves a man withdrawing his penis during sex and releasing his ejaculate, which contains sperm, outside the woman's vagina. For most people withdrawal is one of the least effective contraceptive methods.

## Permanent Methods



**Female and male sterilization** are permanent methods of contraception. Sterilization involves a relatively simple surgical procedure that provides life-long protection against pregnancy. Sterilization is appropriate for men and women who are certain they do not want more children.

METHOD EFFECTIVENESS

TYPE OF METHOD					
	<b>Best</b>	Implants	IUD	Female Sterilization	Vasectomy
	<b>Better</b>	Injectables	LAM	Pills	
	<b>Good</b>	Male Condoms	Female Condom	Fertility Awareness Methods	
	<b>Least</b>	Withdrawal	Spermicides		

## Activity 2: Why did this happen? Unplanned pregnancy, gender and choices. (Time: 60 Minutes)

**Preparation:** Handouts with numbered figures on them

### Objective:

- To explore the choices and decisions that could lead to and result from an unplanned pregnancy
- To consider our own and others' attitudes to sex and gender
- To think about how other people's views may influence our decisions, and the importance of autonomy for the pregnant person in making their own decision
- To learn to consider perspectives other than our own and to understand some of the different factors which can contribute to unintended pregnancy
- To review symptoms of pregnancy, pregnancy tests and contraception experience



## Instructions:

- 1) Divide participants into six small groups and give out one of the numbered outline figure handouts:  
**Handouts 1 & 2: His 15 year old girlfriend is pregnant**
- 2) Ask them the following questions
  - What do you think of him/her?
    - Do most people have the same attitudes to the boy and girl?
    - If not, why do they seem different?
  - How does he/she feel?
    - What might she be worried about?
    - What is he worried about?
    - Do you think they will feel the same about the pregnancy?
    - What happens if they feel differently about it?
    - Who could they talk to about their feelings?
- 3) **Handout 3: She is 15 and pregnant**
  - How did this happen?
  - What contraceptives give the best protection against pregnancy? Against STIs?
  - What can go wrong with condoms? What can affect how well the pill works?
  - Where could she go to get advice?
  - How does she know she is pregnant? What are the symptoms?
  - Can these symptoms be caused by anything else?
  - Is it possible for someone not to have any symptoms and still be pregnant?
  - Where could she get a pregnancy test?
  - If she is under 18 years of age, will the doctor/pharmacist require her parents' permission?
- 4) **Handout 4: His 15 year old girlfriend is pregnant**
  - What are their options?
  - Continuing the pregnancy and becoming a parent, or adoption, or abortion.
  - How can he support her?
  - How might her parents/family react to the news?
  - If she did not feel supported by her partner or her parents, where else could she go for help and advice?

- 5) **Handout 5: She is 15 and pregnant**
- Why may they decide to become parents?
  - Does their age affect their ability to be parents?
  - What sort of things would make it easier to be parents?
  - If she wanted to continue the pregnancy and he didn't, how would this affect their relationship?
  - Why may they decide to place the baby for adoption?
  - Is adoption a popular option?
  - What are the pros and cons of adoption?
- 6) **Handout 6: She is 15 and pregnant**
- Why may she decide to have an abortion?
  - Do you think that she should do what other people want?
  - Why is it important to make her own decision?
  - How do you think she will feel after the abortion?
  - Will the abortion affect her health in any way?
  - Why may he want her to have an abortion?
  - What does the law say about his role in the decision?
  - Do you think it is important to take his view into account?

### Handout 1.

His 15 year old girlfriend is pregnant

- A. **What do you think of him?**
- B. **How does he feel?**



### Handout 2.

She's 15 and pregnant

- A. **What do you think of her?**
- B. **How does she feel?**



### Handout 3.

She's 15 and pregnant

- A. How did this happen?
- B. How does she know she's pregnant?



### Handout 4.

His 15 year old girlfriend is pregnant

- A. What are their options?
- B. How can he support her?



### Handout 5.

She's 15 and pregnant

- A. What are their options?
- B. Why may they decide to place the baby for adoption?



### Handout 6.

She's 15 and pregnant

- A. Why may she decide to have an abortion?
- B. Why may he want her to have an abortion?



## Session 3: SRHR

### Activity 1: Rights Exercise (60 Minutes)

**Preparation:** Cut out of basic rights, postit notes, Meena's case study, flipchart paper.

#### Objective:

- To identify basic human, sexual and reproductive rights
- To describe possible consequences when person's human, sexual and reproductive rights are violated

#### Instructions:

##### To prepare:

- Cut out of Basic Rights one per participant
- Adapt Meena's case study handout to your local context, if necessary, and create a version to photocopy for participants which doesn't have the rights shown.

### Meena's case study (with rights shown)

My name is Meena, and I am a 17-year-old woman. I have worked in a factory for over a year. It is hard work, and I earn a very small salary, far below the national standard. (Right to fair and equitable income, freedom from discrimination). I send most of what I earn to my family, who live in a rural area. I can read and write a little, but I did not go to school very long because my parents could not afford the fees for both my brother and me, and so he went. (Rights to information and education, and freedom from discrimination).

I did not receive any information about sexual and reproductive health issues at home or school. (Right to information and education). During my first month at the factory, one of the supervisors pressured me to have sex with him. (Right to security of person). He did not use a condom or any other protection. He told me to wash afterwards, so I would not get pregnant, and not to tell anyone. (Right to information and education). Because no one talks about such things, I never told anyone. Luckily I did not get pregnant.

My parents want to arrange my marriage to a boy from a neighboring village soon, and they want me to stay pure for him. (Right to decide if, when and with whom to marry). Not too long ago I met a boy in the factory. He treated me nicely and asked



me if I wanted to go out with him. We started going out, and after a while, we started having sex. When we could get them, we used condoms. But it was hard to get condoms, (Rights to health care and benefits of scientific progress) and sometimes when we had a condom, we put it on late, after already starting to have sex. (Right to information and education).

Last month I missed my bleeding. My breasts became tender and a little bigger. I wasn't sure if I was pregnant, but I knew that I could not have a child. My manager would make me leave my job at the factory if he found out. (Right to freedom from discrimination). I could never travel home because it would bring such shame on my parents and I could no longer be married. (Right to decide if, when and with whom to marry).

I heard of a lady who helps young women with these situations. She charges less money than the health clinic, and I wouldn't risk being seen by someone who knows me, so I went to her. She inserted something deep inside of me. It hurt a lot and there was a lot of blood. (Right to healthcare and benefits of scientific progress). All night I felt very weak and was in a lot of pain. My friend found me dead the next morning (Rights to life, and right to decide if, when and with whom to have a child).

## List of Rights

1. Right to live with dignity (Article 16)
2. Right to freedom (17)
3. Right to equality (18)
4. Right to communication (19)
5. Right to justice (20)
6. Right of a victim of a crime (21)
7. Right against torment (22)
8. Right against preventive confinement (23)
9. Right against untouchability and discrimination (24)
10. Right to property (25)
11. Right to religious freedom (26)
12. Right to information (27)
13. Right to privacy (28)
14. Right against exploitation (29)
15. Right to clean environment (30)
16. Right to education (31)
17. Right to language and culture (32)
18. Right to employment (33)
19. Right to labour (34)
20. Right to health (35)
21. Right to food (36)

22. Right to shelter (37)
23. Right of women (38)
24. Right of children (39)
25. Right of dalit (40)
26. Right of senior citizen (41)
27. Right to social justice (42)
28. Right to social security (43)
29. Right of consumer (44)
30. Right against banishment (45)
31. Right to constitutional remedies (46)

## Activity 2: Do the Right Thing (30 Mins)

STIs have been conventionally recognized as a major public and social health problem for a number of years. STIs remain one of the major causes of acute illness and morbidity over the world. More than 1 million STIs are acquired every day<sup>3</sup> and over 100 million STIs occur each year under the age of 25. Boy, girl, rich, poor, athlete, artist, gamer, straight-A student – sexually transmitted diseases don't discriminate. The good news is that STDs are preventable. The following activities will help students understand the risks, learn how to protect themselves, and know where to find help if they need it.

**Preparation:** Do the Right Thing" handout

### Objectives:

Students will learn about STDs by offering advice to fictional teens who are dealing with STD-related issues

### Instructions:

STDs aren't a popular discussion topic. It's awkward, not to mention highly unromantic. But it's a conversation that has to happen if people who are sexually active want to protect themselves from STDs.

- 1) Divide the groups into 4 , provide them each a scenario on the "Do the Right Thing" handout.
- 2) Ask the groups to answer the following questions
  - If these teens were your friends, what would you advise them to do? Be sure to consider all the possible consequences of their actions, or lack of actions, when writing your responses.
  - Ask the leader of the group to present their answers



- Discuss on whether other groups would have don't the same or something different.

## Do the Right Thing

**Instructions:** Hand out the cut outs from below to each group randomly. Foreach one, imagine the main character (**in bold**) is asking you for advice. What would you tell him or her?

1. Hari has been having some strange symptoms lately, like discharge from his penis and pain when he pees. He's had unprotected sex before, but not in the last 6 months he's been with his current girlfriend, Reeta. Hari knows he should see a doctor, but he's afraid of finding out something that could mess up things with Rita. What should Hari do?
2. Jana and his girlfriend are thinking about having sex. Jana decided to go to a clinic together to get tested. Once there, though, Jana's partner backed out, saying that Jana will just have to trust that everything's fine. What should Jana do?
3. Bandana and Shyam have been together for 4 years. They've always used condoms. But now that Rita went on the Pill, she thinks it would be OK if they stopped using condoms. Neither one has ever been tested for STDs. She asks Shyam what he thinks. How should Shyam respond?
4. Chandani just read a text message on her sister Maya's phone from Maya's boyfriend. He said he tested positive for herpes. Maya's freaking out and doesn't know what to do. How can **Chandani** help?

## Activity 3: True or False (30 Mins)

**Preparation: Handouts of True or False Sheets without answers**

**Objectives:** Help students learn about key facts about STDs

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<sup>5</sup>Thapa KB, Chand SB. Knowledge and awareness about sexually transmitted infections among higher secondary school students in Bajhang, Nepal. MOJ Public Health. 2018;7(3):101-106. DOI:10.15406/mojph.2018.07.00213

## Instructions:

- 1) Divide the group into 4
- 2) Hand them the True and False Sheets to answer, one per each group
- 3) Give them 5 minutes to answer
- 4) Bring the group together and discuss as a team, correct any statements that may be wrong

## Answer True or False

1. Many people with STDs don't even know they have them.
2. People who start having sex at a younger age are more likely to get an STD.
3. Using a condom can only help prevent pregnancy, not any STDs.
4. A person who only had unprotected sex once doesn't have to worry about an STD.
5. The only way to know for sure if you have an STD is to get tested by a medical professional.
6. If you ignore an STD, it will probably go away.
7. The Pill can protect a girl from an STD.
8. You can't have more than one STD at one time.
9. Having sex with many different partners can increase your risk of getting an STD.
10. As long as a person with an STD isn't sexually active while he or she is having symptoms, their partner can't catch the disease. (False)



## Chapter 2: Gender Stereotypes

### Introduction :

Gender is an intriguing social construct and a somewhat ancient framework for how we should perform in the world. Depending on many social factors-- such as location, age, the composition of your family, race, religion, and the other unique contributors —the construct of gender will impact people differently. But one thing holds true all around the world: we define, and possess strong personal opinions on, the roles of women and men, often assigning expectations without even knowing it. The deep-seated and unconscious reference frames that we place on things in the world around us are implicit biases. Implicit gender expectations are fueled by stereotypes which pervasively impact the ways in which we encounter other humans.

Most young people are aware of expectations on men and women to behave or act in certain ways. They recognize to some extent the pressure put upon them by their family, peers, community and the media to conform to sometimes contradictory stereotypes about men and women in order to 'fit in'. Girls, for example, should be pretty, thin, caring, gentle and modest but also (and incomplete contradiction) they are expected to be sexy, provocative and flirtatious. Boys should be strong, tough, athletic, macho but also sensitive and caring. Men are expected to be the breadwinners of the family while women should be 'superwomen', responsible for child care but also managing to balance housekeeping with a career. Young people acknowledge that to some extent these 'gender norms' have changed over the years but, at the same time, both boys and girls continue to experience situations where they are treated differently or are offered different opportunities. They themselves frequently subscribe to 'traditional' beliefs about men and women.

Gender norms set women and men apart. They create a damaging division, often from the minute a baby is born, and this division causes inequality. Men and women are assigned different levels of freedom and different levels of privilege, status and value by society. Even amongst men and women, certain groups who do not conform to the 'ideal norm' (for example 'effeminate' men, 'butch' women, lesbian, gay or transgender individuals) are assigned different levels of value, status and privilege. This power imbalance that exists between men and women or amongst men and amongst women can give rise to gender-based violence (GBV).

The fact remains, however, that most young people do not view gender norms as necessarily limiting their potential or the choices they have, nor do they link the enforcement of gender norms with their own lived experiences of inequality, discrimination or violence. The opportunity to explore these issues through the activities below is an eye-opening journey, key to which is gaining understanding that people experience inequality or abuse not because they are different in general but because they are different compared to a desirable ideal which is shaped by societal constructs of gender. It is the process of questioning the validity of rigid gender norms which young people find most empowering alongside embracing their right to be valued and respected - and their responsibility to value and respect others - regardless of how much they conform to these norms.

## Session 4: Gender Stereotypes:

### Activity 1: Gender and Sex (30 Mins)

**Preparation:** Materials: PowerPoint Hand-out of statements on gender and sex

#### Objectives:

- Students understand the difference between biological sex and the social construction of gender.

#### Instructions:

- 1) Start with a short definition of gender and sex :
  - a. Sex (biological): This refers to biological attributes that men and women are born with. They are universal and generally permanent, e.g. men cannot breastfeed; women menstruate.
  - b. Gender (social): This refers to the socially constructed roles and responsibilities assigned to men and women by society. Gender norms are not biological facts; girls and boys are not born knowing how they should look, dress, speak, behave, think or react. Gender differences are created by our culture and not nature, and can be changed.
- 2) Give each student a copy of below and ask them to have a quick read through the statements on their own (for 3-4 minutes) identifying whether each statement refers to gender or sex.
- 3) Discuss each statement with the whole group.
- 4) Ask the students why they classified each statement under 'gender' or 'sex'.
- 5) Look for differences: did any students classify a 'gender' statement under 'sex' or the other way around? Explore their reasons why.
- 6) Make any corrections necessary and explain the reasons why.
- 7) Discussion Questions
  - a. Did any statements surprise you?
  - b. What can we learn from the differences between sex and gender?



- 8) Expected Outcome and Activity Wrap-up
- 9) The take-home message for this activity is that a person's gender identity is not set in stone. From the moment a boy or girl is born, they are treated differently according to their sex e.g. baby girls are dressed in pink while baby boys are dressed in blue, girls play with dolls while boys play with cars and weapons. These are just societal 'norms' and can be changed. There is no reason why boys can't wear pink or girls can't play with a tool set instead of dolls.

Question	Gender	Sex
Women can give birth but men cannot		
Girls are not as good as boys in math		
Women can breast feed whereas men cannot		
Girls are modest, timid and cute		
Boys are hard and tough		
Girls cry		
Boys don't cry		
Sports are more important for boys and girls		
Girls need to find good husbands; boys need to find a good job		
Women can get pregnant but men cannot		
Women do not drive trucks		
A boy's voice breaks at puberty but a girl's voice does not		
In Nepal, it is tradition for women to get paid 50% less than men for the same type of work		

## Activity 2 : It's a girl thing or a boy thing? (30 Minutes)

(Adapted from Robert Gordon University Challenging Gender Stereotype Lesson Plans)

**Description:** Activity to raise awareness of gender stereotyping in our thinking.

### Instructions:

- 1) Read out the following list and ask for hands up if you think it's a girl thing and no hand up if you think it's a boy thing or vice versa.

Burping and Farting	Cooking	Cars
Rescuing	Pink	A six pack
Dancing	Doctor	Diet drinks
Teacher	Nurse	Scientist
Blue	Cleaning	Lawyer
Engineer	Computer programmer	Red
Glitter	Mathematician	Pilot

Once you have read through the whole list ask the following questions:

- Why do you think there was so much agreement?
  - Where do these ideas come from?
  - Is it true that these are just girls or boys things?
  - Where are these answers coming from?
- 2) Explain gender roles: From an early age we have a clear idea of gender roles which include what things we like, behaviours and choices that are associated with being male or female. We then conform to those roles and identify with them. These ideas come from all sorts of sources - our families, the media, what we see in our world. Studies have even shown that parents speak differently to baby boys and girls and our cultural beliefs re-enforce what is seen to be acceptable behaviour of males or females. This includes what we do, what we like and how we behave.



### Activity 3: Gender in a Box (60 Minutes)

**Preparation:** Materials Required: Magazine clippings of advertisements portraying men and women and pictures with celebrities, Flipchart, Markers, Hand-outs with instructions for the 'Gender in a box' activity. 1) Go through women's and men's magazines and clip any advertisement or picture that is striking in conveying messages about how men and women are 'supposed' to look and behave. 2) Prepare two flipchart posters where the two 'gender boxes' will be drawn.

#### Objectives:

- Explore gender norms and stereotypes that are created and enforced by society, including the media;
- Explore their beliefs concerning what it means to be a boy or a girl in the society they live in;
- Challenge gender stereotypes and the 'accepted' or 'normalised' beliefs about masculinity and femininity;
- Recognise the negative impact of rigid gender norms for both boys/men and girls/ women and explore how these stereotypes limit the choices of women and men;
- Understand the link between gender socialisation, gender inequalities and hierarchies of power;
- Understand how the enforcement of gender norms contributes to gender-based violence.

#### Instructions:

- 1) Split the group into smaller, preferably mixed groups of boys and girls.
- 2) Half of the groups will work with pictures of women and the other half will work with pictures of men.
- 3) Give each group clippings of magazines and a copy of Questions
- 4) Ask the groups to discuss among themselves the questions. While they are doing this, prepare two flipchart papers:
  - one with GIRLS/WOMEN as a title the other
  - with BOYS/MEN.
- 5) Once the groups have had time to discuss the activity, ask them to feed back their answers. Write the qualities discussed for each gender on the relevant flipchart.
- 6) Draw a box around the qualities mentioned, one for men and one for women. Explain that these are gender boxes and that they encircle how we expect people to act, depending on the society's idea of what is considered masculine or feminine behaviour. Explain that the box encircles what we call gender roles for women and men.

- 7) Encourage discussion on the activity.
- 8) Discussion Questions
  - a. In your experience, how are girls supposed to look and behave? What makes a girl attractive / popular?
  - b. In your experience, how are boys supposed to look and behave? What makes a girl attractive / popular?
  - c. If students identify additional qualities to the ones already in the box you can add them to the two flipcharts.
  - d. Where do we learn these gender norms? When do we begin learning them? Who teaches us these norms? Do we see these attitudes in our parents?
  - e. What differences do you observe in the way that women and men are expected to behave?
  - f. Does one of the two genders seem to have more power or a stronger position in our society?
  - g. Considering the box that encircles all the qualities you have mentioned, how easy is it for boys and girls to stay 'in the boxes'?
  - h. What if a girl or boy acts in a way that is outside the gender box? What happens to them? How are they treated by their families, peers and the community if they look or behave differently than what is 'expected of them'?
  - i. Alternatively, what happens to people who conform and seem to fit in? What keeps us in the box?
  - j. Is there a system of 'rewards' and 'punishments' in place? How does this system affect the choices we make?
  - k. Note down students views on 'rewards' and 'punishments' on a flipchart.
- 9) Outcome and Activity Wrap Up

## Gender in a Box' Questions

Please discuss the following questions in your group and write down your feedback to each question.

### For women

- 1) How are the women portrayed in the pictures? Describe their appearance and their physical characteristics.
- 2) What messages do these pictures project about the character of these women?
- 3) How are they supposed to behave? Describe them with adjectives.
- 4) Overall, according to your own experiences and reflecting on what you have heard (from your parents, peers, friends, the media, at school etc.), what different roles do women assume in their lives? Are they



professionally successful? Do they hold a position of authority? What is their role within their own families?

### For men

- 1) How are the men portrayed in the pictures? Describe their appearance and the physical characteristics.
- 2) What messages do these pictures project about the character of these men?
- 3) How are they supposed to behave? Describe them with adjectives.
- 4) Overall, according to your own experiences and reflecting on what you have heard (from your parents, peers, friends, the media, at school etc.) what different roles do the men assume in their lives? Are they professionally successful? Do they hold a position of authority? What is their role within their own families?

### The qualities in the gender boxes are likely to include:

**GIRLS:** Sensitive, have long hair, slender, fragile, vulnerable, dependent on men, cry easily, weak, good in language and arts, good mothers, shy, timid, modest, not proper to swear, sexy, flirtatious, take care of children and family members etc.

**BOYS:** Tough, macho, are involved in fist fights, good in math and science, like sports cars, play football, have facial hair, athletic, ambitious, strong, muscular, they don't cry, wear the 'pants' in the family etc.

After the completion of the gender boxes, students like to point out similarities and differences between the two genders (women are sensitive vs. men are aggressive). They also like to point out contradictions within each gender (for instance women expected to be 'modest' but also provocative and sexually experienced), depicting in some ways the 'fluidity' of gender identity.

### The list of punishments and rewards is likely to include:

**PUNISHMENTS:** bullying, isolation, mocking, rumours, discrimination, name calling, physical violence etc.

**REWARDS:** Respect, notoriety, popularity, influence, more opportunities, freedom from abuse etc.

There can be heated debates about certain punishments and rewards - what some young people see as a reward, e.g. notoriety, others may see as a punishment.

## Take-home messages from the Activity:

- Gender norms are not set in stone but are shaped by society. Traditions, popular culture, the media, peers, family and the community (including schools) all play a role in shaping and reinforcing these norms. Young people have the power to accept or reject them.
- Gender norms and stereotypes create a damaging division between women and men and give rise to gender inequality.
- Children, young people and adults alike experience pressure to conform to ideals of what it is to be a man or a woman. Depending on how much they conform, they may be rewarded or punished.
- We are all unique and complex individuals who do not fit into boxes. Everyone has the right to be valued and respected for who they are and we have the responsibility to value and respect others

## Session 5 : Gender Stereotypes

### Activity 1: Power, Status and Rights (60 Mins)

**Preparation:** Paper or cards with character types from page written on them

**Objectives:** To understand the power that different individuals and groups are given in society to access their rights as a result of certain conditions such as their economic status, gender, age, sexual orientation, race, ethnicity or religious belief.

#### Instructions:

- 1) **On individual pieces of paper, write the following descriptions of different types of people in society.**
  - Teenage female mother
  - Child bride
  - Housewife
  - Taxi driver, male
  - Farmer
  - 15 year old rape victim
  - Grandmother taking care of grandchildren with her small pension
  - Young girl, 12 years old, living in informal settlement (slum)



- Political leader, 35, male
- Male corporate executive
- Young boy, 14 years old, coming from affluent family
- Married mother of three, employed as a domestic worker
- Male doctor
- Street kid, 10 years old, male
- Teenage girl, living in a very religious/traditional family
- Teenage boy, living in a very religious/traditional family
- Unemployed LGBTI activist living openly and positively
- Young person, 14, questioning their gender
- Women's rights activist, female
- Gay man/lesbian, 17, college student
- Married woman, 15, from a minority ethnic group
- School Principal , Male

## 2) Step 1: Who am I in society?

1. Explain to the participants that this activity will help them to understand how gender and other aspects of their identity affect access to resources and can contribute positively or negatively to their sexual and reproductive health.
2. Give each of the participants one of the pieces of paper that you prepared earlier that provide descriptions of different people in society.
3. Explain to the participants that for this activity you want them to assume the "role" that has been written on the piece of paper you gave them.
4. Tell participants to close their eyes and try to visualize the person described on their paper. Where would they live? What would their family be like? What would they do during the day? What kind of problems would they have to face?
5. Ask them to think of a name for their character.

## 3) Read each of the following statements (the order is not important):

- I can read and write.
- I don't have to worry about where my next meal will come from.
- I can travel around the city easily.
- I have had or will have opportunities to complete my education.
- I can find the time to read the newspaper each day.

- I have access to sexual and reproduction information.
- I can get a loan when I need extra money.
- I can refuse a proposition of sex for money or other resources, such as a place to live.
- I can leave my partner if s/he threatens my safety.
- If I have a health problem, I can get the help I need right away.
- If my sister is pregnant, I will have access to information to know where to take her.
- I can negotiate safe sex with my partner.
- I can choose freely who I want to marry.
- I can determine when and how many children I will have without feeling pressured.
- I can protect myself against HIV and other sexually transmitted infections.
- If I have a crime committed against me, the police will listen to my case.
- I can walk down a street at night and not worry about being raped.
- I can find a new job easily.
- I am respected by most members of my community.

#### 4) Step 2: Roles in society

- Ask the participants to stand in one straight line.
- Ask the participants to say the name of their person and the role that has been given to them.
- Explain that you will read a series of statements. For each statement, ask them to consider whether that statement applies to the role they have been given. If it does, they should move forward one step. If it does not, they should stay where they are.
- For example, one of the participants has been asked to assume the role of a member of parliament. You then read the following statement, “I can read and write”. Since it is likely that the Member of Parliament can read and write, the person playing this role would move forward one step.

#### 5) Step 3: Discussion: equal access or not? (30 min)

- After going through all the statements ask participants to stay where they are and use the following questions to start a group discussion:
  1. Why did you get distributed in this way even though you started at the same place in the game?



2. How do you feel about where you have ended up?

6) Buzz groups

In a circle, ask participants to share with the person next to them the following questions keeping in mind their role:

- What different social forces affected your character's options?
- Would your character be at risk of experiencing discrimination or violence and why?
- Do you think your character had the right to decide over their own body? Why or why not?
- Do you think being a member of an organization or an activist has an impact on you being able to know and claim your rights? Why?

7) Plenary

- Ask participants to share their reflections.
- Conclude the reflection by recognizing that not all individuals have the same possibility to know or access their rights. Certain groups due to their status and condition in society are more vulnerable to discrimination and violence.
- These groups include but are not limited to sexual, racial and ethnic minorities, Indigenous peoples, migrants, refugees and internally displaced people, sex workers, children and adolescents, and people with physical or mental disabilities, and women belonging to these groups.
- Individuals who belong to marginalized groups –groups with less power in society – often face discrimination on multiple grounds. One person can be stereotyped, stigmatized or marginalized by others in multiple ways.
- Under their human rights obligations, states must give special attention to individuals and groups living in situations of vulnerability and disadvantage in order to address the multiple forms of discrimination they face.

8) Step 4: Take action

- Reflect on how we can take action on what we have learnt.
- Ask participants to think of different members in their school, communities or families and what discrimination or limitations they might face. What can we do to help them overcome these difficulties?



## Activity : Gender SWAP Videos: (30 Mins)

**Preparation:** Projector, Laptop, pen drive with downloaded videos

<https://www.youtube.com/watch?v=Ak1cPJMpelU>

<https://www.youtube.com/watch?v=mxMW0nOB7rE>

**Objectives:** To sensitize participants on the roles of society and gender, and to teach them to respect each other's gender and the problems they face.

Ask the participants the following questions:

- 1) What did you like about the video?
- 2) What have you learnt?
- 3) How does it feel to be on the other side?
- 4) What is one key lesson that you have learnt?

## Activity – Gender Stereotypes: Card Matching Memory Game (60 Mins)

**Preparation:** Methods Cards – ,Two sets

### Objectives

- To learn about and become comfortable discussing gender stereotypes for jobs.

### Instructions

#### 10) Introduction: Introduce the game to the participants as below:

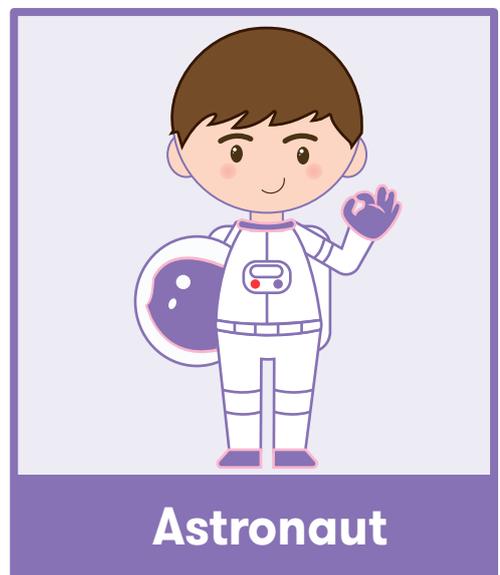
Today we are going to learn about different kinds of jobs and how they are suitable to both sexes.

- 11) Mix together the two sets of cards.
- 12) Have participants sit or stand in a circle. Spread the cards out with the images facing down on the ground.
- 13) Have participants take turns. The first participant should turn over one card and name the job. (Hint: The name of each job is written on the card)



- 14) Once this person has named the job.
- 15) Once the participant has named the job, they may turn over another card from the ground to see if it “matches.” If the cards match, they have “won” their turn. If the cards do not match, they should turn both back over and return to their place in the circle or sit where they were, and another participant should take their turn.
- 16) Each time a participant “wins” by matching their new card with one of the face up cards a pair of cards with the same occupation, leave the matched cards face up. Keep playing the game, with participants taking turns one by one, until all jobs have been matched and discussed.
- 17) After the game, discuss: What is one thing that you learned today that you would share with a friend or family member?



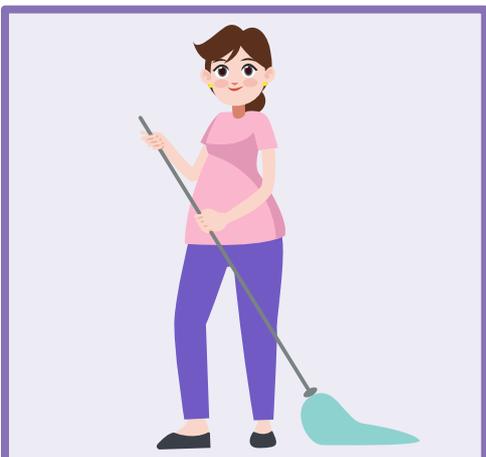




**Scientist**



**Scientist**



**House Wife**



**House Husband**



**Nanny**



**Nanny**



## Chapter 3: Gender Based Violence

### Background:

Nepal has a high incidence of gender-based violence. And while everyone, regardless of their sex, can be affected, women remain — by large — the main victims.

Gender-based violence (GBV) is violence that is perpetrated against an individual based on their socially prescribed gender roles, expectations and norms. While GBV largely affects women and girls because of their socially subordinate status in relation to men and boys it is acknowledged that men and boys are also victims of violence because of their gender roles and expectations linked to ideas of masculinity. GBV infringes on victims/survivors human rights and reinforces the inequities between men and women often leaving life-long physical and emotional scars and sometimes resulting in death. While many people think of gender-based violence in terms of physical violence, there are other forms of violence, which maintain the unequal power dynamics. GBV can be psychological, sexual, emotional, or economic violence. It involves not only direct force, but also threats, intimidation and coercion. Violence does not have to be direct to be effective. The threat of violence can have a devastating impact on people's lives and the choices and decisions they make.

The manual is designed for an adolescent audience (both boys and girls ) for the implementation of SRH lessons and outreach through a gender lens. It is a tool to help them strengthen their capacity in understanding of GBV and to support activities to increase awareness, prevention and adequate response and redress to violations. The activities are highly participatory to give participants time to think, reflect and discuss the concepts, which will facilitate retention and change. Most of the sessions are developed for a non/semi-literate audience to ensure as many people as possible are able to participate actively.

### Session 6: GBV

#### Activity 1: Growing Up, Boy and Girl (Adapted from Restless Development, GBV Manual) (30 Mins)

**Preparation:** Flip chart Markers

**Objectives:** → To identify the different roles that community and culture imposes on female and male members of the community

## Instructions:

### Facilitator's Note

This is a simple exercise to help participants see the differences between sex and gender by using a practical example of how gender roles are taught by socialization. It is important to understand that our gender roles appear and feel completely natural as we grow up however they are cultural. Girls and boys are taught their gender roles as normally as they are taught anything else. Girls and boys are taught that they have different roles to play in the family and in the home. For example, children in Nepal are taught that it is girls and not boys who must help with housework like washing and cooking and that it is the woman's role to serve the man and that it is the man's role to be head of the household.

1. Divide participants into two groups.
2. Ask the two groups to discuss what it means to grow up as a boy and a girl in their community, starting from birth to 25 years old. Ask them to think about the different ways that boys and girls are supposed to act, how they are treated, the differences in importance and value between the two as they grow up. For example, during adolescence a girl may be made to take care of her younger siblings, do household chores or expected to be quieter than boys. In addition, during adolescence a girl may develop breast while a boy may become strong enough to farm. Encourage the groups to talk about not just the differences in how girls and boys are treated and the things they are asked to do/their responsibilities but also about physical differences that appear between boys and girls during the different life stages from birth to 25 years of age. Have them think about the changes as they grow up.
3. Bring the two groups back together and ask each group to present what they discussed to the main group.
4. Ask the participants how they know a baby is a boy or a girl? Re-iterate from earlier learning that this is sex, which is the biological differences between boys and girls. Ask them to identify in their timeline the biological differences between boys and girls.
5. After a few minutes of discussion on the above ask questions to stimulate discussion about gender - how we socialize girls and boys differently. Ask them to use examples from their timelines how we socialize differently. For example, when do girls and boys start learning different things?
6. Explain gender. Explain that gender is what we --culture and community-- teach girls and boys about what they can and can't do. That gender is the social role that each of us is supposed to adhere to



and can be changed but our sex cannot be changed. To further conversation you can ask questions like:

- Can a man cook? (not do men cook - but can a man actually physically cook.)
- Can a woman be an Okada driver?
- Can a man take care of a baby?
- Can a woman financially provide for her family?

7. As the discussion continues continue to point out the ways that culture/society/community determine what boys and girls do as they grow up not their actual sex. Reflecting back on their group discussions ask participants if they can see how boys and girls are taught differently and how that affects the roles boys and girls can assume when they grow up. Explain that a part of what they are doing is to become aware of themselves and how their socialization affects the way they interact with each other and within the community.

## ACTIVITY 2. POWER AND PRIVILEGE (Adapted from Restless Development, GBV Manual) (30 Mins)

**Preparation:** Prepared Diagram 1 ,Tape

### Objectives:

- To identify sources and forms of power
- To identify the relationship between power, privilege and access to rights

### Instructions:

1. Ask people to think about the word power and what it means to them.

### Facilitator's Note

This activity is to help people understand power and privilege. It is important before this exercise that you have a firm grasp of what those two terms mean and how they manifest themselves in relation to gender.

POWER can only exist in relation to other people and is something you don't always have. Having power is being able to have access to and control over resources and to be able to control decision-making. When we have power - we usually feel like we are in control and feel good. Conversely, when we feel powerless - we often feel out of control and many negative emotions. Power over is to have control over resources, decision-making and to be able to impose these on somebody or a situation. Often

dominate them. Sometimes, power over can be used positively - for example, you as an NGO volunteer have power over those you are interacting with - you can decide to support people in your community and have the power to affect change and harness the power with the community. Power to is the ability to influence your own life by having the knowledge, skills, money or even just the ability to convince yourself to do or think something. We all have the power to, even though at times we cannot express it. For example, a young girl from a poor family has the ability learn even though she may not have much space for or access to formal education. However she can still believe and put things or seek out opportunities to learn. This is what we want to tap into with our work. With lots of people with this kind of power we create “power with”

Power with is the power you have as a group - e.g., the collective power of young people - to take decisions and action on areas of common ground or interests that benefits all. This type of power brings solidarity when it harnesses the talents, knowledge and energy of the individuals. We want to help young people Power within is the ability to imagine that you can have more, that you can create change, that you can have a better life and that you as an individual are important, valuable and have rights - just because you are you. Ultimately it is the power of self- confidence and self-esteem. We want to help young people recognize the power within them and use that for the Power To build knowledge and create change by harnessing this Power With others and ultimately have a positive impact on and Power Over their lives and their community.

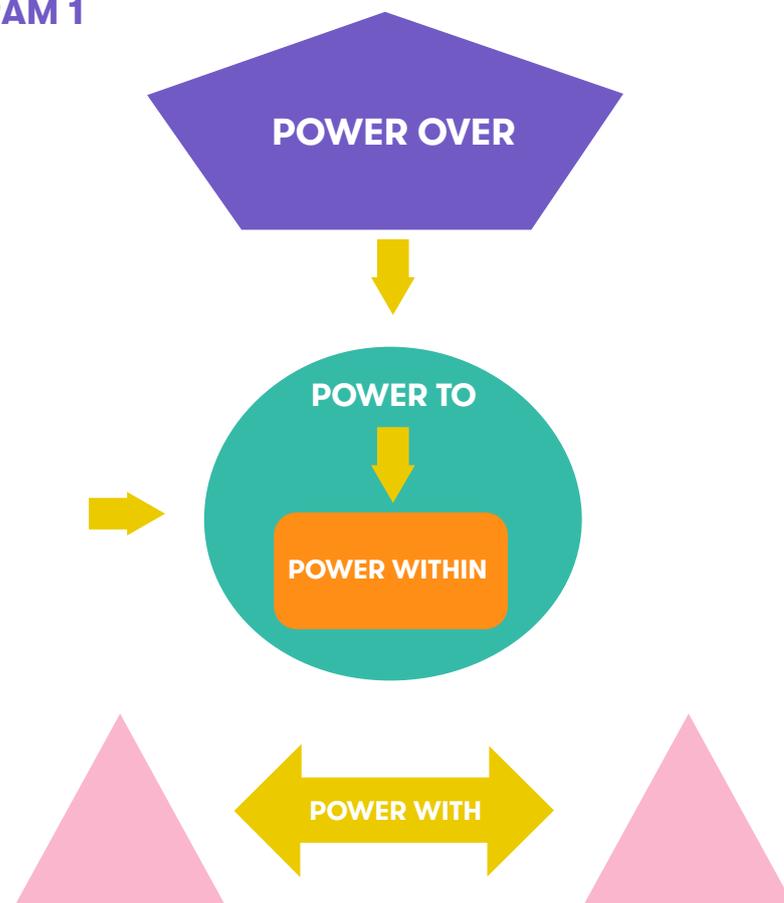
Recognizing internalized oppression. It is important to recognize and acknowledge that individuals and groups historically disenfranchised and marginalized often have little power to influence much and that sense of powerlessness can often lead to abuses of the relative power they do have over. Focusing on how to harness the power within (and diminish the feelings of powerlessness) while acknowledging the limited power over and to is important

2. After a minute to think, ask the participants questions to help get an understanding of what they perceive and understand as power.
  - What is power?
  - Who has power?
  - Are there different kinds of power? If so, what kinds?
  - How can power be used?
  - How does it feel to have power? To not have power?
3. Have diagram 1 drawn out on individual pieces of flip chart paper and stick them to the wall.
4. Use the section on “Power” in the facilitators note at the beginning of this session guide to introduce and explain the ideas of power over, power to, power with and power within.



5. Ask participants, within this context, think about a situation where they felt powerful and a situation when they felt powerless. Give them a couple of minutes to think about the situation.
6. Ask for a couple of volunteers to explain when they have felt like they have had power and when they have not had power. Use this to begin the discussion and facilitate the group process.
7. Questions that may help include:
  - What are the different types of power you have?
  - How does having or not having power make you feel?
  - How do gender roles and gender norms affect the power you have?
  - What aspects of being young/old affect the power you have?
  - How can power influence one's access to rights?
  - How can you use power to help you achieve positive change?
8. Summarize the session and the discussion and make sure to reflect on the positive aspects of power and the importance of using the types of power we have to have a positive effect in the community.

**DIAGRAM 1**



## Activity 3: Types of Gender Based Violence (30 min) (Adapted from Amnesty International, Respect My Rights, Respect My Dignity Adolescent Manual)

### Facilitator's Note (Activity 3 and 4)

This session is giving a participants and introduction to GBV. Getting them to think about violence in general and then about gender-based violence. Gender-based violence is violence that is perpetrated against an individual based on their socially prescribed gender roles, expectations and norms. While GBV largely affects women and girls because of their socially subordinate status in relation to men and boys it is acknowledged that men and boys are also victims of violence because of their gender roles and expectations linked to ideas of masculinity. GBV infringes on victims/survivors human rights and reinforces the inequities between men and women often leaving life-long physical and emotional scars and sometimes resulting in death. While many people think of gender-based violence in terms of physical violence, there are other forms of violence, which maintain the unequal power dynamics. GBV can be psychological, sexual, emotional, or economic violence. It involves not only direct force, but also threats, intimidation and coercion. Violence does not have to be direct to be effective. The threat of violence can have a devastating impact on people's lives and the choices and decisions they make. Often, the truth about the extent of violence faced by individuals, in particular women and girls, is minimized or denied. Some people say GBV is pervasive because of "bad" men and therefore deny that it has anything to do with them and the socio- cultural fabric of society. Others blame women or argue that violence is justified based because she... you can fill in many of the reasons we hear every day that justify violence. These attitudes are dangerous and diminish the seriousness and pervasiveness of GBV, which allows it to continue.

### Preparations: Materials Flip chart Markers, Prepared flip chart with Diagram below:

**Objectives:** → To understand and be able to identify the various types of gender-based violence.

### Instructions

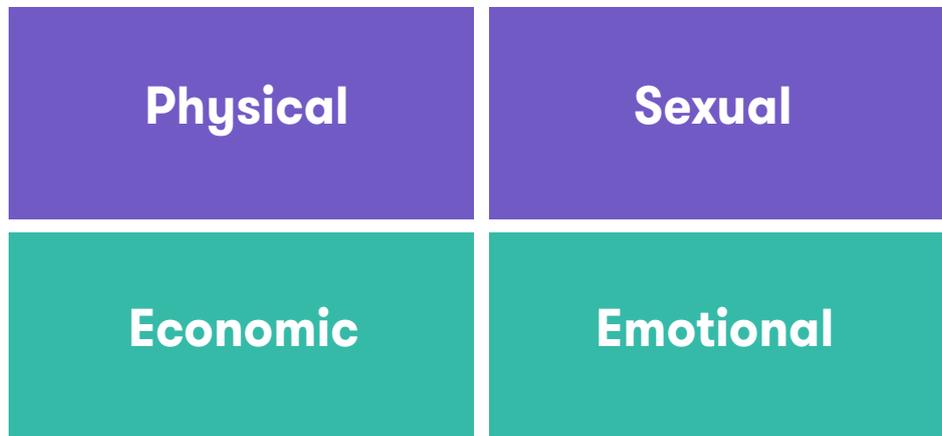
1. Ask participants to reflect on what is violence and share their thoughts with the group. Place the list generated by the group on a flip chart and reinforce that violence is a tool of oppression and is used to exert power and control over another.
2. Ask participants to reflect on what gender-based violence means and share their thoughts with the group.



3. Present the flip chart with Diagram 2, a square with the four types of gender-based violence in each corner (physical, sexual, economic and emotional violence). Ask the group to share the types of gender-based violence and as they do so place them on the flip chart paper in relative proximity to the type of violence.
4. Explain that GBV infringes on human rights and reinforces the inequities between men and women, including many of the examples that the group has already provided.

Types of GBV that should be listed on the Diagram include:

- Rape
- Sexual Exploitation and Abuse
- Early/Forced Marriage
- Child sexual abuse including incest
- Sexual Assault
- Sexual Harassment
- Domestic Violence
- Molestation
- Abuse/Humiliation



#### **Activity 4: Case Study, types of GBV (Adapted from Gender Based Violence Training Module, Ministry of Gender and Family Promotion, Rwanda) (30 Mins)**

**Preparation:** Case Study, flip chart, markers

#### **Objectives**

- To recognize and explain each form of violence

- To categorize each type of violence

### Instructions:

1. The participants are asked to sit in a circle or in any other position that facilitates interaction and form three groups
4. The facilitator reads a story; participants listen actively and find the types of violence from the story.
5. The facilitator will guide the comments to reflect the types of GBV in general and specific cases of GBV in Nepal.
7. After 15 minutes, the groups present findings to plenary session.
8. Participants ask clarification questions.
9. Facilitator summarizes and adds key important elements that have not been elaborated.

### CASE STUDY: KARMA'S FAMILY

Karma is a man who lives with his wife Tara in Nepal. Tara was married at the age of 13 and they have 3 children (girls and boys). Karma likes to drink alcohol and often when he goes for agriculture work with his wife, he lacks energy for work. One day, after agriculture work, he collected firewood and with very rude words ordered his wife to carry all the firewood he had collected even though his wife was tired as him, he also reminded her to not forget to carry home his spade as he went to the local bhatti pasal to talk to his friends and drink alcohol. Around 8:00 p.m, Karma comes home and finds his daughter GYANI occupied doing her homework quietly; he hits her because the goats are once again outside, he also pulls his young son by the arm who falls on the floor. Karma enters the house, hits his wife and asks her for food. The wife anxiously rows a stool that she directs to her husband while she puts food on the plate for him, she timidly says, “our daughter has been sent back from school as we have not paid her school fees, you sold our goat but we are unaware of where the money went?”. “I remind you that it is my goat and that you are not allowed to ask me such questions”, retorted her husband. After, having his good ,Karma wants to have sex while his wife is still busy arranging the necessary household chores. Later in the night, he asks his wife to have sexual intercourse but she refuses because she feels tired by the work on the fields, the transport of firewood and the domestic activities of the evening, and besides, the disputes of the evening had made her very sad. Karma forces his wife to have sex with him after which she begins to cry.

The following day, Karma's daughter who didn't finish her homework gets a zero from her teacher. When she begins to explain what happened the previous evening at home, the teacher asks her to come and see him after class because it is a particular



case that doesn't concern the other students. After class, Gyani meets her teacher,

With a powerful voice the teacher shouts at her: "Instead of studying and doing your homework, you spend time to meet all the boys every night. Today it is my turn and don't forget that I hold your future in my hands. If you fail two of my courses, it is your life that is finished. Ok?" The young girl trembled and didn't respond but she felt her teacher's hands touching her breasts. She was thinking about how she would risk wasting her life if she didn't obey the teacher. Crying, she left while she was still partially undressed and she was full of shame after such an invading act. She went home and cried all night, and did not share the incident with anybody.

Some months later, Karma's wife was still living in the same difficult conditions and disputes, and one day during a dispute with her husband, she slipped and fell. The bleedings that followed obliged her to go to the health centre and the diagnosis of the medical consultations was an accidental abortion.

- What are the lessons learnt from this story?
- What are different forms of violence we find in this family?
- What are the possible reasons of this violence?
- What are some possible solutions that can reduce or end this violence?

**Key message:** GBV is not only sexual violence; there are many types of violence: physical, emotional, economic and sexual committed against women or men within their social responsibilities as women and men.

## Session 7: GBV

### Activity 1: CONSEQUENCES – PERSONAL, FAMILY AND COMMUNITY (60 Minutes)

**Preparation:** Flip chart Markers The story of Above of Karma and Tara

**Objectives:** → To understand the consequences of violence on the individual, family and communities.

#### Instructions :

- 1) Read the story in the facilitators note to the entire group.
- 2) Ask the participants if it is realistic and if similar things happen to women in their community.
- 3) 3.On a flip chart, write the title, 'Consequences for Tara'. Ask

the group to suggest some consequences of domestic violence for Tara. Ask questions that help participants think about how violence affects Tara.

- What are the short-term consequences for Tara living in this kind of relationship?
  - What are the long-term consequences for Tara?
  - How did it make Tara feel about herself?
  - How did it make her feel about Karma and their relationship?
  - How did it make Tara feel about her relationships with other people around her (i.e., friends and neighbours)?
- 4) On a flip chart, write the title, 'Consequences for Karma and Family'. Ask the group to suggest some consequences of domestic violence for Karma and his children. Ask questions that help participants think about how violence affects Karma and the children.
- What are the short-term consequences for Karma living in this kind of relationship? for the children?
  - What are the negative consequences for Karma's son?
  - What are the negative consequences for Karma's son?
  - How does it make him feel about himself?
  - How does it make him feel about Tara?
  - How does it affect their relationship?
  - How does it affect his relationship with his children?
  - What do children learn about relationships from watching their parents?
  - How does it affect how they feel about their mother and their father?
  - How does it affect how children feel in their home?
- 5) On a flip chart, write the title, 'Consequences for the Community'. Write on flip chart the points that emerge from the discussion. Ask open-ended questions, such as:
- How does the violence experienced by Tara affect the community?
  - What kind of relationship did Tara have with her neighbours?
  - What did it mean for the contribution and participation of Tara and her children in community life?
  - What impact did it have on community resources such as health services social welfare services or the police?
  - What did Tara's lack of access to her money mean for her business?
  - Emphasize that domestic violence affects everyone in the community.



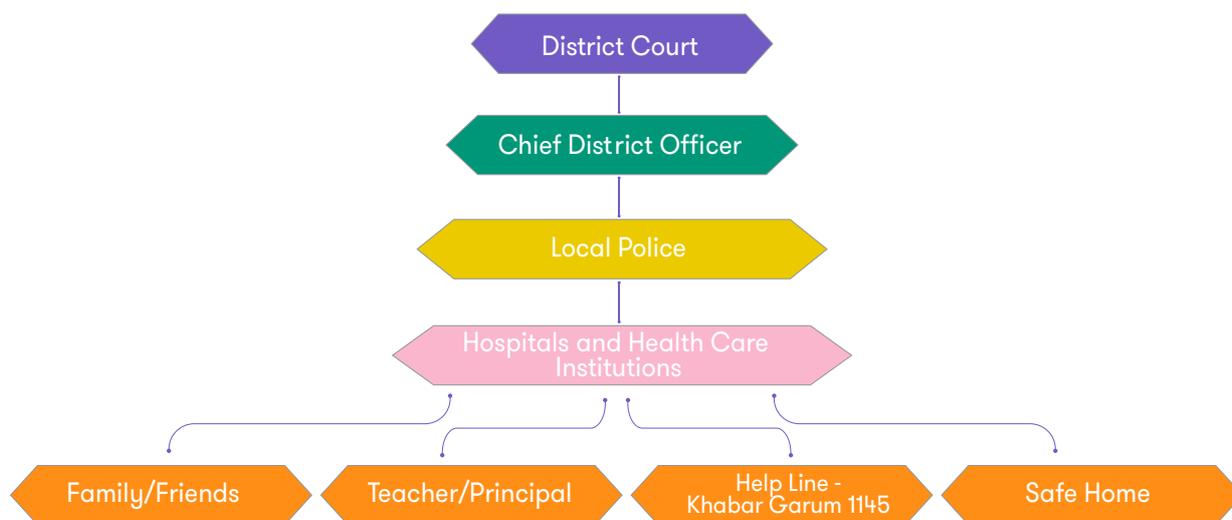
## ACTIVITY 2 : THE PATHWAY TO JUSTICE (60 mins)

**Objectives:** → To understand the steps that a survivor would typically go through when seeking redress for a violation

**Preparation:** Flip chart Tape Markers 40 cut outs of the feet in attached. Preparatory Phase Before the sessions, starts you should place cut outs of the individual feet along the wall in the front of the room, starting from one side spreading just like footsteps to the other side of the room.

### Instructions:

1. Read the story of Karma and Tara in the session above.
2. Ask the participants if it is realistic and if similar things happen to women in their community.
3. Ask the group to identify steps that Tara would normally take if she wanted this behaviour to stop. The figure attached below are the steps (Do not show this to participants)



4. Ask them to think about the real life situation for women.
5. Ask questions such as:
  - Who is the very first person Tara would tell and what would happen?(make sure to help participants really think about the very first person she would tell, not what we think should be the first step.)
  - Is that really the first person Tara would tell?
  - If nothing changes after she told that person, who would Tara tell next and what would happen?(When asking what would happen, be sure to identify things like if she went to the chief is

- there normally a case.)
6. Go through the above questions until you trace a normal pathway of justice all the way through both the traditional and the formal justice system. Each place Tara is likely to go for support needs to be placed on a footprint that is placed across the front of the room. Make sure you are asking what would normally happen at each of these places.
  7. After this is mapped, reflect back to the group about how much work this process as is and the amount of time and money it takes.
  8. Ask questions like what might be some of the negative consequences are of seeking justice in this manner. For example, the fine levied by the chief makes her husband angrier and he beats her or denies her feeding because of it. Or, maybe no one in the community thinks what happened is a big deal because it is her husband.
  9. On the cut-outs of the footprints, titled pathway to justice. Please write some of the steps. Ask the group to suggest some consequences of domestic violence for Tara. Ask questions that help identify steps that Tara would normally take if she wanted this behaviour to stop. Ask them to think about the real life situation for women. Ask pathways to Justice (what is justice? Survivors' decision? You should then walk the path always returning back to Tara. For example, starting from the first step, she goes to the family; it doesn't resolve she goes back. Then from the starting point again, walk to the next step, which may be the village chief – the situation is still not resolved so return to the starting point. Do this for all the steps so you can visually demonstrate how much work it takes for Tara to get help.



## Session 7: GBV

### ACTIVITY 1: THE LAWS (Adapted from Restless Development, GBV Manual) (60 Mins)

**Preparation:** Copies of the relevant legislation Print outs of LAWS on colour coded paper. Each law will have a different color. Make enough handouts for every participant to have one act each. Candy, Rocks

#### Objectives:

- To understand the actual laws of Nepal that protect individuals from gender-based violence.
- To understand what you are protected from under those laws.

Preparatory Phase Before the session starts, make sure you understand the legislation that you are planning to discuss.

Summaries of each bill are provided in the facilitators note and the actual legislation attached.

- List the pieces of legislation that pertain to GBV.

**Children’s Act 1992; Muluki Ain; Domestic Violence (Offence and Punishment) Act, 2066 (2009); The Act to Amend Some Nepal Acts for Maintaining Gender Equality 2063, 2006; The Labour Act, 1992; The Contract Act, 2000 ; Human Trafficking and Transportation (Control) Act, 2064; Child Marriage Laws; Safe Motherhood Act, 2075**

- Explain each piece of legislation is on a colour card. This will ensure those who have low levels of literacy are able to participate.

Read the following statements instructing participants to raise the card of the corresponding piece of legislation. Discuss the answers with the group and give the person who answered correctly first a rock.

Questions should include:

- This act protects your right to live in a domestic relationship free from violence.
- This act protects your right to live free from sexual violence. (Muluki Ain)
- This act gives women the right to inherit equally to men. (Muluki Ain)
- This act raises the legal marriageable age to 18 years. (Constitution, Muluki Ain)

- This Act prohibits discrimination between sons and daughters as to upbringing, education and health care is prohibited (Children’s Act 1992)
- This Act protects you from being trafficked (Human Trafficking and Transportation (Control) Act, 2064)
- This right give you authority to chose the family planning method of your choice. (Safe Motherhood Act, 2075)
- This provision protects children and adolescents from all types of physical and mental violence, damages or abuse.
- This law strictly prohibits child marriage and affirms that this is a punishable offence.
- This **right allows you to obtain sexual and reproductive health related services, information, services and services.** (Safe Motherhood Act, 2075)

At the end of the game the person with the most rocks is the winner and gets a bag of candy

**Discussion:** Summarize each of the bills and what survivor’s options are when seeking justice. This should include things like medical treatment and the medical report are free of charge in domestic and sexual violence cases. Reflect on the importance of survivors knowing what the laws are so they can make informed decision regarding their choices.

### Facilitator notes:

- Gender based violence is a public, not a private issue that needs attention.
- The root cause of gender-based violence is the imbalance of power in relationships between men and women
- Gender based violence hurts everyone not just women
- Women experience gender-based violence more than men
- Women experience different types of gender-based violence (i.e. physical, psychological, sexual, and economic).
- Everyone has a right to live free of violence

## LAWS

1) Children’s Act 1992

Right to maintenance and upbringing, education and health care:

Discrimination not to be made between a son or daughter and between sons and daughters themselves in matters relating to upbringing:



Prohibition on torture or cruel treatment: No Child shall be subjected to torture or cruel treatment. Provided that, the act of scolding and minor beating to Child by father, mother, member of the family, guardian or teacher for the interests of the Child himself/herself shall not be deemed to be violation of this Section.

The Children's Act, 1992 recognizes girls the same status as boys. Discrimination between sons and daughters as to upbringing, education and health care is prohibited (18).

## 2) Muluki Ain

### Rape (Chapter 14)

On Rape: sexual intercourse with a girl below the age of Sixteen years with or without her consent If a person enters into sexual intercourse with a woman without her consent or enters into shall be deemed to be an offence of rape.

Explanation:

(a) A consent taken by using fear, coercion, undue influence, misrepresentation or use of force or kidnapping or hostage taking (abducting) shall not be considered to be consent.

(b) A consent taken when she is not in a conscious condition shall not be considered to be consent.

(c) Minor penetration of the penis into the vagina shall be considered to be a sexual intercourse for the purposes of this Number.

A person who commits rape with a woman within kinship (prohibited degree of consanguinity) shall be liable to the punishment as referred to in the Chapter on Incest, in addition to the punishment as referred to in this Chapter. In cases where imprisonment for life has been imposed to an offender, an additional punishment for rape shall not be added.

A person who commits rape shall be liable to the imprisonment as mentioned hereunder:

Imprisonment for a term ranging from Ten years to Fifteen years if the minor girl is below the age of Ten years

Imprisonment for a term ranging from Eight years to Twelve years if the minor girl is above Ten or more years of age but below Fourteen years of age

Imprisonment for a term ranging from Six years to Ten years if the minor girl is of Fourteen years of age or above below Sixteen years of age

Imprisonment for a term ranging from Five years to Eight years if the woman is of Sixteen years of age or above but below Twenty years of age

Imprisonment for a term ranging from Five years to Seven years if the woman is of Twenty years of age or above

Notwithstanding anything contained in this Number, the husband who commits a rape with his wife shall be liable to imprisonment for a term ranging from Three months to Six months.

One who commits a gang rape or commits rape with a pregnant woman or a disabled woman shall be liable to imprisonment for a term of Five years, in addition to the imprisonment mentioned in this Chapter.

If someone commits a rape upon knowing the fact that he is living with HIV positive, such an offender shall be liable to imprisonment for a term of One year, in addition to the imprisonment referred to in Number 3 and Number 3A. of this Chapter.

Every person who knowingly accompanies a gang and grabs a woman for rape or helps in committing the rape shall be liable to imprisonment for a term not exceeding Three years. In the case of a girl under Sixteen years of age, such a person shall be liable to the double of such punishment.

One who has made attempt to commit rape but has not succeeded in committing it shall be liable to the punishment which is half the punishment that is imposed on the offender who commits rape.

If a person instigates another person to commit a rape, the instigator shall be liable to the punishment which is half the punishment that is imposed on the offender if the person has committed rape, and which half the punishment that is imposed on a person who has made attempt to rape if the person has made attempt but not been able to complete the commission of rape.

## Women's property and use rights in personal laws

The Country Code, Muluki Ain, 1963, last amended in 2007:

- Section 1: Marriages shall be entered upon one's free will and consent. A marriage may be dissolved through the consent of both parties.
- The wife is entitled to her share of the couple's property if she is abandoned by the husband, or she is treated cruelly, or the husband has brought or kept a second wife
- Section 9: allows a man to marry a second time if his first wife is suffering from an incurable venereal disease, is insane or paralyzed, goes blind, has failed to give birth within the first 10 years of marriage, or has agreed to live separately after taking her share of the property. Women are not allowed to divorce their husbands under similar conditions (18).
- Section 19(1): Women can dispose of their movable property.



### 3) **Domestic Violence (Offence and Punishment) Act, 2066 (2009)**

- No one shall commit; or aid or abet; or incite for the commission of for the act of domestic violence.
- Human Trafficking and Transportation (Control) Act, 2064
- No one shall commit or cause to commit human trafficking and transportation.
- Ten years to Twelve years imprisonment and a fine of One Hundred Thousand Rupees for taking a child from one place to another place within the country.

### **The Act to Amend Some Nepal Acts for Maintaining Gender Equality 2063, 2006:**

- Article 2(5) states that “the unmarried girl, married women or a widow living separately may enjoy the movable and immovable property on her own” (22).

The Domestic Violence (Offence and Punishment) Act, 2066 (2009)

- Section 2(a): "Domestic Violence" means any form of physical, mental, sexual and economic harm perpetrated by person to a person with whom he/she has a family relationship and this word also includes any acts of reprimand or emotional harm.

- Section 2(f): "Economic harm" means deprivation from using jointly or privately owned property or deprivation of or access to employment opportunities, economic resources or means. - Section 13(1): A person who commits an act of domestic violence shall be punished with a fine of Three Thousand Rupees up to Twenty Five Thousand Rupees or Six months of imprisonment or both.

### **The Labour Act, 1992:**

- Section 5(3): “Women may be employed like men after making appropriate arrangements on the basis of mutual agreements between the general manager and the employees or workers in question”.

- Section 42(1), (3): Every establishment employing 50 or more women workers and employees shall arrange for a nursery and women workers and employees shall be granted a recess to nurse their children according to need (23).

**The Contract Act, 2000** enables women to enter into financial contract in any form and establish private firm or company. Women can also buy shares of a company and obtain benefits from them (19).

### **Human Trafficking and Transportation (Control) Act, 2064**

- No one shall commit or cause to commit human trafficking and transportation.

- Ten years to Twelve years imprisonment and a fine of One Hundred Thousand Rupees for taking a child from one place to another place within the country.

## Child Marriage Laws

- Twenty years is the minimum age for marriage for both men and women [General Code (Muluki Ain) 2020 (1964)]. The 2015 Constitution of Nepal for the first time explicitly prohibits child marriage and affirms that this is a punishable offence. New laws aimed at advancing the cause will be effective from August 2018. The government will have increased responsibility to take action against child marriage. If implemented properly, the laws will provide justice to survivors and serve as a deterrent to would-be violators.

## Safe Motherhood and Reproductive Health Right Bill (2075)

- Each women and adolescent shall have the right to obtain sexual and reproductive health related information, information, service and service.
- Every person will have the right to obtain reproductive health care services and information received.
- Each woman has the right to safe motherhood and reproductive health. Each woman has the right to decide birth spacing.
- Every person has the right to be receive information and services for family planning methods.
- Each woman has the right to safe abortion
- Each woman has the right to nutritious food, adequate rest during, pregnancy , lactation and while giving birth
- Each woman has the right to receive appropriate services and consultation from qualified workers
- Every person has the right to choose family planning method of their choice
- Every person has the right to confidentiality regarding their choice of contraception
- This bill forbids forcefully making someone use contraception, or forcing someone to abort
- This act forbids abortion on the basis of child's gender identification
- Health institutions fulfilling set criteria , meeting all requirements and permissions should provide safe abortion services to women



## Activity 2: Concluding Session: Video (60 Mins)

**Materials:** Downloaded video, projector, screen

**Objective:** Recap everything learnt, empower participants to take necessary steps to report

### Instructions:

1) Play the video

<https://www.youtube.com/watch?v=zuXSN6-IIJ0>

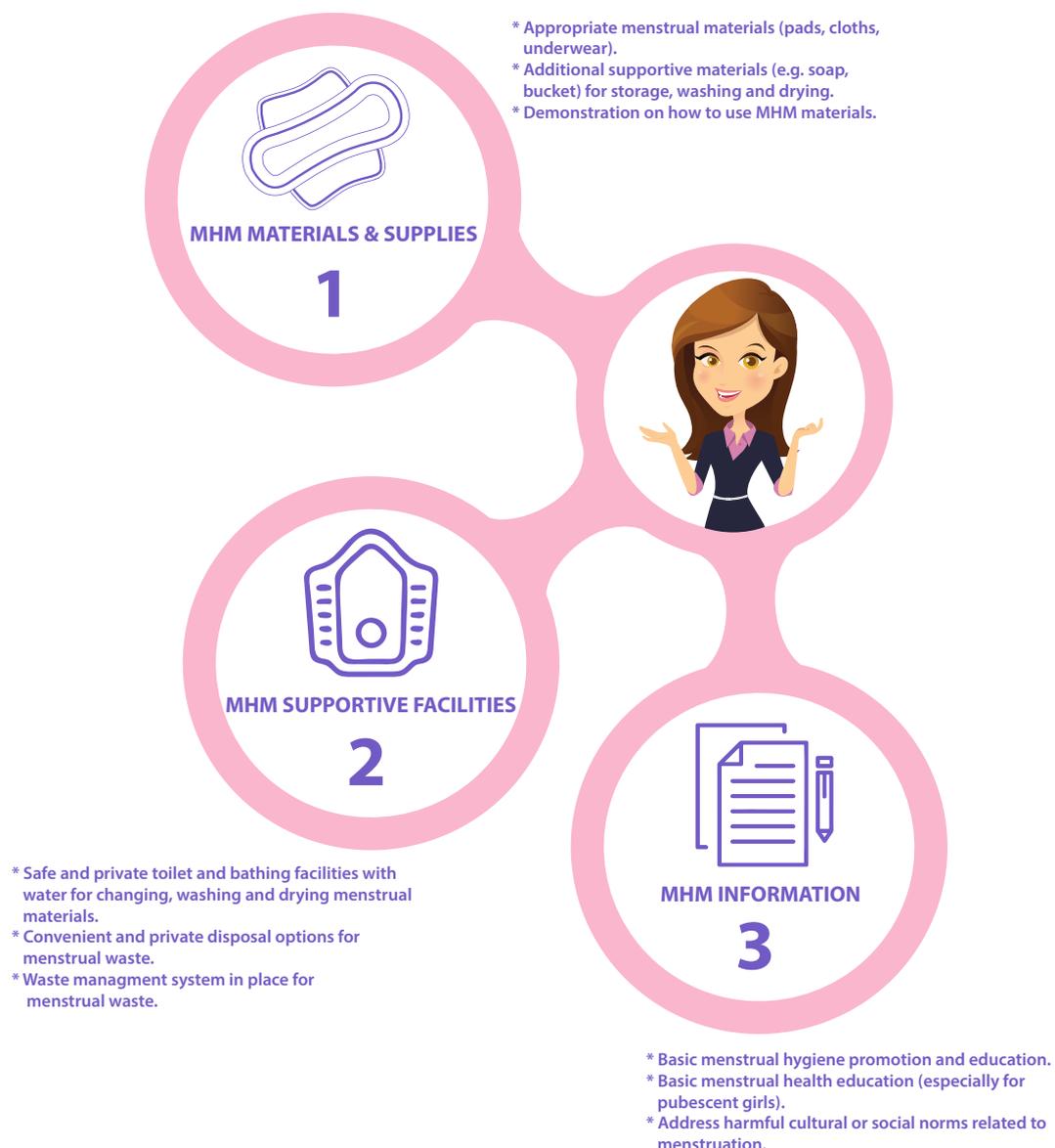
2) Ask the following questions

- What are the key things that you learnt from the video? (Plenary)
- Summarise after, plenary is over with the following
- Violence can and does affect young people. It is not just a problem involving adults.
- Violence can take many forms – it can be physical, psychological or sexual. Psychological forms of violence may be equally as damaging and serious as physical forms.
- Victims of violence are never to blame for the abuse they experience.
- Violence can occur everywhere, home., school, public places etc, so stay alert and act accordingly
- Violence happens to both boys and girls
- Friends, parents, teachers or other trusted adults can really help if a young person is experiencing violence in a relationship.
- Do not tolerate violence, take necessary help required (friends, police, help line, health centres, court if required)

# Chapter 4: Menstrual Hygiene Management

## Introduction

Managing menstruation in resource-poor settings is often challenging, especially when away from home all day. Such challenges are increased by societal taboos, secrecy and embarrassment around menstruation. MHM is a cross-sectoral issue. In order to deliver an effective MHM services, the various sectors must coordinate to ensure that the three central components are addressed



This section of the manual covers puberty and menstruation to provide important information to adolescent youth on the different type of changes that occur during adolescent, the different challenges that both boys and girls face and the support that is available to adolescent.



## WHAT IS PUBERTY?

Puberty is the process that boys or girls undergo to become adults and sexually mature; the period from childhood to adulthood. Puberty involves a series of physical changes in both boys and girls that lead to the development of secondary sex characteristics, the physical features associated with adult males and females (such as the growth of pubic hair). While puberty involves a series of biological or physical transformations, the process can also influence the psychosocial and emotional development of adolescents.

Adolescents also increase their intellectual capacities and experience moral development during puberty. Social identity is supplemented by the search for a psychological identity. An important dimension of puberty is that young adolescents are able to integrate bodily changes into their self-identity, and to incorporate others' responses to these changes into that self-identity. During the early stages of puberty friendships between same-sex peers become more important due to the shared social, physiological changes including a possible detached relationship with parents. The physical growth experienced during puberty is accompanied by new and complex emotions including sexual desire and gender identity. These changes, combined with peer pressure, may cause adolescents to behave in a certain way.

These changes may effect learning both positively and negatively. Positive changes include the ability to reason and understand complex processes and concepts. On the other hand, the negative effects associated with peer pressure, bullying and arrogance can be experienced by some boys and girls. Adolescents react differently to puberty education. Sometimes boys' behavior enables them to assert their stereotypical masculinity and therefore their power and supposed superiority. In some cultures in Zambia, girls who reach puberty are tutored to present themselves in public—as women or young ladies. There are stereotypes of what behaviors are acceptable for young men and women.

## WHEN DOES PUBERTY OCCUR?

Puberty begins when extra amounts of chemicals called “hormones” are produced and lead to physical, emotional, and cognitive changes in the body. As a growing adolescent may feel happy one moment, or sad, or confused the next moment. The onset of puberty varies among individuals. Puberty usually occurs in girls between the ages of 8 and 16, while in boys it generally occurs later, between the ages of 12 and 16. Most girls and boys notice changes in their bodies between the ages of 10 and 14 which take place over a number of years. See Table 1 below:

**Table 1: What are the changes that take place in girls and boys at puberty?**

Changes in Boys	Changes in Girls
<ul style="list-style-type: none"> <li>• Breasts look like they're developing a bit</li> <li>• Chest broadens</li> <li>• Penis and testicles start to grow</li> <li>• Ejaculations begin—boys start to experience “wet dreams” while sleeping</li> <li>• Voice “breaks” and deepens</li> <li>• Boys gain weight and grow taller</li> <li>• Body and facial hair appears (armpits, pubic area, moustache, beard, or sideburns)</li> <li>• Shoulders get wider, muscles start to get bigger and stronger usually between their late forties to mid-fifties. Menstruation is also sometimes known as menses or a menstrual period. During adolescence, a girl’s body starts to change. Along with physical changes (such as growing breasts, wider hips, and body hair) the girl will also experience emotional changes due to hormones.</li> </ul> <p>The cycle for menses is usually around 28 days but can vary from 21 to 35 days. Each cycle involves the release of an egg (ovulation), which moves into the uterus through the fallopian tubes. The body’s tissues and blood start to line the walls of the girl’s uterus for fertilization. If the egg is not fertilized, the lining of a girl’s or woman’s uterus is shed through the vagina along with blood. The bleeding usually lasts between two to seven days each month, with some lighter flow and some heavier flow days. The menstrual cycle for girls during their first year or two is often irregular.<sup>2</sup></p>	<ul style="list-style-type: none"> <li>• Breasts start to develop</li> <li>• Girls gain weight, particularly on the hips</li> <li>• Menstruation starts</li> <li>• Bodies become curvier and hip bones widen</li> <li>• Hair grows in pubic area and armpits</li> <li>• Muscles get bigger and stronger, but they do not show up as much as boys’ muscles</li> </ul>



## WHAT IS MENSTRUATION?

Menstruation is the monthly flow of blood from the uterus through the vagina in girls and women from puberty to menopause.<sup>1</sup> It is a normal process for women and girls, and it starts at puberty or adolescence. Girls tend to start their menstrual periods between the ages of 10 and 14, and this continues until they reach menopause usually between their late forties to mid-fifties. Menstruation is also sometimes known as menses or a menstrual period. During adolescence, a girl's body starts to change. Along with physical changes (such as growing breasts, wider hips, and body hair) the girl will also experience emotional changes due to hormones.

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## MENSTRUAL HYGIENE MANAGEMENT

Menstruation has critical implications for girl's educational outcomes. Menstrual hygiene materials must be made available; linkages to health services must be formed; and safe latrines with water and soap, adequate sanitation and disposal mechanisms must be provided. These objectives benefit all members of the school community, including learners and staff. Furthermore, failure to meet them puts girls at risk of not having a high-quality educational experience.

MHM in school includes the facilities, products, education, training, and support necessary for girls to manage their menstrual periods away from home. MHM is gaining recognition globally as a critical human rights and development problem, one that influences poverty levels and even a country's GDP. Around the world, stigmas and taboos have defined how menstruation is viewed and experienced. Now, a movement is growing, bringing the topic into the open and addressing menstruation as a normal part of being female.

<p><b>What is MHM in school?</b></p>	<p><b>MHM in school is a program that provides:</b></p> <ul style="list-style-type: none"> <li>• Proper girl-friendly facilities: separate toilets for boys and girls</li> <li>• Washrooms for girls with water and soap available</li> <li>• Access to sanitary pads or towels, or other products for discretely absorbing the menstrual flow</li> <li>• Means for disposal of used menstrual absorption products</li> <li>• Training in MHM for teachers, especially SHN coordinators and guidance staff</li> <li>• Education about menstruation for girls and boys, Parents’ and Teachers’ Associations (PTAs), and other parent/community structures</li> <li>• Booklets and other support materials for pupils and teachers</li> <li>• WASH Clubs with MHM activities</li> </ul>
<p><b>Why is MHM important?</b></p>	<ul style="list-style-type: none"> <li>• Lack of MHM is a big reason why girls stay home from school. They can lose up to five days per month, then they lose track of their school work and eventually drop out.</li> <li>• Having access to MHM increases a girl’s confidence, sense of value, and self-worth.</li> <li>• MHM is a main strategy for keeping girls in school and increasing the numbers of educated girls and women in our country</li> <li>• An educated woman contributes significantly to her family’s health and to the development of her country</li> </ul>



**What are the challenges that girls face managing menstruation at school?**

**Menstruating girls frequently experience:**

- Fear of standing up to answer questions, in the classroom, in case they have stained their skirt
- Bullying and teasing from boys
- Shame and fear of people finding out that they are “on their menses”
- Lack of accurate information and fear about what is happening to them
- Health problems related to inability to change their pads regularly i.e. urinary tract infection, vaginal candida, etc.
- Taboos on what they can and cannot do, where they can and cannot be, during their menses
- Lack of support and understanding from the adults in their lives: families, and teachers

## Session 9 : MHM

### Activity 1: SNAKES & LADDERS (60 Mins)

#### Preparation:

- Print out of snake and ladder game
- Cut out of cards (Snake and Ladders)
- Dice

#### Objectives:

To help adolescents learn about Menstrual hygiene management and other key topics such as health, communication etc

#### Instructions:

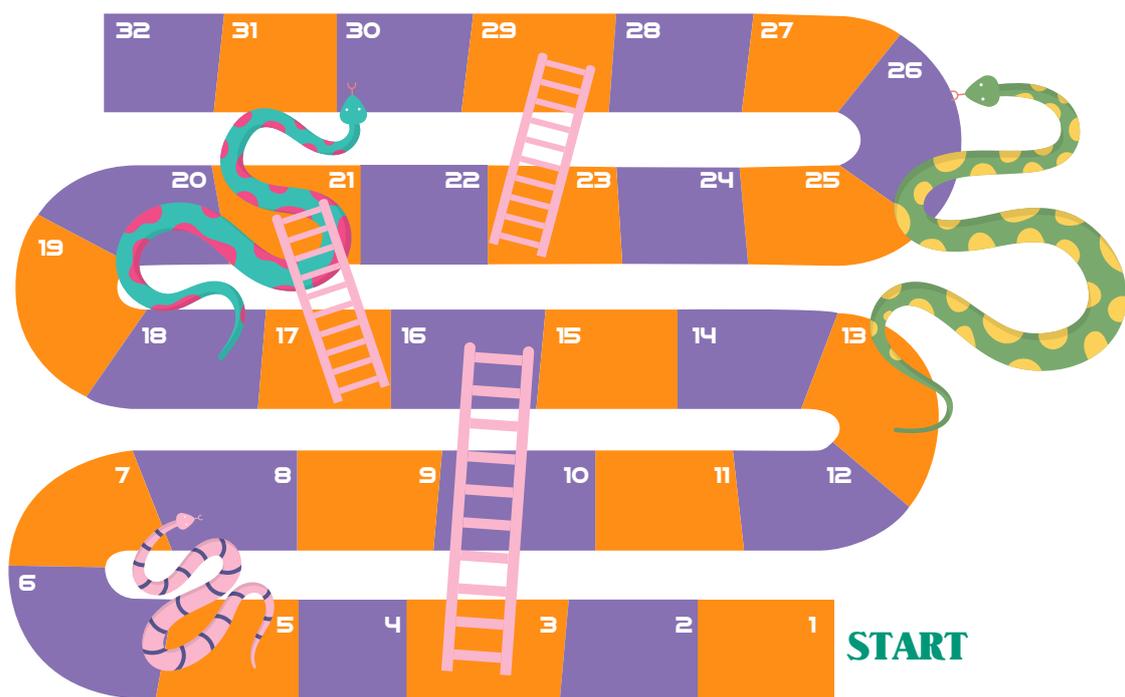
1. The objective of the game is to get to space number the end. Players start on number 1 and take turns rolling the dice to see how many spaces they move. Players keep moving up unless they land on the head of a snake or bottom of a ladder.
2. Lay the corresponding cards on the heads and tails of the snakes, and then the bottoms and tops of the ladders. When a player lands on a head of a snake or the bottom of a ladder, they read the cards placed there. After sliding up or down, they then read the cards on the tail of the snake or the top of a ladder.
3. If a player lands on the head of a snake, they will slide all the way down to the space where the tail of that snake lies.
4. If a player lands at the bottom of a ladder, they will move up to the space where the top of the ladder lies.

#### Additional Notes:

- The ladders correspond to positive behaviors or events that you can do in life relating to SRHR. So when you do something positive, you get to move ahead.
- The snakes correspond to negative behaviors that you can do in life relating to SRHR. So when you do something negative, you move backwards.



Ladder Head	Ladder Tail	Snake Head	Snake Tail
Acquire knowledge and skills about menstrual issues.	Learn safe sex practices.	Have unprotected sex and get pregnant	Don't shower for 7 days
Acquire knowledge about SRH legal provisions	Attend School regularly	Experiment with drugs	Remain Uninformed about MHM and Sexual Health
Top your class	Keep yourself clean	Vandalise the School	Hit / schools your girl friend
Know where to report cases of gender based violence	Wash yourself regularly during periods and change your pad frequently	Make fun of your girl classmate because she has blood stain on her skirt	Fail to report gender-based violence
Eat a Nutritious balanced diet	Create a support group in school to support each other		
Join a Club at school and help to incorporate menstrual hygiene management into school.	Share your problems with teacher, family member or any concerned authority		



## Activity 2: Team Quiz (60 Mins)

**Preparation:** Poster board with pencil OR chalkboard with chalk

**Objective:** Learn about Puberty, Menstruation, Menstrual Hygiene Management and Hygiene

### Instructions:

1. Depending on size of class, split students into 5 teams of about 7-8 students.
2. The objective of the game is for a team to earn the most points. A team can earn points by answering one of the questions correctly.
3. The facilitator will begin the quiz by reading out the questions. The team that raises their hand first, will get to answer the questions asked. The team will have 1 minute to discuss as a group and decide on its answer. If the guess is correct, then that team is awarded the points. Each answer is worth 10 points. The facilitator can then write these points on the chalkboard or can record points on a piece of paper. If the answer is wrong, another team has the chance to try to win those points. If no team can answer, then the facilitator will read out the answer and proceed to the next question.
4. The game ends when all of the questions have been answered. The winning team is the one with the most points!

### Additional Notes:

- Encourage the teams to come up with a group name to promote team building, fun, and creativity!
- After each question, make sure to clarify the answer to make sure that the students understand what the question was asking and what the answer is. If time permits, you can also give a brief discussion or explanation regarding the subject matter of the question, after it is answered



## Quiz Table:

<p><b>Category #1: When I grow up (puberty)</b></p>	<p><b>Category #2: Let's talk about sex (sexual health)</b></p>	<p><b>Category #3: Reproductive health</b></p>	<p><b>Category #4: Keep it clean (hygiene)</b></p>
<p>Q: What is the age range at which puberty typically occurs?</p> <p>A: The age range of 8 to 16 years.</p>	<p>Q: Name 3 sexually transmitted diseases (STDs) or sexually transmitted infections (STIs).</p> <p>A: Chlamydia, Syphilis, Herpes, HIV, Hepatitis, HPV, Gonorrhea</p>	<p>Q: True or False. Once a female reaches puberty, she will have her period for the rest of her life.</p> <p>A: False. A female's period stops temporarily when she is pregnant and then stops permanently once she has gone through menopause.</p>	<p>Q: What does MHM stand for?</p> <p>A: Menstrual hygiene management</p>
<p>Q: Name 2 things that happen to both girls and boys during puberty.</p> <p>A: Changes that happen to both boys and girls: Get taller. Skin gets oilier and is more prone to acne. Grow hair under armpits and around pubic area. Hormones start developing. Start to develop body</p>	<p>Q: Name 2 ways to prevent getting sexually transmitted diseases and infections.</p> <p>A: Abstinence, barrier methods, condoms, both partners get tested and then remain mutually exclusive to each other</p>	<p>Q: What is it called when blood flows to the penis and it becomes enlarged and hard?</p> <p>A: An erection.</p>	<p>Q: True or False. It is important to wash yourself daily in order to avoid body odors and getting infections.</p> <p>A: True.</p>

<p>Q: Name 3 changes that happen to girls when going through puberty and 3 changes that happen to boys when going through puberty.</p> <p>A: Physical changes to boys: voice changes, Adam's apple, testes drop, grow hair under armpits, on chest, and in pubic area, skin gets oilier. Physical changes to girls: Breasts get larger, hair appears under armpits and in pubic area, hips get wider, skin gets oilier, start menstruating</p>	<p>Q: How do you prevent an unwanted pregnancy?</p> <p>A: Condoms, other birth control methods (contraceptives pills or injectables, etc.)</p>	<p>Q: What is menstruation and how often does it occur?</p> <p>A: When the lining of the uterus is shed once each month and causes bleeding from the vagina. It occurs on average once every 28 days but can vary.</p>	<p>Q: How often should menstrual pads be changed?</p> <p>A: Pads should be changed at least 2 times a day, if not more.</p>
<p>Q: What gland initiates the start of puberty in both boys and girls?</p> <p>A: Pituitary gland</p>	<p>Q: What is the only 100% effective way to prevent pregnancy?</p> <p>A: To remain abstinent (no sexual relations). No contraceptive is 100% effective, not even a condom.</p>	<p>Q: True or False. If a girl's egg is mature but she has not yet had her first menstrual period, she is still able to become pregnant if she has sexual relations.</p> <p>A: True.</p>	<p>Q: Name 2 places where you can safely and hygienically dispose of pads?</p> <p>A: Pads should be thrown away in disposal bins, pit latrines, or should be incinerated.</p>



## Session 10: MHM

### Activity 1: Menstrual Awareness Video: (60 Mins)

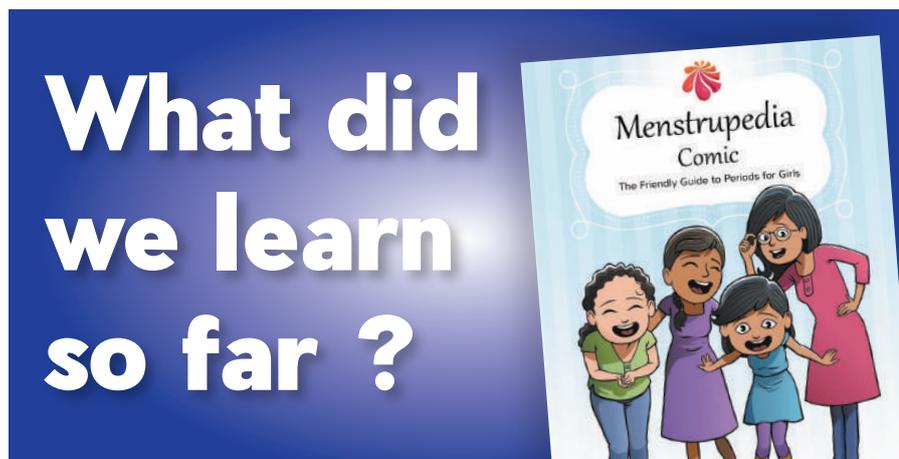
**Preparation:** Projector, Projector Screen, Pen drive with MHM video.

**Objective:** Learn about Puberty, Menstruation, Menstrual Hygiene Management and Hygiene

#### Instructions:

- 1) Play the Menstrupedia, “Hello Periods” Video
- 2) At each Pause screen ask the following questions:

#### BLUE PAUSE SCREEN



Q1: What changes do we see in the body while growing up?

Ans: Height and weight increases, breasts begin to develop, hips widen and hair begins to appear in the underarms and around the genitals.

Q2: What is vaginal discharge? Is it normal?

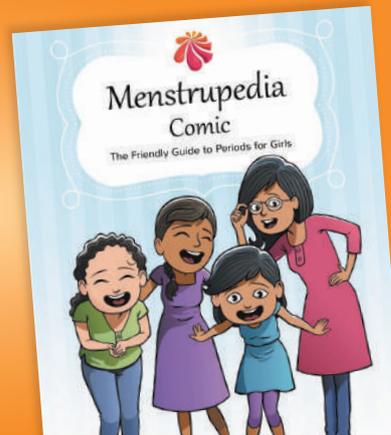
Ans: Vaginal discharge is whitish or clear secretions from the vagina. It is normal.

Q3: How many openings are there between our legs? What is the purpose of each opening?

Ans: There are three openings between our legs. Urethra, where the urine comes out from, vagina, where the baby comes out from during child birth and anus, where the feces come out from.

## ORANGE PAUSE SCREEN

**What did we learn so far ?**



Q1: What do we need iron for?

Ans: Iron is necessary for carrying oxygen in the blood. Deficiency of iron causes Anemia in which you feel very weak even after taking rest.

Q2: What are the sources of iron?

Ans: Peas, spinach, potato with skin, dal, nuts and dry fruits and fish

Q3: Why is it better to have iron rich food with food rich in vitamin C?

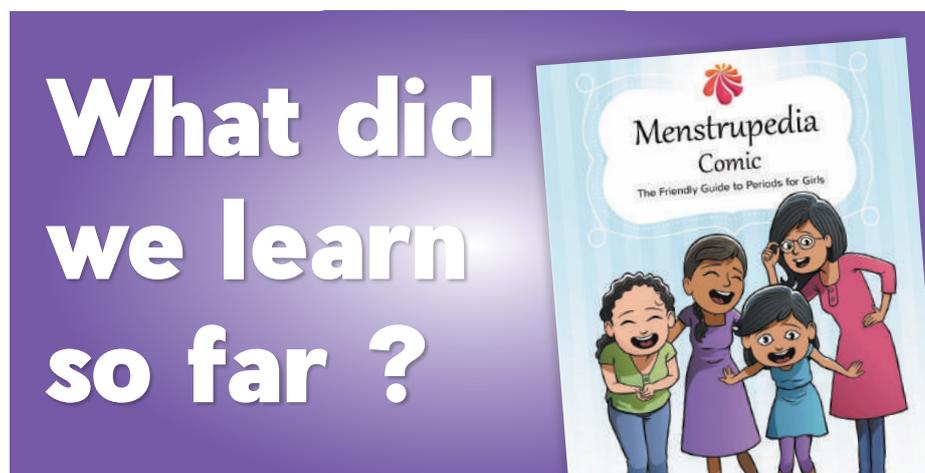
Ans: Having iron rich food with food rich in Vitamin C increases the absorption of iron in the body.

Q3: Why is it better to have iron rich food with food rich in vitamin C?

Ans: Having iron rich food with food rich in Vitamin C increases the absorption of iron in the body



## VIOLET PAUSE SCREEN



Q1: What are periods? Is it normal?

Ans: Periods is a process in which blood comes out of the vagina for 3-7 days. It is normal.

Q2: Why does blood come out of vagina during periods?

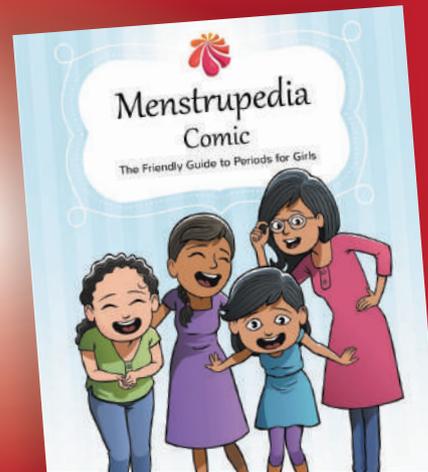
Ans: In the absence of a baby, the uterus sheds its inner lining of blood and soft tissue, which we see as blood coming out of the vagina.

Q3: When do periods start and stop? Ans: Periods generally start between the ages of 10 to 15 years and stop between the ages of 45 to 55 years.

Ans: Periods generally start between the ages of 10 to 15 years and stop between the ages of 45 to 55 years.

## RED PAUSE SCREEN

# What did we learn so far ?



Q1: Can you find out when will you get your next period? How?

Ans: Yes. Periods generally occur after regular intervals which can be known by tracking periods on a calendar. This interval is known as length of menstrual cycle. By knowing the date of last period and the length of menstrual cycle, we can find out the date of next period.

Q2: Why do some girls feel pain in their lower abdomen during periods? How to reduce pain?

Ans: The uterus contracts to squeeze out the menstrual fluid. That's why some girls feel pain in their lower abdomen. The pain can be reduced by applying a warm heating pad to the lower abdomen and getting the body into child pose (Balasana), butterfly pose (Titliasana) and cobra pose (Bhujangasana) and holding for five deep breaths.

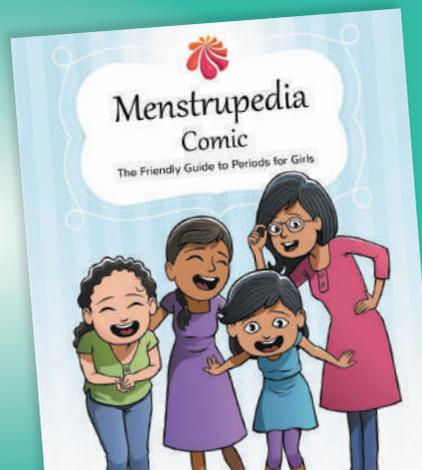
Q3: What is menopause?

Ans: Between the ages of 45 and 55 years, periods stop. This is known as menopause.



## GREEN PAUSE SCREEN

# What did we learn so far ?



Q1: What is a sanitary pad and how to use it?

Ans: Sanitary pad is a thin pad of absorbent material that is used to absorb the blood coming out during periods. Sanitary pad is worn in the underwear such that it exactly covers the opening of the vagina.

Q2: How to dispose a sanitary pad? Can sanitary pad be flushed down the toilet?

Ans: Used sanitary pad must be wrapped in a waste paper and put in a garbage bin. There after the lid of the garbage bin must be closed. Sanitary pad should never be flushed down a toilet.

Q3: What to do if you get periods in school?

Ans: We should tell a teacher or school nurse about it and ask her for a pad. We can also borrow a pad from a friend.

Q4: What hygiene measures should be taken during periods?

Ans: We should take a shower at least once a day. We should wear clean undergarments and change them regularly. Pads should be changed regularly, and hands should be washed clean before and after changing pads. Genital area should be kept clean and dry

## Activity 2: Match Game (60 Minutes):

- Preparation: Paper ; Pen or pencil
- Matching cards (ideally you can have 1 set of the matching cards for each small group of 4 or 5 pupils)

### Objectives:

- Recap knowledge on Puberty and Menstruation

### Instructions:

1. Print out cards, or write them on paper, and then cut them into individual pieces. Make sure to shuffle all of them so that none of the pairs are close to each other. Then give the group of pupils the cards and allow them time to match up the correct question and answer pairs.
2. After the pupils have made all of their matches, then go through each question to reveal the correct answer. Make sure to explain any questions that are confusing for any of the pupils or questions that they got wrong.

### Additional Notes:

- Feel free to get creative and make up your own questions as well!
- The more cards there are, the harder and longer the game will be.
- The cards can be printed out, or can be copied onto paper.



What is the age at which puberty typically begins?	The age range is usually 8 to 16 years.	What are breasts?	These body parts grow on a girl's chest during puberty.
What is body odor?	This is the result of sweat mixing with bacteria on a person's skin.	What are pads or tampons?	These can be used by girls to absorb the flow of menstrual blood.
What is acne?	A common skin condition for boys and girls during puberty.	What is the uterus or womb?	The place where a fetus (baby) grows inside a female's body.
What is pubic hair?	This grows in the genital area during puberty.	What is estrogen?	A female sex hormone that increases during puberty.
What are ways to stay healthy during puberty?	Rest, exercise, and good nutrition and hygiene.	What are the ovaries?	Where the eggs/ova are stored in a female's body.
What two male and female body parts should be examined monthly?	The breasts and testicles.	What is menstruation or a period?	When the lining of the uterus is shed each month.
What is the pituitary gland?	The gland that causes puberty to begin.	What is vaginal fluid or discharge?	This keeps the vagina clean and healthy.
What happens when the female and male sex cells (the sperm and the egg) meet?	Pregnancy results if these join during sexual intercourse.	What are the fallopian tubes?	The tubes that carry the egg/ovum from the ovary to the uterus.
What is an erection?	This is when the penis becomes enlarged and hard.	What are the testicles?	Where sperm are produced.
What is a wet dream or nocturnal emission?	This is an ejaculation during sleep.	What is testosterone?	The hormone responsible for most of the changes in boys during puberty.

What is semen?	The fluid produced in the prostate containing sperm.	What is one teaspoon?	The amount of fluid released when a male ejaculates.
What is the larynx?	When this body part grows, a boy's voice gets deeper.	What is the urethra?	The tube that allows for both urination and ejaculation.

## Session 11: MHM

### Activity 1: Menstrual Cycle Game (60 Mins)

**Preparation:** Materials: Menstrual Cycle set of cards

- Secretions cards (12 cards) – Purple
- Period cards (5 cards) – Purple
- Cycle days (1-32) – Purple
- Sperm card (card # 41) – Light Blue
- Ovum card (card # 42) – Light Blue

### Objective:

To understand the menstrual cycle and fertility during the typical woman's cycle and clarify misconceptions about menstruation and fertility.

### Instructions:

1. Introduce the Menstrual Cycle game. In this game, we will learn about when women are fertile or not during their cycle and how this can influence choices around having sexual relations or using family planning. We will also learn that a woman's monthly bleeding is normal and not unclean.
2. Spread out the number cards 1-32 on the ground in a large circle and have participants stand outside of the circle.
  - **Ask:** What can anyone tell me about menstruation, or a monthly menstrual cycle?
  - **Say:** All of these cards represent the woman's menstrual cycle and each card is a day of the cycle. It is called a cycle because it happens over and over again. While the number of days will vary between women, for now we are using 32 days



3. Next, place the red drop cards next to the cards numbered 1-5.
4. Say: “The red drops represent menstruation (or monthly bleeding). Women usually have monthly bleeding for three to seven days. Every woman is different and that is normal.”
5. Ask: “Why do women bleed every month?”  
**Say:** “Every month, a woman’s womb prepares to receive a fertilized egg if she becomes pregnant. If her egg is not met by the man’s sperm (fertilized egg) her body gets rid of the blood from her womb. This is menstruation and it happens to women every month, from puberty to old age.”
6. Next, place a few clear drop cards by the cards 8 to 19.  
**Say:** “These cards represent secretions. Every month, women’s bodies produce clear secretions as a normal part of their cycle. When they are healthy they do not smell, itch or cause any pain. Healthy secretions are a sign that a woman may be fertile, and are most often present from day eight to 19.”
7. Next - hold up the card with the egg and place it on Day 12.  
**Say:** “Every woman’s body releases one egg into her womb each month. It is not possible to know the exact day an egg comes out, but it is sometime mid-cycle”
8. Next, hold up a sperm card:  
**Say:** “Men are fertile every day since puberty and are able get a woman pregnant during the fertile period if their sperm meet an egg. This will not happen if they use family planning methods, or if they have sexual relations during a time when the egg is not present.”
9. Next, place the sperm card on Day 13  
**Ask:** What happens here when there is an egg and a man and woman have sexual relations such that there is also a sperm?  
**Say:** “The answer is that if the egg and sperm meet, the egg is fertilized and it means a pregnancy.”
10. Next, remove the egg card from Day 12 while leaving the sperm card.  
**Say:** “If a woman is using a hormonal method of family planning such as pills, implants, or injectables, she does not release an egg and so there is no possibility that the sperm will meet an egg.”
11. Next, place the red drop cards next to the cards numbered 1-5.  
**Tell:** “The red drops represent menstruation (or monthly bleeding). Women usually have monthly bleeding for three to seven days. Every woman is different and that is normal.”

**Ask:** “Why do women bleed every month?”

**Say:** “Every month, a woman’s womb prepares to receive a fertilized egg if she becomes pregnant. If her egg is not met by the man’s sperm (fertilized



egg) her body gets rid of the blood from her womb. This is menstruation and it happens to women every month, from puberty to old age.”

12. Next, place a few clear drop cards by the cards 8 to 19.  
**Say:** “These cards represent secretions. Every month, women’s bodies produce clear secretions as a normal part of their cycle. When they are healthy they do not smell, itch or cause any pain. Healthy secretions are a sign that a woman may be fertile, and are most often present from day eight to 19.”
13. Next - hold up the card with the egg and place it on Day 12.  
**Say:** “Every woman’s body releases one egg into her womb each month. It is not possible to know the exact day an egg comes out, but it is sometime mid-cycle”
14. Next, hold up a sperm card:  
**Say:** “Men are fertile every day since puberty and are able get a woman pregnant during the fertile period if their sperm meet an egg. This will not happen if they use family planning methods, or if they have sexual relations during a time when the egg is not present.”
15. Next, place the sperm card on Day 13  
**Ask:** What happens here when there is an egg and a man and woman have sexual relations such that there is also a sperm?  
**Say:** “The answer is that if the egg and sperm meet, the egg is fertilized and it means a pregnancy.”
16. Next, remove the egg card from Day 12 while leaving the sperm card.  
**Say:** “If a woman is using a hormonal method of family planning such as pills, implants, or injectables, she does not release an egg and so there is no possibility that the sperm will meet an egg.”
17. Explain Fertile and Unfertile Days:  
Walk to participants standing behind cards 8-19 and say that during this time when a woman has secretions and her egg is released, it is possible she can get pregnant. Then walk to the participants standing behind cards 20-30 and say that because there is likely no egg in the womb during these days, the sperm will not meet an egg, therefore a woman is less likely to get pregnant.  
  
**Emphasize:** Just as the length of the cycle or bleeding days can vary from one woman to the next and this is normal, the number of days in which a woman may be fertile or infertile also varies. Therefore, you cannot predict your fertile or infertile days without more information about the consistency of your own menstrual cycle.
18. Next, tell participants to walk in a circle around the cards while clapping or singing. While they are circling, put the sperm on different card numbers.



19. Put the sperm on card 22. Ask again if the woman can get pregnant on this day. The answer is NO because there is no egg.
20. Put the sperm on day 15. Ask again if the woman can get pregnant on this day. The answer is YES because she has secretions that tell her she is fertile. Also, show the egg card on day 12 say that this is around the time an egg comes out.  
**Ask:** What are options for avoiding pregnancy on the 15th day of her cycle?  
**Answer:** She can avoid having sexual relations or use a condom (so there is no sperm) or she can use another family planning method (so there is no egg).
21. Repeat as many times as necessary to be sure the participants understand when there are fertile days during their cycle.
  - Discuss:
  - What information about the menstrual cycle was new to you?
  - What difference might it make in your life to know this?
22. Next Steps:
23. What is one thing that you learned today that you would share with a friend or family member? (What about your husband or wife?)
24. Explain Fertile and Unfertile Days:  
Walk to participants standing behind cards 8-19 and say that during this time when a woman has secretions and her egg is released, it is possible she can get pregnant. Then walk to the participants standing behind cards 20-30 and say that because there is likely no egg in the womb during these days, the sperm will not meet an egg, therefore a woman is less likely to get pregnant.  
**Emphasize:** Just as the length of the cycle or bleeding days can vary from one woman to the next and this is normal, the number of days in which a woman may be fertile or infertile also varies. Therefore, you cannot predict your fertile or infertile days without more information about the consistency of your own menstrual cycle.
25. Next, tell participants to walk in a circle around the cards while clapping or singing. While they are circling, put the sperm on different card numbers.
26. Put the sperm on card 22. Ask again if the woman can get pregnant on this day. The answer is NO because there is no egg.
27. Put the sperm on day 15. Ask again if the woman can get pregnant on this day. The answer is YES because she has secretions that tell her she is fertile. Also, show the egg card on day 12 say that this is around the time an egg comes out.

Ask: What are options for avoiding pregnancy on the 15th day of her cycle?  
Answer: She can avoid having sexual relations or use a condom (so there is no sperm) or she can use another family planning method (so there is no egg).

28. Repeat as many times as necessary to be sure the participants understand when there are fertile days during their cycle.

29. Discuss:

- What information about the menstrual cycle was new to you?
- What difference might it make in your life to know this?

30. Next Steps:

What is one thing that you learned today that you would share with a friend or family member? (What about your husband or wife?)



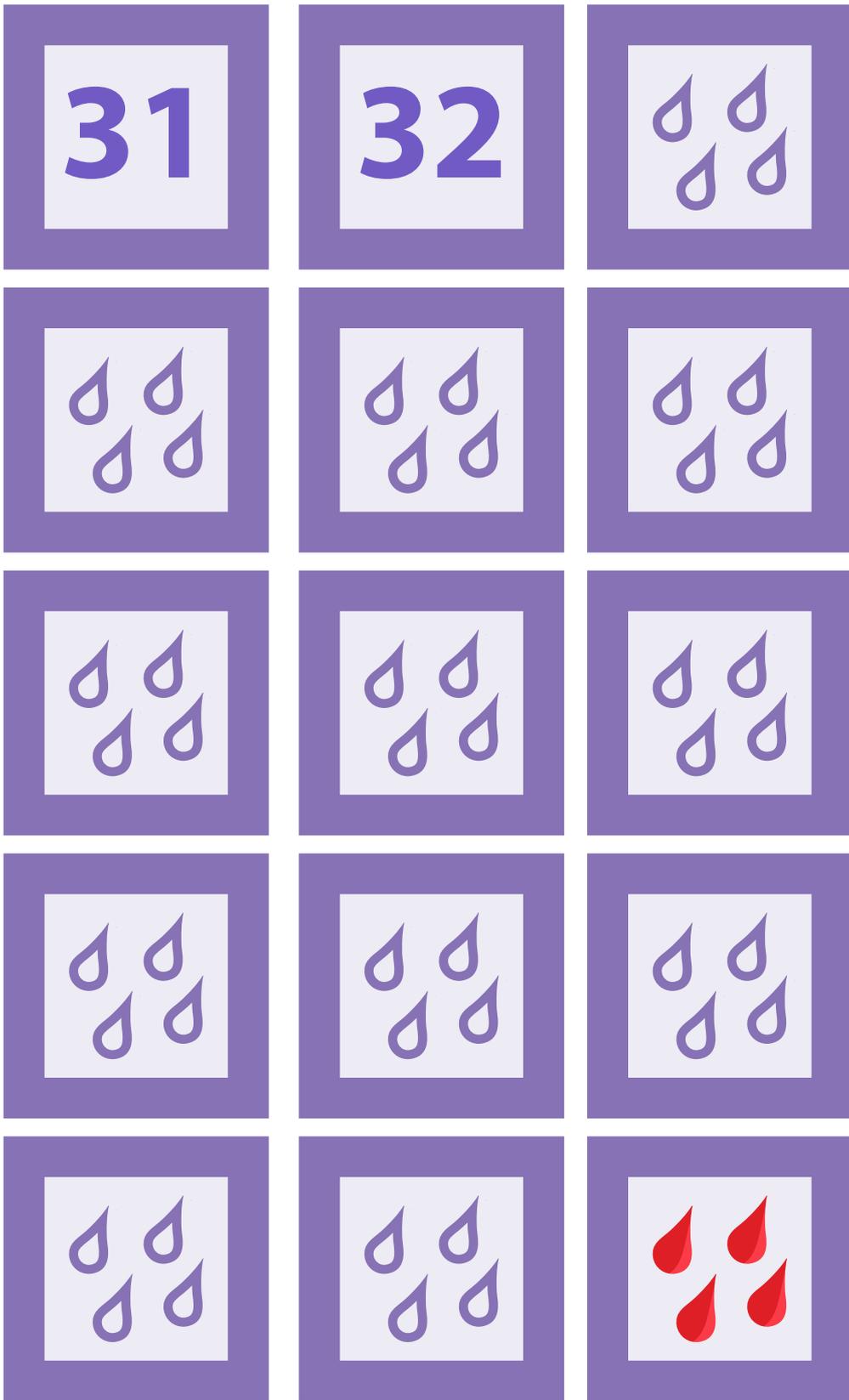


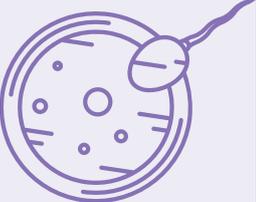
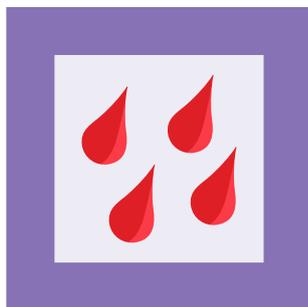
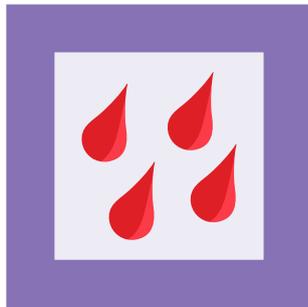
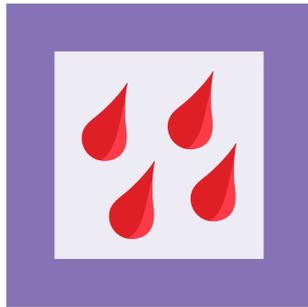
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15



16	17	18
19	20	21
22	23	24
25	26	27
28	29	30







**Ovum**  
produces by women  
lives for 1 day  
can only be female

A square purple frame containing a diagram of a large circular cell with a tail-like structure extending from one side. Below the diagram is the text: **Ovum**, produces by women, lives for 1 day, can only be female.

**Sperm**  
produces by man  
lives for 5 day  
can only male or female

A square purple frame containing a diagram of four sperm cells, each with a circular head and a long, wavy tail. Below the diagram is the text: **Sperm**, produces by man, lives for 5 day, can only male or female.

## Activity 2: Activity ROLE-PLAY (60 Mins)

### Preparations/Materials Needed

- Volunteer actors (7)
- Cloth or pad

The play requires three males and two females to play the role of pupils, plus one additional participant (male or female) to play the role of teacher. The actors must be comfortable role-playing on the topic of menstruation. They should receive the script in advance.

### Objectives

- 1) Describe the basic bodily function of menstruation
- 2) Through a role-play and discussion, list challenges girls face in managing their monthly menses (periods) in school
- 3) Identify small doable actions to address these challenges

### Instructions

- 1) Setting Up

With the desks and chairs of the training room, set up a simulated classroom and put the rest of the chairs around the classroom scene so the participants can be spectators. Scene 2 is in the school yard so make sure you can play both the classroom scene and the school yard scene without moving too much furniture around

- 2) Ask the actors to act out the play

### Scene 1: A Grade 7 Classroom

Teacher calls pupils to class. Ritika has a stain on the back of her skirt. Teacher calls roll of all girls and boys. Two girls Reeta and Seeta are absent. She notices. Teacher is giving a lesson. She is explaining something and asks a question.

Hari and Shyam raise their hands quickly and want to be recognized.

**Teacher:** “Not always the same boys! Let’s hear from some girls. Stand up, Ritika, and tell us what you know!”

Ritika stands up and the boys see the stain on her skirt and start mocking and teasing her.

Ritika is completely embarrassed and ashamed. She closes her books, sits down, and refuses to participate anymore. Teacher understands what happened and calls a break. Teacher helps Ritika to leave last and hands her a large shawl to

and calls a break. Teacher helps Ritika to leave last and hands her a large shawl to wear.

## Scene 2: Girls in the School Yard

Reeta and Seeta are waiting for Ritika to come out of the classroom. The girls talk about the embarrassing moment Ritika just faced. Then they each share their own experience.

**Reeta:** “During my last menses, I had such pain I couldn’t come to school, so I stayed home for 2 days.”

**Seeta:** “I hate the toilet facilities here. There is no privacy. How am I supposed to clean up and change my pad? It stinks in there, and those boys tried to follow me and laughed and mocked me.”

The girls talk about their absent classmates. One girl passed by the house of an absent one in the morning and tells what her problem was: She had cramps, she wouldn’t walk to school for fear of soaking her pad that is made from strips of old cloth.

One girl said she heard an awful story of a pupil in their village who got her menses for the first time and used the same pad for 7 days and came to school. She got an infection that destroyed her reproductive system.

Ritika: “Today was the last straw. I am leaving now to go home. I can’t go back in that classroom.”

Ritika leaves to go home. The girls go back in the classroom.

## Scene 3: Back in the Classroom

Teacher decides to talk to the boys and girls about what happened to Ritika before recess.

**Teacher:** “This girl had her menses (monthly period), do you know what that is? We learned about this in Growth and Development. Boys, how do you think Ritika felt about the teasing and about her skirt stain? Do you think it was her fault? Is she alone? No, every single girl experiences menstruation and it is completely normal.”

The boys respond by saying that they feel bad about their behavior now that they understand.

The girls also say things about how they viewed the earlier embarrassing episode and tell why the other girls are absent today.



The girls complain to the teacher about the school's poor facilities and lack of support and information.

**Teacher:** “We clearly have a big problem. I know it's hard to talk about this with your families. Let's talk to the head teacher and see if we can come up with a plan.”

After the Role-Play Decide what MHM Actions Are Doable and Feasible

**Ask/Discuss:**

- What just happened?
- What problems/challenges/issues did you notice related to menstrual hygiene management?
- What makes it hard for a girl or female teacher to privately manage menstruation?

**TRAINER'S NOTE:** Make sure to touch upon problems related to the following topics:

- Sanitation facilities
- Products
- Rules or school policy
- Ignorance
- Shaming and bullying

**Ask/Discuss:**

- Do you think this is an issue in our school?
- What are some actions—especially small doable actions—schools and/or parents can carry out to improve the situation? Refer to the list of topics and make sure problems related to each one are addressed through a small doable action.

## Session 12: MHM

### Activity 1: Myths and Facts (60 Minutes)

1. During Menstruation you shouldn't go out in the sun, you shouldn't look at a man's face, you shouldn't leave your room
2. During menstruation you should not cook in the kitchen
3. The homemade sanitary pad used during menstruation should be soft and clean

4. During menstruation attention to personal hygiene is very important
5. Women should stay outside in a shed during menstruation
6. During menstruation, green vegetables, fruits, and milk shouldn't be eaten
7. Females become lesbians when they don't find a male partner
8. Being transgender is a sin of the past
9. You cannot get an STD from your first experience of sexual intercourse
10. STD can be transmitted encountering another person's urine on toilet seat
11. Cleaning my genitals regularly helps to reduce the risk of sexual infection/disease
12. We can recognize people who are HIV positive by their physical appearance
13. Emergency Contraceptive pills can be used as a method of family planning.

### Myths and Facts with Answers:

1. During Menstruation you shouldn't go out in the sun, you shouldn't look at a man's face, you shouldn't leave your room (False)
2. During menstruation you should not cook in the kitchen (False)
3. The homemade sanitary pad used during menstruation should be soft and clean (True)
4. During menstruation attention to personal hygiene is very important (True)
5. Women should stay outside in a shed during menstruation (False)
6. During menstruation, green vegetables, fruits, and milk shouldn't be eaten (False)
7. Females become lesbians when they don't find a male partner (False)
8. Being transgender is a sin of the past (False)
9. You cannot get an STD from your first experience of sexual intercourse (False)
10. STD can be transmitted encountering another person's urine on toilet seat (False)



11. Cleaning my genitals regularly helps to reduce the risk of sexual infection/disease (False)
12. We can recognize people who are HIV positive by their physical appearance (False)
13. Emergency Contraceptive pills can be used as a method of family planning. (False)

## Activity 2: Action Plan for MHM (60 Mins)

**Preparation:** Flip Charts, Markers, Print out of Action Plan format

**Objective:** Prepare an MHM friendly action plan for the school

### Instructions:

- 1) Divide the group into 4
- 2) Hand them the print out of the Action Plan template
- 3) Make each group work on the template and record in flip charts
- 4) Ask each group to select a leader
- 5) Have the leader of the groups present the action plan
- 6) Open the floor to other group members for discussion
- 7) After groups have finished discussing, pick out the most realistic and doable actions
- 8) Conclude the session by stating the importance of sticking to the action plan and monitoring it.

### Action Plan Format

S.N	Actions	By Whom	By When

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## About US

Alleviate Poverty Empowering women In Rural areas Of Nepal (APEIRON) is a Non-Governmental Organization established in 2013 with the DAO registration number 223. It is also affiliated with Social Welfare Council (SWC) with the number 38100. Currently, APEIRON has operations in 14 districts of Nepal.

[www.apeirononlus.org](http://www.apeirononlus.org)



**APEIRON**

MAHILA SASHAKTIKARANDWARA  
GRAMIN NEPAL KO  
GARIBI NIWARAN