

Community-based Extended and Continuous Education and Learning (EXCEL)

Facilitator Guide – Phase (3)

| Term A and B - Each Term 12 hours | | | |
|--|---|------|------|
| Phase | | | |
| III | | | |
| A1 | Self awareness | Time | Page |
| | A-1-1 Let's have a clear conscious | 60' | 8 |
| | A-1-2 Let me say something | 60' | 11 |
| A2 | Communication Skills | | |
| | A-2-1 What kind of person should be? | 60' | 14 |
| | A-2-2 Which way do you choose? | 60' | 18 |
| | A-2-3 Control your tongue | 60' | 21 |
| | A-2-4 "No, I am sorry is not enough" | 60' | 23 |
| A3 | Mental health (be mindful, think before you do) | | |
| | A-3-1 Be at peace | 60' | 26 |
| | A-3-2 Counselling | 60' | 28 |
| A4 | Communicable diseases (Malaria, Pulmonary TB)-120' | | |
| | A-4-1 Malaria | 60 | 31 |
| | A-4-2 Pulmonary TB | 60 | 40 |
| A5 | Disaster Preparedness -120' | | |
| | A-5-1 Natural Disaster | 40 | 46 |
| | A-5-2 Think before to reduce risk and hazards | 40 | 53 |
| | A-5-3 Let's prepared for disaster | 40 | 58 |
| A | Summary Key Messages | | 60 |
| B1 | Decision Making and problem solving (Questionable world) | 120' | 62 |
| | B-1-1 Making Difficult decision | | |

| | | | |
|-----------|---|-----|-----|
| | | | |
| B2 | Drugs and alcohol, (What next when addicted, How to help, Not a Robot) | | |
| | B-2-1 Alternative options if possible 1 | 60' | 66 |
| | B-2-2 Alternative options if possible 2 | 60' | 71 |
| B3 | HIV/AIDS (Never enough, Live meaning fully) | | |
| | B-3-1 Who has HIV/STI? | 60' | 75 |
| | B-3-2 Live meaningfully | 30' | 90 |
| | B-3-3 Is there ever enough | 60' | 93 |
| B4 | HIV/AIDS (Open your heart) | | |
| | B-4-1 Be mindful! Think before you do | 60' | 95 |
| | B-4-2 Reproductive system (G9L7) | 60' | 98 |
| | B-4-3 Contraception (G9L10) | 60' | 107 |
| | B-4-4 Needs, Rights and Responsibility | 60' | 115 |
| B5 | Gender role (G8L5) | | |
| | B-5-1 It depends on you | 60' | 118 |
| | B-5-2 Let's review (Personal Protection) | 60' | 121 |
| B | Summary Key Messages | | 124 |

Extensive and continuous Education and Learning (EXCEL) Goal

To promote Life Skills of out-of-school youths by actively participating themselves in Community-based Extended and Continuous Education and Learning (EXCEL) Program

Objectives

Out of school youths will be able to

1. Behave accordingly by knowing facts for their physical and mental health.
2. Live protectively from the diseases that usually occur in their environment.
3. Live in accordance with the environment by acquiring the life skills and practices.
4. Live safely and practice good healthy behaviors by getting facts concerning with HIV/AIDS prevention.

Objectives of the Excel Training

At the end of the EXCEL phase 1, 2, and 3 trainings, the facilitators will be able to

1. Facilitate the lessons to the out of school youths by knowing the objectives of implementing EXCEL programmers
2. To gain the practice of friendly cooperation among facilitators.
3. To find out ways to mobilize and educate out-of-school youths
4. To create programs for out-of-school youths that is consistent with their respective communities
5. To nurture the practices for fostering self-confidence

Life Skills (General)

At the end of these lessons, youths will be able to have the following skills.

Problem Solving

The youths will be able to clearly identify problems and their causes.

Creative Thinking

The youths will be able to identify at least 3 possible solutions to a problem.

Critical Thinking

The youths will be able to anticipate the consequences of the problem for self, family and community.

The youths will be able to assess the advantages and disadvantages of each possible solution.

Decision Making

The youths will be able to identify the best possible solution for him/her based on personal ability and living situation

Communication

The youths will be able to clearly and directly state opinions and give good reason.

The youths will be able to ask for help and advice, and seek information when needed.

Self Awareness

The youths will be able to identify realistic goals and expectations based on personal ability and living situation.

Interpersonal Relationships

The youths are able to identify the benefits and limitations of living together in society.

Empathy

The youths will be able to recognize the needs of others, provide support and/or compromise.

Coping with Stress and Emotions

The youths will be able to distinguish between rational thinking and emotional thinking.

**EXCEL Training for Facilitators and Monitors
Part (3)**

| Part (S) | | | | Lunch Break-12 to 1 | 1:00 – 2:00 | 2:00 - 3:00 | 3:00 - 4:30 |
|--------------|--|--|---|---------------------|---|--|-------------|
| 08:30 - 9:30 | 9:30 - 10:30 | 10:30 - 12:50 | | | | | |
| Day 1 | Reviewing the activities | | (Self-awareness) 2 – A - 1 – 1 Let’s have a clear conscious | | 3-A-1-2 Let me say something | (Communication) 3-A-2-1 What kind of person should be? | Reflection |
| Day 2 | 3-A-2-2 Which way do you choose? | 3-A-2-3 Control your tongue | 3-A-2-4 “No, I am sorry is not enough | | (Mental Health) 3-A - 3– 1 Be at peace | 3 – A – 3 – 2 Counselling | Reflection |
| Day 3 | (Diseases) 3 – A – 4-1 Malaria | 3– A – 4– 2 Pulmonary TB | (Natural Disaster) 3–A–5–1 Natural Disaster 3-A-5-2 Think before to reduce risk and hazards | | 3 – A – 5– 3 Let’s prepared for disaster | (Decision Making & problem Solving) 3–B–1–1 Making Difficult decision (1 st pd) | Reflection |
| Day 4 | 3-B-1-2 Making Difficult decision (2nd pd) | (Drugs) 3-B-2 -1 Alternative options if possible 1 | 3-B-2-2 Alternative options if possible 2 | | (HIV/AIDS) 3– B – 23– 1 Who has HIV/STI? | 3-B-3-2 Never enough 3-B-3-3 Live meaningfully | Reflection |
| Day 5 | (Reproductive Health) 3-B-4 -1 Be mindful! Think before you do | 3– B –4-2 Reproductive system | 3- B – 4-3 Contraception | | 3 – B – 4 – 4 Needs, Rights and Responsibility | Gender 3-B-5-1 Gender role | Reflection |
| Day 6 | Let’s review | Follow-up activities | | | Future Plan | Closing Ceremony | |

PART 3-A

Self Awareness

Phase 3 A- 1- 1

Time: (60) minutes

Let's have a clear conscious

(Self Awareness)

Objective

At the end of the discussion, the participants will be able to

1. Control not to face the situation that can make them feel embarrassed.
2. Analyze that they should go through their life in using the right ways

Materials

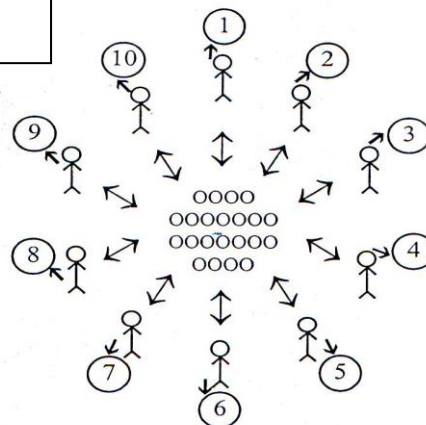
Stones (collect many stones in order for each participant to pick up 10 stones)

Activities

1. Stone picking game

- The facilitator will explain how to play the game by drawing pictures on the board.
- Let the participants stand in the shape of a circle. The small stones will be piled in the centre of the circle.
- When the facilitator give a signal, all the youths have to pick up the stones simultaneously. They should pick up until no stone is left.
- Each participant has to pick up a stone at a time. The youth who can pick up the most will win.
- Every time the youth has picked up a stone, he/she must put it in a circle where the stones is supposed to be placed. They must not throw it.)
- (The facilitators don't need to supervise the game while it is being played. No need to remind them to pick up only one stone at a time. It is to check whether or not the participants follow the rules.)
- In this way, they have to pick all the stones up.
- When there is no stone in the middle of the circle, the one who has got the most stones is the winner.

Small stones picked by the participants have to be put in the respective circles.



2. Whole Class Discussion

The facilitator has to ask the questions. (There can be participants who answer honestly or dishonestly or who do not answer. Whatever response they give, take care not to blame them.)

- (a) Who could collect most stones?
- (b) Is there anyone who picked up one stone at a time according to the rule of the game? If so, please hold up your hand. Is there anyone who threw the stone? If so, please hold up your hand.
- (c) Who do you think knows most whether or not a youth picked up more than one stone?

3. Facilitator's explanation.

When playing a game, there can be using unfair means or breaking rules so that one can win the game.(for example, picking up the stone by pushing the other person forcefully and taking more than one stone) Although other people may not know that a particular person won the game unfairly, that very person knows himself / herself what he/she has done.

4. Group Discussion

(25 minutes)

- (a) Distribute the following case study to every group. The facilitators help read the event.

Event: There were the two close friends, Khine Htoo and Maung Ni. Maung Ni gave regards to Khine Htoo as an important friend for him. He trusted him and Khine Htoo also respected him. They wanted a job and went to an employer to apply for a job. Some days later, when Maung Ni met the employer, he said "I need only one employee but you and Khine Htoo have the same qualifications. So, I'd like to discuss with both of you again." Then Maung Ni lied that Khine Htoo had already got a job. So, the employer appointed Maung Ni. When Maung Ni met Khine Htoo, he told him that the employer needed only one employee and he chose me. That's why I was now working there Khine Htoo believed Maung Ni but he felt rejected.

- (b) Ask the following questions for group discussion.
 - (1) What is Maung Ni's value concerning with Khine Htoo? What Maung Ni had done to Khine Htoo really agrees to his value? Why?
 - (2) Who knew what Maung Ni had done to Khine Htoo? What could happen to Maung Ni if somebody knew about it?
 - (3) If you were Maung Ni, what would you do? Why?
- (c) Let the groups present their discussion points.
- (d) The facilitator will explain as follows.

Life is like a race. You will always encounter competitions. If it were so, you could have used unfair or dishonest ways to win like Maung Ni did. Although

other may not know what you have done, you, yourself really know it. As the success you gained was not a fair one, you would feel guilty conscious. Due to this guilty conscious, you would feel unhappy and worried throughout your life. This can reduce your self respect, self value and self confidence.

1. Assessment Questions

- (1) How would you feel if you secretly do something that your parents do not like?
(For example: You secretly date your girlfriend, you secretly smoke, chew betel nut or steal something from home and sell it)
(Encourage the participants to speak out what they really feel)
- (2) If you have done something wrong on someone like Maung Ni did, how do you think you will feel? (To share their experience if they have)
- (3) What thoughts have you got according to this lesson?
(Note: This lesson is discussed based on ones own experience. Therefore remind the participants to keep as personal confidential)

Interpersonal Relationship

Part (3) A-1-2

Time: (60) minutes

Let me say something (Interpersonal Relationship)

Objective

At the end of the discussion, the participants will be able to describe that talking about their feeling directly to the person who made this is the best.

Materials

Pieces of paper on which stories are written

Activities

1. Whole class discussion

(a) Discuss the following questions. Record the answers on the blackboard.

- (1) Have you ever felt shy, frightened, sad, angry or unhappy because of someone else? (let all the youths think of it)
- (2) Who brought such feelings to you? What did you do at that time?

For example:

Due to the friend → get angry → tell it the other friend.

Due to the mother → feel sad → tell nobody.

(b) The facilitator should explain as follows.

It is natural that one usually shares with the other person one's feelings brought about due to someone else, or tells nobody. Some people usually reduce their feelings by telling them to someone. However, some do not confide anyone and staying with those feelings without out-letting them.

2. Group Discussion

(25minutes)

(a) Give time to each group to prepare their part of the following role play.

Role play: A friend working together with you in the same business always told you something bad about the employer and you reminded him/her that he/she shouldn't say something like that. The friend felt angry with you and gossip about how bad you are and how you always behave as a superior person to him/her.

Role play for group (1)

Perform a role play in which you angrily told about this to a younger sister of your friend and to remind her elder brother/sister not to gossip about you. She also got angry with you and to your warnings.

(This group has to perform both the person who gives reminder and the one who was given the reminder.)

Role play for group (2)

Perform a role play in which you met the friend and angrily quarreled with him/her and so did he/ she.

Role play for group (3)

Perform a role play in which you met the friend and explain calmly that you felt sad because of his/her gossiping about you. The friend also felt sad and apologized to you.

- (b) The groups will perform the role play in turns. Tell the other groups to watch the role play carefully.
- (c) After each role play, ask the class who and how the performers say and filled in the table. The last column will not be filled yet.

| Situation: Being gossiped by a friend | | | |
|---------------------------------------|------------------------|---------------------|--|
| Group | To whom it was said | How it was said | Consequences |
| 1 | To friend's sister | Angrily and harshly | Both the ones who said and who was said were angry |
| 2 | Directly to the friend | Angrily and harshly | Both the ones who said and who was said were angry |
| 3 | Directly to the friend | Calmly and flexibly | The one who said got satisfaction. The one who was said realized the fact and both of them were satisfied. |

- (d) Based on the record in the table, ask the following questions to the class.
1. What did you notice about the results of the ways they said? (Record the answers in the third column of the table.)
 2. Which way of communication is the best? Why?
- (e) The facilitator will explain as follows.

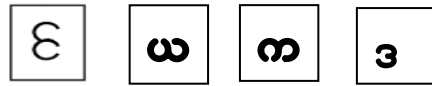
Sometimes you feel shy, sad and angry due to the other person's words and deeds. It would be better face the person directly and tell how you feel, if you can't get over it. When you deal with the person, you should try your best to cope with your emotion and explain the matter by taking it easily. This can make both of you to be reconciled as you can understand each other's feelings. Your feelings can lessen too.

3. Playing

(10 minutes)

- (a) Write Myanmar letter င in a big shape on sheets of square paper or card and cut them into pieces.

- (b) Give a set of cards to each group and let them get that letter.
- (c) Ask them to tell what the letter they get.



- (Just let them say the letter from the side they see.)
- (d) Ask them why they got different letters.
- (e) Ask them which the correct letter is.
- (f) The facilitator will explain as follows.

Everybody usually assumes what he/she thinks is right. But there may be a situation that it is right from your views and it is also right from the other person's side of view. That's why we need to consider from different aspects. If you say something one-sidedly, believing that you are right, it will affect the other person. It may lead to prejudice against each other. Nobody likes rude behaviors.

4. Assessment Questions

(a) Content Questions

- (1) When you are displeased with someone, do you directly talk to the person to solve the problem? (Or) Do you tell the other person about it? Which one is better? Why?

(b) Personalization Questions

- (1) Can you always talk to the person concerned about your feelings? What difficulties can there be to express something like that? Why?
- (2) Have you ever respond directly to the person who makes you feel shy or sad? How did you react (calmly or angrily)? What happened if you did so?
- (3) How should you response to the person when he/ she directly tell you how he/ she felt shy or sad because of you? Why?

(c) Linkage Questions

- (1) If you sometimes find the conversation doesn't go well when you directly express your feelings to the person that is concerned, what should you do? Why?

Summarize as follows.

- ◆ Don't forget that you know best what you have done. You shouldn't do anything that will make you feel embarrassed and have guilty conscious throughout your life.
- ◆ If you have got feelings concerning someone and have to stay with those feelings, you should directly tell that person. When you express your feelings, should be able to cope with your emotions and say calmly.

Communication Skills

Part (3) A-2-1

Time: (60) minutes

What is he saying? (Communication, Critical Thinking)

Objective

At the end of the discussion the participants will be:

1. Identify the three different behavior of communication
2. Assess the three different behaviors of communication and identify the appropriate behavior for the situation

Materials

Participant booklet

Activities

Introduce the lesson by saying that people use different ways to communicate with each other. Let's see what they are.

1. Role plays (15 minutes)

- Write the following story on pieces of paper and distribute one to each group.

Ko Maung recently finished the ninth grade and had to leave school to help his family. He heard that a local factory is offering 20 new jobs to people from the community on a first-come-first-serve basis. The next morning he woke up very early to wait outside the factory gates. He was the 18th person in the queue and felt lucky that he had a good chance of getting a job.

Out of nowhere, two other members of the community walk up and start talking to their friend who is standing in front of Ko Maung. They then take places in line in front of him.

- Ask the groups to prepare for the role play discussing how they would respond if they were Ko Maung. Give 5 minutes for preparation.
- Let each group perform the role play. While one group is performing, let the other groups carefully observe the words they use and their behavior and facial expressions.
- After each group's performance, record the performance by asking the observers and record them in the first four columns.(The last column doesn't need to fill yet.)

| Group | Words and expressions | Voice | Gesture | Eyes | Communication Behavior |
|-------|-----------------------|-------|---------|------|------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |

2. **Whole class discussion**

(15) minutes

- Tell the class as follows. When we observe the communication behavior of people, we will find three kinds of behaviors. Then, let them look at those behaviors in their booklet and explain to them.

| | |
|--------------------------|---|
| <i>Passive</i> | <ul style="list-style-type: none"> - Accept what others say - Worried about upsetting others and can't look at the other person directly - Lack self-confidence and fail to explain clearly so that the other person understands |
| <i>Aggressive</i> | <ul style="list-style-type: none"> - Forceful and rude - Act without respect to others - Too insecure to express needs without being domineering - Pressure, intimidation, or force used to get what is wanted. - Causes confrontation that may escalate into violence |
| <i>Assertive</i> | <ul style="list-style-type: none"> - Communicates clearly and directly - Respectful of others wishes - Make own wishes known with sensitivity - Take responsibility for feelings and actions - Stand up for one's self |

- Then ask the class to look at the table on the board and let them decide what kind of communication behavior the groups have used and fill in the last column.
- If there are not all three behaviors, the facilitator can explain according to the examples in the participant's booklet.

| Behavior | Words and expressions | Voice | Gesture | Eyes |
|-------------------|---|-----------------------------|--|---|
| <i>Passive</i> | Say nothing negative.(Yes, OK, It's alright) | Low voice, Less tone | Keep the body pulled in; not in an up position. Lack of self-confidence; Timid | Down –cast eyes; Don't look at the other person up or directly. |
| <i>Aggressive</i> | Why? You can't break in like this! You really | Loud, sharp voice; Screech; | Stand with arms akimbo; Move toward the other | Stare at the other person keeping eyes wide |

| | | | | |
|------------------|---|----------------------------|---|----------------------------|
| | want a blow? | | person | |
| <i>Assertive</i> | You'd better take place at the back of the queue. We have queued since morning. | Calm voice, Normal tone | Keep the body straight. Looking self confident | Look at the eyes directly. |

3. Group Discussion

(25 minutes)

- (a) Ask the following questions for group discussion.
 - What do you think would happen if Ko Maung responded to the situation passively by standing in the queue angrily but not saying anything?
 - What do you think would happen if Ko Maung responded to the situation aggressively by shouting rudely?
 - What do you think would happen if Ko Maung responded to the situation assertively by saying the reasons for what they should do calmly?
- (b) Let each group present their discussion points. Record the points on the board.
- (c) Ask the youths which behavior would be the best for Ko Maung.
- (d) The facilitator will explain to the youths by referring the points below.

The consequences of Passive Response:

Behaving passively means not expressing your won needs and feelings, or expressing them so weakly that they will not be addressed.

If Ko Maung behaves passively, by standing in the queue and not saying anything, he will probably feel angry with the others and with himself. If the factory gets all the help it needs before Ko Maung can get a job, he will be furious and might get very angry after it is to late to change the situation.

The consequences of Aggressive Response:

Behaving aggressively is asking for what you want or saying how you feel in a threatening, sarcastic or humiliating way that may offend the other person.

If Ko Maung behaves aggressively, he may be about to express what his needs are but larger trouble, even violence, may arise. Factory security may even ask him to leave, so that he will lose his chance to work.

The consequences of Assertive Response:

If Ko Maung tells the others they need to go to the end of the queue because other people have been waiting, he will not put the other down (insult them), but merely state the facts of the situation. He can feel proud for standing up for his rights. At the same time, he will probably be supported in his statement by other people in the queue. While there is a good chance the others will feel embarrassed and move there is also the chance that they will ignore Ko Maung and his needs will not be met.

- (e) The facilitator will ask the following questions for class discussion.
 - If it were you were Ko Maung, how would you response to the situation? Why?

- What kind of communication should youths have? Why?

(f) The facilitator will add the following points to the discussion.

A passive response is not usually in a person's best interest, because it allows other people to violate your rights. Yet there can be a time when being passive is the most appropriate response. It is important to assess whether a situation is dangerous and choose the response most likely to keep you safe.

An aggressive response is never in a person's best interest, because it almost leads to increased conflict.

An assertive response is almost always in a person's best interest, since it is the best chance of getting what you want without offending the other person (s). At times, however, being assertive can be inappropriate. If tempers are high, if people have been using alcohol or drugs, if people have weapons or if you are in an unsafe place, being assertive may not be the safest choice.

4. Assessment Questions

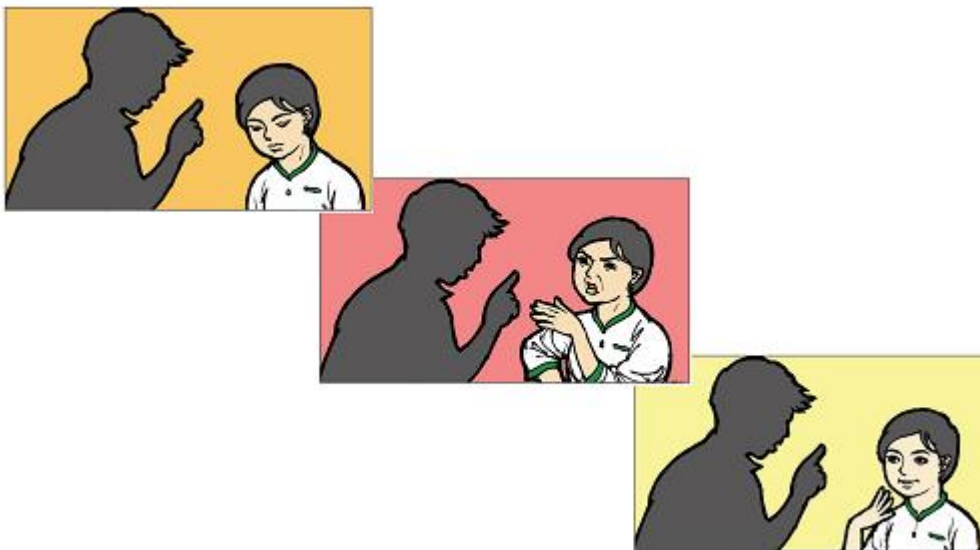
(5 minutes)

(a) Content Questions

- (1) When you communicate with people, can you know what kind of communication behavior a person has? How do you distinguish one communication behavior from another? Give examples and explain.

(b) Personalization Questions

- (1) In your environment or in the movies, which behavior do you mostly find? Give your opinion on their behavior.
- (2) Do you need to know the behavior of people you communicate with in daily life? Why?
- (3) Which behavior do you mostly conduct? Why?
- (4) After learning this lesson, do you think you should to change your behavior? How will you change? When will you start changing?



Part (3) A-2-2**Time: (60) minutes****Which way do you choose?**

(Critical Thinking, communication, Decision Making)

Objective

At the end of the discussion, the participants will be able to:

1. Explain assertive behavior in communication.
2. Analyze that it is important to be able to choose the most suitable behavior in responding to the other person.

Materials

Sheets on which a case study is written

Activities**1. Introduction**

- (a) Ask the following question to introduce the lesson.
Can you tell me the three behaviors that people use in communication?
- (b) Review Ko Maung's story and ask, "Which behavior was decided as the best?"
- (c) The facilitator will explain as follows.

Among the three behaviors, assertive response is the best. However, depending on the situation, you need to choose the appropriate behavior because when the other person is being very angry or he/she has used a kind of drugs, he/she won't be able to think rationally. In this situation if you tell him assertively, you can face the danger.

2. Whole Class Discussion

(10 minutes)

- (a) The facilitator will write the following facts concerned with assertive response on a large sheet and stick it on the board.

When you express your opinion or disagreement, the steps in assertive communication are:

1. Remain relaxed and breathe deeply.
2. Look at the person (as appropriate).
3. Use a neutral, calm voice to clearly state your opinion or disagreement.
Avoid emotional terms. (use I statements)
4. Listen to the other person.
5. Acknowledge other viewpoints and opinions. Thank the person for listening.

(From step 2 to 5, the interaction should be included.)

- (b) Tell the youths as follows.
Now, you know how assertive response behavior is so you will practice how you would say assertively if you were Ko Maung. Think of the words and expressions you will use in assertive communication. Give them 3 minutes to discuss with each other.
- (c) Ask a volunteer from each group to perform a role play between Ko Maung and the two who break into the queue.

- (d) After each role play, ask the participants whether the performer can really communicate assertively or not. Then, the facilitator will add some good behaviors and some behaviors that need to be improved.

3. Group Discussion

(40 minutes)

- (a) Among the situations given below, give one situation to a group of three and let the groups think in which behavior they would respond to other person in the given situation. Tell them that they have to perform a role play. Give them 5 minutes to prepare. Tell them that they have to perform the role play in 2 minutes.
- (1) While you are walking through the crowd, a drunkard bumps into you and shouts at you.
 - (2) A group of boys always tease you. You have already told them several times that you don't like this. Now you meet them on your way and tease you as usual.
 - (3) A man appears in a deserted area holding a gun in his hand and threatens you.
 - (4) In a dark deserted area, a man approaches you and proposes you.
 - (5) A friend asks you to accompany him/her to a place where you don't want to go.
 - (6) You meet your friend, who borrowed money and avoid seeing you, in the market.
 - (7) When you are alone at home, your brother's friend who is drunk arrives home and hits on you.
 - (8) While you are selling things, a customer touch your chin and said, "How pretty, my daughter! Or, how handsome, my boy!"
 - (9) An adult neighbor of yours invites you to eat something and touches parts of your body.
 - (10) You have already done your duty at the training but the other participant shouts at you to do it again.
- (b) While one group is performing their role play, let the participants observe carefully to decide which communication behavior it is. Record the discussion points on role play in the table below.

Note: The last column doesn't need to fill yet.

| Group | Situation | Response Behavior/ voice/tone/ words | Response Behavior | Consequences |
|-------|-----------|--------------------------------------|-------------------|--------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |

- (c) After all the groups have performed their role, discuss what consequences can there be due to those responses. Put the discussion points in the last column of the table.
- (d) Pointing out to the consequences, ask them, "In this situation, which response do you think will be the best?"
- (e) The facilitator will explain as follows.

Although it is accepted that assertive communication is the best, there can be situations in which we need to communicate passively or aggressively. Therefore, when we choose a behavior we need to analyze the consequences of that particular behavior. Sometimes, we respond passively and then change to another behavior based on the situation. Youths need to choose the appropriate behavior to respond in accordance with the situation.

4. **Assessment Questions**

(a) Content Questions

- (1) Which situation is the best for passive response?
- (2) Which behavior of response is the best when you are persuaded by peers?

(b) Personalization Questions

- (1) When you choose the best type of behavior to respond to the other person, which facts should you consider?

Summarize as follows:

Now you all know the three types of behavior to respond to the other person. You can observe the behavior of yourself as well as others and analyze them what type of behavior it is. For example, even if you watch movies, think critically what type of behavior it is and assess whether or not it is an appropriate behavior. In doing so, you will come to see the consequences of the behavior. However, reflecting own behavior and changing it is more important.

Part (3) A-2-3**Time: (60) minutes****Control your tongue**

(Communication)

Objective

At the end of the discussion, the participants will be able to:

Communicate using assertive behavior to express their feelings avoiding the words that can hurt the other person.

Able to describe what is the best/most suitable behavior for young people.

Materials

Participant booklet

Activities

1. The facilitator will introduce the lesson as follows.

Although assertive communication is the best, based on the situations, we sometimes need to communicate passively or aggressively. We will discuss more about the behaviors that we can conduct to reveal our feelings without hurting others.

2. **Whole Class Discussion**

(20 minutes)

(a) Review the ways to say assertively in the previous lesson.

(b) Based on the points that the participants' answer, the facilitator will also tell them ways of assertive communication.

When you express your opinion or disagreement, the steps in assertive communication are:

1. Remain relaxed and breathe deeply.
2. Look at the person (as appropriate).
3. Use a neutral, calm voice to clearly state your opinion or disagreement. Avoid emotional terms. (use I statements)
4. Listen to the other person.
5. Acknowledge other viewpoints and opinions. Thank the person for listening.

(From step 2 to 5, the interaction should be included.)

- (c) Supposing you are a vendor who sells duck eggs, chicken eggs or rabbit leaves, how would you respond to a customer bargains you by offering a small amount of price on your things? Ask 4 or 5 participants to answer.

(In the answers, there can be responses of anger, threatening, or scolding.)

| Your feeling | Behavior | Words you say |
|--------------|----------|---------------|
| | | |

- (d) Let the participants choose the words, in the above table, that do not hurt the other person and ask them why they choose those words.
- (e) The facilitator will explain as follows.

The words that can express your real feelings and that do not hurt the other person are the best responses. When you encounter a situation to respond to, you should take care that you should not threaten, scold or blame the other person. For example:

Accusing: You know it and do this intentionally.

Insulting: You are worthless.

Threatening: I'll beat you. I'll hit you. I'll report what you have said to the adults.

Blaming: It happened because of you. It's your fault.

These kinds of responses are the type of aggressive behavior. This behavior can lead to undesirable consequences. When you give a response, using "I statement" in a calm and normal tone is more effective. Therefore when you respond assertively, you should use "I statement".

3. Group Discussion

(35 minutes)

- (a) Let them study the examples of "I statements" given in their book.
"Examples of 'I statement'"
- It wouldn't be comfortable for me if you do so.
 - It frustrates me when you don't listen to me.
 - I can agree only up to this point.
 - I don't agree with that.
 - It makes me feel unwanted when you ignore me.
 - I don't like it when you do that
 - I wish you wouldn't laugh at me when I ask questions.
 - I wish you would consider what I'm saying.
- (b) Form 6 groups. Give one situation to each group. Give 5 minutes for discussion.
- (c) Tell them that each group has to decide which behavior they will use to respond to the other person in the situation. Tell them they have to use "I statement" in their response together with appropriate tone, gesture and facial expression.
- Responding to a friend who always comes later than the appointed time
 - Responding to a person who used your thing that you value most without asking for your permission
 - Responding to a friend who persuades you when you are feeling frustrated
 - Responding to a person who said gossip intentionally to make your dignity obscure
 - You unexpectedly met your creditor who you are trying to avoid as you cannot pay the debt. Responding to that person
 - Responding to the person who scolded you rudely in front of other people
- (d) Let each group perform the role play. Give two minutes for each role play.
- (e) After each role play, the facilitator together with the other groups gives suggestions for the improvement.
- (f) The facilitator will explain as follows.

You must express your feelings simply and honestly. You should not criticize or threaten the other person. In behaving so, you can avoid the situation of arguing or quarrelling with the other person.

Phase 3 A-2-4**Time: (35) minutes****No, I am sorry is not enough**

(Communication)

Objective

At the end of the discussion, the participants will be able to

1. Identify the situations and persuasions they can encounter in their daily life that they need to refuse
2. Practice the assertive refusal and the words and expressions to be used in refusing

Materials

Trainees Booklet

Activities**1. Playing a game**

(10 minutes)

- (a) Make lots with the following statements. Mix those lots with blank lots and give one to each participant. Tell them not to show their lot to others.
 - Could you lend me two thousand kyats?
 - I'll go to the big Banyan tree at the entrance of the village. Will you accompany me?
 - Will you buy me some snacks?
 - Will you dance like a monkey?
 - Will you follow me to my house? I'll give you some snacks. (An adult said to you)
 - I'll come to your house tonight. Will you come out to meet me?
 - Will you invite me to your house?
 - There will be no adults at home tonight. Will you come to my house?
 - Let's go and visit together, won't you?
 - I'll go out tonight. Will you accompany me?
 - Will you come along with me to my village after the training?
 - There is a job that earns a lot of money. Do you want to work?
 - If you feel tired, will you take this medicine?
- (b) Let them ask anyone what is written in the lot. Tell them that the one who has to answer the question can do it freely. They can give any answer they like. (Help the participants who cannot read well)
- (c) After asking and answering the questions, ask the class which words are mostly included in the answers. (No
In which situations do you mostly use those words?)
- (d) Let them express the situations they will refuse the offer. Record the situations on the board.

2. Whole Class Discussion

- (a) The facilitator will invite two volunteers to come in front of the class. Ask one of them to choose one of the situations on the board and take the role of the person who refuses the offer. Ask the other person to take the role of the person who persuades the other one till he/she accepts the offer. If that person cannot persuade the other person to accept his offer, ask another two persons to do the role play.
- (b) After role play, ask the following questions.
 - Why did the person happen to accept the offer?
 - Although a person doesn't want to accept the offer, due to feeling bad about the other person if he/she doesn't refuse the offer or doesn't know how to refuse or dares not refuse, what consequences can happen?
- (c) The facilitator explains as follows.

Youths can face the situations that are difficult to refuse in daily life. Although you know it shouldn't be done, if the persuasion is very strong, you happen to accept it. If you don't refuse that deserves to be refused, the person who will receive the consequences is you. Therefore, it needs to refuse the offer if you don't want to. If you do so, just saying "No" may not be enough. The other person may not give up easily. You must refuse assertively so that the other person will give up. Use the steps for refusing assertively. Let's practice these steps.

- (d) Let the participants look at the steps for refusing assertively and explain them with examples.

Steps for refusing assertively

| <u>Steps</u> | <u>Using "I" statement to refuse</u> |
|--|---|
| 1. Express your feelings and attitudes openly | I don't like it. I can't agree with you. I don't want it. |
| 2. Get an excuse. (with reasons) | I can't do it. I have to do work that my mother asked me to do. Excuse me. I have no time. I'm sorry. I'm not feeling well. Please don't. I'm afraid that my mother will scold me. I can't accompany you. I have to go somewhere. |
| 3. Ask the other person's opinion on your excuse | How do you think of it? Are you annoyed with it? |
| 4. Thank the other person for accepting your excuse. | Thank you. Thanks for not being annoyed with my excuse. |
| If the other person continues to persuade | |
| 1. Refuse assertively. Or | I have considered. The answer is no. Don't disturb me. Don't tell me this again. |
| 2. Delay or | Not now. Let's consider it later. |
| 3. Negotiate | Let me consider about it. Let's go and eat snacks instead. |

- (e) Remind the youths that they must refuse assertively to the offer of drug use and sex instead of delaying and negotiating.

3. Group Discussion

- (a) Ask the groups to divide their group into two small groups, A and B. tell them that first A will offer to do something to B and B have to refuse it. Then, A and B will change the roles.
- (b) Distribute one story to each big group. Tell them that after reading the story; members A will persuade members B and members B will have to refuse the offer. A will have to think words to persuade and B will have to use steps for refusal and appropriate behavior. (Give 10 minutes for doing this.)

Stories

- Htoo Htoo parted his friends to get the trolley for selling ice-lolly. A man followed him and asked the way. He requested him to direct the way more clearly by riding in his car. He said that he would give Htoo Htoo pocket money for doing this and would send him back home, as well. He would like Htoo htoo to decide immediately without discussing with his friends. If you were Htoo Htoo what would you do?
 - Two friends worked in a restaurant. Their restaurant had sold well since they worked there. The owner of the restaurant worried that they would leave him. Therefore, one day, he gave them some tablets saying that as they were tired, they should take those tablets to feel well and less tired. However, the two friends didn't want to take them. If you were in this place, how would you refuse?
 - Maung Maung worked to be able to help for the expense of the family. His parents could not care Maung Maung who had to work for the whole day. As he was hardworking and honest, his employer favored him. At first Maung Maung thought that she was sincerely favored him but later, she asked him to stay close to her and to massage her or apply medicine on her. One day, she asked him to come and sleep at her house. If you were in this place, how would you refuse?
- (c) When, time is up, ask the one of the group member, A and B, to do the role play. Let all the rest of the groups to observe the role play. Remind the performers that they have to redo the role play if they can't refuse assertively.
 - (d) After each group's role play, ask the other youths to discuss whether the performers could go through the steps for refusal, use "I" statement, their tone of voice and behavior is appropriate to assertiveness.

4. Assessment Questions

(a) Personalization Questions

- 1) What kind of persuasion have you decided to refuse? Why?
- 2) Do you think you can refuse according to the refusal steps? Why?
- 3) Does every youth need to be able to refuse assertively? Why?

Summarize as follows:

As you will face the situations to refuse in your daily life, you need to practice to be able to refuse reasonably. When you refuse by expressing your feelings, you need to avoid using words that hurt the other person and communicate effectively.



Mental Health

Phase 3 A-3-1

Time: (45) minutes

Be at peace (Empathy)

Objective

At the end of the discussion, the participants will be able to describe love, care, praise and encouragement is essential for healthy mind.

Materials

Pictures showing love, care, praise and encouragement

Activities

1. Whole class discussion

(5 minutes)

Ask the participants the following questions.

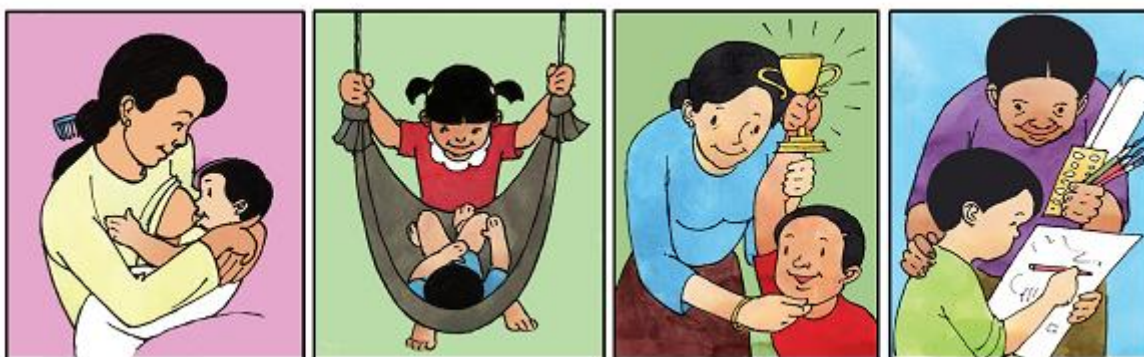
Record them on the blackboard.

- When do you feel happy?
- How would you like someone to treat you?
- What would you like to hear from the adults when you help do chores at home?
- How would you like someone to say when you feel unhappy?
- How do you help your best friend when she/he feels so unhappy?

2. Group discussion

Let the youths look at the pictures showing love, care, praise and encouragement to and discuss the questions.

- 1) What is happening in each picture? What do you think the two persons are talking?
- 2) How will the children in the picture feel?
- 3) Who are the 'giver' and 'taker' in each picture? Can a person be a 'giver' and a 'taker' at the same time? How? Give example.



3. Have the groups present the discussion points

5. The facilitator will explain using the following notes.

Everyone receiving love, care, praise and encouragement from others are happy and have peacefulness in mind. But a person who is just a receiver can't be called a mentally healthy person if he/she cannot give back to others.

5. Group discussion

With regard to the love, care, praise and encouragement of parents, brothers and sisters or friends and associates, ask as follows:

- An experience in which one has been the taker.
- An experience in which one has been the giver. Share it to others in the group.
- Choose one experience of each group and present it to the class.

6. Select some students and ask them to recount their experience and feelings to the class.

7. Then, the facilitator should explain that to become a mentally healthy person, one needs as much to receive, as to bestow on others, love, care, praise and encouragement.

Content Questions

- (1) What kinds of support does a person need from their family members, friends or elders in order to feel happy and have peacefulness in mind?
- (2) How would a youth feel if she/he gets love and care from others? Does this feeling have a positive or negative effect on the person?

Personalization Questions

- (1) Have you ever received care or psychological support? How did you know that you were cared for? How did you feel?
- (2) Have you ever experienced that although you have given help and support to others, they never recognized it? Or have you ever experienced that you needed help and support from others but nobody was willing to give you? How did you feel? Why did you feel this way? Please explain.
- (3) Is it fair just to receive care from others? Do you think you need to give as well? Why?

Linkage Questions

- (1) How do you feel when you get depressed? What do you expect from others? Why?
- (2) What do you think a person with HIV/AIDS (or other chronic illness) would need when he/she may be ignored, neglected, or discriminated against? What can you do for him?

Follow up activities

Phase 3 A-3-2**Time: (60) minutes****Counseling**

(Communication, Empathy)

Objective

At the end of this lesson, participants will be able to tell how to counsel a person who is worried or anxious about something.

Materials**Activities**

1. **Whole class discussion** **(10) minutes**
 - Have you ever been emotionally upset?
 - How did you feel then?
 - Whom did you tell about it at that time?
 - Why did you tell him?
 - What did that person respond to you?
 - Have anyone told you about his feeling?
 - Why do you think he told you?
 - What did you do to him then?
 - What can it be called as?
 - If so, who needs counseling? Why?
 - Who can offer counseling?
 - What qualifications are needed for a counselor?
 - What things should be followed for better counseling?
2. The facilitator should add the facts needed and write down them on a sheet of paper and stick it on the wall. (Until the youths recognize them)

Facts to be followed when counseling

- Be confidential(Must not tell anybody)
- Listen to the person with interest.
- Be patient and respect the person who confides in you.
- Be friendly with that person but you speak little. Let him/her speak a lot to reduce his/her feelings.
- Help the person know his/her problem.(What makes you hard? What do you want to be?)
- Help the person think about options and find the solution himself/herself. (What can you do? What do you think will be convenient for you? You can provide the ways you have heard.)
- Don't suggest how he/she should decide.
- Let him or her decide themselves.(Let him/her think the advantages and disadvantages of each option and choose the most advantageous one.

4. **Practice by the groups****40 minutes**

- a) Form groups of three. Give names A, B and C to those three.
- b) Give each of the following situations to each group and have the groups study them. (Or) The facilitators should read them if they need help. Group members will take the role of the person who wants to confide his/her feelings, the role of the person who does counseling and the role of the observer in turn. The observer will observe whether the counselor follows the facts to be followed for counseling.

Event 1**The role of A**

Bote Sone had to give all her earnings to her parents. When she could not work and could not give regular money, she was scolded and even beaten by her parents. Therefore, whenever she found it difficult to earn enough money, she borrowed money from her friends so that she could give it to her parents. In this way, she was slowly deep in debt and felt very frustrated. Bote Sone confided about this to her friend.

The role of B

You were Bote Sone's friend. How would you help Bote Son?

The role of C

You have to observe the roles of A and B and assess whether it is doing well according to the counseling facts.

Event 2**The role of A**

U Pho Tin, the father of Tun Tun, becomes addicted to drinking alcohol. He asks his wife for money every evening. When he doesn't get money, he scolds and beats his wife and children. When he gets money, he buys alcohol and drinks all of it. He cannot take care of his family's business. He sometimes asks Tun Tun to give his money that he earns from his work. Therefore Tun Tun is unhappy as he cannot save money. He tells about this to his friend.

The role of B

You were Tun Tun's friend. How would you help Tun Tun?

The role of C

You have to observe the roles of A and B and assess whether it is doing well according to the counseling facts.

Event 3**The role of A**

Mu Mu lived with her aunt after her parents' death. Her aunt raised her as her own daughter. However, her aunt's husband was not so. Although he pretended like a

father in front of her aunt, at the back of her aunt he tried to flirt with her. He intentionally touched her and spoke to her in an inappropriate behavior. Mu Mu felt unhappy and confided this to her friend.

The role of B

You were Mu Mu's friend. How would you help Mu Mu?

The role of C

You have to observe the roles of A and B and assess whether it is doing well according to the counseling facts.

- c) Let all the groups perform one role play after another simultaneously. Limit time for this activity. The observers have to present their observation points after each play.
- d) The facilitator also has to give comments and suggestions on counseling.

Summarize as follows.

- Everybody wants love, care, recognition and comfort from others. We should have empathy and understanding to this. We should practice give and take, accepting from others and sharing them. In this way, we can be happy and healthy.
- When someone confides the feelings to you, you should listen to him/her and comfort him/ her and do counseling. From today on, you should be aware of yourself whether you have healthy behaviors and try to practice them.

Phase 3 A-4-1**Time: (60) minutes****Malaria**
(Critical Thinking)**Objective**

At the end of the discussion, the participants will be able to

1. Describe causes of Malaria.
2. Explain preventive methods of Malaria.

Materials

Participant booklet

Activities**1. Playing a game of guessing a name (10) minutes**

- (a) Let the groups think to make a quiz or riddle or puzzle by hiding a name of something. (E.g. The skin is dark, the fruits are hanging but you can't eat them. What fruit is this?)
- (b) Give 3 minutes for preparation.
- (c) Let each group in turn ask the riddle or quiz.
- (d) The facilitator also asks about two riddles for fun. Then, ask the following riddle.
"It has wings but not a bird. It makes buzzing sound but not a car. It can pierce but not a needle. What is that?"

2. Whole class discussion (15) minutes

- (a) Ask the following questions and discuss with the class.
 - What are the diseases caused by mosquito?
 - In your community, what is said about malaria infection?
 - What is the real cause of malaria?
 - How does malaria transmit from one person to another?
 (Explain using ESSE principles)

Teacher's tip: The following is a possible explanation of the four principles for malaria.

Exit – There can only be exit of malaria if a mosquito has the parasite. The parasite comes out with the saliva of the mosquito.

Survive – The parasite is only exposed to the mosquito and human blood so that it can survive. However, the parasite must mature in the mosquito 10-14 days before it matures into a form that is infectious to people.

Sufficient – There is no way to tell if a mosquito is carrying the malaria parasite. But, if a mosquito is carrying the parasite, it would be sufficient for transmission. Therefore, we should always assume that a mosquito has the parasite.

Enter/Entry – There can only be entry into our bloodstream if we allow mosquitoes to bite us.

- (b) The facilitator should add to the discussion by using facilitator note.

The diseases caused by mosquito are malaria, dengue, hemorrhagic fever and filariasis(elephantiasis). Both children and adults, irrespective of sex, can be afflicted with malaria. Malaria is usually transmitted to the person being bitten by mosquitoes carrying the parasites that cause the disease. This is the most common mode of transmission. Malaria is not infected through drinking or bathing in spring water, eating bananas and papayas, etc. In the community, some people avoid drinking spring water and bathe in the spring but they do not protect themselves from being bitten by the mosquito and thus they are infected with malaria. Mosquitoes that carry

malaria parasite usually bite people during dusk. Therefore, people should take care not to be bitten by mosquitoes when they have a bath or wash clothes in the evening.

(c) Ask the following questions.

- How do mosquitoes breed?
- Where do mosquitoes breed?
- Where do mosquitoes hide?

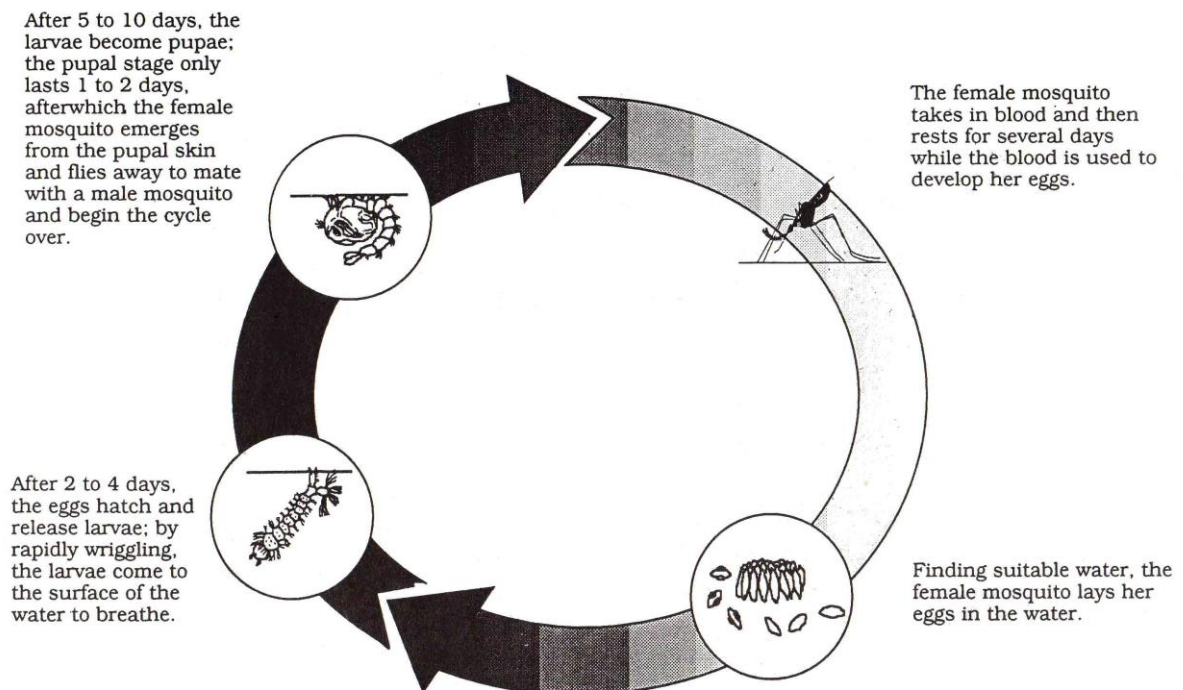
(d) After the youths have answered, explain the life cycle of a female mosquito using the facilitator notes.

The life cycle of a female mosquito

The adult female mosquito is attracted to people by body odour, temperature, perspiration on clothes, and the air people exhale. Having found suitable prey, the female mosquito searches for a place close to the surface of the skin to draw blood. Using a long razor sharp nose, she pierces (not bites) a hole in the skin to reach the blood source. This piercing action, combined with chemicals the female mosquito releases to disrupt the clotting process and inhibit the pain reaction (so that the victim is unaware of the bite!), causes the itchy sensation people feel after being bitten by a mosquito.

Once fully fed, the female mosquito searches for a place to rest for several days while the ingested blood is used to develop her eggs. At the end of her resting period, the female mosquito lays her eggs in the water. Afterwards, she is ready to feed again and develop more eggs.

Female Mosquito Life Cycle



3. Group Discussion**(10) minutes**

- (a) Let the groups discuss the following questions and present their discussion points.
- How will you live to protect yourself not to be bitten by the mosquito?
 - What can you do so that mosquitoes cannot breed near your house?
- (b) Ask one group to present their discussion points and the other groups listen and add the different points.
- (c) Among the discussion points, discuss and categorize the tasks that the youth themselves can do and the tasks that the community people can do collaboratively to suppress the mosquitoes.
- (d) Use the facilitator notes to do additional explanation.

| Facilitator note Mosquitoes lay eggs in the still waters. Mosquitoes live mostly in dark places, bushes and puddles. | |
|---|--|
| Ways for preventing mosquito bites | Suppression of mosquitoes |
| <ul style="list-style-type: none"> - Wearing of adequate clothing - Use of mosquito nets during sleep - Use of mosquito coils - Use of mosquito repellents - Fumigating with turmeric, dried leaves, etc. - Avoid living in places that mosquitoes hide. (Dark places, bushy places and places that have bad smell) • Note: The best ways are wearing full sleeve clothes and long longyi to cover the limbs; sleeping in the mosquito net. Using mosquito coil and Repellent can cause respiratory diseases by breathing smoke caused by them | <ul style="list-style-type: none"> - Clearing away grass and bushes, the hideouts for mosquitoes, in the surroundings of the home and school - Clearing away the plants at the edge of lakes, ponds - Filling up puddle with earth - Cleaning the drainage to ensure constant flow without being blocked - Filling up swampy places where water is not drained off with earth - Spraying insecticides to suppress mosquitoes - Breeding larva-preying fish in wells and lakes, the hot-beds for mosquitoes - Turn over water pails, basins, and flower pots when not in use or dispose them systematically if they are no longer in use. |

As female mosquito is attracted to people by body odour, practising personal hygiene is also a way of keeping them away.

4. Whole class discussion**(5) minutes**

- (a) Have you ever seen a person being ill with malaria?
- What are the symptoms of malaria?
 - What should be done if people are infected with malaria? What do they usually do?

- (b) The facilitator should add to the discussion by using 'facilitator note'.

Facilitator note

When one is infected with malaria, one suffers from fever, intermittent fever with hot and cold spells and shivering with teeth chattering, headache, anemia and weakness. If one is suspected of being infected with malaria, one has to go to the nearest hospital/clinic and take a blood test. If malaria parasites are detected, take medical treatment as prescribed by the health workers. Malaria can be cured. If one doesn't take proper treatment, it will lead to loss of life especially when malaria parasites infect one's brain, one can lose one's life immediately. Though malaria can be cured, one can be infected with the disease again due to the mosquito bite. Therefore, the best way of protecting from being bitten by mosquitoes is sleep in the mosquito nets whenever you sleep. If it is an area of malaria, use insecticide treated mosquito nets.

5. Assessment Questions

(15) minutes

Content Questions

- (a) Suppose, a person has drunk spring water. Assess whether that person will be infected with malaria using four principles of communicable disease transmission ESSE.
- (b) Assess the person who has eaten banana in the same way and decide whether that person will be infected with malaria or not.

6. Giving assignment

- (a) Give each youth a sheet of paper written number one to five.
- (b) When the facilitator reads the statement, they have to make a tick (✓) or (✗) beside the number.
- (c) Then read out the following statements that are also included in the participant booklet.

Malaria Prevention Checklist – Self and Family Risk

| Item | Yes | No |
|---|--------------------------|--------------------------|
| 1. Full sleeve clothes and longyi are worn when in cool and shaded areas. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Repellents are used to protect from mosquito bites. | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Mosquito coils are burned to repel mosquitoes. (Citrus fruit peels may also be used). | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Insecticide-treated mosquito nets are used to protect family members from mosquito bites while sleeping at home or while travelling. | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Family members who are sick are protected from mosquito bites. | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
|---|--|
| Risk <input type="checkbox"/> | No risk <input type="checkbox"/> |
|---|--|

- (d) Explain that if the youth has all ticks (✓) from 1 to 5, the family members can be said no risk of malaria. If there is one cross (✗), it can be said that the family members have the risk of malaria.
- (e) Let the youths decide whether their family has the risk of malaria/
- (f) Ask the youth what he/she and the family can do to prevent malaria.

Note for the facilitator:

1. What is Malaria?

Malaria is a disease caused by a group of parasites called plasmodia. There are four malarial parasites that are infectious to people. In Myanmar, the two main plasmodia found are *P. vivax* and *P. falciparum*. The other two types are rare in Myanmar. Of these four parasites, *P. falciparum* is by far the most dangerous and the most commonly fatal type.

In all cases, the malarial parasite feeds on and reproduces in the blood cells of the circulatory system. Not only does the parasite destroy the blood cells it uses, often causing anemia (thin blood) in the people affected, but the blood cells also become sticky and adhere to the walls of blood vessels in the brain and kidneys, thereby blocking blood flow to these areas. Reduced blood flow to the brain can cause severe neurological effects in the brain like convulsions (abnormal, violent muscle contractions throughout the body) and coma (profound state of unconsciousness); however, the most common cause of death for people infected with malaria is reduced blood flow to the kidneys which causes kidney failure.

2. How is Malaria spread?

People get malaria when they are bitten by an infected female mosquito (malaria is transmitted by the *Anopheles* group of mosquito only). The infected female *Anopheles* mosquito **injects** parasites into the bloodstream while it feeds. These parasites go to the liver where they mature and multiply. Eventually, the invaded liver cells burst and release thousands of parasites which then invade blood cells and reproduce some more. These blood cells then burst, releasing hundreds of parasites into the bloodstream which re-invade fresh blood cells; this process is repeated many times (in severe cases, one fourth or more of the blood cells may be infected). Eventually, some of these parasites change into forms that can infect mosquitoes. Once this form of the parasite is picked up by a feeding mosquito, it **must** reside in the mosquito about 10-14 days before it matures into a form that is infectious to people.

3. What conditions or factors (habits, behaviours, activities, etc.) increase or decrease the risk of getting malaria?

Malaria is spread by the *Anopheles* group of mosquito in mainland Southeast Asia. The *Anopheles* mosquito group lives primarily in and along the fringes of forested areas and feeds between dusk and dawn. People living or travelling in areas away from the forest face little if any risk of contracting malaria. However, for people living / working in or travelling to such areas, especially at night, their risk of becoming infected with malaria greatly increases and appropriate precautions should be taken. Some preventative measures are wearing protective clothing (such as long-sleeved shirts and long trousers; although this may help reduce the number of mosquito bites, if a mosquito can bite through the clothing the mosquito can pass on the disease), using mosquito repellents (apply topical mosquito repellent to all exposed body parts; if mosquito coils or electrical repellents are too expensive or unavailable, burn weeds, fruit peelings, coconut husks, or other organic in the early evening hours), and sleeping in treated bed nets.

4. *When does the anopheles mosquito bite?*

Anopheles mosquitoes enter the house in the evening (generally between 5 p.m. and 9.30 p.m.) and again in early hours of morning. They start biting by late evening and the peak of biting activity is at midnight and early hours of morning. By keeping the windows and doors closed between 5 p.m. and 10 p.m. and again in early morning, one can prevent the entry of these mosquitoes into the house. Also protect yourself against the bites in the evenings and early mornings by wearing garments that cover the body as much as possible and at bedtime, by using insecticide treated nets without fail.

5. *Why does a mosquito need blood?*

The female mosquito lays 30-150 eggs every 2-3 days. Blood is needed to nourish these eggs and Anopheles shows the most regular cycles of blood feeding and egg-laying.

6. *Where does the anopheles mosquito live?*

Mosquitoes that spread malaria live and breed in and near forested areas.

7. *Where does the mosquito hide?*

The adult mosquitoes hide themselves behind cupboards, clothes, curtains and other dark and cool corners during the day and come out to bite at night. It is important to minimize these hiding places. Therefore keep the cupboards and such other things closed; do not hang clothes at corners of the room, instead keep them inside the wardrobes or cupboards.

8. *How far do the mosquitoes fly?*

Mosquitoes can fly up to several kilometers! And they can reach far off places by taking shelter in motor vehicles, ships and aircraft.

9. *How long do they live?*

The average life span of a mosquito is 2-3 weeks. It can be longer in ideal living conditions.

10. *Where does the Anopheles mosquito breed?*

Anopheles mosquitoes breed in natural water collections. Therefore, breeding increases dramatically in the rainy season when water collects in bottles, tins, tender coconut shells, buckets, tires etc., that are thrown out in the open and these provide ample breeding ground. Also wells, ponds, water tanks, paddy fields etc., act as breeding grounds. Construction sites provide ample breeding places for the mosquito - water on the concrete slabs (used for curing), water collected in tanks, water collected in and around the construction site owing to blockage of water drains - all these help breeding. It is very important to destroy these water collections or to keep them properly covered to prevent breeding.

11. *What are the symptoms of malaria?*

Symptoms are changes in someone's body that are signs for a disease. Most people who get malaria get symptoms 10–30 days after they get infected (the *Plasmodium* gets in their blood.) But some people can get symptoms after only a week, and some may be infected with malaria and not have symptoms for a year. The most common symptom of malaria is fever, when the body temperature is high. The fever from malaria usually comes very suddenly. The people who have Malaria often feel like they had influenza.

12. Symptoms of malaria are:

- Pain in joints
- Headache
- Vomiting
- Feeling very tired or sleepy
- Anemia (low red blood cell levels in the blood)
- Jaundice (yellow skin and eyes)
- Cough
- Enlargement of liver or spleen (enlargement means it gets bigger)
- Sweating
- Chills (feeling very cold)
- Delirium (when people are very confused because of a disease. They may look drunk. They may not be able to talk.)
- Coma (when people are not conscious. They look like they are asleep, but they cannot be woken.)
- Fast heart rate
- Low blood pressure

13. What can happen to someone if he/she does not get treated for malaria?

If left untreated, severe complications can develop either gradually or suddenly. Convulsions, coma, hypoglycemia (not enough sugar in the blood), metabolic acidosis (too much acid in the blood), and severe anaemia are relatively common in children and pregnant women. Pregnant women are also at risk of premature labour, spontaneous abortion, and stillbirth. Adult Respiratory Distress Syndrome (breathing difficulties) and kidney failure can also occur.

14. Can people die from malaria?

Yes. Up to 40 percent of the people infected with falciparum malaria can die if not treated. Children are at the greatest risk of death from malaria. In adults mortality is also quite high once the disease has progressed to the point of coma, Adult Respiratory Distress Syndrome, or kidney failure

15. How can people be sure if they have malaria?

The only way to know if someone has malaria is to have his/her blood checked for malarial parasites. Blood is taken by a simple finger prick. The blood is placed onto a slide, which is then examined by a technician.

Because malarial parasites are very small, they are sometimes quite difficult to detect. Therefore, even though someone's blood has been examined once and found negative for malarial parasites, if malarial symptoms persist, he/she should have his/her blood re-examined.

A rapid test is now available in some clinics and health centre.

16. Prevention of Malaria & the Multiplication of Mosquitoes (Exit)

Mosquitoes that spread malaria live and breed in and near forested areas. We can help prevent malaria by:

- Protecting sick people with malaria. Mosquitoes become infected when they bite people who are sick with malaria. Mosquito nets and coils will effectively prevent mosquitoes from biting people and help stop the spread of malaria.
- Destroying or altering any place that mosquitoes can use to breed, which is anywhere water can collect and stand.
 - Cover all water containers and jars;
 - Collect and dispose of empty bottles, cans, tyres and other objects that can catch rain water;
 - Use oil instead of water in small dishes places under the legs of tables or kitchen cabinets to prevent ants from getting to food;
 - Turn over water pails, basins, and flower pots when not in use;
 - Remove water from refrigerator drip pans every other day;
 - Change water in vases regularly and empty water from plant saucers;
 - Place small mosquito larvae-eating fish in pools or ponds near living areas;
 - Turn over, crush, or burn any coconut husks that can collect water.

17. Prevention of Mosquito Bites (Entry)

Dengue mosquitoes feed (bite) from dusk till dawn. Protect yourself from mosquito bites:

- Wear full sleeve clothes and long longyi to cover the limbs;
- Use repellent. [Care should be taken in using repellents on small children and elderly]. Lemon grass oil makes an excellent natural repellent.
- Use mosquito coils
- Use insecticide-treated mosquito nets when sleeping at night

18. *Can people get malaria by being close to others who have dengue?*

No. Malaria can only be transmitted by an infected mosquito. People cannot get malaria by being close to or touching someone infected with malaria, or using his/her eating utensils. Even if someone gets bitten by a mosquito that has just bitten somebody infected with malaria, the mosquito cannot pass on the disease immediately because it takes at least 10-14 days for the parasites in the mosquito to develop into a form that can then be transmitted to people.

However, it is important to know that people who live in the same family with or nearby people who have malaria **DO** have a greater chance of becoming infected with malaria than people who live in a malaria free family or community. This is because the possibility of being bitten by an infective mosquito increases the more infected people there are living in a family or community.

Summary of Malaria

| <i>Questions</i> | Malaria |
|--------------------------------------|--|
| 1. What is the cause of the illness? | Group of parasites called plasmodium |
| 2. How do people get it? | Bite from infected Anopheles mosquito |
| 3. Are some people more at | Those with little or no built-up resistance, |

| | |
|--|--|
| risk of getting it than others? | i.e.: travellers, children, and pregnant women, though men are more commonly infected in Myanmar from work in areas with high rates of malaria |
| 4. Can people get it by being close to others who have it? | No. Malaria is only transmitted by infected mosquitoes – not direct personal contact |
| 5. What are the initial symptoms? | First 9-30 days: no symptoms followed by severe fever, chills, and aches. |
| 6. What can happen if people do not get treated for it? | Convulsions, coma, and even death if infected with falciparum malaria; infection with other strains may cause relapsing symptoms |
| 7. Can it cause death? | Only P. falciparum is fatal malaria but without blood test it is impossible to tell the difference between strains |
| 8. How can people be sure if they have the infection? | Seek proper medical tests at health facility. |
| 9. Is there a cure or a vaccine? | No vaccine, but several being tested; many preventative medicine available but do not always work |
| 10. How can you avoid it? | Avoid forested areas between dusk & dawn; use long-sleeved clothes, mosquito nets, and repellents. |

Phase 3 A-4-2

Time: (60) minutes

Pulmonary TB

(Critical Thinking)

Objective

At the end of the discussion, the participants will be able to

- (1) Assess the behaviors using four principles of communicable disease transmission ESSE and decide whether certain behavior is risk of infection or not.
- (2) Describe preventive measures.

Materials

Participant Booklet

Activities**1. Whole class discussion (5) minutes**

- (a) What are the communicable diseases through air?
(If it doesn't include pulmonary TB in the points discussed by the youths, the facilitator should tell them TB is also a disease communicable through air.)
- (b) Have you ever heard of pulmonary TB? Share the class as much as you know.
(Teacher's tip: Elicit to get as many answers as you can.)
- (c) Ask whether they remember ESSE. Explain the transmission of TB using ESSE.
- (d) The facilitator can use the following points.

The Four Principles of communicable disease transmission through aerosol droplets

E EXIT – the bacteria must *exit* the body of an *infected* person (through coughing or sneezing)

S SURVIVE – the bacteria must be in conditions in which it can *survive* in the droplets

S SUFFICIENT – *sufficient* quantities of the bacteria are needed to cause infection in the droplets

E ENTER – the bacteria must *enter the lung* of another person. (Inhale)

2. Whole class Discussion

- (a) The facilitator will read out the three events in the participant booklet and discuss whether there can be TB transmission using four principles of ESSE.
 - Nyi Nyi commutes daily in the crowded bus to go to work. Someone coughs up straight to his face for several times. Nyi Nyi does not cover his nose and mouth nor turn his face.
 - Little girl Hla Hla sits on the floor and always plays nearby her uncle. Her uncle coughs frequently when they are talking. The room is dark and does not have proper ventilation.
 - Thida works in a busy shop. A person in front of Thida sneezes on the door handle without covering his mouth. Thida then opens the door by holding door handle. Then she enters the room and eats the biscuit with her hand. She rarely washes her hand before eating.

If necessary use the following points to explain to them.

Cough several times straight to the face- High risk.

Exit: TB bacilli exit a person infected with Lung TB when coughs through droplets of sputum/mucus in the air. (Yes)

Survive: TB bacilli can survive in sputum droplet in the air. (Yes)

Sufficient: The amount of TB bacilli in the sputum droplets is sufficient.. (Yes)

Entry: Entry is possible as Nyi Nyi inhales droplets when he breathes in. (Yes)

Cough nearby and talking- High risk

Exit: TB bacilli exit a person infected with Lung TB when cough through droplets of sputum/mucus in the air. (Yes)

Survive: TB bacilli can survive in sputum droplet in the air and in darkness. (Yes)

Sufficient: The amount of TB bacilli in the sputum droplets is sufficient.. (Yes)

Entry: Entry is possible as Hla Hal inhales droplets when she breathe in as her uncle cough frequently. She plays and touches droplets on the floor and may touch nose/mouth.(Yes)

Holding dirty door handle and eat without washing hand – Medium risk

Exit: TB bacilli exit a person infected with Lung TB when sneezes through droplets of mucus in the air. (Yes)

Survive: TB bacilli may survive in mucus droplets in the air and on the door handle for sometime if the room is dark. (Yes)

Sufficient: The amount of TB bacilli in the mucus droplets that Thida touch may be sufficient. (Yes)

Entry: Entry may be possible as Thida eats biscuits without washing hands.

(b) The facilitator will explain using the followings.

All four principles of transmission are needed for communicable lung diseases transmission to occur. If uncertain about whether any of the four principles are present in a given situation, we should always assume that it is. For example, TB bacilli can survive outside the human body for a few hours but we cannot always calculate how long the TB bacilli have been outside the person infected or how long it will survive. We do know, however, that TB bacilli are unable to survive for more than a few minutes in a well ventilated room that is exposed to sunlight. As for sufficient quantity, we should always assume there is a sufficient amount of TB bacilli to cause infection. Unlike many other communicable diseases, the inhalation of just a single bacterium can cause a new infection but our immune system may be strong enough to prevent infection, or prevent infection from becoming active.

3. Reading Stories

(a) Let the groups observe the pictures in their book. If it is necessary, the facilitator will read the story.



- (1) A middle-aged person who has TB is coughing without covering and then spits sputum into a nearby spittoon (bowl). The windows are closed and room is dark.



- (2) Little girl is sitting nearby and studying. She quickly picks up and holds the bowl by the rim. Cough droplets are on the rim of the bowl



- (3) Then, the girl places the bowl on the floor and continues reading the story. She is thinking and touching her nose with her hand.



- (4) Later, she washes her hand without using soap and the family have the meal together.



- (5) A woman gave the man some tablets (medicine) and a cup of water but the man was refusing as he had already taken a lot of medicine and thus he did not want to take any more.

(b) Let the youths to copy the following table in their note book.

| <i>Behaviour in the picture</i> | <i>Alternative Behaviour (reduce the transmission)</i> | <i>Advantages</i> | <i>Disadvantages</i> | <i>Realistic Solution(s), Why?</i> |
|--|---|--------------------------|-----------------------------|---|
| Behaviour 1 | | | | |
| Behaviour 2 | | | | |

| | | | | |
|-------------|--|--|---|--|
| Behaviour 3 | | | - | |
|-------------|--|--|---|--|

(c) Ask the following questions to each group. Let each group discuss the answers and fill in the table.

- What are the behaviors in this picture that can transmit the disease?
- What can be the alternative behaviors to reduce transmission?
- What are the strengths and weaknesses of the alternative behaviors?
- Among the alternative behaviors, which ones realistic and can be done practically?

(d) Ask one group to present their discussion points and after the presentation, ask the other groups to add their discussion points.

| <i>Behaviour in the picture</i> | <i>Alternative Behaviour (reduce the transmission)</i> | <i>Advantages</i> | <i>Disadvantages</i> | <i>Realistic Solution(s), Why?</i> |
|--|---|---|--|---|
| 1.a. Man does not cover when he coughs | Cover with hand / handkerchief for every cough. (this prevents the EXIT of TB bacteria) Use surgical facemask | - Does not spread droplets - Can wash handkerchief later - Face mask can be worn, not dependent on strength of man. | - He is too weak to cover with hand - He cannot cover every time - He cannot afford handkerchief - Facemasks may be expensive | |
| 1.b. He tries to spit sputum in a spittoon that is out of reach. | -Put spittoon in the reachable place with easy lid cover. - provide disposable plastic bags (This helps stop others coming in contact with the TB bacteria or possible ENTRY) | -Spit does not spill or soak other materials | - Expensive and cannot afford | |
| 1.c. Windows are closed | Open windows for proper ventilation and allow sunlight to enter the room (This will reduce the time TB bacteria can SURVIVE) | - Allow air to flow and droplet can dried up soon. -Allow sunlight can reduce the survival of the bacteria | - Patient may refuse as he as he feels cold | |

(e) Discuss with the class about some possible strategies to implement the chosen solution(s). If the disadvantage is the unwillingness of the TB patient to go along with the solution or another, smaller, problem has arisen, what can be done to reduce these?

Example

| <i>Alternative Behaviour (reduce the transmission)</i> |
|--|
| <ul style="list-style-type: none"> - A mask to be used can be made with a clean cloth - It can be washed and use again |

5. Explain using facilitator notes.

Some people are asymptomatic. TB bacteria can be in an inactive state when the person's body immune system is strong. However, if the person is infected with HIV or malnourished, his immune system becomes weakened and the bacteria will become reactive and reproduce in the lung. Then the person will have symptoms of Lung TB like;

- *coughing for more than 3 weeks;*
- *productive cough (sputum);*
- *chest pain or pain in the upper back;*
- *loss of appetite (don't feel like eating food) and weight;*
- *chronic low grade fever;*
- *sweating at night;*
- *possible coughing up blood.*

Lung TB is a communicable disease commonly occurs in Myanmar. Whenever people have above symptoms, to ensure the correct diagnosis, it is best to consult the doctor and have proper investigation as the above symptoms can be caused by other diseases also. The doctor will check the person's sputum (spittle) for TB bacilli, take a Chest X – ray to look for TB or use a special skin test to see a person has been exposed to TB. If there is TB the doctor will provide the right medicine against TB. It is important to have proper treatment rather than relying on traditional medicine. For a complete cure from TB, a person must take prescribed medication for months as per instructions.

People with Lung TB are most likely to spread bacteria to those with whom they spend time everyday- including family members, friends and colleagues. Lung TB is curable with proper treatment.

There is a national DOTs (Directly Observed Therapy) in which medication are provided free of charge to patient. A patient must follow the doctor's instruction and must be observed when taking medication. Observation can be done by medical staff at a clinic or by family members at home. An incomplete course of medication can create drug resistance and TB bacteria will become more difficult to treat.

Summarize as follows.

Now you have learnt about two diseases. Whichever behavior you have had, from today on, you should live protectively from those diseases. You also need to share the facts about the diseases exactly to your family members, friends and community members. Try to assess the behavior that can transmit the disease or not using the four principles of disease transmission ESSE. In this way you can gain trust of the community.

Disaster Preparedness

Natural Disaster

Phase (3) A-5-1

Time: (40) minutes

Objective

At the end of the discussion, the participants will be able to

1. Identify some of the natural hazards common to Myanmar
2. Assess personal preparedness in the event of flooding and to develop an emergency evacuation plan.

Materials

Participant booklet

Activities

1. Whole Class discussion

- (a) Ask the following questions and record the answers.
 - (1) What does emergency mean?
(An unexpected and often dangerous situation requiring immediate action)
 - (2) What are disasters that give people trouble?
- (b) Record the disasters that youths mention on the board.
- (c) Ask them to categorize the disaster that caused by people and natural disaster from the list on the board.

List of disasters

| | |
|---|----------------|
| Fire | By people |
| Accidents(car, train, plane, motor cycle, boat) | By people |
| Earthquake | Nature |
| Tsunami | Nature |
| Storm | Nature |
| Flood | Nature |
| Mountain slide | Nature |
| Riverbank slide | Nature |
| Forest fire | Nature/ People |

2. Whole Class Discussion

- (a) Let the youths look at the 8 disasters in their book and explain to them.

NATURAL HAZARDS IN MYANMAR



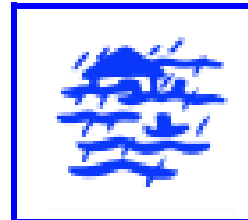
Earthquakes, earth tremors: The sudden motion or trembling in the Earth due to movements of rock deep in the underground.



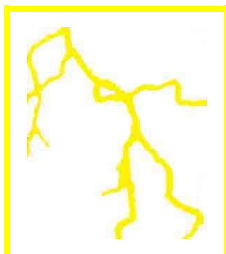
Tornadoes: Destructive whirling, funnel-shaped winds that forms between a cloud and the ground surface.



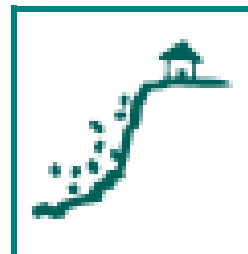
Tsunamis: A gigantic wave or series of waves that smash into the shore, caused by an earthquake, volcanic eruptions or landslides under the sea.



Floods: The building up of large quantities of water, generally caused by heavy rains that the soil is unable to absorb.



Thunderstorms: Storms created by electrically charged rain and hail within the clouds, resulting in lightening and thunder.



Landslides, mudslides: Soil, rocks and debris that move suddenly or slowly down a slope. They mainly caused by heavy rain by earthquakes.



Cyclones: Strong winds that start over the sea, rotating in big whirling circles, and bring rain with them.



Wildfires: Destructive fires in forests and other areas covered by vegetation. These fires can get out of control and easily spread over vast areas of land

1. Then, ask the following questions one by one. Ask students to quickly brainstorm some of the natural hazards common to Myanmar?

(b)

- (1) What are the natural hazards you learnt more?
- (2) What natural hazard is the most common to Myanmar every year? (Flood)
- (3) Why does it often have flood caused by rivers?

(c) The facilitator explains as follows.

In Myanmar, the most common natural hazard is the flood caused by rivers. If there is much rain in the area where the river starts flowing or if it has been raining for many hours, there can be flood due to overflowing rivers. The outbreak of flood can occur in the lower plains and in the area where there are many river-lets and creeks. Flood can be worse in an area where big and small trees are cut and felled. If there are trees, their roots can make the earth less density and absorb the water. If the earth is hard the water can flow pass the hard surface and flood is caused.

3. Whole Class Discussion

(a) Let the class brainstorm the bad consequences of flood.

(b) The facilitator explains as follows.

Any kind of natural hazard can make people lose their houses, buildings and possessions. The environment is destroyed and people become homeless. The families are separated and can even lose their lives.

(c) Then, ask the following questions. “What will you do during the flood?”

(d) After getting answers from the youth, ask them, “Are the tasks you will do during the flood safe and can keep you from danger? Why?”

(e) Explain as follows.

When you are faced with this kind of danger, the most important thing is protect your life. As soon as you know that the hazard is going to happen or is happening, you need to inform this to the adults and has to follow their instructions. You also need to prepare for the hazard.

(f) Discuss the following questions and record the discussion points on the board.

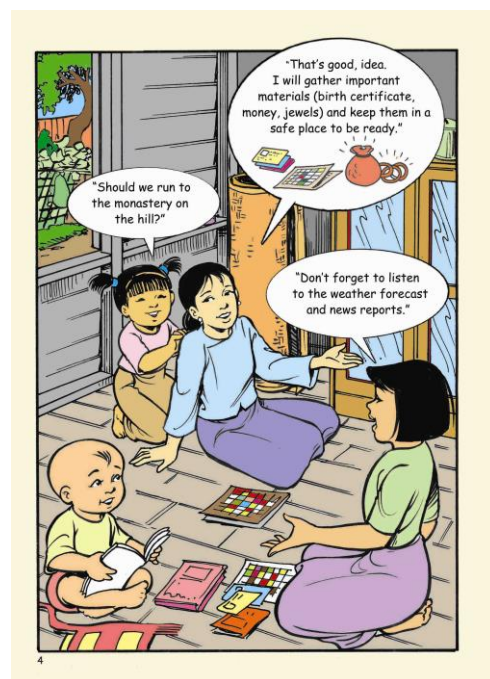
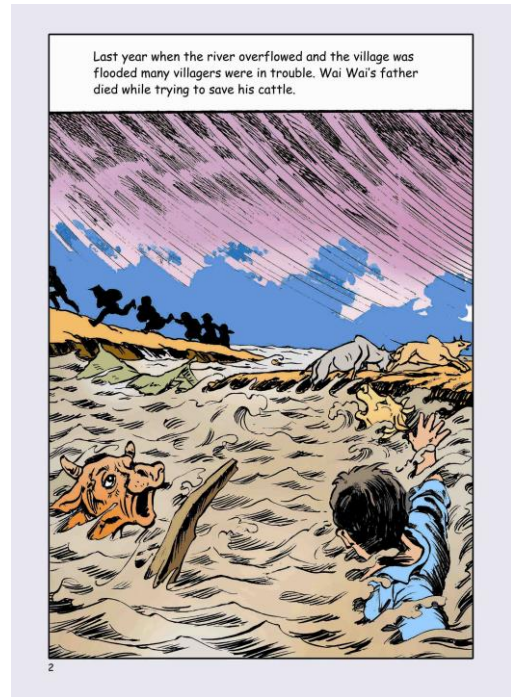
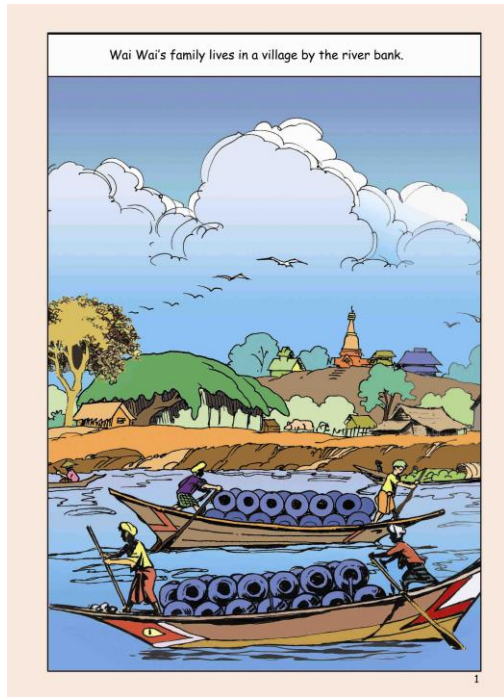
- (1) What can be done to reduce the bad consequences of flood?
- (2) Where can you go to keep yourselves safe during the flood?
- (3) What are some of the important things that you will take with you?

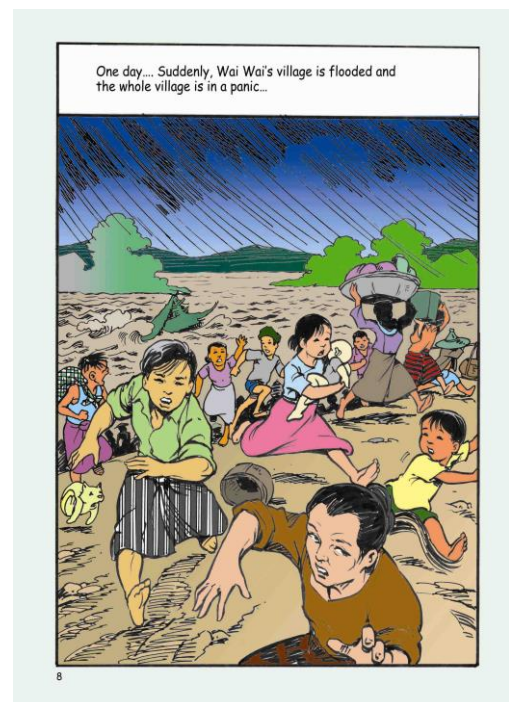
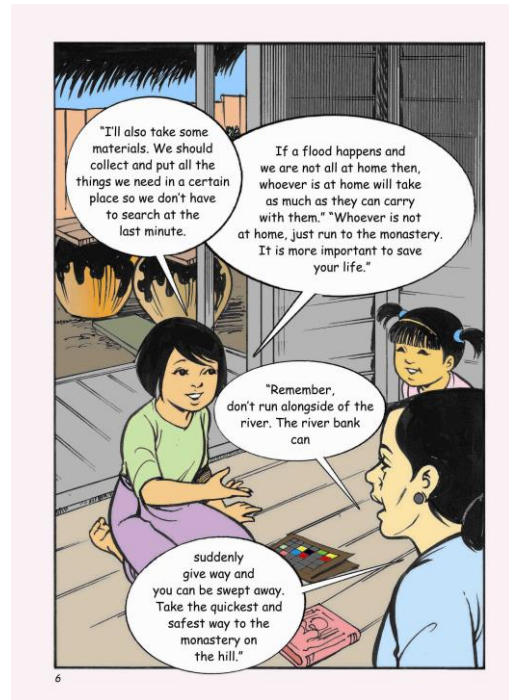
4. Reading the story

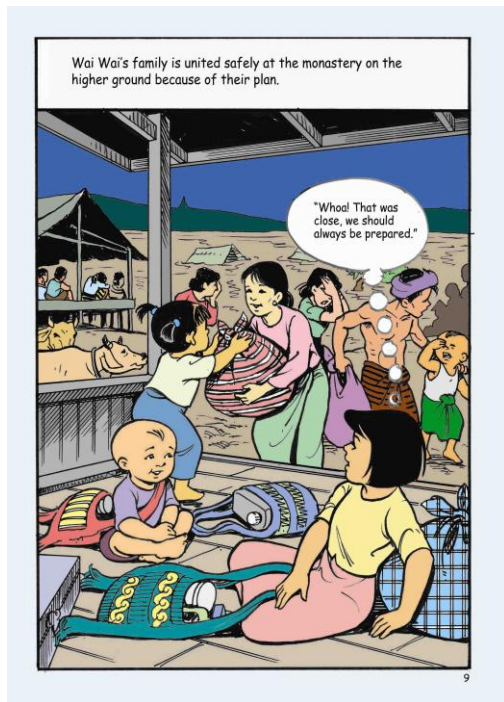
(a) Let the youths look at the story in their booklet.

(b) The facilitator will read the story slowly to the youths.

(g) The story of “Let’s Prepare”







- (c) Ask the following questions about the story.
- (1) Where did Wai Wai and family plan to go if the village is flooded again?
 - (2) What things did they plan to take with them? What is the difference between your list of things to take and Wai Wai's list of things to take?
 - (3) Among your choice of things, which are not necessary for emergency survival?
- (d) Explain as follows.

You need to think and prepare to protect yourself before a hazard. For example, when there is flood you have to plan to go to a higher place that cannot be flooded. You need to plan to take drinking water and dried food that will last a long time such as biscuits, dried noodle, etc. You should write your address and names of your family on a sheet of paper and put it in a plastic bag and always keep it with you. During the flood, you should give priority to the safety of your life. You should not do things desperately. Listen to your parents and teachers and go to the place where your family has planned to meet each other. Even if you don't meet the family members you have to wait there till you meet them. You must be able to report the authoritative persons and ask for help.

6. Group Discussion

- (a) Let each group draw a map of their village. (Main roads, buildings, rivers, hills and their own houses should be included.)
- (b) Ask the following questions on how their family prepares in case of flood in their region.
 - (1) Where would you go in the event of a flood? Why do you decide to go to that place?
 - (2) Who do you need to contact with before you leave for that place? Where are they?

- (3) Which way would you choose to go there? What will be the pathway to safety?
- (4) What things will be needed to take with you?
- (c) Let the groups' map of "Pathway to Safety" stick on the wall.
- (d) Let one group present their discussion points on one question.
- (e) The facilitator will explain using the notes for the facilitator.

Facilitator Notes:

Before a Flood

1. Listen to the TV or radio for warnings about flooding in your area.
2. Store three-day supply of water and non-perishable food.
3. Store medicine for diarrhoea and for fever, home medicine, spirit, cotton wool, gauze, batteries and soap.
4. Choose two places where the family member will meet and inform this place to each family member.
5. Put the important documents such as identity cards, registered list of family members, and birth certificates.

During a Flood

1. If you come upon floodwaters, climb to higher ground.
2. Then, go the other way opposite the way of flood.
3. Never try to walk, swim, or play in floodwater.
4. Stay away from creek and stream banks in flooded and recently flood areas. It is very easy to be swept away by fast-moving water.
5. Never stay in a vehicle (car, truck, motorcycle) and become surrounded by water.
6. Watch out for snakes and poisonous insects in areas that are flooded or climb up the tree in this area.

After a Flood

1. Stay out of buildings where floodwaters remain.
2. Continue to listen to radio or television reports.
3. Help those who need special assistance –infants, elderly people, and those with disabilities
4. Never wear wet clothes.
5. Water for drinking should be boiled before use.

(Keep in mind that a person's curiosity can make him lose his life.)

Phase (3) A-5-2**Time: (40) minutes****Think before to reduce risk and hazards**

(Critical thinking, Creative thinking)

(Note: The youths have been reminded to copy the Family communication Plan from their handbook)

Objective

At the end of the discussion, the participants will be able to make a plan to reduce the harm and injury caused by the natural hazards common to Myanmar.

Materials

Participants' booklet

Activities**1. Introduction**

Tell the participants as follows.

Now, we are going to discuss the natural hazards common to Myanmar and what we can do to reduce the effects of them.

2. Whole Class Discussion

(a) Discuss the following question with the whole class.

- What are the natural hazards that are common to Myanmar? We discussed it in the previous lesson.
- What kinds of bad effects can those hazards cause to us?
- How can we reduce those effects?

(b) The facilitator can add the discussion points as follows.

All of the natural hazards can destroy the environment and cause us lose our lives, our houses and our belongings. When they become worse, they can become disasters. We cannot say when a hazard will become a disaster so it is the best way to prevent it from becoming a disaster and prepare the disaster plan and reduce the natural hazard harm.

(c) Write the following facts on the board and say that when we prepare a Disaster Preparedness plan, these points should be included.

- A Family Communication Plan
- Disaster Supplies Kit
- Pathway to Safety

3. Learning Activity(1)**10 minutes**

(a) Let's start with a Family Communication Plan

During the disaster you can be together with the family or you can be separated from the family. During this time as all the communication system in your region can be destroyed, it would be difficult to get contact with one another. It is important to be able to contact with one of your family members or a trusted friend so that you can contact with your family.

(b) Explain the family communication plan that is included in the participants' booklet.

Family Communications Plan

My Name: _____

My Address: _____

My Telephone Number: _____

1. My Parent's

Father's work address _____

Father's work phone number _____

Mother's work address _____

Mother's work phone number _____

2. Who to Contact in Case of Emergency or Separation(trusted family friend or relative)

Name _____

Address _____

Telephone number _____

3. Who to Contact in Case of Emergency or Separation(trusted family friend or relative out of town)

Name _____

Address _____

Telephone number _____

4. Other Emergency Contacts:

Local police station: _____

Local fire department: _____

Doctor: _____

5. Name of prescription medication (if any) _____

- (c) Let the youths fill up the Family Communication Plan copied from their booklet. If they need to ask some of the facts from parents, they can do it at home but remind them that it is the best for them to put that sheet in a plastic bag and keep it in their pocket.

4. Learning Activity(2)

15 minutes

- (a) Tell them that, during the disaster, the family might face the situation to leave their house immediately or to stay in the house without any water, electricity, fuel and food. They might not have enough time to collect the things they need for them. Therefore you should prepare disaster supplies kit.
- (b) Let the youths think the things that should be included in that kit. (put the things they say on the board)
- (c) Explain the disaster supplies kit in the participants' booklet.

During a disaster, you may have to evacuate quickly. You might not have time to gather all the supplies you need so it is recommended to make a disaster supplies kit. This kit contains enough food, water and supplies to last for three days for each person in your family. The supplies are usually placed in a duffel bag that can easily be carried to the evacuation site (place of safety). Here are some suggestions for the kit:

| WATER | MEDICINES | CLOTHING & BEDDING |
|---|---|---|
| <input type="checkbox"/> Store water in plastic containers. <input type="checkbox"/> Store 4 litres of water per person per day (2 litres for drinking, 2 litres for food preparation/sanitation) <input type="checkbox"/> Keep at least a three-day supply per person. | <input type="checkbox"/> First-AID Kit <input type="checkbox"/> Paracetamol <input type="checkbox"/> Any essential prescription medicines | <input type="checkbox"/> One complete change of clothing <input type="checkbox"/> Sturdy shoes <input type="checkbox"/> Blankets <input type="checkbox"/> Mosquito netting <input type="checkbox"/> Rain gear |

| IMPORTANT DOCUMENTS | FOOD | SANITATION |
|--|---|--|
| <input type="checkbox"/> Keep documents in a waterproof, plastic container <input type="checkbox"/> Safety map (map of local area showing evacuation sites) <input type="checkbox"/> Copy of personal identification <input type="checkbox"/> Immunization records <input type="checkbox"/> Family Communications Plan <input type="checkbox"/> Family records (birth, marriage, death) | <input type="checkbox"/> Three-day supply of non-perishable food. Select foods that do not have to be kept cold, need little preparation or cooking, and little or no water <input type="checkbox"/> Ready-to-eat canned or dried meats, fruits and vegetable, instant noodles <input type="checkbox"/> Canned or boxed juices, powdered milk <input type="checkbox"/> High-energy foods such as dried fruit, nuts, and biscuits | <input type="checkbox"/> Soap, antibacterial liquid <input type="checkbox"/> Feminine supplies <input type="checkbox"/> Large plastic bags & ties for personal sanitation. <input type="checkbox"/> Plastic bucket <input type="checkbox"/> Chlorine bleach <input type="checkbox"/> Toilet paper |

TOOLS & EMERGENCY SUPPLIES

- ☐ Battery operated radio & extra batteries
- ☐ Candles, torch & extra batteries
- ☐ Can opener, utility knife
- ☐ Matches in waterproof container
- ☐ Paper, pencil
- ☐ Needle, thread
- ☐ Whistle
- ☐ Medicine dropper
- ☐ Insect repellent

- ☐ Charcoal (for outside use only)

Remember, the disaster supplies kit at least once a year!

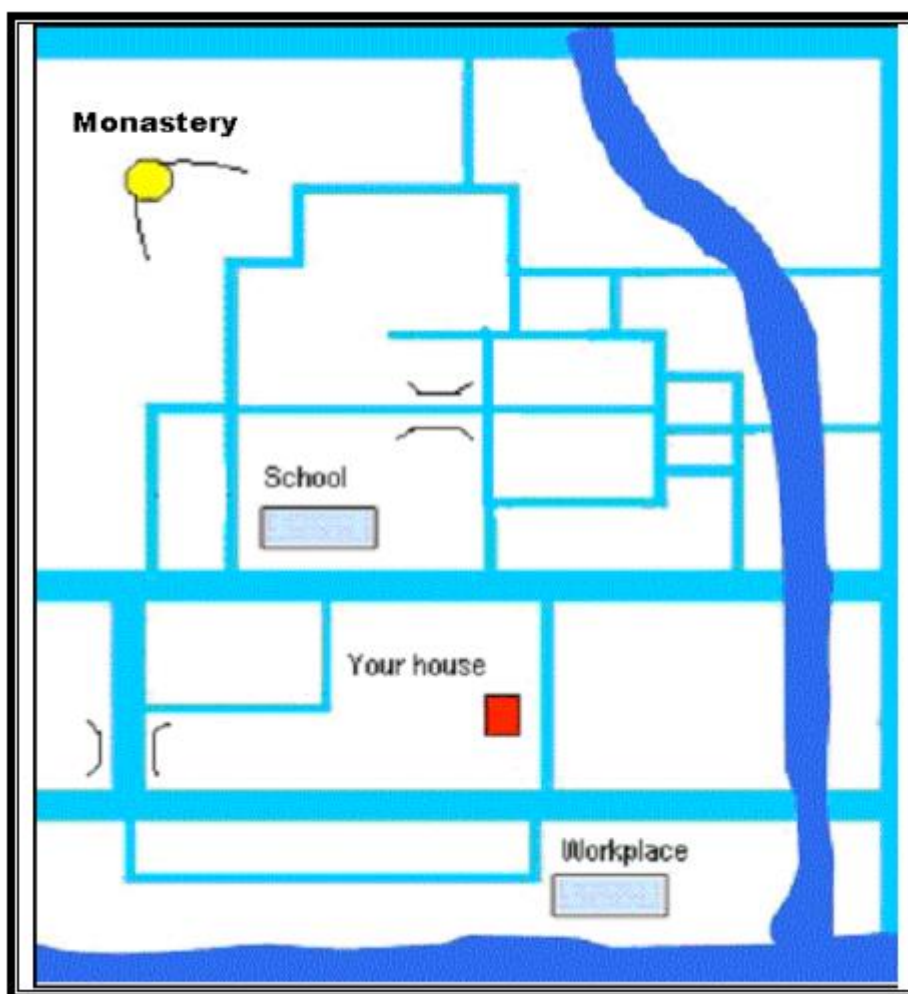
- (d) Tell the participants that for many families, it is not possible to keep a disaster supplies kit ready at all times due to the cost of the items needed. Therefore, it is important to discuss with family members what supplies will be needed and who will be responsible for collecting the different items at a moments notice. All family members will need to take some responsibility. In the table below, write the items you will need and the name of the person who will be responsible for these items

5. Learning Activity(3)

10 minutes

- (a) The facilitator can lead to make a pathway to safety map with the participants so that they can do it in their groups. (Make sure that the main roads and paths, buildings, bridges and rivers or creeks are in the map.)

Pathway to Safety



- (b) Write the two common hazards that usually occur in your region in the map.
- (c) Ask the following questions for each hazard and make a mark on the map in different symbols.
- Where would you go for your safety? Why do you go to that place?

- From this place, if we are going to that safe place, which path would be the shortest and safest? Choose the way that you can safely reach it in a short time.

(d) The facilitator will explain as follows.

Now, you have prepared a Disaster Preparedness Plan. When you prepare the disaster supplies kit, all the family members should take responsibility so that you can do it easily. The Pathway to Safety Map should be prepared and stuck on the wall of your house. If there is disaster, all family members should follow the Family Communication Plan. In this way, you can reduce the harm and bad effects of the disaster.

Phase (3) A-5-3**Time: (40) minutes****Let's prepare for disaster**
(Critical thinking, Creative thinking)**Objective**

At the end of the discussion, the participants will be able identify the facts to prepare for reducing the harm and injury caused by earthquake.

Materials

Participants' booklet

Activities**1. Whole Class Discussion**

- (a) Review the natural disasters they have studied in the previous lessons. Tell them that they are now going to discuss about the earthquake.
- (b) Discuss the following questions with the youths.
 - (1) Has Myanmar any experience of having earthquake?
 - (2) Why do you think earthquake happens?

Then, explain as follows.

Some of the plates move apart, allowing molten rock to well up through the gap and solidify. Others move together or grind alongside of each other. This constant squeezing and stretching of the plate edges builds up stresses in the rock which eventually ruptures and causes an earthquake.

- (3) What can happen if there is earthquake?

2. Group Discussion**15 minutes**

- (a) Let the groups discuss the following questions.
 - (1) What must you do to reduce harm and injury during earthquake?
 - (2) What must you prepare before the earthquake?
 - (3) What must you do after the earthquake?
- (b) Let one group present their discussion points. Let the other groups add the different points or more detailed points.
- (c) Then, let the groups study the points to be done before, during and after the earthquake that is included in their booklet. If it is necessary, the facilitator should help them.

WHAT YOU CAN DO**Before an Earthquake**

- In each room, find a safe place under a sturdy table, desk or bench. Your safe place can also be against an inside wall or corner, away from things that could fall on you.
- Ask your parents to bolt or strap large items against the wall. Bolt to the walls mirrors, pictures and tall bookcases. Keep heavy objects on the lower shelves so they do not fall on people.

During an Earthquake

- Drop, cover and hold on.

- Take cover under a sturdy desk, table or bench. Cover your face and head with your arms. Hold on.
- If there is no table or desk near you, take cover along an inside wall or corner of the building. Cover your face and head with your arms. Hold on.
- Stay away from glass, windows, outside doors and walls. Stay away from things that could fall.
- Stay inside until the shaking stops. Stay inside till it is safe to go outside.
- If you are outside, stay away from tall buildings, trees, streetlights, and power poles

After an Earthquake

- Be prepared for aftershocks.
- Open cabinets slowly. Beware of objects that can fall off shelves.
- Stay away from damaged places. They could collapse with minor tremors that follow!

3. Practice(1)

10 minutes

- (a) Instruct the youths to be able to prepare before the earthquake as follows. If necessary, give help to them.
 - (1) Let them draw the house or the room they are discussing now.
 - (2) Tell them to include all the things (ceiling, things hanging on the wall, on the table etc.) in picture of the room or house they are drawing. Give 5 minutes for the activity.
 - (3) Then, let them circle the things that need to be moved.
 - (4) Let them mark a star on the furniture that they can sit and take shelter under it. E.g. Tables, benches, or corner of the room.
- (b) Let one group to present about the house and the other about the room.

4. Practice(2)

10 minutes

Let the youths practice the how to act during the earthquake.

- (1) Each one has to sit they can get shelter.
- (2) They have to cover their head and face with two hands.
- (3) They have to sit still where they are.

(Note: Assessment can be done by observing the practical work of the youths.)

Summary and follow up activity

You are learning about the disasters so that you can know how to reduce the effects of the disasters if you are faced with one of them in your region. If so, instead of being shocked, you should recount the facts you know and protect yourself. Share what you know with your family so that they can do disaster preparedness.

Facilitator Note:

Let the participants read the lessons in the “Ready- Set- Prepared” and discuss the rest disasters in groups.

Summary Key Messages for Phase 3 A

- * Try to be able to live with clear conscious in life.
- * When you get mad at someone, you should directly tell the concerned person how you feel. Never say a word that will make the other person hurt because you think you are right.
- * Whatever refusal behavior you use in communication, use it effectively and assertively. Use effective refusal behavior if it is needed. The other person would persuade someone to get move the person to his side. Don't forget that if you can't refuse, you can lose many things.
- * Never make the other person feel frustrated because of you. Live in harmony with others. Don't forget that if you want to be loved by others, you yourself must show your love and care to others.
- * To protect yourself from malaria, don't let mosquitoes bite you.
- * Practise covering your mouth and nose when you cough or sneeze and keeping your hands clean by washing them.
- * When you are faced with the natural disaster, don't get shocked. Instead, you should think how you can escape from it safely.

Part 3-B

Making Difficult Decision and Problem Solving

Phase (3) B-1-1

Time: (120) minutes

Making Difficult Decision (Decision making, Problem Solving)

Objective

At the end of the discussion, the participants will be able to

1. Explain that their decision can affect not only to them but also their family and the others.
2. Describe that when they make decision, they need to consider the causes and effects of their decision.

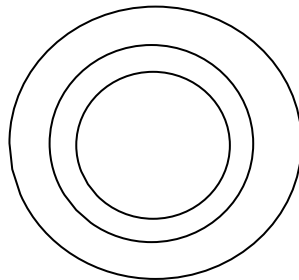
Materials

Pieces of paper, color pens, bowls of water, some small stones, Participants' booklet

Activities

(a) Practical Work

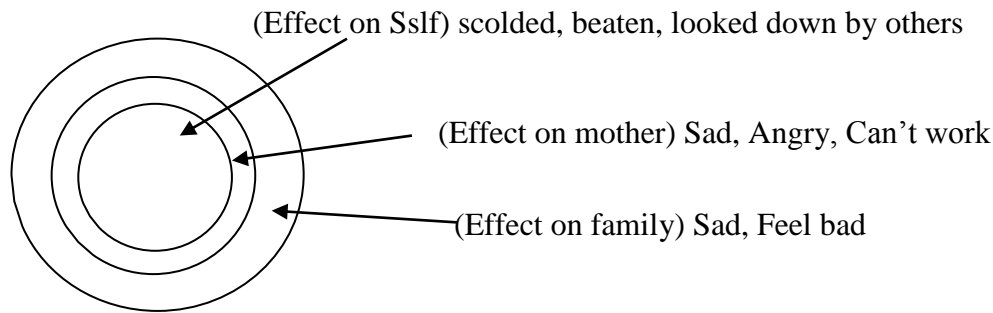
- (a) Form groups of three. Give a bowl of water and a small stone to each group. Give them the following instructions.
Keep the water in the bowl calm. When the water is calm, drop the stone into the water from a bit higher place. Record how the water moves when the stone is dropped.
- (b) Let groups say what they have found and draw the picture of the movement of water on the board.



- (c) Discuss whether the findings of the groups are same or different.
- (d) Discuss why these ripples appear with the whole class.

2. Explanation of the effects of behavior

- (a) The facilitator will explain the effects of the dropping stone by giving examples as follows. (10 minutes)
For example, while you are playing, your mother asks you to do some work. You get angry and shout at your mother. Supposing your shout is a stone, what is the first effect of the stone? (It will be on you. You will be scolded or beaten.)
Fill in the other circles by asking the effects of a stone dropping.



(b) The facilitator can use the following points to explain to the youths.

If a person cannot cope with his emotions and behaves in accordance with the emotions, the effect will be not only on him but also the others in the environment. Based on the behavior, the effect can be more than three areas.

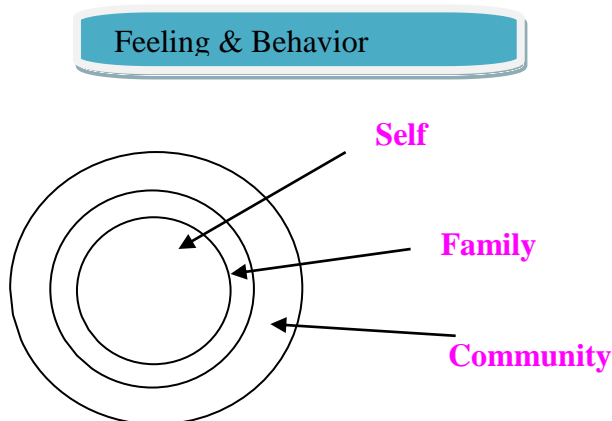
3. Group Discussion

(a) Let the groups read the events in their booklet. Let one group discuss one event.

Event 1: Maung Zaw promised to support the money his girlfriend needed. Today is the promised date. However, he has no money in his hand. He is worried because his girlfriend can misunderstand him for not keeping his promise. He has no idea for solving this problem. At last, he sold the bicycle he borrowed from his friend and gives the money she needs.

Event 2: Su Su likes a free life style. She doesn't like to live with her parents who control her. As she feels stressed to live with her parents, she has left her house to live together with her friend who always helps her.

(b) Let the groups study the events and identify the feeling and behavior due to that feeling. Then let them discuss the effects on self, and others due to that behavior. Draw the circles that self and others fill in the effects on each one.



(c) Let the groups present the discussion points.

(d) The facilitator explains as follows.

Youths can think irrationally when they cannot cope with their emotions and desire to do something. In this situation, they can make irrational decisions easily. Due to their behavior, they will have bad consequences and so do their family and the community.

4. Whole Class Discussion

Ask the following questions for class discussion.

Are the solutions in the events are suitable ones? Why?

What should be known to be able to solve the problems correctly?

(Let them recount the problem solving steps they studied in Phase 2 “Think to prevent mistakes”

5. Inform the students that when we make difficult decisions, we need to do 8 steps. Then, let them look at the following problem solving steps in their booklet and explain them.

Step 1: Define the decision you have to make.

Step 2: Consider all the choices/alternatives. *Collect information about them.*

Step 3: Consider all the alternatives. *List the advantages (pros) and disadvantages (cons) for each possible choice.*

Step 4: Consider your values.

Step 5: Consider the impact on other people.

Step 6: Choose one alternative. *Make a decision after considering the pros and cons of each possible choice.*

Step 7: Implement the decision. *Make a list of the things that you will have to do to carry out your decision.*

Step 8: Assess your decision

6. Group Discussion

25 minutes

- (a) Tell them as follows. Now you all know how to use the steps for problem solving. You need to use these steps by identifying the problem, the behavior due to emotion and how it affects self and others.
- (b) Let them tell the problems and let each group choose one.
- (c) They have to identify the problem that causes emotion and the behavior due to emotion and effects to self and others. The facilitator can fill in the circles with effects.
- (d) As the question. If you use the 8 steps for problem solving by considering those facts, what do you think will happen?
- (e) Let the groups present their discussion points.
- (f) The facilitator will help them check the 8 steps of problem solving.

7. Whole Class Discussion

10 minutes

- (a) Let them reflect what they have done and ask them whether they had conflicts in choosing the alternatives. Tell the youths that whenever they have a conflict or problem, they should respect other peoples’ choice as every individual can be different.
- (b) Explain as follows.

Sometimes, even though we have assessed all the advantages and disadvantages of different choices before us, the decision we have made goes terribly wrong and places us in a difficult situation. It becomes necessary for us to make new decisions to try to resolve the situation. This time, however, instead of your decision affecting only you, it also affects others. Therefore, when we find ourselves in a difficult situation, we must consider how our decisions will affect others.

For example, if a young person makes a decision that results in negative consequences, new decisions will have to be made on how to handle the situation that will involve other people. Some situations where making difficult decisions may be necessary may include unplanned pregnancy, infection with a sexually transmitted infection, or drug addiction. This lesson will explore how difficult decisions can be made.

When faced with a difficult decision to make, we sometimes forget what is important to us – our values. We may only see the problem that is immediately before us and we wish to resolve it as quickly and as easily as possible. We also may forget that whatever decision we make and action we take can affect others. Therefore, reflect the problem solving stages and if it is needed, you should change and make a new decision.

8. Assessment Questions

(a) Content Questions

- (1) Do the youths usually think the consequences of a behavior before doing something? Why?
- (2) Which facts should be considered to solve a problem? Why?
- (3) Whatever the problem is, what do you need to consider when you solve the problem?(Goal and value)

(b) Personalization Questions

- (1) Whenever you solve the problem, could you think the consequences of it? Why?
- (2) Is there any difference in your life by behaving rationally and irrationally?
- (3) Have you got any experience of not being able to cope with your emotion? What is that? How did you behave? What were the effects on you and your family?

(c) Linkage Questions

- (1) Is there any effect on using drugs by being able to think the consequences of the behavior? How?
- (2) If your friend is in a condition of being unable to think rationally, what will you do?

9. Summarize as follows.

Whenever you make a decision, you should think the effects on you and your family. Think the consequences rationally. Never make a decision immediately. Reflect your past decisions and get lessons from them. You must practice to make decision by using the knowledge gained from this lesson.

Drugs and alcohol

Phase (3) B-2-1

Time: (120) minutes

Alternative options if possible 1

Objective

At the end of the discussion, the participants will be able to identify the causes and consequences of using drugs and substances.

Materials

Participants' booklet

Activities

1. Introduction

5 minutes

Introduce the lesson as follows.

When adolescents are at the age of puberty, they experience not only the physical and emotional changes but also the changes in social life and ways of thinking. At this age, they can feel uncomfortable as well as confidence to face everything as an adult.

Therefore, they do risky tasks and more dangerous things. For example, they try drugs and substances. If they use drugs and substances frequently, they will addict to it and get into trouble.

2. Whole class discussion

(30 minutes)

- (a) The facilitator should discuss the following questions one after another.

Record the results of the discussion on the blackboard.

- What do you understand by "addicted" or "attached"?
- What are the things that people get addicted to?

- (b) Draw the following table on the board.

How Different Substances are Commonly Used

| Taken orally (drink / eat) | Taken by inhaling | By injecting into the veins |
|----------------------------|-------------------|-----------------------------|
| | | |

- (c) The facilitator can give example of chewing beetle nut and ask the youths how people use betel nut and other drugs. Record the answers in the table as follows.

How Different Substances are Commonly Used

| Taken orally (drink / eat) | Taken by inhaling | By injecting into the veins |
|--|---|-----------------------------|
| Betel nut(Chew) Alcohol Sleeping pills Marijuana (in food) Amphetamines (pills, in food or in drink) | Tobacco (smoking) Marijuana (smoking) Heroin / opium (smoking) Amphetamines (smoking) Glue/ Thinner | Heroin Amphetamines |

- (d) Different substances can enter your body in many ways. A substance can be used alone or together with other different kinds of substances. Let's discuss the consequences depending on the way they are used. Tell them the following case study.

Tun Tun was a high-way bus conductor. He tried to earn money for his family by travelling in the bus to and fro. He got tired and felt unhappy. Knowing this, his friend gave him some medicine for regaining energy and feeling happy. When Tun Tun tried them, he found that he became fresh and active and could work harder. His unhappiness disappeared. He liked the medicine and took them everyday. In this way, he could not stay without taking them and he addicted to them. In the long run, he sometimes felt frightened and excited. He got angry easily and could not sleep well. He became suspicious of others. His capacity of rational thinking became less and less. He happened to do things without thinking and often fought with others. He even shouted at his beloved mother and beat his younger siblings. Later he found out that the tablets he had been taking were amphetamine tablets.

- (e) Ask the following question for class discussion.

What medicine did Tun Tun take?

What bad effects did Tun Tun get by using that medicine? (Let the youths to answer the physical, mental and social effects)

- (f) Record the answers on the board. The following table is given to help the facilitator.)

| Substance | Physical injuries | Mental injuries | Social injuries |
|-------------|---|--|--|
| Amphetamine | <ul style="list-style-type: none"> - Could not sleep well - Change the function of the brain cells - Felt tired - Could die due to accident | <ul style="list-style-type: none"> - could not stay without taking them - addicted to them - felt frightened and excited - got angry easily - became suspicious of others - less rational thinking - do things without thinking | <ul style="list-style-type: none"> - Lose good relationship with others |

- (g) Tell them that they have discussed about the consequences of drugs such as alcohol, betel nut and tobacco in the previous lessons so in this lesson they will discuss the consequences of using Cannabis (Marijuana, hashish), Heroin, Glue and Thinner.

3. Group Discussion

25 minutes

- (a) Give each group 5 kinds of substances.
- (b) Ask the groups to learn the short term and long term consequences of substance use. If necessary the facilitator can explain to them.

The following table summarizes what is known about the effects of common substances

| Substance | Short-term effects | Long-term effects |
|--|--|--|
| Alcohol (Beer, wine, liquor) | Short-term effects include doing things that normally one would stop oneself from doing, possible loss of physical co-ordination, unclear vision, slurred speech, making poor decisions and memory impairment. Excessive drinking over a short period of time can cause headache, nausea, vomiting, deep unconsciousness and death. | Drinking large amounts of alcohol regularly over a lengthy period of time can cause loss of appetite, vitamin deficiency, skin problems, depression, loss of sexual drive and memory, and liver and brain damage. Alcohol consumption during pregnancy can lead to Foetal Alcohol Syndrome. Tolerance and dependence also develop. |
| Opioids (Heroin, Opium) | These produce detached and dreamy sensations, sleepiness, and constriction of the pupil of the eye, nausea, vomiting and constipation. Overdose leads to unconsciousness, failure to breath and death. | Tolerance and physical and mental dependence can develop quickly. Stopping use results in the withdrawal syndrome. |
| Volatile inhalants (Glue/ Thinner) | The individual feels uninhibited at first and drowsy later. With continued inhalation, hallucinations may occur. Other effects include feelings of happiness, relaxation, sleepiness, poor muscle coordination, slurred speech, irritability and anxiety. The most immediate danger to the individual is "sudden sniffing death". | Although little is known about volatile substances, regular long-term use may lead to nose bleeds, skin rashes around the mouth and nose, loss of appetite and lack of motivation. Some of the solvents are toxic to the liver, kidney or heart; and some may cause brain damage. Little is known about the long term effects of regular inhalant use. |
| Cannabis (Marijuana, hashish) | Cannabis may make the individual feel euphoric at first and then relaxed and calm. Feelings of wellbeing and relaxation, loss of inhibitions, muscle co-ordination and concentration. There may be increased heart rate, redness of the eyes and increased appetite. Large quantities can cause panic, hallucinations, restlessness and confusion. Large doses can also change physical perceptions, similarly to hallucinogens. | Regular use over a long period of time increases chances of dependence causes impairment of cognitive functions and may worsen existing mental problems. |
| Amphetamines (Ya Ma, Ya Ba) | Short-term effects include enhanced or increased central nervous system activity; experiencing brief intense feeling of intoxication and exaggerated feelings of confidence. Soon the mood quickly changes to a low feeling, and may prompt the person to repeat the dose. Overdose is more common with crack than with other forms of cocaine. | Long-term effects include inability to sleep, irritability, mental health problems, and becoming suspicious and distrustful of others (paranoia). |
| Nicotine | Some short-term effects are: a feeling of | Long-term nicotine use can cause heart |

| Substance | Short-term effects | Long-term effects |
|---------------------------------|--|---|
| (Tobacco cigarettes) | alertness just after using tobacco and then relaxation afterwards; increase in heart rate and a temporary rise in blood pressure. Dizziness, nausea and reduced appetite also occur. | and lung disease, blockage of arteries (peripheral vascular disease), hypertension, bronchitis, cancer of the lung, cancers of the mouth (with pipe smoking and tobacco chewing). |
| Depressants (Sleeping pills) | Effects are similar to alcohol. They slow down a person's thinking and movements and decrease the ability to concentrate. They cause effects such as slurred speech, sleepiness, problems with coordination; and they cause "hangovers". Low doses reduce feelings of anxiety, while higher doses cause sleepiness. Consumption of alcohol (at the same time) increases their effect, and repeated doses cause toxicity because the substance cannot be broken down (metabolized) quickly. Accidents and suicide are common. | Substances in this category can lead to dependence, inability to learn and problems with coordination. Convulsions can occur when the substance is withdrawn. |

(c) Then, let them discuss the following questions.

What are physical and mental injuries caused by using substances?

(d) Let the groups present their discussion points. Accept the points that have possibility.

(e) The facilitator can explain using the following points.

| Substance | Physical injuries | Mental injuries | Social injuries |
|--|--|--|---|
| Cannabis (Marijuana, hashish) | <ul style="list-style-type: none"> • Interferes with coordination • Increase heartbeat • Redness of the eyes | <ul style="list-style-type: none"> • Lose concentration • Irritation • Confusion • Change perceptions • Mental problems | <ul style="list-style-type: none"> • Interferes with effective communication • Commit crimes |
| Opioids (Heroin) | <ul style="list-style-type: none"> • constriction of the pupil of the eye • nausea • vomiting • constipation • unconsciousness • failure to breath and death | <ul style="list-style-type: none"> • Irritation • Destroys brain cells and memory • Depression | <ul style="list-style-type: none"> • Family financial prom due to addiction to heroin • Cost for the substance • Commit crimes |
| Volatile inhalants (Glue/ Thinner) | <ul style="list-style-type: none"> • Nausea • Decrease muscles • Slurred speech | <ul style="list-style-type: none"> • similarly to hallucinogens • irritability and | <ul style="list-style-type: none"> • Interferes with effective communication |

| | | | |
|--|--|---------|--|
| | <ul style="list-style-type: none"> • sudden death • nose bleeds • skin rashes around mouth and nose • Lose appetite • Toxic to the liver, kidney or heart • Brain damage | anxiety | |
|--|--|---------|--|

(f) The facilitator will explain as follows.

Whatever substance is used, it affects physical, mental, and social injuries depending on its type.

Phase (3) B-2-2**Time: (60) minutes****Alternative options if possible 2****Objective**

At the end of the discussion, the participants will be able to identify the causes and consequences of using drugs and substances.

Materials

Participants' booklet

Activities**1. Introduction****15 minutes**

(a) Discuss the following questions with the whole class.

- In phase one and two, what sort of goals did you set?
- What can happen to the goals if youths use drugs and substances?
- How can substance use affect health? Why?
- How can substance use affect your technical work and skills? (Can it support your skills better?) Why?
- Can using substances help your family? Why?

(b) Now, let's continue to discuss why adolescents use substances although this can affect their goals.

2. Whole Class Discussion

(a) Draw the following table on the board. Give example of using sleeping pills by asking the question, "Why do people use sleeping pills?" Then fill in the table with the answers.

| Substance | Reasons for using | Alternative way |
|---|--|-----------------|
| <ul style="list-style-type: none"> - Sleeping pills - Alcohol - Tobacco - Amphetamine - Cannabis(Marijuana, hashish) - Heroin - Glue and Thinner | <ul style="list-style-type: none"> - To be able to sleep well | |

(b) Fill in the reasons for using other substances in the corresponding column.

(c) Ask the following question. Instead of taking sleeping pills, what can people do to be able to sleep well? Fill in the column with the answers.

3. Group Discussion**10 minutes**

(a) Give each group two substances that are not discussed yet for the alternatives of substance use. The facilitator let them discuss the alternatives for substance use.

(b) Let the groups present their discussion points and record them in the table.

(c) If it is necessary, the facilitator can use the following table for explanation.

Reasons for Using Substances and Alternatives to Using Them

| Type of drug | Desired Effect / Reasons for use | Alternatives / Solutions |
|-----------------------------|--------------------------------------|--|
| Sleeping pills | Want to sleep well | Take physical exercise Eat suitable food Have regular time for bed |
| Alcohol | Reduce inhibitions Have 'fun' | Build self-confidence, self-esteem and good interpersonal relationship, communication and problem solving skills |
| Tobacco | Feel alert, relax | Proper diet, appropriate amount of sleep, exercise |
| Amphetamines (Ya Ma, Ya Ba) | Feel alert, have confidence | Proper diet, appropriate amount of sleep, exercise, build self-esteem |
| Heroin / opium | Have dreamy sensation, sleepiness | Meditation, proper diet, appropriate amount of sleep, exercise |
| Marijuana | Feel calm, relax, reduce inhibitions | Meditation, appropriate amount of sleep, build self-esteem and good interpersonal relationship, communication skills |
| Glue/ Thinner | Reduce stress | Build self-confidence, self-esteem Making right decisions |

4. Practice

- Tell the youths that they have already identified the alternatives of using substances. Now, they will practice them.
- Form groups of 3. Name the group members as A, B and C. A will encourage his friend to be willing to confide his situation and discuss the alternative ways so that his friend can choose wisely. B will confide his situation to A. C will take the role of the observer. C will have to observe whether A can do the steps for counseling. Remind them not to interrupt while someone is talking. A, B and C will take the roles in turn.
- Then, let the youths study the events in their book. (Facilitator can help the ones who cannot read well.)

Event 1

A:

A found that his friend B could work harder without taking rest or stopping. He noticed the changes in his behavior and tried to ask him.

B:

B told A that he was taking some tablets so that he could work harder and earn more money.

C:
C has to observe A and B talking to each other.

Event 2

A:
A got strong smell from his friend B. He noticed B's lips became blue and asked him the reason.

B:
B told A that he smoked so that he would be stylish but now he smokes everyday.

C:
C has to observe A and B talking to each other.

Event 3

A:
A found that his friend B went to a bar instead of going back home after work. He asked him about that.

B:
B told A that he drank alcohol with others so that he could be relaxed and less tired after hard work. But now, he could not stay without going to that bar.

C:
C has to observe A and B talking to each other.

- (d) Let all the groups perform the role play simultaneously. After that let the observers present whether the performers could do according to the steps for counseling.
- (e) The facilitator can add some counseling points if necessary. Then, recite the poem with the youths.

Causing you lose your consciousness

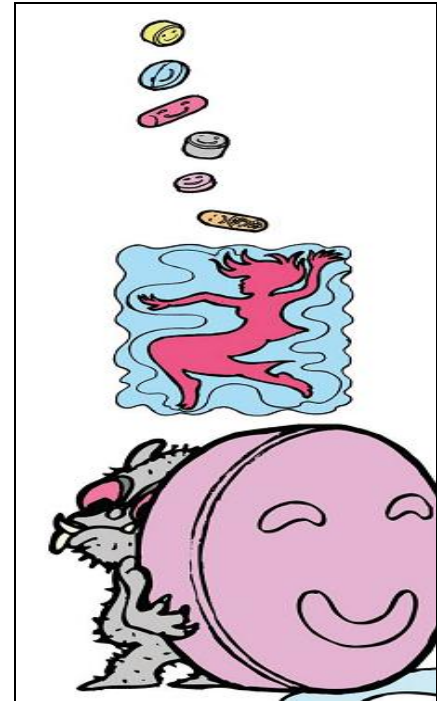
The tablets are lying beautifully
All mixed with different kinds of Ya-ma and Ya-
ba wonderfully.

Don't try it my friend,
You'll surely get twice bad effects in the end.

As the effect is rising, you'll feel like flying.
When you like it more and more, you can't stop it
at all.

Over confidence seems good but not.

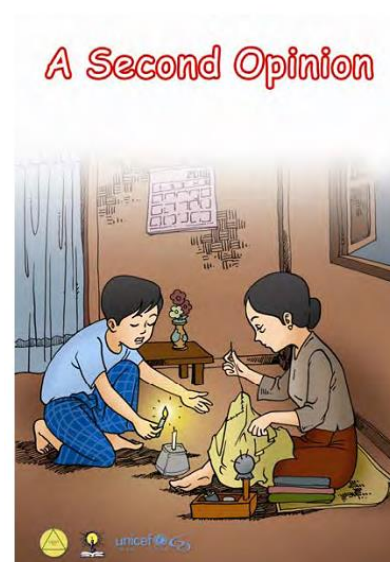
To be able to live happily,
You must refuse it assertively.



Summarize as follows

- Adolescents need to know not only the short and long term effects of the substances but also the alternatives of the substance use so that they can solve the problem concerned with it.
- If the substance users confide you with their problem, you should help them by discussing the alternative ways of substance use.
- Never use substance in any way.

(Note: Let them read the following stories.)



Phase (3) B-3-1**Time: (60) minutes**

Who has HIV (Critical Thinking)

Objective

At the end of the discussion, the participants will be able to identify the causes and consequences of using drugs and substances.

Materials

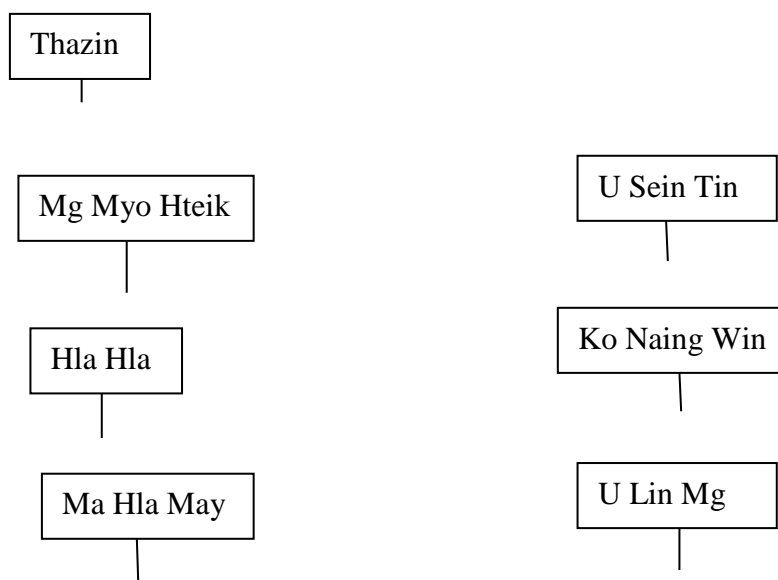
Participants' booklet

Activities**1. Introduction****5 minutes**

- (a) Ask the following question to introduce the lesson.
Have you ever heard of sexually transmitted diseases?
- (b) Then, tell them as follows. We have just explored the risk of HIV and STI infection through the critical analysis of various behaviours with ESSE. But, who has these behaviours? Can we ever really know another person's intimate behaviours? And, thereby, who is essentially at risk of HIV infection? This next activity may help us think more clearly about our perceptions on who is at risk and on how the behaviours of other may contribute to our personal risk.
- (c) Ask the following question.
Which behaviors can cause HIV infection? If necessary, use the information below to explain to them.
(Having sex (mouth, anus, vagina) without using condom, sharing a contaminated needle or syringe, untested blood transfusion)

2. Whole Class Discussion

- (a) The facilitator will tell them about the situation of each person and let them decide whether they are at risk of HIV/STI infection. Also ask them why they decided so. Write their risk of infection under their names.
(Note: To make the youths clear, use a board to write as follows)



Present Situation

- (1) Thazin(15 yrs. old)
What we know: This adolescent is from a rural area and migrated to town to attend secondary school. She lives with distant relatives and helps in their shop after school.
- (2) Maung Myo Htike(16 yrs. old)
What we know: This adolescent is from a nearby town and attends secondary school. He lives in a rented room with a friend near the school.
- (3) Hla Hla (17 yrs. Old)
Basic Characteristics: This adolescent works in a karaoke bar. She lives in town with her family.
- (4) Ma Hla May (27 yrs. old)
What we know: Daw Hla May packages dried fruit at home. She lives with her current partner.
- (5) U Sein Tin (48 yrs.old)
What we know: U Sein Tin is well off financially. He has his own business with many employees. U Sein Tin is married and lives with his wife.
- (6) Ko Naing Win (22 yrs.old)
What we know: Ko Naing Win works for a shipping company. He likes to go out at night with friends and meet people
- (7) U Lin Maung (32 yrs.old)
What we know: U Lin Maung runs an orchard on the edge of town. He lives with his current partner.

3. Whole Class Discussion

- (a) The facilitator will now tell them each of the person's sexual behavior and let the youths decide again who are at risk of HIV/STI infection.
- (b) Record the youths' answer under each person's name again.

Intimate Behaviours and Risk

- (1) Thazin(15 yrs. old)
Intimate Behaviour: This adolescent has never had sex but she has a boyfriend.
- (2) Maung Myo Htike(16 yrs. old)
Intimate Behaviour: Maung Myo Htike has a girlfriend but has sex with other partners, male and female. He does not use condoms with his male partners because they are not sex workers. They are usually older than he is it is difficult for him to ask them to use condoms.
- (3) Hla Hla (17 yrs. Old)
Intimate Behaviour: Hla Hla is sexually active but she uses condoms with all partners, including her boyfriend.
- (4) Ma Hla May (27 yrs. old)
Intimate Behaviour: She is the partner of the 32-year old male. She previously had sex with a former partner and did not use condoms because they were in a relationship. She doesn't think it is necessary to use condoms with her current partner because they are both monogamous and are planning to get married.
- (5) U Sein Tin (48 yrs.old)

Intimate Behaviour: Likes to regularly go out to drink alcohol. Has previously visited sex workers but used condoms. When he has sex with a woman who is not a sex worker he does not use a condom. Also, he does not use condoms with sex workers that he visits regularly and likes.

(6) Ko Naing Win (22 yrs.old)

Intimate Behaviour: Ko Naing Win occasionally shares contaminated needles and other equipment to inject drugs like heroin. He only uses condoms with people he thinks are at risk of HIV infection.

(7) U Lin Maung (32 yrs.old)

Intimate Behaviour: He is the partner of the 27-year old female. U Lin Maung has sex with both female and male partners but only uses condoms with female sex workers. He previously had symptoms of a STI but the symptoms went away on their own.

(c) Ask the following questions.

- (1) How much your assessment before and after knowing the intimate behavior of each person match?
- (2) Which facts made you amazed?
- (3) What are intimate behaviors?
- (4) Can they cause HIV/STI infection?
- (5) How do you think they cause infection?

(d) The facilitator can explain as follows.

We may not consider our selves to be at risk of HIV or STI infection if we look at our own personal behaviours. However, when we enter into a sexual (or drug using) relationship with others, our level of risk will change because our risk will not be linked to the past and current behaviours of our partner(s) as well.

Our vulnerability will also change and may further contribute to risk. Our perceptions of our relationships with others will influence whether or not we will take steps to protect ourselves. On the whole, we like to view our relationships in a positive light. We may feel a special closeness to our partners and thereby think that they would never do us any harm. The closer the relationship, the less likely we are to use prevention because we wish to demonstrate our trust in the other person.

4. Whole Class Discussion

- (a) Tell the class as follows. Now we'll look at the relationship of these people to one another. Read their intimate behaviors and situation of HIV/STI infection aloud to the class. Show their relationship by drawing lines. Discuss the questions with the whole class.(Answers to the questions are shown in brackets)

Teacher's Notes:

Sexual Network and the Transmission of HIV & STI

Red Line – Suppose the 22 year-old male, Ko Naing Win, has sex or uses drugs together with U Lin Maung. He does not use a condom because he does not think he is a risk because U Lin Maung is not a sex worker. U Lin Maung is infected with HIV and/or other sexually transmitted infections from Ko Naing Win.

U Lin Maung goes home, he later has sex with his partner, Daw Hla May, and does not use a condom.

She also becomes infected with HIV (and/or other sexually transmitted infections). Daw Hla May does not use any form of protection against pregnancy.

- **What may be the consequences for U Lin Maung and for Ko Naing Win?**

Ko Naing Win already is infected with HIV but may not know it. Without condoms, U Lin Maung could become infected with HIV as well. Previously, U Lin Maung had symptoms of a STI but did not treat it properly. It is still possible for him to infect Ko Naing Win with the bacteria or virus that are still in his body but not causing symptoms at that time.

- **If Daw Hla May becomes pregnant, what may be the consequences?**

Daw Hla May could become infected with HIV from U Lin Maung. The baby could also become infected if Daw Hla May does not know her HIV status or seek the proper care during her pregnancy. Daw Hla May may also become infected with STI from U Lin Maung. Sexually transmitted infections during pregnancy may cause still birth,

- **Even if the child does not become infected with HIV, what other problems will it face if both its mother and father become infected?**

If both the mother and father have HIV, it is possible that the baby will be orphaned in its childhood or before the child reaches adolescence

Blue Line – Suppose Daw Hla May has an affair with U Sein Tin before she met her current partner, U Lin Maung and did not use condoms because they were in a relationship. At that time, Daw Hla May did not know that U Sein Tin was already married.

- **What might have been the consequences for either Daw Hla May or U Sein Tin?**

Daw Hla May's could have been infected with another STI from her relationship with U Sein Tin since he unprotected sex with other women. She may not show any visible symptoms of the STI. Although Daw Hla May's last known HIV status is negative there still is a chance that she is still infected with HIV if she was tested in the window period. [The window period will be discussed in another lesson].

While we do not know about Daw Hla May's sexual history before she met U Sein Tin, it is possible that he could be infected with additional STI from her.

- **What might happen if U Sein Tin then has sex with his wife and does not use a condom?**

If U Sein Tin has sex with his wife without a condom, it is possible that she will also be infected with HIV and any other STI that he may have.

- **How easy do you think it would be to ask a partner in a relationship (girlfriend/boyfriend, wife/husband) to use a condom, especially if one has not been used before?**

Most people in relationships find it difficult to use condoms with their partner because they feel the need to demonstrate "trust" for the partner. It is especially difficult if condoms have not been used before or have not been used for a long time. A request to use condoms is then seen that one partner has lost "trust" in the other.

Green Line – Suppose after a night of drinking Ko Naing Win has sex with Hla Hla who works in the Karaoke Bar and uses condoms.

- **What risk would either Hla Hla or Ko Naing Win have for getting infected with HIV or any other sexually transmitted infections?**

If a condom is used correctly, there is little risk of infection with HIV or other STI. However, if alcohol was consumed, vulnerability will increase because the alcohol may prevent condoms from being used correctly – or used at all.

Purple Line – Suppose Maung Myo Htike is Thazin's boyfriend. They have not had sex yet but he hopes that she will be willing to have sex soon.

- **If they do have sex, do you think they will use a condom? Why or why not?**

Because it is the first relationship for Thazin and Maung Myo Htike (even though Maung Myo Htike is already sexually experienced) they may decide not to use a condom as a sign of trust and commitment in the relationship.

While he is waiting for Thazin to be willing to have sex, Maung Myo Htike has sex with Hla Hla and use a condom the first time. As they see each other more often, their relationship becomes closer.

- **Do you think they will use condoms consistently over time, especially if they have never been tested for HIV?**

As the relationship becomes closer Maung Myo Htike and Hla Hla will be less likely to use condoms.

- **What might be the consequences for Hla Hla?**

Maung Myo Htike is already HIV positive. Therefore it is possible that Hla Hla will also become infected. Maung Myo Htike may also have other STI which he could pass on to Hla Hla.

Suppose Thazin and Maung Myo Htike end their relationship. Thazin soon has a new boyfriend. She thinks the best way to keep him is to have sex with him. Because they are in a relationship, they do not use condoms.

- **What do you think might be the consequences for Thazin, her new boyfriend, or any of her future partners?**

Thazin could be infected with HIV or other STI depending on the past sexual history or her new boyfriend. If the relationship does not last, she could transmit HIV or STI to any future partners. She could also be infected from those partners as well if a condom is not used.

Pink Line – Suppose U Lin Maung has sex with Maung Myo Htike and does not use a condom. Later, Maung Myo Htike has sex with his girlfriend, Hla Hla, and does not use a condom.

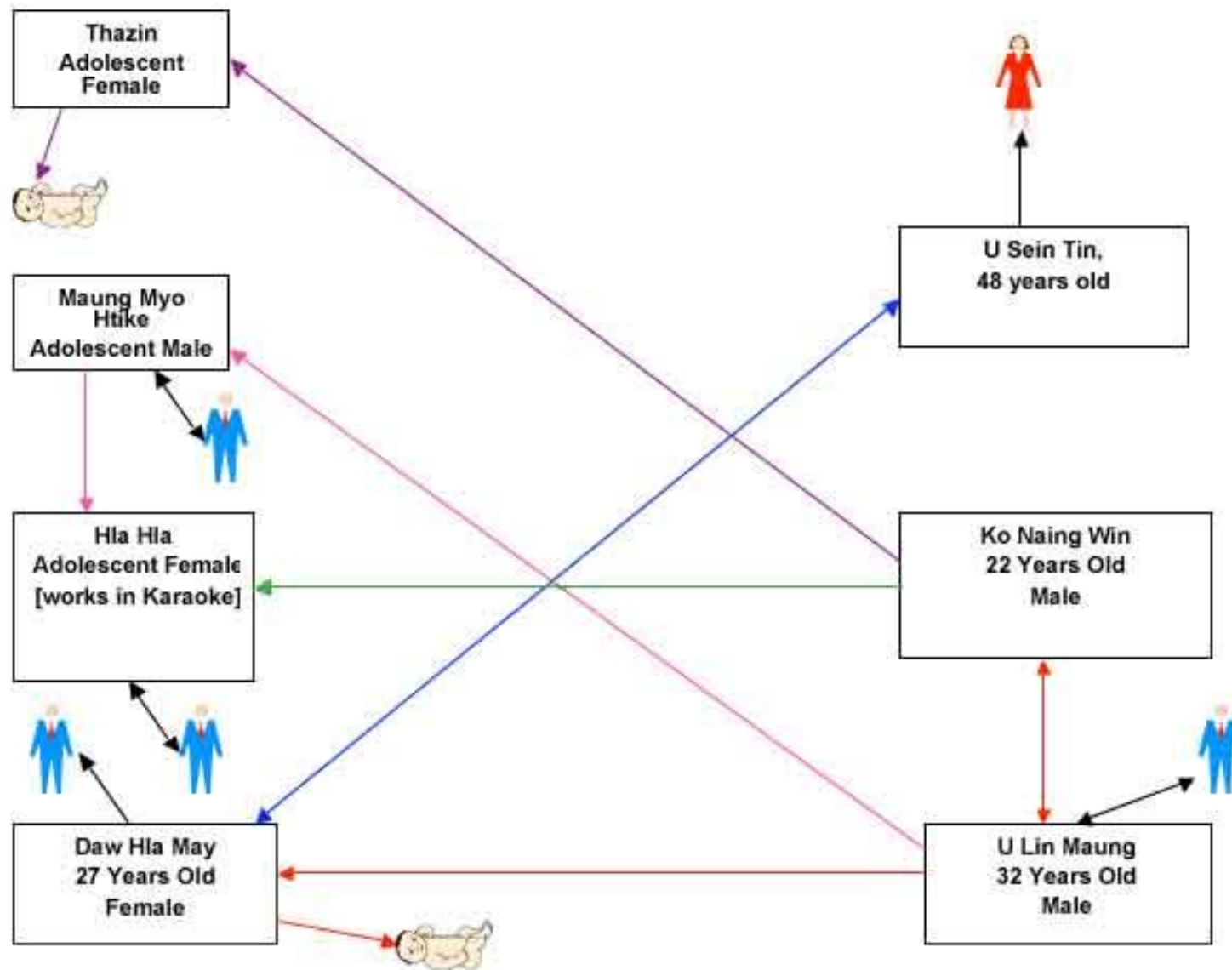
- **What might be the consequences for either U Lin Maung or Maung Myo Htike?**

U Lin Maung had symptoms of an STI but did not see proper treatment. This may make it easier to be infected with HIV from Maung Myo Htike. And, even though, U Lin Maung's symptoms have cleared up, he can pass the STI on to Maung Myo Htike.

- **What might be the consequences for Hla Hla?**

Hla Hla can become infected with both HIV and STI.

Sexual Network and the Transmission of HIV & STI (for student books and teacher guides)



(b) Continue discussion with the following questions.

- Can you say that a person has HIV just by seeing his appearance?

(We can't say that a person has HIV just by seeing his appearance. STI in some people do not show the symptoms so we can't say whether a person has STI or not. Only after test, we can say whether the person has HIV/STI.)

- Who are at risk of HIV/STI infection?

(Anyone who has the risky behaviour and who is in the situation, that leads to risky behaviour, is at risk of HIV/STI infection.)

(c) Summarize with the following key message of the lesson.

Key Messages:

- Anyone can a risk of infection, depending on their behaviours.
- We may not consider our selves to be at risk of HIV or STI infection but we may be vulnerable to infection due to our perceptions of risk and our partner's behaviour.
- We cannot tell by appearance whether someone is infected.
- HIV infection does not discriminate by age, education, ethnicity, profession, sexual identity or socio-economic status.
- The only way we can tell if someone is infected with HIV is by an HIV test.

Facilitator Notes

Sexually Transmitted Infections Caused by Bacteria

Gonorrhoea



Transmission:

Gonorrhoea is usually transmitted by unprotected penetrative sex, but can occasionally be transmitted by touching someone else's genitals and then touching your own without washing your hands.

Time between infection and first symptoms:

Symptoms of infection may show up at anytime between 1 and 14 days after exposure, but sometimes there are no symptoms at all. Men are much more likely than women to have symptoms.

Symptoms:

| | |
|---|--|
|  | <p>Women – symptoms can include:</p> <ul style="list-style-type: none"> • a change in vaginal discharge. This may increase, change to a yellow or greenish colour and develop a strong smell • a pain or burning sensation when passing urine • irritation and/or discharge from the anus |
|  | <p>Men - symptoms may include:</p> <ul style="list-style-type: none"> • a yellow or white discharge from the penis • irritation and/or discharge from the anus • inflammation of the testicles and prostate gland |

Chlamydia



Transmission:

Having unprotected sex with someone who's infected, Children can become infected during childbirth.

Time between infection and first symptoms:

Symptoms often show up 1 to 3 weeks after infection, but can be much longer, and can show up at any time. There can be no symptoms at all.

Symptoms:

| | |
|---|---|
|  | <p>Women - Most women will have no symptoms at all. If there are symptoms, they may include</p> <ul style="list-style-type: none"> • a slight increase in vaginal discharge - caused by the cervix becoming inflamed • a need to pass urine more often/pain on passing urine • lower abdominal pain • pain during sex • irregular menstrual bleeding • a painful swelling and irritation in the eyes (if they are infected) |
|  | <p>Men - Men are more likely to notice symptoms than women, but some men may have no symptoms either.</p> <ul style="list-style-type: none"> • a discharge from the penis which may be white/cloudy and stain underwear • pain and/or a burning sensation when passing urine • a painful swelling and irritation in the eyes (if they are infected) <p>Chlamydia in the rectum rarely causes symptoms.</p> |

NSU (non-specific urethritis)

Non-specific urethritis (NSU) is an inflammation of a man's urethra. While NSU can also be caused by other types of infection, its most common cause is infection with Chlamydia.

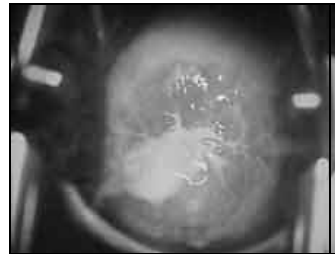

Transmission:

Having unprotected sex with someone who's infected.

Time between infection and first symptoms:

Symptoms often show up months or some cases even years after infection. There can be no symptoms at all.

Symptoms:

| | |
|--|--|
|  | <p>Women - Most women will have no symptoms at all. If there are symptoms, they may be the same as the symptoms for Chlamydia.</p> |
|  | <p>Men - Men are more likely to notice symptoms than women, but some men may have no symptoms either.</p> <ul style="list-style-type: none"> • pain or burning sensation when passing urine • a white/cloudy or clear sticky fluid from the tip of the penis. • feeling that you need to pass urine more frequently |

LGV (Lymphogranuloma venereum)

Non-specific urethritis (NSU) is an inflammation of a man's urethra. While LGV can be caused by other types of infection, its most common cause is infection with Chlamydia.


Transmission:

Having unprotected oral, vaginal, or anal intercourse with someone who's infected

Time between infection and first symptoms:

Symptoms often show up 1 to 5 weeks after infection.

Symptoms:

| | |
|---|--|
|  | <p>Symptoms are the same in women and men</p> <ul style="list-style-type: none"> • a small swollen, transparent boil or so will appear in the genitals that will disappear in 2-3 days • the lymph node at the groin will become swollen like a boil and become painful. The skin in the area of the lymph node will become swollen and infected. • feeling that you need to pass urine more frequently |
|---|--|

Chancroid

Chancroid is caused by the *haemophilus ducreyi* bacterium.



Transmission:

Having unprotected sex with someone who's infected

Time between infection and first symptoms:

Symptoms often show up months or some cases even years after infection. Symptoms are commonly visible in men but there can be no symptoms at all.

Symptoms:

| | |
|---|--|
|  | <p>Women</p> <ul style="list-style-type: none"> • May not have visible signs • Chancre at site of infection (in the vagina or cervix) • multiple inflamed, painful, and tender ulcers appear. • Possible vaginal discharge and painful urination |
|  | <p>Men</p> <ul style="list-style-type: none"> • a chancre at the site of infection • chancre may burst within 48 hours • Multiple inflamed, painful, and tender ulcers appear. • Possible enlarged lymph gland on one side of the groin |

Syphilis

Syphilis is caused by a bacterium called *Treponema Pallidum*.

Transmission:

Having unprotected oral, vaginal or anal intercourse with someone who's infected, the bacteria that causes syphilis can live in the throat, vagina, penis or anus. Children can become infected during childbirth.

Time between infection and first symptoms:

Symptoms can be difficult to recognise and can take up to three months to develop. On average, symptoms first appear within 21 days of infection.

Symptoms:

Symptoms are similar in both men and women.

- Usually, the first symptom of syphilis is a painless sore which appears on the place where the bacteria entered the body. Usually, this is on the vaginal lips, clitoris, around the urethra or on the cervix. In men, they may be on the penis or foreskin, and in both sexes they may be around the anus or mouth.

Sexually Transmitted Infections Caused by Virus

Genital Herpes

There are two types of the genital herpes virus. Either type is infectious, but:

Type I infects the mouth or nose. It is more likely to recur than if Type II infects this area.

Type II infects the genital and anal area, it is more likely to recur than if Type I infects this area.

Genital and anal infections used to always be caused by Type II, but Type I is becoming more common in these areas, because more people are having oral sex.

Transmission:

Genital herpes is passed on through skin contact with an infected person. The virus affects the areas where it enters the body. This can be by:

- • kissing (mouth to mouth)
- • penetrative sex (when the penis enters the vagina, mouth or anus)
- • oral sex (from the mouth to the genitals)

Time between infection and first symptoms:

Usually between one and 26 days between infection and first symptoms

Symptoms:



Symptoms are similar in both men and women.

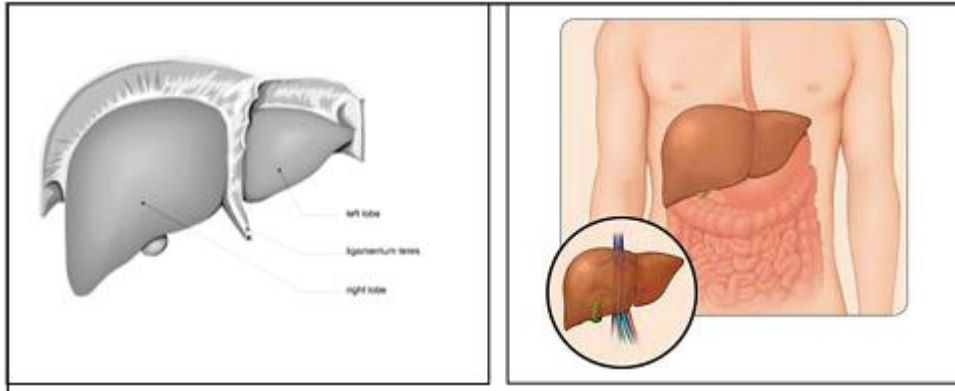
- an itching or tingling sensation in the genital or anal area
- small fluid-filled blisters. These burst and leave small sores that can be very painful. In time they dry out, scab over and heal. With the first infection they can take between 2 and 4 weeks to heal properly
- pain when passing urine, if it passes over any of the open sores
- a flu-like illness, backache, headache, swollen glands or fever.

When a person shows symptoms, the virus is highly infectious.

The virus can recur at other times throughout your life, often when you're stressed or run down. The sores are fewer, smaller, less painful and heal more quickly, and there are no flu-like symptoms, but the virus is still infectious at these times.

Hepatitis B Virus (HBV)

Hepatitis B virus (HBV) is very common in Asia. It is very infectious and causes Hepatitis B, a liver disease.



Transmission:

Having unprotected sex with someone who's infected, Sharing contaminated needles or other drug injecting equipment, Using unsterilized equipment for tattooing (needles, ink), acupuncture or body piercing. Transmission can also be caused from an infected mother to her baby, mainly during delivery.

Time between infection and first symptoms:

People may have no symptoms at all, but they can still pass the virus on to others. It can take between 2 weeks to 3 months before HBV can be detected in the body.

Symptoms:

- a short, mild, flu-like illness
- nausea and vomiting
- diarrhoea
- loss of appetite
- weight loss
- Jaundice (yellow skin and whites of eyes, darker yellow urine and pale faeces)
- Itchy skin

Genital Warts (HPV)

Genital warts are small fleshy growths which may appear anywhere on a man or woman's genital area. They are caused by a virus called human papilloma virus (HPV)

Transmission:


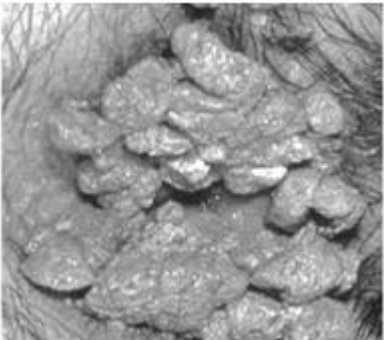
Genital warts are spread through skin-to-skin contact. If you have sex or genital contact with someone who has genital warts you may develop them too.

They can be passed on during vaginal or anal sex.

Time between infection and first symptoms:

After you have been infected with the virus it usually takes between 1 and 3 months for warts to appear on your genitals

Symptoms:

| | |
|--|--|
|  | <p>Women</p> <ul style="list-style-type: none"> • In women genital warts can develop inside the vagina and on the cervix. • If a woman has warts on her cervix, this may cause slight bleeding or, very rarely, an unusual coloured vaginal discharge. |
|  | <p>Men</p> <ul style="list-style-type: none"> • Pinkish/white small lumps or larger cauliflower-shaped lumps on the genital area. Warts can appear around the vulva, the penis, the scrotum or the anus. They may occur singly or in groups. They may itch, but are usually painless. • Often there are no other symptoms, and the warts may be difficult to see. |

Not everyone who comes into contact with the virus will develop warts. If anal sex is practiced, then the warts can develop in the anus and may not be visible.

Treatment:

HPV can be treated but not be cured. A common treatment is a brown liquid, which is painted on the warts to reduce their size and keep them from spreading. Another common treatment is freezing the warts or laser treatment. However, even if the warts go away or are removed, they can come back.

HIV (Human Immunodeficiency Virus)

HIV is a virus that can damage the body's defence system so that it cannot fight off certain infections. If someone with HIV goes on to get certain serious illnesses, this condition is called AIDS (Acquired Immune Deficiency Syndrome).

Transmission:

Having unprotected oral, vaginal, or anal intercourse with someone who's infected, Sharing contaminated needles, syringes or other drug injecting equipment, Transmission can also be caused from an infected mother to her baby, during pregnancy, at birth or through breastfeeding.

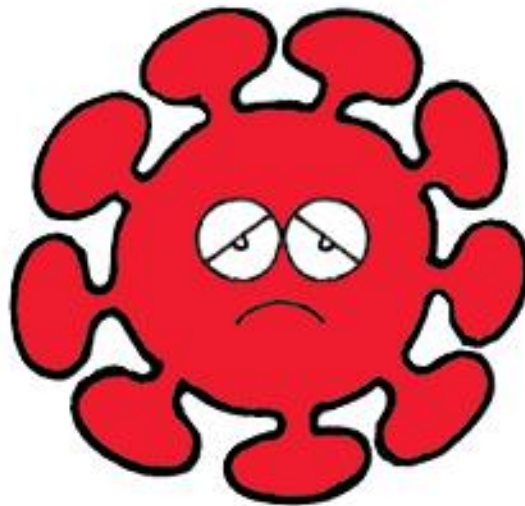
Time between infection and first symptoms:

It takes the body 2 to 12 weeks to produce immune cells to fight HIV in the body. It is only after this time that we can test someone to see if he or she has been infected. If a person cares for his/her health, he/she can live for many years before showing symptoms of opportunistic infections.

Symptoms:

There is no 'set' symptoms for HIV infection. Most people who become infected with HIV do not notice they have been infected, although some may suffer from a flu-like illness shortly after infection.

People who have HIV may feel and look completely well but their immune systems may nevertheless be damaged. Once someone is infected, they can pass HIV on, even if they feel well. The more time passes, the more likely damage is to have occurred to the immune system. Once the immune system is compromised, the person may be susceptible to 'opportunistic infections', these are infections that are around us all the time and can normally be fought off by a healthy immune system. The symptoms that we associate with HIV are not symptoms of HIV at all but are symptoms of the opportunistic infections.



Phase (3) B-3-2**Time: 30 minutes****Live meaningfully****Objective**

At the end of this lesson, participants will be able to:

1. Describe that person living with HIV/AIDS can lead a meaningful life by taking care of one's own health.
2. Identify ways for caring a person living with HIV/AIDS

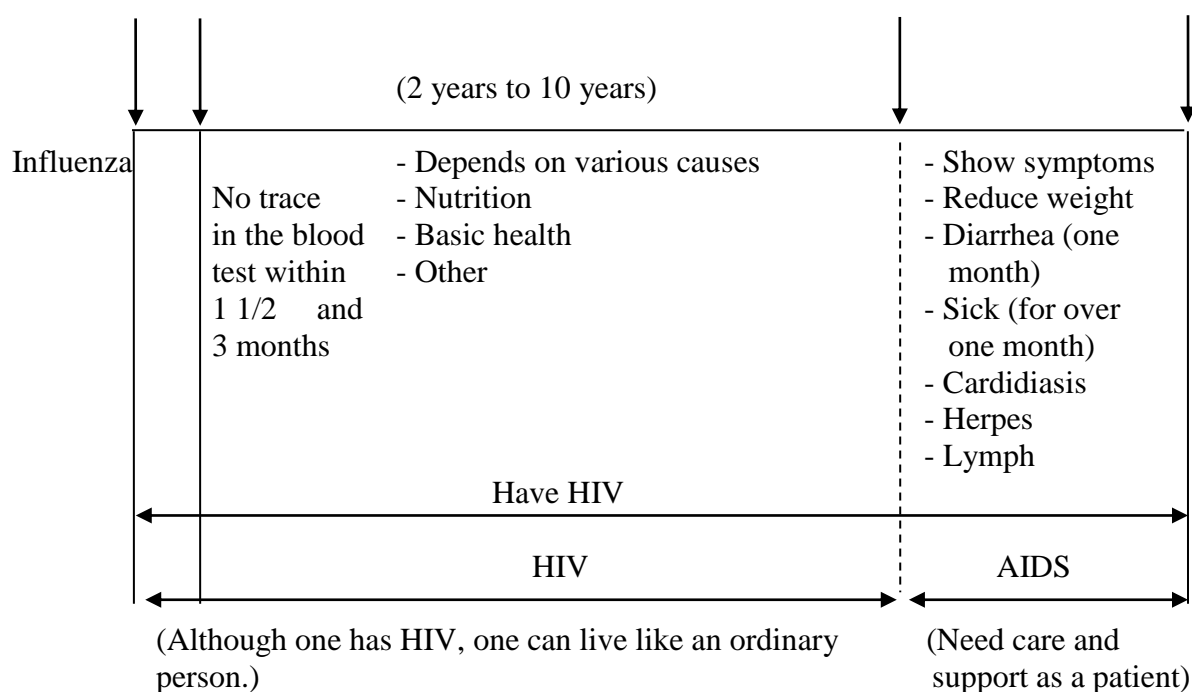
Material

Participant booklet

Activity**1. Whole class discussion****(5 minutes)**

- (a) Explain the situation with the following chart in which one who has been infected with HIV may have to go through with AIDS and die at last.

Just Infected
with HIV

**2. Group Discussion****(10 minutes)**

- (a) Read the following two stories in the participant booklet.

My name is Hla Moe. I used to get addicted to drugs. I injected drug into the vein with my friends. When I was hospitalized by my family to give up drugs, I knew I had HIV virus, I wondered why it happened only to me but not to others. And I also thought other people looked at me strangely. I wondered if they knew about me. They seemed to avoid me, I felt very angry.

I want to inject my blood into their bodies. Alright! I had better die early. I don't care whatever happens to me. I'll try to get other people infected with my HIV virus. I will use drug again. If I have companions, I will drink and have sex. What a fun! I have to waste time. I will try to live my life happily before I die.

My name is Mg Cho. I only know that I have HIV when I donate blood. The doctor said that I cannot donate blood because I have HIV virus. I felt surprised to know about it at that moment. When I thought that I was going to die, I was shocked, I wanted to do nothing, I just wanted to lie on bed, I was getting thinner as I couldn't sleep and eat for two weeks. Therefore I went and met a doctor whom I was acquainted once. He was participating in social activities in our community. I told him about myself. After talking with him, I knew about AIDS and realized what to do.

I am getting careful in my behaviors. I take care of myself not to be sick. I go to a clinic when I am ill. Taking care of my health!

Then I try to live in peace of mind. I am always occupied with a work so that I have no time to be disappointed. I try to concentrate in doing what I can do. What is important is to know that I have to do to myself for my longevity.

(b) Then, let the youths discuss the following questions.

- (1) What can happen next in these two stories? (Finish them)
 - (2) Who can live longer? Why?
 - (3) Whose behaviors should be avoided? Why?
 - (4) How should one behave to live longer meaningfully?
- (c) Let the group representatives present their discussion points in turn.
3. The facilitator will explain as follows.

You should analyze yourself whether you have risk behaviors or not. You are responsible to live your life beneficially even if you have HIV. You can take a test if you are not sure whether you have been infected with HIV or not. There are two life styles that you can choose after taking the test.

Although some people know that they have HIV, they live their lives without taking care of themselves. They still have risky behaviors. If so, they can have AIDS soon and other diseases may occur and die eventually. Some people know that they have HIV after taking test, but they take care of themselves to live healthily, they prevent themselves from having other diseases, they avoid risk behaviors, they take part in social activities, and they tell other people about themselves to prevent them from being infected with HIV. They can live longer years without getting AIDS because they use their life time meaningfully.

4. Group Discussion

(10 minutes)

(a) Let the groups discuss the following questions.

- (1) How can you help people living with AIDS?

- (2) From whom could you get help for the people living with AIDS?
- (b) Let the group representatives present their discussion points.

Discuss the following questions with the whole class.

- (1) When you played the circle games on HIV/AIDS,
Who had to go out of the circle? Why?
Who remained in the circle? Why?
- (2) What are the behaviors that may have risks for you to be infected with HIV/AIDS?
What can happen next because of risk behaviors?
- (c) The facilitator can explain as follows.

HIV can destroy the white blood cells and thus our body immune system becomes weak. From time to time, HIV may become stronger, reducing the body's ability to fight opportunistic infections, so that the person may show symptoms from these infections such as diarrhea, herpes and thrush. The immune system has lost its ability to fight off infections and the person is said to have AIDS. People living with AIDS are avoided by others. In stead of this, people should have empathy and care them with love and compassion.

5. Assessment Questions

Personalization questions

- (1) Is your behavior at risk of HIV infection? Why?
- (2) Supposing, you are infected with HIV, how would you behave so that you don't transmit the virus to others? Why? How would you live for the longevity of your life?
- (3) Supposing you are living with AIDS, how would you like others treat to you?
- (4) Do you have empathy on the family whose member has HIV/AIDS? How can you help them?
- (5) Are there any places in your region that can give help to people living with HIV/AIDS? What kind of help can they provide?

Summary and follow-up activity

Supposing you have been infected with HIV, you can live long without giving up the difficulties. You can still live your life meaningfully. When you meet people living with HIV, you can help them with empathy.

Phase (3) B-3-3**Time: (30) minutes****Is there ever enough?**

(Critical Thinking)

Objective

At the end of this lesson, participants will be able to assess the cost for the treatment of HIV/AIDS related symptoms.

Materials

Pieces of paper written the values of money

Activity**1. Demonstration (10 minutes)**

- (a) Ask for three youths (2 boys and 1 girl) as volunteers to participate in a role play.
- (b) The facilitator should name the youths as Pho Htaung, Phyu Phyu and Ko Phyo. The facilitator should tell them as follows.
 - ◆ Pho Htaung works in a job(earning money by having xes) saying he will do whatever it is if he can get money. He earns 100,000 kyats a month.
 - ◆ Phyu Phyu is a shop assistant. Let's say she earns 25,000 kyats a month.
 - ◆ Ko Phyo is a waiter in a tea shop and earns 10,000 kyats a month.
- (c) All of them get sick now. Phyu Phyu and Ko Phyo get sick naturally but Pho Htaung is sick because of AIDS.

2. Whole class discussion

- (a) What is the difference between simple illnesses and the illnesses related with AIDS?
For example:

| Simple illnesses | AIDS related symptoms |
|--|--|
| <ul style="list-style-type: none"> - sick for a short time - can work when recovered - ill for about 3 days | <ul style="list-style-type: none"> - chronic - infected with various diseases - take long time to treat them - take long time to fully recover |

- (b) Calculate the cost for simple illnesses treatment and for HIV/AIDS related symptoms.

| Estimated costs for the simple illnesses treatment | |
|--|-------------------------------------|
| Doctor's visitation fee 1 500 kyats | Doctor's visitation fee 5,000 kyats |
| Food (Rice porridge) 500 " | Medicine 10,000 |
| ----- | Diagnose Test 20,000 " |
| Treatment per day 2000 Kyats | Food 2,000 " |
| Treatment 3 days 6000 Kyats | ----- |
| Treatment - One time | Treatment per time 37,000 Kyats |
| (No need to give per month) | Treatment - 5 times per month |

- (c) The facilitator should collect the money for the costs of treatment from each person. (Ask Pho Htaung 5 times of 37,000 Kyats. Pho Htaung will be in debt. Ask Phyu Phyu and Ko Phyo 2,000 Kyats three times.)
 (The facilitator should help those who cannot calculate the cost.)
- (d) The facilitator can explain as follows.

Generally, people get ill one or two times per year. Therefore, they don't need to spend monthly medical care fees. However, for a person living with AIDS has to spend monthly medical care fees for his chronic diseases. Therefore, his earning will never be enough.

3. Assessment Questions

(5) minutes

(a) Content Questions

- (1) Do you think this situation could take place in real life? Why?
- (2) Why did Pho Htaung choose this job? What happened next?
- (3) Why was Pho Htaung's cost for treatment larger in amount although they got sick at the same time? Why did Pho Htaung has to visit the clinic often?

(b) Personalization Questions

- (1) If you were Pho Htaung, would you say and do as Pho Htaung did? Why?
- (2) When you and one of your family members get sick, what can happen to your family's daily expenditures and activities? Why?
- (3) If one of your family members has HIV/AIDS, what can happen to your family's daily expenditure and activities? Why?

(c) Linkage Questions

- (1) How would you take care and protect yourself if you are not infected with HIV till now?



Reproductive Health

Phase (3) B-4-1

Time: (40) minutes

Be mindful! Think before you do

(Problem solving, Decision Making)

Objective

At the end of the discussion, the participants will be able to analyze the consequences depending on the intimate behavior between opposite sex and identify ways of controlling emotional changes towards opposite sex.

Materials

Participant booklet

Activities

1. Playing

(a) The game "Ma Aye Mosquito nets"

Ask the youths to stand hand in hand in a circle shape. Boys and Girls stand one after one.

Ask a youth to stand in the middle of the circle begin to ask a question.

Question: "Circle.... Circle... How big is it?"

Answer : "Big like that!"

After answering, the youths change the circle shape into 'mosquito net' by stretching their a little in order to make the circle as wide as possible.

Then, the circle becomes a bigger one. After that, continue to ask a question.

Question: "Circle.... Circle... How small is it?"

Answer : "Small like that!"

After answering, the youths make the circle as small as possible. When making the circle small, the youths raise their hands above their heads. Then, continue to ask questions.

Question: "How much is Ma Aye's mosquito net paid?"

Answer : "Pay 560 kyats!"

Question: "Do you sell it to me?"

Answer : "Mother will scold."

Question: "If mother sell it to me."

All the youths: Wying-Gyi-Pap-Pap-Du-Wai-Wai
(Moving around in a circle shape)

After saying "Wying-Gyi-Pap-Pap-Du-Wai-Wai" the youths have to circle round.
(Play 4 or 5 times, depending on the available time)

2. Whole class discussion

(a) Discuss the following questions with the whole class.

- How do you feel while playing the game?
- How closer are the youths to each other, when trying to get the smallest circle how smaller is the circle? Why?

- What is the difference between the feeling of playing the game now and in the childhood? How do you feel? Why?(Ask the youth who felt shy)

(b) The facilitator should add further explanation.

When boys and girls become adolescences, if they experience body touch in a particular situation, they usual have a feeling of satisfaction in such experience.

3. Group discussion

- (a) Distribute each situation to the groups, ask them discuss the following question and present it. "What'll continue to happen to the main characters in the situations? What should they do not to have bad consequences?"

Event 1

Maung Maung is about 15 years old. He is helping his family by working. His parents can't show their care and kindness to him because they go out for business the whole day. The employer who is a woman 25 years more than him rely on him, showing favor. For his honest and hard-working attitude, she is interested in him and loves him. At first, he thought she shows her favor to him due to being hard-working. When she wants him to take a close care of her, asking him to massage her or apply medicine ointment, Maung Maung feels satisfied with the situation.

- What are the situations that lead to make Maung Maunf and his employer closer?
- What can happen next to Maung Maunf and his employer?

Ma Htay is 12 years old and helps her mother by sending the clothes made by her mother to the tailor shop. Whenever she sends the clothes to the shop, the man from the ship gives food and speaks to her with holding her shoulder. Though she notices his strange behavior, she feels satisfied with his treatment.

- What are the situations that lead to make Ma Htay and that man closer?
- What can happen next to Ma Htay and that man?

Maung Wunna is a handsome youth. His employer, a man, is friendlier with the handsome youths. He treats Maung Wunna with special care, buys clothes for him and wears him. He always wants Maung Wunna only to be near him. He wants to see him all the time. He notices that the man's behavior becomes strange and feels afraid. Now the man comes to his bed and hugs him, saying that he feels cold. Maung Wunna is very afraid.

- What are the situations that lead to make Maung Wunna and his employer closer?
- What can happen next to Maung Wunna and his employer?

- (b) Let the group read the event they got and present their discussion points. The facilitator will record the discussion points and let the other groups add their ideas.

| Event | Situation | What can happen next |
|-------|-----------|----------------------|
| | | |

4. The facilitator can explain using the following facts.

When young people deal closely in a strange way with opposite sex or homosexual, he/she becomes satisfied with that situation, feel hesitant to refuse and afraid. (For example, asking Maung Maung to massage her or apply medicine ointment, holding her shoulder, hugging man to man...) He/she finds it difficult to cope with these emotions. The persons who have evil intention and know the points well will create a situation in which the persons will try by all means to be close to him/her pretending to be friendly with him/her. Therefore, young people need to understand such situations and cope with their emotions when encountering them. They need to avoid the situations that will bring about such emotions.

5. Group Discussion

(15 minutes)

(a) Based on the discussion points, the facilitator can ask the following questions for group discussion.

- (1) If you encounter this situation, how would you protect yourself so that you can avoid the bad consequences that will follow?
- (2) What are the strengths and weaknesses of each alternative?
- (3) Decide the best technique.

(b) Draw the table below on the board. Record the discussion points in the table.

| Situation | Ways for protection | Strengths | Weaknesses |
|-----------|---------------------|-----------|------------|
| | | | |

7. Explain using the following points.

You are likely to encounter elder co-workers' enticement in your work place when you deal closely with them. You should cope with your emotion to be able to resist their enticement. You have to consider ways to be able to cope with emotion so as not to occur unnecessary problems. You have to live up to identify advantages and disadvantages of each way. Explain that you need to cope with your emotion in accordance with the Buddha's teaching and traditional customs, and cooperate with and behave toward your co-workers as brothers and sister.

7. Assessment Questions

Content Questions

- (1) What did you learn after discussing the events?
- (2) Should young people analyze the situations of the relations with the persons who work together in a same business? Why?

Personalization Questions

- (1) How do you consider the person who often buys you what you like? Why? What would you do next?
- (2) What would you do to prevent the undesirable situation when you and the same/opposite sex were alone together?
- (3) How would you cope with your emotion when you feel excited to meet or touch opposite sex?

Linkage Questions

- (1) How should you behave to be able to show that both of you are good friends when you deal with friends of opposite sex?

Phase (3) B-4-2**Time: (60) minutes****Reproductive System**
(Self-awareness)**Objective**

At the end of the discussion, the participants will be able to:

1. Identify male and female parts of reproductive system and the importance of their functions.
2. Value them and protect them carefully

Materials

Participant booklet

Activities**1. Introduction**

- (a) Introduce the lesson by stating the following:

In the last lesson we discussed how to cope emotions to the opposite sex and appropriate behaviours to protect ourselves. In this lesson we will learn about the parts of the male and female reproductive system so that you will have correct information about your bodies and growth. This will help you feel good about the changes in your bodies; help you feel more comfortable asking questions of your parent and doctors; and, will also help you to understand and appreciate yourselves, your families and one another.

2. Observation**(10 minutes)**

- (a) From groups of the same sex. One facilitator will take charge of boys' group and the other girls' group.
- (b) Ask the groups the following questions.
What are parts of your body? (Ask till reproductive organs are included.)
- (c) You need to know parts of your body say about them so that you can discuss about them to your parents or doctors comfortably. Let the groups observe the parts of the reproductive system.
- (d) Let them read part of the body and fill in the blank beside the part whether it is male or female part of the body.

Parts of the Female and Male Reproductive Systems**Instructions:**

Mark an "M" next to any part of a male's (a boy's or a man's) body, and "F" next to any part of a female's (a girl's or woman's) body, or "E" if the part could belong to either male or a female.

- | | |
|-----------------|--------------------------|
| 1. Penis----- | 10. Urethra----- |
| 2. Scrotum----- | 11. Seminal Vesicle----- |
| 3. Cervix----- | 12. Epididymis----- |
| 4. Bladder----- | 13. Ovary----- |
| 5. Vagina----- | 14. Prostate Gland----- |

6. Testicle-----

7. Fallopian Tube-----

8. Cowper's Gland----

9. Labia-----

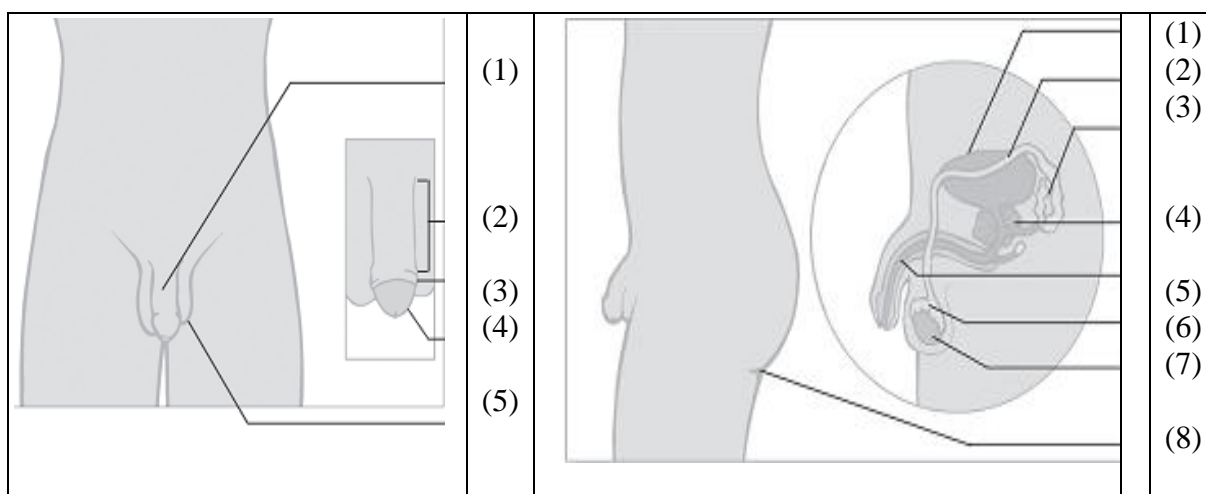
15. Uterus-----

16. Anus-----

17. Vas Deferens-----

18. Clitoris-----

(e) Tell the students that they must now try to identify the different parts of the male reproductive system. Then, ask them to look at the outer parts of male reproductive system.



(f) Then, let them read the inner parts of male reproductive system and do the exercise by labeling them.

(Remind them to read carefully so that they can express different parts.)

Male and Female parts of Reproductive System

When you come to the age of adolescent, one of the main changes is the growth of sex organs. The outer parts of the reproductive system are called genitals and the inner parts are called internal reproductive organs.

External organs of male reproductive organs and their functions

| Genitals | Function |
|------------|--|
| 1.Penis | It is an outside male sex organ and used to get rid of urine. |
| 2.Shaft | It is the body stem of penis and round and long. |
| 3.Foreskin | A fold of skin that covers the head round part of penis. |
| 4.Glans | The sensitive tip or the "head" of the penis |
| 5.Scrotum | The bag that holds the testicles between the penis and anus. Keeps the temperature of the testicles at 37 degrees. |
| 6.Anus | A small opening behind the vulva, through which faeces passes out |

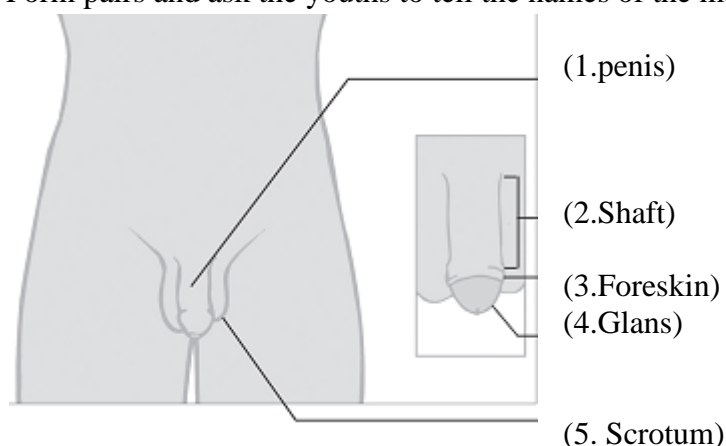
The penis and testicles (testes) are the sexual organs outside a boy's body. A boy's penis hangs down between his legs at the front of his body. The main part of the penis is called the shaft. The end of the penis is called the glans. The foreskin is a skin that covers the glans. Usually it can be

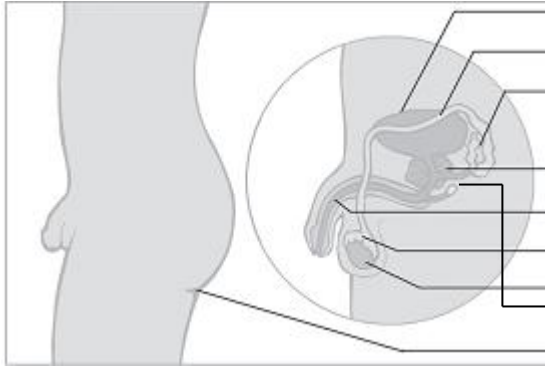
pulled back quite easily. If it is tight it can be stretched by gently pulling it over the glans. All boys are born with a foreskin, but some have it removed whilst they are a baby for cultural or religious reasons, or because some believe its removal may reduce disease. The scrotum is a loose wrinkly pouch of skin that hangs down behind a boy's penis. It contains the testicles (testes) and controls the temperature of the testes. As a boy goes through puberty his testicles move lower down his scrotum. One of the testicles usually lower than the other.

Internal organs of male reproductive organs and their functions

| Internal organs | Function |
|---------------------|--|
| 1. Bladder | A pouch that collects urine excreted by the kidneys before disposal by urination. The bladder is not part of the reproductive system. |
| 2. Vas deferens | The tubes that connect the testicles to the Seminal vesicles and to the urethra. |
| 3. Seminal vesicles | Tube-like glands found behind the bladder. They make most of the content of semen. |
| 4. Prostate | At the base of the bladder it adds part of the fluid to semen, and stops males from urinating while sexually aroused. |
| 5. Urethra | A tube that connects the bladder to the outside of the body, though which urine passes out of the body and though which semen is ejaculated. |
| 6. Epididymis | A tightly-coiled tube that hold the testicles in place and which store newly formed sperm for 2 or 3 months until they mature. |
| 7. Testicle | Oval-shaped glands that produce sperm to fertilize eggs in females and male hormones. |
| 9. Cowper's glands | Glands which secrete fluids that clean the urethra of acids that remains from urination. |

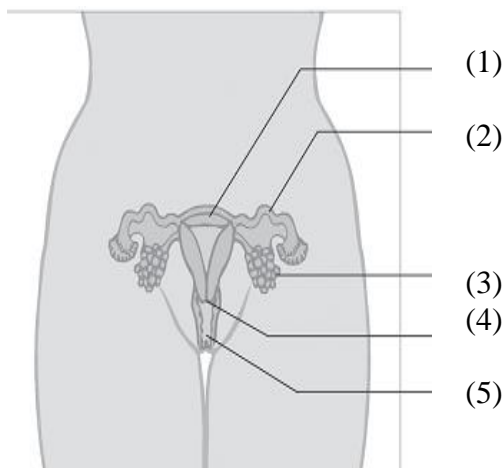
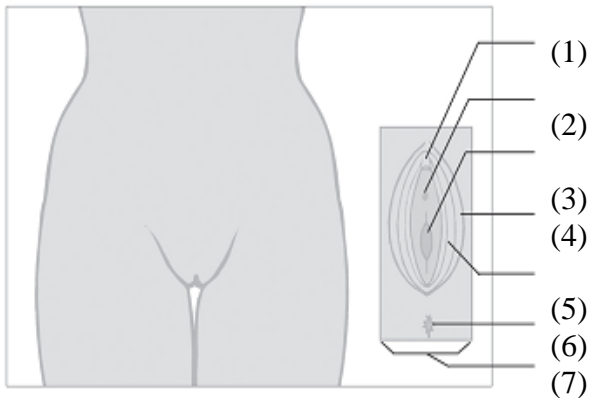
(g) Form pairs and ask the youths to tell the names of the male reproductive organs in pairs.





- (1. Bladder)
- (2. Vas deferens)
- (3. Seminal vesicles)
- (4. Prostate)
- (5. Urethra)
- (6. Epididymis)
- (7. Testicle)
- (9. Cowper's glands)
- (8. Anus)

(h) Tell them that now they will look at the external and internal organs of female reproductive system. Let the study the pictures in their book.



(i) Then, let them read the external and internal organs of the female reproductive system and their functions.

6. External organs of female reproductive organs and their functions

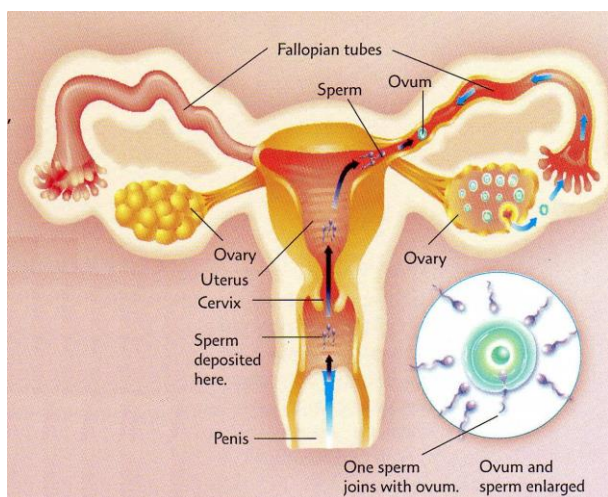
| External organs | Function |
|---------------------|--|
| 1. Clitoris | An organ filled with nerve endings |
| 2. Urethral opening | The opening of a tube that connects the bladder to the outside of the body, through which urine passes out of the body |
| 3. Vaginal opening. | The pathway in and out of the internal female reproductive system. |
| 4. Labia majora. | The outer padded flaps of skin that protect to the internal genital organs. |
| 5. Labia minora. | The softer flaps of skin inside the labia majora that function as a covering for the actual vagina |
| 6. Anus | A small opening behind the vagina through which faeces passes out |

The opening to the vagina is one of three holes that a girl has between her legs. At the front is the urethral opening which a girl urinates through. The anus is the opening at the back where she defecates from. From the vaginal opening in the middle there is a passageway or tube called the vagina which leads to a girl's internal sexual organs. Another important sex organ is the clitoris. This is about the size of a pea and is at the front of a girl's outside sex organs. The folds of skin (labia), protecting the female sex organs, the clitoris and the vaginal opening, are together known as the vulva.

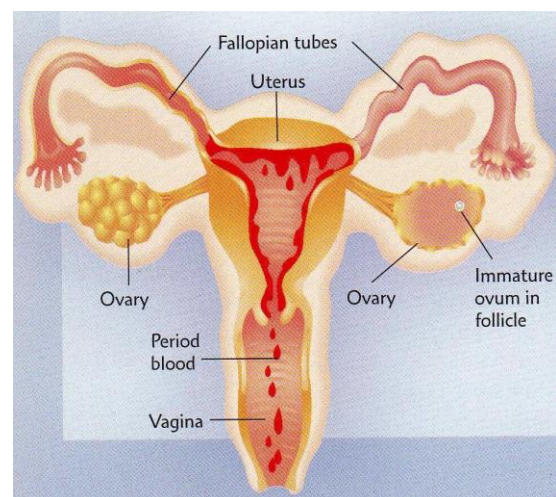
Two of the main sex organs in a girl's body are the vagina and ovaries

Internal organs of female reproductive organs and their functions

| Internal organs | Function |
|-------------------|--|
| 1. Uterus (womb) | Where a fertilized egg develops into a foetus which grows into a baby. |
| 2. Fallopian tube | Two tubes through which the egg travels from the ovaries to the uterus. |
| 3. Ovary | There are two ovaries that produce female hormones and contain the eggs. |
| 4. Cervix | The opening of the uterus into the vagina. |
| 5 Vagina | The canal that leads from the cervix to the outside of the body (the vulva) and through which menstrual fluid passes; When a baby is born, it also passes through the vagina |



Ovulation and Fertilization



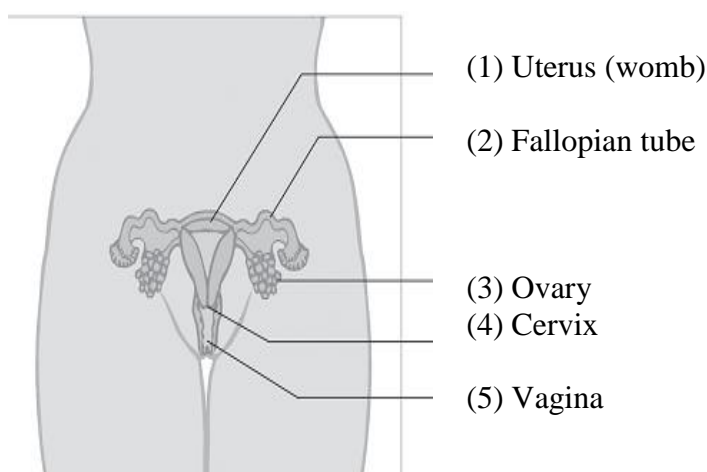
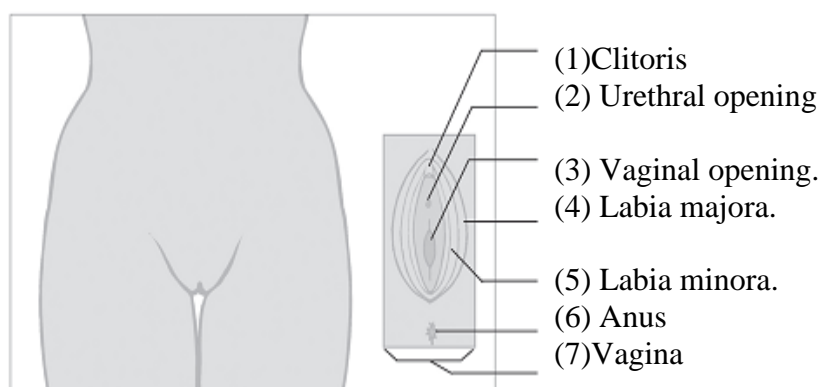
Menstruation

Ovulation is when a ripe ovum (“egg” cell) comes out of the ovary. If it meets sperm and they join together, then there is fertilization. If the ovum does not meet sperm, it will disintegrate. The lining of the uterus and some blood will come out of the vagina. This is called menstruation.

3. Whole Class Discussion

(10 minutes)

- (a) Tell the class that they are now going to identify the names of the female reproductive organs and ask them to find the names corresponding to the numbers in pairs.



- (b) Explain how the reproductive system works as follows

When a man and a woman have sexual intercourse, the sperms that come out together with semen swim up into the uterus and from there to the fallopian tubes to find the ovum. If a sperm can get into the ovum it is said that fertilization is successful. Although there are millions of sperm in the semen, only one sperm can enter the ovum. It takes one week for the fertilized ovum to come down to the uterus. Once a fertilized egg has implanted itself in a woman's uterus, it can be said implantation is successful and the woman is pregnant.

- (c) Let the youths change the female and male reproductive organs if they want to. (The facilitator can help them using the answers given below.)

| | |
|--------------------|------------------------------|
| 1. Penis-----M---- | 10. Urethra—M/F----- |
| 2. Scrotum---M--- | 11. Seminal Vesicle---M----- |

| | |
|-----------------------|-----------------------------|
| 3. Cervix----F----- | 12. Epididymis---M----- |
| 4. Bladder---M/F--- | 13. Ovary-----F---- |
| 5. Vagina----F----- | 14. Prostate Gland---M----- |
| 6. Testicle----M----- | 15. Uterus----F----- |
| 7. Fallopian Tube--F- | 16. Anus----M/F----- |
| 8. Cowper's Gland--M | 17. Vas Deferens---M--- |
| 9. Labia----F----- | 18. Clitoris----M/F----- |

4. Playing a game

- (a) The facilitator will prepare 24 pieces of paper for each group. Copy one word from table 1 on one piece of paper. There will be 12 pieces of different words from table 1. Then copy one statement from table 2 on one piece of paper. There will be 12 pieces of paper with different statements. From table 2. If there are 6 groups, prepare 6 sets.

| Table 1 | Table 2 |
|-------------------|--|
| (a)circumcision | 1. The outside part of the male's or female's reproductive system |
| (b)Conception | 2.The process of fertilization and implantation |
| (c) Ejaculation | 3.A cell from a woman's body that can start a pregnancy (sometimes called an "egg" cell) |
| (d) Fertilization | 4. A cell from a man's body that can start a pregnancy. |
| (e)Genitals | 5. An operation to remove the foreskin from the penis |
| (f)Implantation | 6.The meeting of sperm and ovum |
| (g)Menstruation | 7. A ripe ovum coming out of the ovary. |
| (h)Ovulation | 8. Semen coming out of the penis |
| (i)Ovum | 9.The nesting of a fertilized egg in the wall of the uterus |
| (j)Puberty | 10. The body beginning to change from a child's into |

| | | |
|-----------|--|---|
| | | an adults. |
| (k) Semen | | 11. The lining of the uterus coming out through the vagina (sometimes called “having a period”) |
| (l) Sperm | | 12. The liquid that carries sperm. |

- (b) Let each group match the words and their meanings.
- (c) Let each group read out two words and meanings. (For example, group 1 a and b, group 2 c and d, etc.)
- (d) The facilitator can help if the youths do not get the answer.

Answers to the words and their meaning

| | |
|-------------------|--|
| (a) circumcision | 1. An operation to remove the foreskin from the penis |
| (b) Conception | 2. The process of fertilization and implantation |
| (c) Ejaculation | 3. Semen coming out of the penis. |
| (d) Fertilization | 4. The meeting of sperm and ovum |
| (e) Genitals | 5. The outside part of the male’s or female’s reproductive system |
| (f) Implantation | 6. The nesting of a fertilized egg in the wall of the uterus |
| (g) Menstruation | 7. The lining of the uterus coming out through the vagina (sometimes called “having a period”) |
| (h) Ovulation | 8. A ripe ovum coming out of the ovary. |
| (i) Ovum | 9. A cell from a woman’s body that can start a pregnancy (sometimes called an “egg” cell) |
| (j) Puberty | 10. The body beginning to change from a child’s into an adults. |
| (k) Semen | 11. The liquid that carries sperm. |
| (l) Sperm | 12. A cell from a man’s body that can start a pregnancy. |

- (e) The facilitator will explain the reproductive system that is included in their booklet.

Talking about the Reproductive System

A) The Menstrual Cycle

- ◆ It is incredible how the female body knows how to prepare for pregnancy!
- ◆ An ovum starts to develop. While the ovum is developing, the lining of the uterus is getting thick and soft.
- ◆ The ovary releases the ovum. It travels through the fallopian tube.
- ◆ If the egg doesn't meet a sperm, it dissolves. About two weeks later, since the lining of the uterus is not needed for a pregnancy, it comes out through the vagina.
- ◆ Another ovum starts to develop in one of the ovaries and the process begins again.

B) The Life of a Sperm Cell

- ◆ Without me, an egg cell couldn't begin the amazing process of reproduction.
- ◆ I am produced in the testicles. I develop for two or three months in the epididymis.
- ◆ When the penis becomes erect, I leave the epididymis and travel up into the body through the vas deferens.
- ◆ I go from the vas deferens to the urethra. As I pass the prostate gland, the seminal vesicles, and the Cowper's glands, fluids are added so that I can live longer and swim more easily.
- ◆ The urethra carries me (along with about 200 million other sperm) out of the penis in a process called ejaculation. I go through the cervix and the uterus and into the fallopian tubes, in search of an egg cell.
- ◆ If I can find the ovum before the other sperm do, I will be the winner: part of a fertilized egg!

(f) Tell the youths as follows.

Human beings are naturally responsible for reproduction but it means to the adults and not the youths under age. As the adolescents or youths are still developing their reproductive organs and thus they need care and protection so that they can develop well. Youths are responsible for this duty. You also need to clean them daily. If not, they can produce bad smell due to bacteria and you can get sores, itching, irregular menstruation, hot urinating, bleeding and aching. If you get these symptoms, you should discuss this with a health worker.

Phase (3) B-4-3**Time: (60) minutes****The best at this age is....**

(Critical thinking)

Objective

At the end of the discussion, the participants will be able to explain factual information about preventing pregnancy and sexually transmitted infections, including HIV.

Materials

Participant booklet

Activities**1. Introduction:****2 minutes**

- (a) In the previous lesson, you have discussed about pregnancy. What do you think could happen if you get pregnant while the reproductive system is not fully developed?
- (b) Let the youths brainstorm their ideas and ask 3 or 4 youths to express their ideas. Then, the facilitator can explain as follows.

At your age, your reproductive system is not fully developed yet so there can be bad consequences such as abortion, premature birth, unhealthy mother and baby, etc. You can even lose your death. For most adolescents, pregnancy may be unplanned and undesired so they usually try to get rid of the pregnancy using traditional methods in the community and lose life or affect their health. This is because they can't access the correct information or having wrong information and beliefs. However, some families make family plans and use correct methods for pregnancy. Therefore, youths should have factual information about pregnancy so that you can help people in the community besides yourself.

2. Whole Class Discussion

- (a) Ask the following question and record the answers on the board.
What are contraception methods? You can also include the traditional methods used in the community.
- (b) If necessary, use the following facts to add to their discussion points.

- Abstinence
- Condoms (male)
- Female condom
- Spermicidal foam
- Oral contraceptives (The Pill)
- Diaphragm
- Intrauterine device
- Withdrawal
- Rhythm method
- Contraceptive implant (Norplant)
- Injectable contraception (Depo-Provera)
- Tubal ligation (female sterilization)
- Vasectomy (male sterilization)

- (c) Ask the students which methods they think can be purchased from a local shop/pharmacy “over the counter,” or without a doctor’s prescription.

(Note: Put a tick (✓) beside the methods identified. Over-the-counter methods include: male and female condoms, spermicidal foam, Abstinence, rhythm method and withdrawal might also be classified as over-the-counter, because they do not require a doctor's prescription.)

- (d) Explain that the remaining methods (without a tick) are methods that should require a physical examination and a prescription from a doctor or a health care worker (nurse, midwife, etc.).

3. Group Discussion

- (a) Tell them that they will continue to discuss the contraception methods and choose the best method of all.
- (b) Form girls and boys separately in groups. Then ask them to form small groups of 3 girls /boys.
- (c) Then, assign 2-3 contraceptive methods to each group. Include one contraceptive method that is listed under Temporary Contraception, including Temporary Contraception Needing Medical Supervision, and Permanent Contraception.

Contraceptive Methods

1. Temporary Contraception

(a) Abstinence (no sexual intercourse of any kind)

How abstinence works: Prevents sexual contact and exchange of body fluids between partners.

How abstinence is used: Mutual agreement or an independent decision by either partner.

How effective is abstinence: Almost 100 percent. Semen and vaginal fluids may still be exchanged manually.

Myths about abstinence: Myth that testes in males will become damaged or will not work if sperm is not used; myth that a female who abstains is sexually repressed; myth that abstinent teens will be unpopular; myth that “nobody” practices abstinence when, in fact, most school-aged young people may be abstinent.

Additional information: Abstinence is readily available to both males and females for no cost, no medical side effects, no risks, no worry and no conflict with parents.

A person who has had sexual intercourse in the past may decide to abstain at any time, in any relationship.

Abstinence protects health and reproductive capacity by reducing or eliminating the risk of HIV and other sexually transmitted infections and pelvic inflammatory disease.

Abstinence almost completely eliminates the chance of unplanned pregnancy.

(b) Withdrawal Method

How withdrawal works: Prevents the ejaculation of semen into the partner's body (vagina, anus, mouth).

How withdrawal is used: Requires the penis to be removed before ejaculation

How effective is withdrawal: Withdrawal can be about 80% effective if actually used.

Additional information: Even though the penis is withdrawn before ejaculation, pre-seminal fluid may contain sperm cells that can cause pregnancy and also may contain

organisms that cause sexually transmitted infections, including HIV.

Using this method requires control and motivation. Some people find this method of pregnancy prevention to be both physically and emotionally unsatisfying because behaviours and emotions must be stopped “in the heat of the moment.”

(c) Rhythm Method

How the rhythm method works: Prevents the release of semen into the vagina during ovulation, when an egg can be fertilized.

How the rhythm method is used: The time of ovulation is determined by changes in the woman’s body temperature or cervical mucus; then intercourse is avoided for a specific number of days before and after ovulation.

How effective is the rhythm method: 90 percent if monitored and followed correctly.

Additional information: This method does not prevent the spread of sexually transmitted infections or HIV. It is also difficult for some couples to use as it requires training from a qualified professional. It is often unreliable, particularly in women younger than 20, whose cycles may be irregular. Couples must refrain from intercourse for many days during each cycle.

(d) Male Condom

How the male condom works: Prevents semen from entering the partner’s body.

How the male condom is used: Before sexual intercourse begins, a condom is placed over the erect penis; space must be left at the end to collect sperm. After ejaculation, the condom should be held in place when removing the penis so semen does not spill into the partner’s body. Condoms must be thrown away after one use; they should never be re-used.

How effective is the male condom: The condom is about 90% effective if used correctly.

Additional information: Only water-based lubricant should be used with a condom. Other lubricants will weaken the condom and may cause the condom to break. Condoms deteriorate so check the expiration date on the side of the box or foil wrapper before use. The latex condom is a relatively inexpensive method and prevents the spread of most sexually transmitted infections, including HIV.

(e) Female Condom

How the female condom works: Prevents semen from entering the woman’s body and protects male partner from contact with vaginal fluids.

How the female condom is used: Before sexual intercourse begins, the female condom is inserted into the vagina. The female condom is like a polyurethane bag with two flexible rings at either end. One of the rings is used to insert the condom into the vagina and hold it in place. The other ring stays outside the vagina.

The female condom must be removed immediately after intercourse.

How effective is the female condom: The female condom is about 90% effective if used properly.

Additional information: The female condom helps to prevent the spread of most sexually

transmitted infections, including HIV. It provides women with a way to protect themselves if they are with a partner who refuses to use a male condom.

The female condom may not be widely available.

(f) Contraceptive Foam

How contraceptive foam works: Temporarily blocks the opening of the uterus and coats much of the vagina with a spermicidal substance (a chemical that kills sperm)

How contraceptive foam is used: One or two applications of foam are placed into the vagina before intercourse.

How effective is contraceptive foam: Foam is 99 percent effective if used together with condoms. It is much less effective on its own.

Additional information: The quality of foams vary. Foam must be available and used each time intercourse occurs. Foam may cause minor irritation in some women and men.

2. Temporary Contraception Needing Medical Supervision

(a) Diaphragm

How the diaphragm works: Prevents semen from passing into the uterus

How the diaphragm is used: The diaphragm should be inserted within two hours before intercourse. A spermicidal cream is spread in the cap and around the rim. It is inserted in the vagina completely covering the cervix. The diaphragm should be left in for six to eight hours after intercourse. After each use, the diaphragm should be washed with soap and water, dried and stored in its case.

How effective is the diaphragm: The diaphragm is only about 82 percent effective in preventing pregnancy.

Additional information: While the spermicide may provide some protection against sexually transmitted infections, including HIV, the diaphragm should be used with a condom. The diaphragm must be kept readily available and used each time intercourse occurs. If the diaphragm is inserted incorrectly, it may not protect against contraception.

(b) Oral Contraceptives (The Pill)

How the oral contraceptive works: Prevents the release of an egg from the ovary (ovulation) and implantation of the fertilized egg in the uterus (if ovulation should occur).

How the oral contraceptive is used: The contraceptive pill should be taken daily. Each pill contains a small amount of a female hormone, progestin. If a woman skips taking a pill, she should take it as soon as possible, and take her next pill at the regular time.

How effective is the oral contraceptive: Oral contraception is 95-98 percent effective

Additional information: The pill does nothing to protect a woman from sexually transmitted infections, including HIV. It should be used with a condom.

Possible side effects of taking the pill include reduced menstrual flow, swollen or tender breasts, headaches, slight weight gain and nausea.

(c) Contraceptive Implant (Norplant)

How the contraceptive implant works: Prevents the release of an egg from the ovary (ovulation) and thickens cervical mucus, blocking sperm that are released into the vagina during intercourse.

How the contraceptive implant is used: Using a minor surgical procedure, six flexible capsules are implanted just under the skin on the underside of a woman's upper arm. Each capsule contains a small amount of a female hormone, progestin, which is also used in oral contraceptives. The hormone is absorbed into the woman's bloodstream very slowly for as long as the capsules remain in place (up to five years).

How effective is the contraceptive implant: The implant is 91 to 99 percent effective in preventing pregnancy. Effectiveness rate is affected by body weight.

Additional information: The method is effective for up to five years and requires no additional action by the user once it is in place. Once the implant is removed, fertility is restored by the next menstrual cycle. This method may be used to prevent pregnancy by women who find it difficult to use other contraceptive methods, but it should always be used in conjunction with latex condoms to prevent sexually transmitted infections and HIV>.

(d) Contraceptive Injection (Depo-Provera)

How the contraceptive injection works: An injection of the hormone progestin stops eggs from being released by the ovaries for three months and thickens cervical mucus, blocking sperm from entering the uterus.

How the contraceptive injection is used: The hormone is injected into the muscle of the arm or buttocks. The first injection is usually given during the first five days of a woman's menstrual cycle to ensure she is not pregnant. Injections must be repeated every 12 weeks.

How effective is the contraceptive injection: This method is 95 to 98 percent effective within 24 hours of the first injection, which is effective for 12 weeks.

Additional information: The injection provides very effective pregnancy prevention for 12 weeks with minimal side effects. Any side effects, however, will continue for some time after effectiveness has ended, lingering until the last traces of the chemicals have disappeared. This method does not provide an protection against sexually transmitted infections or HIV and therefore should always be used with a latex condom.

(e) Intrauterine Device (IUD)

How the IUD works: The IUD prevents the fertilized egg from implanting in the uterus.

How the IUD is used: A trained medical person inserts the IUD into the uterus with an attached string left hanging into the vagina. The string should be checked by the woman after each menstrual period to make sure the IUD is still in place. IUDs can remain in the uterus for about 5 years.

How effective is the IUD: The IUD is 98-99 percent effective in preventing pregnancy.

Additional information: The IUD is one of the easiest contraceptive methods to use. It is not recommended for women who have never had a child.

Possible side effects include cramps, heavier menstrual flow, irregular bleeding and infection.

3. Permanent Contraception

(a) Male Sterilization (Vasectomy)

Before leaving the body, sperm produced in the testes move through a series of small tubules, including the vas deferens. A vasectomy is a surgical procedure in which the vas deferens are cut.

How sterilization works: Vasectomy is a procedure that blocks the passage of sperm through the vas deferens. Small incisions on either side of the scrotum allow a surgeon to isolate each vas and to cut it.

How sterilization is used: A male should have a physical examination and complete a health history before the surgery. Because he may not be sterile immediately after the surgery, other methods of birth control should be used for the next 20 ejaculations. Strenuous exercise should be avoided for a week after the procedure.

How effective is sterilization: Vasectomy is an extremely effective method of birth control.

Additional information: Vasectomy is a simple procedure that is effective, safe, and inexpensive. Some pain may be experienced for a short time after the surgery at the site of the incision. About two percent of males may experience minor complications including bleeding, fever, abdominal pain, or infection.

(b) Female Sterilization (Tubal Ligation)

How female sterilization works: Tubal ligation is a procedure that prevents a sperm and ovum from uniting. Because fertilization takes place in a Fallopian tube, tubal ligation is designed to block the tubes so that there is no way for a mature ovum to move through a tube to the uterus.

How sterilization is used: Before deciding on a surgical procedure, a female should be fully informed. A general physical exam, including a Pap smear and pelvic exam, is essential. After the procedure, she will be advised to rest for 24 to 48 hours and to resume her normal activity in a few days. Heavy lifting, strenuous exercise, and penile-vaginal intercourse should be avoided for a week.

How effective is sterilization: Tubal ligation is theoretically 100 percent effective. The procedure is immediately effective, although for absolute effectiveness, a backup contraceptive method should be used until the first menstrual cycle. Failure may occur if the tubes rejoin or there is surgical error.

Additional information: Sterilization is a highly effective, permanent, and one-time expense.

Some pain may be experienced for a short time after the surgery at the site of the incision. About two percent of females may experience minor complications including bleeding, fever, abdominal pain, or infection.

4. Emergency Contraception

(a) Emergency Contraception (The Morning After Pill)

How emergency contraception works: The emergency contraception pill, works by giving the female body a short, high, burst of synthetic hormones. This disrupts hormone patterns needed for pregnancy. The pill affects the ovaries and the development of the uterine lining, making pregnancy less likely. Depending upon where the woman is in her menstrual cycle, the hormones prevent pregnancy in different ways. It prevents ovulation (the egg leaving the ovary and moving into the fallopian tube). It blocks the hormones needed for the egg to be able to be fertilized. It may affect the lining of the uterus and alters sperm transport, which prevents sperm from meeting the egg and fertilizing it.

How emergency contraception is used: The emergency contraception pill is taken by the female partner after unprotected sexual intercourse or after sexual intercourse with contraception has failed, for example, the condom has broken during intercourse.

How effective is emergency contraception: The emergency contraception pill may be effective up to **120 hours (5 days)** after intercourse. **But, it is most effective within the first 24 hours.** Emergency Contraception reduces the risk of pregnancy by 75 - 89%.

Additional information: The emergency contraception pill does not protect against sexually transmitted infections not HIV.

The emergency contraception pill cannot prevent an ectopic pregnancy, which is when a fertilized egg attaches and grows outside the uterus. This can be very dangerous and requires immediate medical attention.

Emergency contraception is much less effective than methods of birth control you use before sex such as condoms or birth control pills. But if a woman has had sex without protection, emergency contraception significantly lowers her chances of getting pregnant

(b) Abortion

The term "abortion" actually refers to any premature expulsion of a human fetus, whether naturally spontaneous, as in a miscarriage, or artificially induced, as in a surgical or chemical abortion. Today, the most common usage of the term "abortion" applies to artificially induced abortion.

How abortion works: Abortion ends a pregnancy by destroying and removing the developing child.

How abortion is used: The vast majority of all abortions performed today are done for social, not medical reasons -- because a woman doesn't feel ready for a baby at the time, or because her partner wants her to have an abortion, etc.

How effective is abortion: Abortion is 100 percent in terminating pregnancy

Additional information: Abortion can lead to physical problems in the woman that range from hemorrhage and infection to sterility and even death. Psychological effects of abortion range from depression and mental trauma.

(d) Let the groups discuss the following questions based on their assigned contraceptive methods.

- What are the advantages of using this method?

- What are the disadvantages of using this method?
- Does this method protect against sexually transmitted infections, including HIV?
- How does a woman use this method?
- Can a partner participate in use of this method (such as going with a partner to get it, paying for it, reminding a partner to use it, and helping the partner to use it)?

(e) Let each group present their discussion points in brief.

4. Whole Class Discussion

(a) Ask the following questions to discuss with the whole class.

What decision have you made to protect yourself after discussing this lesson? Why?

As a youth, should he/she let self or his/her friend do the abortion? Why?

(b) Explain as follows.

We cannot be sure of the contraceptive methods to avoid pregnancy. Even if you use condom, you should check whether it has a hole, the lubricant dried. If not, it can't be safe.

Summary and follow-up

Although you are not at the age of having pregnancy, we discussed the contraceptive methods because it is intended that this factual information will be used when you come of age and get married or for others you know. Knowing the factual information can help you to protect unplanned pregnancy and Sexually transmitted diseases including HIV. In fact, abstinence from having sex is the most effective and most appropriate method of contraception for adolescents.

Facilitator Note:

- Abstinence as the most effective and most appropriate method of contraception for adolescents. Unprotected intercourse is neither safe nor smart where pregnancy and infection with HIV and other sexually transmitted infection are concerned.
- It is important for adolescents who are sexually active to minimize risks for unplanned pregnancy, HIV and other sexually transmitted infections.
- While some contraception methods are extremely effective in preventing pregnancy but they do not prevent transmission of HIV and other sexually transmitted infections. These methods must be used in combination with a condom.
- If used correctly and consistently, the condom is the only method that can effectively prevent pregnancy and sexually transmitted infections, including HIV.

Phase (3) B-4-4**Time: (60) minutes****Needs, Rights and Responsibility**

(Critical Thinking, Interpersonal Relationship, Empathy)

Objective

At the end of the discussion, the participants will be able to analyze and identify ways to have a balance between competing needs, rights and responsibilities.

Materials

Participant booklet

Activities**1. Introduction:****5 minutes**

(a) Introduce the lesson by asking the following questions.

- How do you understand “Needs”? (Essential things for our life)
- How do you understand “Responsibility”? (Essential work and duty for us)

(b) Continue asking the following question.

- How do you understand “Rights”? (Things one should get for ones wellbeing)

2. Whole Class Discussion

(a) Discuss the following questions with the class and record the answers in the table.

- What do adolescents (youths of your age) need?
- What are your rights?
- What are your responsibilities?

| | Person | Needs | Rights | Responsibilities |
|----|---------------------|-------|--------|------------------|
| 1. | Adolescents(youths) | | | |
| 2. | Family | | | |
| 3. | Parents | | | |

(b) Continue asking the following questions.

- What do your family members need?
- What are their rights?
- What are their responsibilities?

- What do your parents need?
- What are their rights?
- What are their responsibilities?

(c) Continue asking the following questions.

5 minutes

- Do you notice any of the similarities between the needs and responsibilities of children?

(d) The facilitator can explain as follows.

Everybody has the same needs and rights but their responsibilities are not the same. As youths are at the age of adolescence, you are now experiencing your physical and emotional changes. You are still learning how to be yourself in the community. Therefore, you need to take the responsibilities of your needs and rights.

(e) Continue with the following question.

- What do you think of the needs of children, especially infants and young children? Why?

(Point out that many of the needs of children are also the basic rights of children.)

(f) Explain as follows.

Say that children also have rights and there is an international document that was written specifically to talk about child rights, it is called the United Nations Convention on the Rights of the Child. This includes the right to special protection for full physical intellectual, moral, spiritual and social development in a healthy and normal manner, the right to education, to play and recreation, the right to equality, regardless of race, religion, nationality or sex, the right to love, understanding and protection, and the right to adequate nutrition, housing and medical services.

(g) Draw 2 columns on the board.

10 minutes

- In the first column write “Things I want to do in future”. Let the youths close their eyes and think what they would like to do happily in life or in future. Then write what they say in the column. (Write about 10 ideas)
- In the second column write “Can’t continue doing”. Let the youths close their eyes and think what they would not be able to do anymore if unexpectedly get married and have a child. Then write what they would not be able to do anymore in the column.
- Why do you think you would not be able to do?
- How do you feel when you have to give up something you want to do very much?

(h) Then, discuss the following questions.

- What would be the changes if youths become parents?
- How would they feel for these changes?
(When they become parents at the age of adolescence, they have changes in their life. They have to take more responsibilities for fulfilling their needs and rights as well as those of his family and children.)
- When you become a parent, what can you do to make your life enjoyable?

(i) Ask the following questions with the class.

- Have you ever thought of your changes in life as a parent? Why?
- What are the responsibilities of a parent? Why?

3. Group Discussion

(a) Assign one different event to each group. The groups have to read the situations in their booklet and discuss the questions.

Situation 1

You have been saving for new clothes but there are a lot of things that your baby needs.

Situation 2

Your friend invites you to go out because you haven’t seen each other in a long time but you don’t have a baby sitter.

Situation 3

You are supposed to play football with your friends but your baby is ill.

Questions:

- Who are involved in the situation?
- What are the needs, rights and responsibilities of the people involved in the situation?

(b) Form 3 small groups in one big group. One small group will discuss the needs another small group, the rights and the other group, the responsibilities of the people involved

in the three situations. Then, all the members will discuss again in the big group negotiating needs, rights and responsibilities.

(c) Then, ask the groups the following questions.

- How was your group able to achieve a balance in the situation assigned?
- Or do you have to give priority to one among the needs, rights and responsibilities? (Give 5 minutes to consider it.)

(d) Let the groups present their discussion points.

4. Practice

10 minutes

(a) Ask the youths to identify the situations in the community in which parents have to negotiate the needs, rights and responsibilities for their children. (The youths can reflect the situations they have discussed.)

(b) Record the situations the youths identified on the board. Then, choose the three that is the most common in the community and give one to each group. Let them discuss based on the questions below.

(1) Who are involved in the situation?

(2) What are the needs, rights and responsibilities of the people involved in the situation?

(3) Are they assigned these responsibilities according to gender?

(4) Whose rights are affected?

(c) Discuss the following questions included in their booklet so that they can apply them in real life situations.

(1) How are the responsibilities divided up in your family when you were a child? Who seems to have the greatest responsibilities? Why do you think that is so?

(2) Have you ever been in a situation in which you have had to decide between your needs and your responsibilities (unrelated to parenting)? What was the situation? What did you do?

(3) What do you think is more important your needs, your rights, or your responsibilities? Why?

(4) Do you think it is possible to have a balance between needs, rights, and responsibilities? Why or why not?

(5) Why should the need/rights of children always take priority over our own needs and rights? Why?

(d) Conclude the activity by asking the students to share some of the key things they have learned from the activity.

Summary and follow-up

- Healthy relationships find a balance of needs, rights, and responsibilities of the individuals involved.
- Needs, rights and responsibilities often need to be prioritized.
- The need and rights of children should be prioritized before those of the parents.
- The adolescents should try to get the needs and rights and take their responsibilities as well.
- When you become parents, you will have to consider the needs, rights of your children and give priority to theirs than yours.

Phase (3) B-5-1**Time: (60) minutes****It depends on you**

(Self Awareness)

Objective:

At the end of this lesson, participants will be able to:

1. Identify the norms of the roles of male and females in the community
2. Analyze that it depends on their decision whether certain activities can be done by male or female

Materials

Rolled pieces of paper for drawing lots

Activities**1. Role play**

- (a) Write one item given in the list below on one strip of paper and make a role. There are 21 items and one item will be in two lots so there will be 42 rolled lots. Adjust the items with the number of youths. Let them draw the lots.

Items written on the rolled lots

- | | |
|---------------------------------|-----------------------------------|
| (1) Climbing trees | (2) Cutting the bushes |
| (3) Applying make-up | (4) Making the roof |
| (5) Washing clothes | (6) Carrying water |
| (7) Ploughing the field | (8) Sweeping |
| (9) Transplanting rice plants | (10) Washing dishes |
| (11) Cooking | (12) Earning money |
| (13) Driving truck cars | (14) Making business |
| (15) Farming | (16) Fishing |
| (17) Making a plot for farming | (18) Being a village headman |
| (19) Filling drinking water pot | (20) Taking in charge of the shop |
| (21) Chopping firewood | |

- (b) The facilitator will draw the diagram on the board.

The work to be done by female

The work to be done by male

- (c) Starting from one youth, facilitator will ask him/her to act out the work mentioned in the lot. Other youths have to think and identify the kind of work. The other youth who has got the same item will join and the two of them decide whether it is the work of a male or a female and stick the item in the column. If it is the work of both male and female, they will stick it on the centre line.

2. Group Discussion

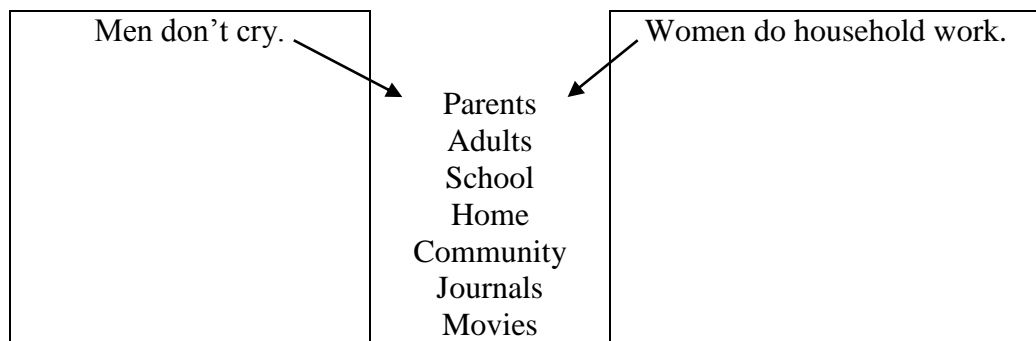
- (a) Ask the male and female mixed groups to discuss the following questions.
- What does it mean when adults in the community tell you to act like a man? What do they remind boys concerned with their manner, type of a man and what they do and how they say.
 - What does it mean when adults in the community tell you to be ladylike? What do they remind girls concerned with their manner, type of a woman and what they do and how they say.
- (b) Let each group present their discussion points.

- (c) Record the points about boys and girls separately.
 - (d) Ask the youths to look at the discussion points and discuss whose points are more, the girls' or boys'.
 - (e) Ask them whether boys and girls are born with those restrictions.
3. Explain to them using the following points.

In Myanmar, there are more how to behave and what to do guidelines for girls than boys. Therefore, girls have to try to live according to that guideline or stereotype of girls so that the community will accept them.

For example, Doing household work, or behaving like a lady with dignity is a stereotype of a girl but this is not predetermined for girls. They are not born with these restrictions.

4. The facilitator will draw a box around the entire list. Explain that this box will be called the **Act Like a Man** box. Inside the box is a list of attitudes and behaviours that boys are pressured to adopt in the process of becoming men in our society. Then draw a box around the list of **Being ladylike** as below.



5. Whole Class Discussion

- (a) Where do we learn these gender roles?
 - (b) Write the answers between the boxes.
 - (c) We did not know these gender roles in the boxes as soon as we were born. We learned them from different sources such as our community, parents, peers, etc.
 - (d) What do people usually say to someone who does not practice the roles in the boxes? For example, what name do people give to a boy who wears thanakha or to a girl who climbs up a tree?
 - (e) Explain as follows.
Although some people do not want to follow the stereotype gender roles, they live within the boundary that others accept. For example, although a boy wants to apply thanakha, he doesn't do it as he dares not do it.
 - (f) Discuss the following questions.
 - How many boys have never cried, hands up?
 - How many girls want to be passive, hands up?
6. Explain using the following information.

We are all real people and we can experience the full range of emotions, and thus we sometimes cannot perform these specific roles and do them well. In fact, everybody has the right to express own feelings. "Men do not cry" or "women are passive and cannot express their feelings openly" are not birth roles to be taken rigidly. They are slowly learned from parents, community and traditional

customs.

Some of these roles may not be appropriate with the changing environment and social norms. For example, in the olden days, girls do not usually go out for work but nowadays, there are many women who are successful in their business. Moreover, some play even soccer games. In the same way, men/boys also participate in child care or housework and work in beauty parlors. Therefore, if some of the roles restrict your interest, hobby and skills, it is your choice to make our own decisions to go beyond these roles.

7. Assessment Questions

(a) Content Questions

- (1) What traditional customs give male and female equal rights to participate in your community?
- (2) If male and female cannot have equal rights, what can happen?
- (3) What advantages can you enjoy if there are equal rights for male and female?

(b) Personalization Questions

- (1) What is that work/activity that you take interest among the jobs or activities traditionally restricted separate gender roles? Why?
- (2) What are the jobs that you agree both men and women can work equally?
- (3) What is your opinion on girls' soccer playing and men's work in beauty parlor? Why?

Summary and follow-up

Girls must be able to choose the job that they have aimed although it is regarded as boys' job. In the same way, boys can choose to work a job regarded as girls' job. You will be able to achieve your goal if you have opportunity to do the work that you are interested in.



Phase (3) B-6-1**Time (60) minutes****Let' review**
(Critical Thinking)**Objective:**

At the end of this lesson, participants will be able to assess the situations they are facing and prepare themselves to prevent the situation not to become risky.

Materials

Events in their booklet

Activities**1. Whole Class Discussion**

(a) Explain the event below to the youths.

Ma Ni is 15 year old. Among her 5 siblings, she is the oldest. Her mother is a widow. She has no father. They lived in a small town not far from Yangon. One day, Ma Ni ran away from her home as she quarreled with her mother. She met a woman in the car bound for Yangon. She asked her to come along with her. The woman said she would give a job to Ma Ni and a salary of 30,000 Kyats. She gave Ma Ni 5000 Kyats as an advance. Ma Ni agreed with her and followed her. When they got to the woman's home, she gave Ma Ni the money. She also bought Ma Ni clothes in a market. Then she locked Ma Ni in a small cell. She made Ma Ni have sex with man. Ma Ni wanted to run away but she had to live under watch all the time. One day, the police came to this house and arrested the woman. Ma Ni was sent to the women's welfare centre. Now Ma Ni has been infected with HIV/AIDS.

(b) Ask the following questions and record the answers on the board.

1. What are your opinion and feeling upon the story?
2. What kind of job is it in the story?
3. How did they get connection with each other?
4. How was the person in the event persuaded?
5. What happened next?
6. Where do you think we should start to make changes so that the person in the story would not get into trouble?

2. Group Discussion

(a) Give each group the following events.

Event(1)

Mg Wine is 14 year old and has a big body. He was dropped out of school to help his father farm works. He had to pick up some sticks for fire-wood. (He had to work very hard). He was tired of hard working. He felt disappointed then. One day he decided to go up to "the hill". "The hill" meant the neighboring country. It is only one day walk from their village to the hill. He went along with two other men older than him. They went there by a car and met with a broker and stayed there for two days. He was taken to a man whom he thought as the owner of the factory. The man took him to a place. He found some 10 young people of his age. Their ages ranged from 14 to 18 year. He was not allowed to talk with

them and go anywhere. He was watched all the time by the sentries. Then he was asked to have sex with men. Then he realized that it was not a factory and the man was not the owner of a factory either.

Event (2)

Ma Thidar is 15 year old. She had to leave school as her parents couldn't afford her school fees. She was approached by a couple of about 40 year-old. They told her to work in a neighboring country. They told her that if she worked there, she would get a lot of money. She decided to go there with them. They stayed at a guest house. In the morning, she didn't find them. But the owner of the guest house told Ma Thidar that they sold her and had gone. Ma Thidar didn't know what to do. Her national identity card was also gone. She had no other identification.

She did not know where she was. She had been forced to have sex with men for one year. There were other four Myanmar girls besides her. One day they ran away as soon as they got an opportunity. Good people found and saved them. They were sent to a safe place. Some people enquired about their families. At last Ma Thidar was sent back home.

When she was hospitalized because of her illness, she knew that she had HIV/AIDS. She felt very sad. Ma Thidar told other people about her not to have the same experience like her.

(b) Then, let the groups discuss the events using the questions in 1. (b).

(c) Let the groups present their discussion points.

(d) Explain as follows.

Before you do something, the first thing you should do is to control your emotions. Consider the consequences of the ways to solve the problem and think carefully to make the decision. In doing so, you will be able to protect yourself from having tragedies.

3. Discussion questions

Ask the youths the following questions to be able to assess the situations.

- (a) Have you heard the events like that? Share them to the class.
- (b) Where can they happen?
- (c) Under which situation can they happen?
- (d) Why do you think they happen?
- (e) Why do these stories happen in real life although they should not happen?
- (f) How will you prepare yourself not to have those tragedies?
- (g) How will you help other people not to have those tragedies?
- (h) Do you think you should do anything if you get money?
- (i) How can you practice yourself not to believe whatever other people say? How can you set your mind?
- (j) Do you think you should do whatever other people ask you to do because you have no money?
- (k) Can young people in these events prepare themselves in the way you do?

- (1) Why do you think people get cheated? Why do they believe the cheater? How will you take care of yourself so that you are not cheated?

Summary and follow-up

When you encounter a situation in one of the events, don't decide what to do at once like the person in the event. You should carefully think the consequences of your decision first and then make the decision thinking rationally. If you can't make the right decision, you can consult people you trust or experienced ones about your situation before making the decision.

Summary Key Messages for Phase 3 B

- * Always try to consider the bad consequences that can follow your decision.
- * Whatever the reason is, avoid trying to use substances.
- * Abstain from sex so that you cannot be infected with HIV/STI.
- * Take care of your reproductive organs so that they can be fully developed at your age.
- * Try to get your needs and rights and also try to perform your responsibilities.
- * Try to choose what you want to do to achieve your goal in the changing environment disregarding the gender roles.
- * Prepare and protect yourself to avoid undesirable tragedies assessing the situation you are faced with.