

My
Changing
Body

The title is presented in a stylized, multi-colored font. 'My' is purple, 'Changing' is orange, and 'Body' is purple. The text is set against a light purple background with a large white circle behind it. There are two orange silhouettes of a person with arms raised, one in the top right and one in the bottom left. Several orange and purple circles of varying sizes are scattered around the text.

Fertility Awareness for Young People

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Fertility Awareness for Young People

Institute for Reproductive Health of Georgetown University

and

Family Health International

in collaboration with Elisa Knebel

My Changing Body: Fertility Awareness for Young People

by the Institute for Reproductive Health of Georgetown University
and Family Health International in collaboration with Elisa Knebel

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YouthNet



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The Institute has worked extensively in developing materials and approaches for increasing fertility awareness, mainly for adults. Its work has shown how few people really understand their fertility and how important it is to have this knowledge.

FHI is committed to the ideal that young people have a right to access reproductive health information and services, which leads to a greater understanding of their own bodies and fertility. FHI is currently working around the world to improve youth reproductive health and HIV prevention behaviors.

The impetus for this project was the combined desire of both organizations to share their experience in preparing young people to understand their bodies as they grow into adulthood.

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*Institute for Reproductive Health of Georgetown University
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Introduction to the Manual

Why Choose *My Changing Body*?

Human development, interpersonal relationships, personal skills, sexual behavior, sexual health, and sex in society and culture—there are many topics to cover when teaching youth about fertility, sex, and development!¹ *My Changing Body: Fertility Awareness for Young People* is not a comprehensive sexuality education manual, but it goes into detail about one of these topics—fertility awareness.

Fertility awareness is a way to help young people understand their maturing bodies and how to protect their own reproductive health. Discussing physical and emotional changes and signs of fertility during puberty helps young people become knowledgeable about how their bodies function and empowers them to make appropriate decisions about sexual behavior. Helping young people understand their fertility dispels myths and misconceptions about reproductive health and makes them better prepared for adulthood.

Most parents, schools, youth organizations, and religious institutions are ill-prepared to help young people understand and prepare for puberty. Thus, young people often lack skills and information to deal with the many physical, social, and emotional changes associated with this time of rapid change. When young people are better aware of how their bodies work and what changes to expect as they become adults, they are much better prepared to deal with sexual and reproductive health issues and challenges.

My Changing Body provides accurate, factual information about puberty in objective and reassuring terms for young people. What youth learn from *My Changing Body* will help them to become more self-confident, practice good health habits, and gain a positive self-image. *My Changing Body* is a fun and engaging manual. Each session includes interactive activities, role-plays, games, and craft-making that not only promote the mastery of new knowledge, but also stimulate participants to share feelings and emotions. By engaging the “heart,” in addition to the “head,” participants hear, learn, and absorb very important messages about their changing bodies.

¹ For guidelines on what topics to cover in sexuality education, see: National Guideline Taskforce. *Guidelines for Comprehensive Sexuality Education, Kindergarten–12th Grade, Second Edition*. New York: Sexuality Information and Education Council of the U.S. (SIECUS), 1996. Available: www.siecus.org.

Who is the Target Audience?

This manual is designed for adults who teach young people about human development and fertility. Youth group leaders, religious instructors, school teachers, or any adults regularly meeting with and instructing young people can use this manual. This manual is ideal for youth-serving organizations such as the Young Men's Christian Association (YMCA), Young Women's Christian Association (YWCA), World Association of Girl Guides and Girl Scouts (WAGGGS), World Organization of the Scout Movement (Boy Scouts), and others. The content and activities covered in this manual are targeted toward young people ages 10 to 14.

Although this manual does not cover topics around sexual behavior and practice, participating young people will likely ask about these issues. Thus, there are questions and answers available throughout the manual in case this happens. It is also very important for you to be objective in how topics concerning sexuality are approached. Personal biases and attitudes should not interfere with the teaching of this manual. Young people have a right to honest, accurate, and appropriate information about their sexuality and reproductive health.

Overall Objectives

During the course, participants will do the following:

1. Identify specific physical and emotional changes experienced by both boys and girls during puberty.
2. Identify the age or time when puberty occurs.
3. Discuss their own physical development and body image.
4. Begin to understand their sexual feelings.
5. Describe the process of conception and the definition of female and male fertility.
6. Dispel common myths around female and male fertility.
7. Describe the process of fertilization.
8. Become conscious of their own signs of fertility.
9. Develop practices for maintaining good hygiene.

How is *My Changing Body* Organized?

This manual can be used as a supplement to existing materials you might be using to teach sexuality education. If you would like additional information or resources on sexual health and sexuality education, please consult the Resources section at the end of this manual.

Depending on the amount of time available, this manual can be taught over a series of weeks or days, or during a two- or three-day workshop. Each session in the manual should be followed in consecutive order, but the amount of time between each session can vary based on your program's needs. An advantage of moving through the material slowly is that participants will have enough time to complete the suggested long-term homework activities.

The Fertility Awareness Necklace

The manual uses a necklace with 32 beads of different colors to help facilitators explain the monthly changes that girls experience when they menstruate. The necklace provides a visual tool to help girls better understand their fertility and the changes in their bodies that occur at the onset of puberty and continue as they mature. Menstruation is a regular occurrence that involves the same changes in their bodies each month. The necklace can also be used to teach boys how the female body works and when a girl can become pregnant.

The idea for using a necklace to teach fertility awareness to young people had its genesis in the work of the Institute for Reproductive Health in developing a new, natural family planning method called the Standard Days Method (SDM). Many SDM users rely on CycleBeads™, a color-coded string of beads with a rubber ring, to help them track their fertile days while using this method. A number of individuals from youth organizations suggested that the necklace concept would be a helpful visual aid for teaching young people about fertility. Thus, it is important to note that the necklace used in this manual is different from CycleBeads™ and is not intended for use in family planning. If a woman wants to use CycleBeads™ for family planning, it is important for her to have additional information. She should contact her family planning provider.

Teaching Methodology

Telling youth about the process of growing up takes courage. In many societies, people are taught not to talk about intimate things, including our so-called “private parts.” But, as you have probably noticed, *not* talking only leads to more myths and misinformation.

The methodology of this manual is based on engaging participants in very interactive exercises. Activities are meant to be fun for kids, but be sure that in your role as facilitator, you draw out the lessons of each session. It is important to not get lost in the activity and to be sure to process the most important points for your participants.

To make this course a success, you need to overcome your fears and discomforts about discussing fertility and the human body. This will contribute toward creating an atmosphere of openness and trust for participants. Before beginning the manual, you should prepare yourself. Below are some recommendations to help you successfully conduct this course:

- **Read the whole manual.**

A preliminary reading of the manual will give you a holistic view of what you will be teaching, an idea about the material you need to gather, and how you should prepare yourself to teach the course.

- **Identify and understand the beliefs and values of youth participants and of yourself.**

Do you remember how it felt to be a young person? Do you remember what it was like to have your first period or wet dream? Think about what participants must be feeling as they grow up. Pay attention to your own beliefs and values. Doing so will make you a much more effective facilitator.

- **Create a nonjudgmental environment where participants' values are respected.**

Accept and respect all participants' comments and questions. Let them know that their concerns and opinions are valid and worthwhile.

- **Be enthusiastic!**

Help young people develop attitudes about human development by setting the tone of the learning experience. Maintain a positive approach to the normal, healthy process of growing up. No matter how objective adults are trying to be, youth notice negative feelings and attitudes. How something is presented is often more powerful than what is said.

- **Always be prepared.**

Before each session, *read all the session steps and content*. Pay special attention to the "Facilitator Note" and "Stress the Following" shaded boxes. Be prepared for any questions participants might ask about that particular topic. Do not be afraid to say you do not know something, and offer to check it out and get back to the group.

- **Make participants feel comfortable.**

Avoid causing anyone potential embarrassment. Do not make participants answer a question they feel uncomfortable answering.

- **Provide opportunities for participants to ask questions anonymously.**

For some participants, asking questions is the easiest way to express their concerns. Give participants time to write down questions and deposit them in a “Question Box.” Then answer the questions later for the entire group.

- **Identify resource persons and sites.**

If you are not comfortable facilitating a topic, or feel you do not have adequate information, invite someone (such as a health expert or fellow educator) who can.

- **Utilize brainstorming.**

Participants will likely know more about puberty and fertility than they or you might realize. Brainstorming helps to bring out this information and to identify if their information is incorrect or incomplete.

- **Help participants make their own rules.**

Helping young people to develop and follow a clear set of rules to govern their discussions will make them feel comfortable sharing their thoughts and feelings. Ground rules also make clear what type of language and behavior is considered acceptable and appropriate. Once ground rules have been clearly stated, refer to them throughout the course and when dealing with difficult situations.

- **Conduct large group discussions.**

The more participants are able to debate and talk with each other, the more they grow. After creating an atmosphere of openness and trust, you will still need to stimulate participation and involvement. Much of the manual will consist of involving participants in large group and small group interactive exercises.

- **Use small group activities.**

Participants will take ownership of their work when working alone or in small groups. Small group work can also help to encourage young people to speak up more, especially those who may be shy or reluctant to speak in larger groups.

Teaching with This Manual

It is important to be familiar with the organization of the manual. The manual contains:

1. Six teaching sessions. Each **Session** is devoted to a particular topic:

Session 1. Puberty: My Body, My Self

Session 2. Female and Male Fertility

Session 3. Combining Female and Male Fertility: Fertilization

Session 4. Concerns about My Fertility: Female and Male Group Discussions

Session 5. Hygiene and Puberty

Session 6. Review

2. A **Glossary** of important words in the back of the manual.
3. A list of other **Resources** at the end of the manual to help you gain more knowledge.

Each teaching **Session** contains:

1. **Objectives** – Specific skills and abilities the participants will gain from the session.
2. **Materials Needed** – Items that need to be gathered ahead of time for the session.
3. **Before You Begin** – Directions for what to do before starting the session.
4. **Time** – Schedule to guide the length of the session. Depending on the number of participants and other factors, the time for doing each activity could vary. Most sessions should take between one and a half to two hours to complete. It is most important to work at the pace of the participants.
5. **Steps** – Separate activities that comprise the session. Each step in the session should be followed in order. Instructions are provided for each step and may also include the following:
 - Facilitator Note** – Special note or reminder for the facilitator on how to facilitate certain steps.
 - Stress the Following** – Main points to cover for certain steps.
 - Take-Home Messages** – Points to review again with the participants at the end of the session.
6. **Possible Questions and Answers** – Young people will certainly ask questions about each topic. Some possible questions and answers are listed after each session to aid the facilitator. With the exception of Session 4, *you do not have to cover all of these topics*. The questions and answers are only there to provide you with quick answers if participants ask questions. Read these questions before starting a session to be familiar with possible questions participants might ask.
7. **Extra Activities** – Activities listed at the end of the session that can be added to the manual to reinforce what the participants have learned. *The activities are optional—you can decide whether or not to use them*. Some activities are designed to last over several months.
8. **Content** – Main information to be covered during the session. *It is critical to read and understand the content before starting every session*.

It is important for participants to understand the objectives of each session. Stop and review important points if participants do not understand them. This manual is about the personal development of each participant. It should not be treated like a school class in which participants are preparing for an exam. Make the course fun and informative!

Boys and Girls: Together or Separate?

All of the sessions, except **Session 4**, are designed to maximize the participation of boys and girls together. In **Session 4**, boys and girls are separated to give them an opportunity to ask questions of a facilitator of their own sex, among their peers. Some of the topics in this manual can be difficult to discuss. Separating boys and girls for this session enables them to feel more comfortable talking about their specific questions and concerns.

After reading this manual, you might believe that boys and girls should be separated in some or all of the other sessions. In many cultures, girls and boys, and men and women, traditionally do not talk about bodily changes or sexuality with each other. In such settings, both boys and girls will likely be embarrassed to speak or participate in the activities. Therefore, you may decide to conduct the sessions with girls and boys separately.

Promoting participation should be your first priority. Whether this means separating boys and girls for the whole or part of the course is your decision and should be based on the culture and society in which you are leading this course.

Course Location

Some of the material discussed in this manual is sensitive, and participants will likely want privacy. Where you choose to hold this course is critical. If possible, try to select a quiet, safe place where participants will not be viewed, listened to, or interrupted by outsiders. Assure the participants that none of their comments will leave this “safe place.” Also, make sure that the manual is delivered at a location convenient to participants’ homes.

Preparing Parents

Some parents and caregivers are uncomfortable discussing sexuality issues with their children. Others may feel anxious about providing too much information or embarrassed about not knowing answers to questions they are asked. Parents or caregivers may also feel uncomfortable communicating these things because of their cultural values, norms, and traditions.

It is important that parents or caregivers be informed about the information being shared with their children. Below is a sample letter that can be adapted and sent to them. This information can also be communicated in person if you are working with low-literate populations. In addition to the letter, you might want to hold a meeting with parents or caregivers to discuss the manual and some of its more sensitive content. This will be essential for low-literate populations who cannot read such a letter. Maintaining contact with and responding to any questions or concerns of parents or caregivers throughout the course will contribute to a greater understanding of the topics and overall success of the course. Providing your contact information in case parents or caregivers want to ask you additional questions is also recommended.

Sample Letter

Dear Parents,

We are pleased to offer a special program concerning the emotional and physical growth and development of early adolescence for your child. The program involves group discussion and interactive exercises.

In order to prepare participants to make healthy and responsible decisions as they grow and develop through adolescence, we will be studying the physical, social, and emotional changes associated with puberty. Fertility awareness and puberty education are part of a balanced, complete, health education program. The goals of this program are to help young people:

- Gain accurate and age-appropriate knowledge about puberty.
- Develop a positive self-image and attitude toward the changes that they are experiencing or will experience.
- Develop skills that will enable them to communicate appropriately with others about puberty.

Topics that will be covered include the social, emotional, and physical changes associated with puberty, development of the male and female reproductive systems, menstruation, fertility awareness, and personal hygiene. You may wish to become involved in your child's learning in the following ways:

- Encourage your child to discuss questions with you.
- Talk to your child about your own feelings and experiences during adolescence.
- Talk to your child about your own values and beliefs regarding sexuality, puberty, health, and hygiene.
- Encourage your child to share or discuss what he or she is learning in the manual.

The primary purpose of the program is to provide accurate, factual information about puberty in objective and reassuring terms for young people. All of the high-quality learning materials have been compiled by the Institute for Reproductive Health of Georgetown University and Family Health International in the United States, and are based on experiences of youth-serving programs in developing countries. Both organizations are well respected worldwide for their work in educating young people about puberty.

As a youth leader, I feel it is in the best interest of our young people to provide them with this very valuable and important information. Thank you very much for your continued cooperation and support. If you have any questions or comments, please contact me.

Sincerely yours,

(NAME OF FACILITATOR)

(Provide contact information such as school or organization name, address, and/or telephone number.)

Referring Participants for Further Help

Boys and girls often have questions or concerns that they might not want to share with their parents. There are many people who can act as counselors or advisors to youth: health providers, teachers, religious leaders, community leaders, school principals, and relatives. Throughout the course, it is important to stress that participants should contact you or other adults whom they trust to discuss any of the information presented in the manual. You should also mention existing referral services in your area that deal with any issues or concerns that participants raise during the course.

Session 1

Puberty: My Body, My Self

Objectives

By the end of this session, the participants will:

1. Identify five physical changes experienced during puberty by both males and females and discuss their feelings about them.
2. Identify three emotional changes accompanying puberty and discuss their feelings about them.
3. Identify the age when puberty occurs.
4. Discuss their own physical development and body image.
5. Understand that sexual feelings are normal.



Materials Needed

- Two regular notebook-size sheets of paper and pen or marker for each participant
- Six sheets of flip chart paper
- Markers
- Flip chart or chalkboard
- Tape

Before You Begin

- Carefully read all of **Content for Session 1** (pages 26-28).
- Read each step of the session. Think about how you will perform each step and what you will add to every session.

Facilitator Note

Some facilitators find Step 3 challenging. Rehearse in your mind how you think this exercise might happen. Even though it might make you uncomfortable, it is important to remember that many young people use slang words for all of these terms every day. It is important to appear calm and comfortable when doing this step. You will gain their trust and openness for the rest of the sessions if you calmly accept everything they say.



Time

Activity	Minutes
Step 1: Let's Get to Know Each Other	15
Step 2: Setting Ground Rules	10
Step 3: Words We Use about the Body	15
Step 4: How Our Bodies Have Changed	35
Step 5: Changes in Feelings	20
Step 6: Talking about Puberty	20
Step 7: Take-Home Messages	15
TOTAL MINUTES	130

Step 1: Let's Get to Know Each Other

**Pair Exercise and Large Group Activity
(15 minutes)**

Divide participants into pairs. If there is an odd number of participants, you can be someone's partner.

When everyone has a partner, tell the group that each person should think of any number between one and five. Ask the participants to introduce themselves to their partner and tell their partner the number they chose.

Next, tell the participants that each person has to tell his or her partner the same number of things about himself or herself as the number he or she chose. For example, those who picked the number five must tell their partner five things about themselves.

After about five minutes, ask everyone to rejoin as a group. Have each person introduce his or her partner to the group and explain what he or she learned about that partner.

Step 2: Setting Ground Rules

Large Group Discussion (10 minutes)

Ask participants to brainstorm a list of rules they think will make the course more successful. Write these rules on the flip chart or the chalkboard. Feel free to add any important rules that participants may have omitted (see below). These rules should be kept visible for all sessions and referred to as needed throughout the course.

The following are some sample ground rules:

- Listen to what other people say.
- No talking when someone else is talking.
- Be kind and give support.
- If people do not want to say anything, they do not have to.
- Do not laugh at what other people say.
- Insults are not allowed.
- The opinions and statements of boys and girls are equally valued.
- All experiences will be shared in a climate of privacy and trust.
- If you wish to speak, raise your hand and wait to be called upon.
- Questions are encouraged and may be asked at any time. There is no such thing as a stupid question.
- It is okay for the facilitator and participants to blush, feel embarrassed, or not know the answers to all the questions.
- The facilitator also may choose not to answer a question in front of participants.
- Things shared will be kept strictly confidential. They will not be discussed outside the group.
- Do not judge people because of what they do or say.

Tell the participants that they might also have questions during the course that they are afraid to raise in front of their peers and friends. Let them know that they can write questions anonymously and place these in a *Question Box* that has been set up especially for the

course. Explain that you will answer these questions after each session, or when appropriate.

Step 3: Words We Use about the Body²

Large Group Discussion (15 minutes)

Post six sheets of flip chart paper around the room. Write one of the following words on each sheet of paper:

Man	Breasts	Vagina
Woman	Penis	Buttocks

Instruct each participant to move around the room and write slang words or phrases for each of the words on the sheets of paper. Encourage them to use any words or phrases they know. Let the participants know it is okay to use words they may think are “bad.” Once everyone has finished, come together and read through the lists out loud carefully and slowly.

Ask the following:

- Were you embarrassed to see, write, or hear any of these words? Why or why not?
- When do we use “slang” words and when do we use words that are more formal? Why?
- Do some of the words seem harsh or abusive?
- Do we ever use these to talk about women or men, in general? How do you think this makes men or women feel? Why do you think this happens?
- What does it mean when people use them?
- Did participants forget phrases with positive meanings? Why?

² This exercise is adapted from: Centre for Development and Population Activities. *Choose a Future! Issues and Options for Adolescent Boys: A Sourcebook of Participatory Learning Activities*. (Washington: Centre for Development and Population Activities, 1998) 98.

Stress the Following

This exercise is to get us more relaxed talking about puberty. Today we will talk about the physical and emotional changes you are going through or will go through as part of puberty.

Facilitator Note

If suitable during this exercise, you may talk to participants about the importance of appropriate behavior and actions when discussing our bodies. It is important to emphasize that everyone should be treated with respect and dignity and that boys and girls should be treated equally.

For participants who do not have strong writing skills, this exercise can be modified. Divide the group into three small groups. Give each group two words from the list. Have them brainstorm all the slang words or commonly used expressions for both terms. After five minutes, ask them to stand in front of the group and say their list.

Step 4: How Our Bodies Have Changed

Large Group Discussion (35 minutes)

Hand out paper and markers to each participant. Ask the participants to draw a picture of themselves at 16 years of age. Give them about five minutes to do this.

Facilitator Note

If participants are uncomfortable, they can draw a picture of a “friend” rather than themselves. They may be too shy to draw all the changes if they know the drawing is meant to be themselves.

If the group is all girls or all boys, have participants also draw a picture of the opposite sex.

Write two titles on the flip chart or chalkboard:
Changes in Girls and *Changes in Boys*.

Ask participants to compare the differences in physical appearance they see in themselves at their current age to the picture of themselves at age 16.

Ask them about other physical changes that they cannot see. For example, ask them, “What will happen to your voice by the time you are 16?”

Write the new changes in their bodies on the flip chart or chalkboard as in the table below.

After you cover each part of the body, read out loud the **Facilitator Main Message** listed in the third column of the table below.

Common Responses			
	Major Changes in Females	Major Changes in Males	Facilitator Main Message
Skin	Skin becomes oily, sometimes with pimples or acne.	Skin becomes oily, sometimes with pimples or acne.	This lasts through your teen years and then usually ends. Wash the face each day with soap and water.
Hair	Hair increases on legs, under arms, and in pubic area.	Hair increases on legs, chest, face, under arms, and in pubic area.	The amount of new body hair that grows is different for each young man and woman.
Breasts	Breasts grow, swell, and hurt just a bit.	Breasts grow, swell, and hurt just a bit.	Both breasts may not grow at the same rate or to the same size. It is normal for one breast to be a bit smaller than the other one.

Body size	Hips broaden, breasts enlarge, weight and height increase.	Shoulders and chest broaden, weight and height increase.	Girls can reach their full height before boys. However, by the time puberty is complete, young men are often taller and weigh more.
Perspiration (Sweat)	Perspiration increases and body odor may appear.	Perspiration increases and body odor may appear.	This is normal. Can help control by washing or bathing daily.
Voice	Voice deepens slightly.	Voice deepens and may crack.	Male voices can suddenly go from high to low or from low to high. This cracking can be a bit embarrassing sometimes. In time, it will stop.
Female sexual organs	Period or menstruation begins, and there is more wetness in the vaginal area.		Girls might see and feel a white or clear liquid from the vagina. This does not mean anything is wrong. We will talk about this wetness and the menstrual period later.
Male sexual organs		Wet dreams and erections occur, and penis and testicles grow larger.	Wet dreams and erections are completely normal. We will talk about this more later.

Stress the Following

Puberty is a time when the bodies of boys and girls change—bodies grow bigger and taller, genitals develop, and body hair appears.

Puberty happens because new chemicals—hormones—are developing in the body, turning young people into adults. Usually, puberty starts between ages eight and 13 in girls and between ages 10 and 15 in boys, although some young people start puberty earlier or later. Typically, but not always, girls begin puberty about two years before boys. During puberty, a girl becomes physically able to become pregnant, and a boy becomes physically able to father a child.

If you are concerned about your developing body, ask to speak with a trusted adult or health provider.

Step 5: Changes in Feelings**Small Group Activity
(20 minutes)**

Divide the group into small groups of three to four participants each. Ask each group to think about and discuss for several minutes some of the emotional and social changes happening to them as they start puberty. If they are younger, ask them what they imagine they will feel as they grow older. Ask them to think about the following:

- Changes in the way they feel about themselves.
- Changes in their relationship with their parents.
- Changes in friendships and feelings of love.

Ask each group to share with the entire group three new emotional changes or new feelings they are experiencing or will experience.

Ensure that the following are mentioned as common feelings of those entering puberty:

- Struggling with a sense of identity and questions about oneself.
- Moodiness, anger, and depression.
- Need for more independence and privacy.
- Relationships with friends and opinions of others become more important.
- More concern or worry about appearance and body.
- Worry about the future (school, family, job, etc.).
- New “crushes” on movie stars, pop artists, teachers, peers, or fellow participants.
- Curiosity about sexual organs.
- Feeling sexually attracted to people.

Stress the Following

All of these new emotions are normal. Feeling anxious about growing up is normal. Having sexual feelings is normal and is nothing to feel guilty about. Acting on such feelings, however, is a big responsibility. All people are sexual beings. Talking to parents and other trusted adults about sexuality can be helpful. We are going to talk more about this later.

Step 6: Talking about Puberty

Pair Exercise (20 minutes)

Divide the group into pairs. Assign one of the following role-plays to each pair. If there are too many pairs, more than one pair can do the same role-play. Ask each pair to act out the situation using the information they just learned. If culturally appropriate, encourage them to be creative and encourage girls to act out male roles or boys to act out female roles (in some societies,

girls and boys, or participants of different ages, might not be comfortable performing with each other; arrange the pairs the way you think would be most effective). Give participants five minutes to prepare each role-play.

Role-play #1: One person plays the mother (aunt, grandmother); the other plays a 12-year-old girl. The girl is worried because she has not developed breasts, although most of her friends have. The mother (aunt, grandmother) comforts the girl, letting her know that the age when breasts start forming varies and that breast sizes vary.

Role-play #2: One person plays a 12-year-old boy; the other plays the older brother. The boy is sad because everyone at school teases him about his cracking voice. The older brother explains why his voice is cracking and what to say to people when they tease him.

Role-play #3: Both people play 10-year-old girls. One girl teases the other girl because she is taller than all the other girls in the group. The tall girl explains that boys and girls grow at different paces and to different heights. She also explains why she does not like being teased and asks the other girl to be a nicer person. The teasing girl apologizes.

Role-play #4: One person plays a 12-year-old boy; the other plays his father (uncle, grandfather). The boy is worried because he is growing hair under his arms and a little on his face. The father (uncle, grandfather) comforts him and tells him that most boys develop hair in new places as they grow older.

Role-play #5: One person plays an 11-year-old girl; the other plays her friend. The friend is worried because she has not yet started having periods but the 11-year-old girl has. The girl comforts her friend, letting her know that the age when girls start menstruation varies.

Role-play #6: One person plays a 13-year-old boy; the other plays his friend. The friend is worried because he is not as tall and big as the 13-year-old boy. The boy comforts his friend, letting him know that the age when boys start the physical changes of puberty varies.

Step 7: Take-Home Messages

(15 minutes)

Close the session by stressing the following:

- All of these physical and emotional changes are natural.
- Each person develops at an individual pace, some early, some late. It is important not to tease or make fun of others who may develop earlier or later.
- Young people often feel uncomfortable, clumsy, or self-conscious because of the rapid changes in their bodies.
- Menstruation and wet dreams are normal. These will be discussed later.
- During puberty, a girl becomes physically able to become pregnant and a young boy becomes physically able to father a child. In other words, they become fertile. We will talk more about this later.

End the discussion by asking the following questions:

- To whom could young people go with questions or worries about puberty? (*Encourage them to talk to parents, facilitators, counselors, grandparents, aunts, uncles, doctors, nurses, etc.*)
- What would you say to a friend who wished he or she never had to enter puberty?
- Do you have any questions about what we discussed today?

Stress the Following

Stress that you will cover more about puberty in the next session and that participants will get a chance to ask all the questions they have.

Thank them for being an enthusiastic group. Tell them that it is hard to talk about one's body sometimes and that you are proud of them for participating and sharing with each other.

Possible Questions and Answers**Q. Is it normal for some boys and girls to mature earlier than others?**

A. Yes. Some boys start puberty as early as 10 years old, others not until they are 14 or 15. Some girls start puberty as early as age eight, others not until they are 13 or 14. However, if a girl does not start menstruating by the age of 16, she should consult a health provider.

Q. Why do some parts of the body mature more quickly than others?

A. During puberty, there is an order in which certain physical changes usually occur: For girls, breasts begin to grow; for boys, growth of the testicles is usually the earliest sign. However, bodily changes can occur in a different order and still be considered normal.

Q. Why do some boys experience breast tenderness during puberty?

A. Occasionally one or both of a boy's breasts can become slightly enlarged or sore. This is related to the rising levels of hormones in the body.

Q. Why do many teenagers have skin problems?

A. During puberty increased hormonal activity leads to increased activity in the skin glands. Oil produced by the glands blocks skin pores and mixes with bacteria to cause pimples or spots. To help keep skin clear, teens should wash faces and hands frequently.

Q. How long does it take for breasts to be fully developed?

A. It takes a different amount of time for each girl. If a girl starts later than other girls, it does not mean that her breasts will always be smaller. There is no link between what size breasts will be and when they start to develop.

Q. Do all women have to wear a bra?

A. No, but some find it is more comfortable.

Extra Activities

The following are optional activities you may do with the group.

Activity 1: Interviews with Adults about Puberty

Begin by dividing the group into small, same-sex groups. Ask each group to think of a list of questions that they would like to ask an adult of the opposite sex and same sex. Suggest that participants think of questions about physical changes and emotional changes that the adult went through during puberty. Possible questions include:

- What did you like best about being age 10 to 14?
- What did you like least about being age 10 to 14?
- What emotional changes did you have during puberty?
- How did your social life change in puberty?
- Where can I get accurate information about puberty?
- Do you have any advice for anyone about to enter puberty?

Ask each participant to then use the questions his or her group has listed as the basis for an interview with an adult of one's choosing.

Discuss the results of the interviews. Make a list of the changes the males and females experienced. Compare the lists to note similarities and differences between the two sexes.

Activity 2: Growth Diaries

Ask participants to keep a growth diary for self-observation and reflection. The end product will include: a) a print notebook that participants will enjoy reviewing and perhaps sharing with others later in life; and b) a personal essay about the process of maintaining the notebook. This exercise may be more appropriate for 12- to 14-year-olds, depending on their literacy level.



Materials

- Blank notebooks
- Camera for snapshots
- Access to scales and tape measures for participants to weigh themselves and track other measurements
- Rulers

Explain to participants that the activity will proceed over many weeks. To avoid misunderstandings at home, consider informing parents or caregivers about this activity before you assign it to participants.

The single most important fact to share with participants about their growth diaries is that they will remain *confidential*. Neither you nor other participants should at any time have access to anyone else's growth diary.

1. At the beginning of the assignment, present each participant with a photo of himself or herself. Tell each participant to paste this photo in the front of a notebook.

2. Show participants how to arrange their notebook pages in columns and rows to track the data they will collect on a regular basis during the rest of the assignment (see following sample table).

Advise participants to designate one section of their notebook as a journal, in which they will comment on their physical changes (or lack of changes) and accompanying emotional changes.

Sample Growth Diary

Change	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9
Height									
Weight									
Chest									
Hips									
Waist									
Skin condition									
Presence of period (for girls)									

3. Tell participants in more detail what you mean by asking them to “comment on their physical changes . . . and accompanying emotional changes.” Explain that it is not unusual for young adolescents to feel pride or embarrassment, excitement or fear, as they grow. Those emotions are what you want participants to write about so that they will be able to remember them when they are older.
4. Remind participants that you are expecting them to maintain their growth diaries every month. After Month 9, present each participant with a second picture of himself or herself to include in the growth diary.

5. Toward the end of the assignment, tell participants more about the personal essay that you expect from each of them about the process of keeping the growth diary. Go over what the personal essay should contain:

- Title.
- Clear statement about the process of keeping the growth diary.
- Coherent and unified paragraphs with topic sentences.
- Support for the statement and topic sentences: examples, statistics, sound opinions, and other details.
- Strong conclusion.

Explain that the challenge in writing these personal essays is for participants to make clear to you what they thought about keeping the growth journal—positives and negatives of the process—without sharing intimate feelings that they do not want to share with you.

Facilitator Note

For low-literate or younger participants, you can modify this activity—ask the participants to keep a picture diary. Using the notebook, they can draw pictures of themselves each month illustrating any new physical or emotional changes.

Activity 3: Letter to Sibling about Puberty

Explain to participants that they are to write a letter to an imaginary brother or sister about to enter puberty. In the letter, each participant should explain what he or she will go through and offer tips to better prepare for these changes.

Facilitator Note

For low-literate or younger participants, you can modify this activity—ask the participants to make up a poem, story, or song instead of writing a letter.

Content for Session 1

What is Puberty?

Puberty is a time when the bodies of boys and girls physically change—bodies grow bigger and taller, genitals mature, and hair often starts growing in new places on the body.

During puberty, a girl becomes physically able to become pregnant and a young boy becomes physically able to father a child.

Why is Puberty Happening?

New chemicals produced by the body—hormones—are developing in the body, creating changes in the body and turning young people into adults.

When Does Puberty Start and How Long Does it Last?

Puberty typically starts between ages eight to 13 in girls, and ages 10 to 15 in boys, although some young people start puberty a bit earlier or later. Each person is a little different, so everyone starts and goes through puberty at one's own pace.

During puberty, young people are experiencing a major growth change. It lasts for about two to five years. Some people grow four or more inches in one year! This growth during puberty will be the last time the body will grow taller. When the growth period is over, young people will be at their adult height.

How Do Our Bodies Change?

Boys' Size and Sexual Organs

Boys' shoulders will grow wider, and their bodies will become more muscular. Some body parts (especially hands and legs) may grow faster than others. Many boys have uncomfortable growing pains in their arms and legs as the bones grow faster than the muscles can stretch to keep up with them.

Some boys develop swelling underneath their nipples, which looks like the start of breasts. This is caused by the hormones that are pulsing through the body and will usually go away with time.

During puberty, boys will start to have erections and wet dreams. They will notice other changes as well, such as the lengthening and widening of the penis and the enlargement of the testicles.

Girls' Size and Sexual Organs

Girls' bodies usually become rounder and more womanly. They gain weight on their hips, and their breasts develop, starting with just a little swelling under the nipples. Sometimes one breast might develop more quickly than the other, but should even out over time.

Girls will notice an increase in body fat and occasional soreness under the nipples as the breasts start to enlarge—this is normal. Gaining some weight is part of developing into a woman, and it is unhealthy for girls to go on a diet to try to stop this normal weight gain.

About one to two years after girls' breasts start to develop, they usually experience their first menstrual period—one more thing that lets them know puberty is progressing. It means that the puberty hormones have been doing their job.

Girls might see and feel a white or clear liquid from the vagina. This does not necessarily mean anything is wrong; it is usually just another sign of their changing body and hormones.

Hair

One of the first signs of puberty is hair growing where it did not grow before. Hair will grow under arms and in the pubic areas (on and around the genitals). At first it is light and sparse. Then it becomes longer, thicker, heavier, and darker. Eventually, young men also start to grow hair on their faces and chests.

Skin

Acne (pimples or spots) often starts around the beginning of puberty and can remain all through adolescence (the teen years). It usually gets better or disappears by the end of adolescence. Young adults should wash their faces each day with soap and water to keep their skin clean.

Sweat

A new odor under arms and elsewhere on the body might develop. This is body odor, and everyone gets it. The puberty hormones affect glands in the skin, and the glands make chemicals that have a strong odor. Bathing or washing every day helps reduce this odor, as does deodorant.

Voice

Boys will notice that their voices may “crack” and eventually get deeper. Girls’ voices might get a little deeper, too. The cracking of boys’ voices will end as they mature.

Emotions

During puberty, young people might feel overly sensitive or become easily upset. Feeling anxious about how the changing body looks is one of the things young people are most sensitive about. Losing tempers more than usual and getting angry with friends or family members happen more easily. It is common to feel sad or depressed sometimes. Young people should talk to adults they trust about any feelings of anger, sadness, or depression they may have.

Sexual Feelings

During puberty, it is normal to become more aware of the opposite sex and to feel more sexual. In boys, the main sign of sexual feelings is an erection of the penis. In girls, it is wetness of the vagina. Sexual feelings can come from reading a romantic novel or thinking about another boy or girl. Having sexual feelings is normal and is nothing to feel guilty about. Acting on such feelings, however, is a big responsibility, and it is best to wait until one is older.

Session 2

Female and Male Fertility

Objectives

By the end of this session, the participants will:

1. Describe the menstrual cycle.
2. Describe sperm production.
3. Dispel three common myths about menstruation.
4. Dispel three common myths about erections, ejaculations, and wet dreams.



Materials Needed

- Flip chart or chalkboard
- Assorted feminine products that are commonly used in your country (pads, rags, tampons, etc.)
- One egg
- Empty bowl
- Six cups or glasses of water

Before You Begin

- Carefully read all of **Content for Session 2** (pages 44-54).
- Read each step of the session. Think about how you will perform each step and what you will add to every session.
- For each participant for Steps 3 and 6, make photocopies of the Female Reproductive System—Internal Genitalia handout (page 49), the Female Reproductive System—External Genitalia handout (page 51), and the Male Reproductive System handout (page 53). (If you cannot make a photocopy, draw them on the flip chart or chalkboard for everyone to see.)

- For Step 5, bring samples of products that women use when having their period (pads, rags, tampons, etc.). Bring what is used and available in your country.
- For Step 6, write down the role-plays on sheets of paper for each pair.
- For Step 4 and Step 6, crack the egg and place only the egg white in a bowl.



Time

Activity	Minutes
Step 1: What is Fertility?	10
Step 2: Fertility Myths and Facts	20
Step 3: Introduction to Female Fertility	20
Step 4: Signs of Fertility	10
Step 5: Products We Use during Menstruation	20
Step 6: Introduction to Male Fertility	20
Step 7: Talking about Our Fertility	30
Step 8: Take-Home Messages	20
TOTAL MINUTES	150

Step 1: What is Fertility?

**Large Group Discussion
(10 minutes)**

Pose the following questions to the participants:

- What does “fertility” mean?
- When does a woman become fertile?
- When does a man become fertile?

After you listen to their answers, tell the group that you are going to discuss these items in more detail in this session.

Facilitator Note

Encourage participants to say what they know about this topic even if it is wrong. This will give you an opportunity to gain a better understanding of what they know. Be certain that participants understand what fertility is. Stress that boys and girls are developing their fertility at approximately the same time.

Step 2: Fertility Myths and Facts**Large Group Game
(20 minutes)**

Explain that the group is going to play a game that will focus on signs of female and male fertility, specifically menstruation and wet dreams, and that this game will help them identify and correct myths (incorrect beliefs) around the topic.

Divide the group into two teams and place them on opposite sides of the room. Have each team choose a name.

Read one of the following statements to the first member of Team A. That person should consult with the rest of the team to determine whether the statement is a “myth” or “fact.”

Once the first player responds, say whether the answer is correct and mark the score on the flip chart or chalkboard. Award one point for each correct answer. If the answer is correct, ask the player to say why this is correct. If the answer is incorrect, provide the right response and briefly explain why.

Continue by reading another statement to the first member of Team B, then alternate teams until everyone has had a chance to respond. After you have read each of the myths and facts, ask the teams to come up with two things that they have heard about menstruation and wet dreams and share these. Have the opposite team state if it is a myth or fact, and

again, tell them if they are correct and why. Afterward, add up the score and announce the winning team.

Myth or Fact?

Statement	Myth or Fact
The blood coming from a woman during menstruation means that she is sick.	Myth
Cold drinks do not cause menstrual cramps.	Fact
Women are able to eat spicy or sour foods during menstruation.	Fact
If a woman misses her period, this could mean she is pregnant.	Fact
If men do not ejaculate, sperm will collect and make their penis or testicles burst.	Myth
It is perfectly safe for a woman to wash her hair or take a bath during her period.	Fact
Having menstrual blood means a woman is dirty.	Myth
When a boy or a man has a wet dream, it means he needs to have sex.	Myth
When a man has an erection, he must always ejaculate.	Myth
Most boys have wet dreams during puberty.	Fact
If a penis is touched a lot, it will become permanently larger.	Myth

Facilitator Note

You may also want to adapt or add the local myths in your community to the above list.

Close the activity by asking:

- How did you feel about this activity?
- What new facts did you learn?
- Do you think it is good to have these myths in society? How could society do better in helping people understand about menstruation and wet dreams?

Step 3: Introduction to Female Fertility

Large Group Discussion (20 minutes)

Ask the girls to volunteer what they have heard about menstruation from their sisters, mothers, aunts, other female friends and relatives, media, school, etc. After you have let them speak, confirm or correct their statements. Distribute the Female Reproductive System—Internal Genitalia handout to each person in the group. Explain the basis of menstruation using the Content for Session 2 as your guide. Be sure to cover the following sections from the Content for Session 2:

- **What is menstruation?** Use the Female Reproductive System—Internal Genitalia handout to explain each point. Have participants take turns reading the text aloud and ask them to point out the place in the picture mentioned in the text.
- **At what age do girls start menstruating?**
- **What is the sign that menstruation has started?**
- **What is the menstrual cycle?**
- **How much blood flow is there?**
- **What is the length of the menstrual cycle?**
- **How does the body feel during menstruation?**
- **What is ovulation?**
- **What are some of the things a woman may feel around the time of her period?**
- **What is menopause?**

Explain to participants that a woman's menstrual cycle happens in phases:

1. She has her period and bleeds.
2. There is no bleeding for a few days.
3. She may start to have secretions.
4. She ovulates.

5. She has no secretions.
6. She may start to experience bodily or emotional changes just before her next period.
7. The cycle starts all over again.

After discussing the menstrual cycle, distribute the Female Reproductive System—External Genitalia handout to each person in the group. Explain to participants the various parts of the external female anatomy.

Stress the Following

- Once a girl has started to menstruate (have her period), she is physically able to become pregnant.
- A girl can become pregnant before her first period if she has already become fertile.
- It is called the menstrual cycle because it repeats continuously, except during pregnancy, until menopause.
- The menstrual cycles start at puberty and ends at menopause.
- Having a period means that a girl is becoming a woman. Almost every woman in the world has her period. There is nothing to worry about.

Step 4: Signs of Fertility

Large Group Discussion (10 minutes)

Get the bowl with the egg white in it.

Tell the group that sometimes girls can see a whitish or clear fluid on their underpants or experience a feeling of wetness around their vagina. This fluid or wetness is called a “secretion.” Secretions do not happen every day—just some days of the menstrual cycle.

Tell the group that those secretions from the vagina help sperm travel through the uterus to meet the egg.

Explain that women are most aware of their secretions during ovulation—when women are most fertile—because the secretions have more water in them at this time. Women may have other kinds of secretions during the rest of their cycle, but these are less moist. Some women may have no secretions. It depends on the woman.

Take the egg white in the bowl and drip it from your fingers to show them what a secretion can look like. Tell the group that not all secretions are exactly like this—some are thicker or thinner.

Tell the girls that if they pay attention to their vaginal secretions, they can learn to recognize what is normal for them. If they see anything different from what they see normally, they should consult a health provider. For example, yellow or strong-smelling secretions are often a sign of infection.

Stress the Following

- Some women get heavy secretions; some get very light secretions or none at all.
- Having secretions does not mean that a woman's vagina is dirty. It just means that her body is going through its normal, constant menstrual cycle changes.
- If secretions suddenly change color or smell, this might mean that a woman has an infection, and she should see a health provider.
- Most women do not have secretions all the time—just on some days of the menstrual cycle.

Step 5: Products We Use during Menstruation

Small Group Activity (20 minutes)

Ask participants to form five or six small groups. If culturally appropriate, have boys and girls mixed together.

Give each group one of the products used during a woman's period and a cup or glass of water.

Allow participants to touch and play with the products. Ask the participants in each group to explain how the products are used and disposed of. Tell each group to place the products in water. Explain that the products absorb water like a sponge and this is what they do for blood during the menstrual period.

Encourage the boys to ask questions for the girls to answer.

Ask participants the following questions:

- Why use these products?
- How do they work?
- How often do they need to be changed?
- How should they be disposed of or cleaned?
- Where are they sold and how much do they cost?

Step 6: Introduction to Male Fertility

Large Group Discussion (20 minutes)

Get the bowl with the egg white in it again.

Ask the participants to volunteer what they have heard about erections, ejaculations, and wet dreams from their brothers, uncles, other male friends and relatives, media, school, etc. After you have let them speak, confirm or correct their statements. Be sure to cover the following sections from the Content for Session 2:

- **How are sperm produced?** Use the Male Reproductive System handout to go over this briefly. Have participants take turns reading the text aloud and ask them to point out the place on the picture mentioned in the text.
- **What is an erection?**
- **What is ejaculation?** (Pinch the egg white here between your fingers to show what this liquid looks like and point out that the color of ejaculate (semen) is often whiter and less clear than the egg white.) Explain to participants that semen is the fluid that leaves the man's penis when he ejaculates.
- **What are wet dreams?**

Stress the Following

- A boy cannot control when he will have an erection or wet dream.
- Erections and wet dreams are completely normal. It means a boy is becoming a man.
- Boys do not have to ejaculate each time they have an erection.
- Semen leaves the body during ejaculation.
- Ejaculation means a boy is physically able to get a girl pregnant.

Step 7: Talking about Our Fertility

Pair Exercise (30 minutes)

Divide the group into pairs. Assign the following role-plays to each pair. If there are too many pairs, more than one pair can do the same role-play. Ask each pair to act out the situation using the information they just learned. Encourage them to be creative and encourage girls to act out male roles or boys to act out female roles. Give participants five minutes to prepare each skit.

Role-play #1: One person plays the aunt; the other plays a 12-year-old girl. The girl is worried because she has not gotten her period yet, but her friends have. The aunt comforts the girl, letting her know that the first period starts as early as age nine or 10, but can also start a few years later.

Role-play #2: One person plays a 10-year-old girl; the other plays the older sister. The girl is frightened because she began her period and does not understand what it is. The older sister explains what menstruation is and why it is happening.

Role-play #3: One person plays the father; the other plays the 13-year-old son. The son is worried because he keeps waking up, and the bed is a little wet. He asks his father what is wrong with him. The father explains to him what wet dreams are and that they are normal.

Role-play #4: One person plays a 12-year-old girl; the other plays her mother or father. The girl has stained her clothes with menstrual blood at school and is too embarrassed to return to school because she thinks everyone saw her. The mother or father comforts her and tells her that every woman has an occasional spot on her clothes. The mother or father explains what to use to stop the blood in her panties.

Role-play #5: One person plays the older brother; the other plays a 12-year-old boy. The boy is worried because he ejaculated and now thinks his sperm is floating in the air and might get someone pregnant. The brother explains to him about wet dreams and ejaculation.

Step 8: Take-Home Messages

(20 minutes)

Close the session by stressing the following:

- Menstruation, erections, ejaculations, and wet dreams are entirely normal signs of puberty.
- Menstruation means that a girl is physically able to become pregnant.
- Ejaculation means that a boy is physically able to get a girl pregnant.

Stress the Following

Encourage participants to ask questions, but let the group know that they will have a private session to talk about these things with a facilitator of their own sex (Session 4).

Thank them for being an enthusiastic group. Tell them that it is hard to talk about one's body sometimes and that you are proud of them for participating and sharing with each other.

Extra Activities

The following are optional activities you may do with the group.

Activity 1: Tracking Our Fertility (For Girls)

This exercise is most appropriate for 12- to 14-year-old girls who are more likely to have started menstruating. The activity calls for girls to keep a private daily calendar of their menstrual cycles and secretions. For those girls who have not begun their periods, they can ask their mothers or older sisters to do this activity with them. Because this is a private and confidential activity, a girl who has not started her period should not feel embarrassed or left out, since no one else will know this information. The final product will include a calendar that the girls can use to understand their bodies better (and thus predict their behavior) and an essay describing the process of keeping the calendar.



Materials

- Blank notebooks or blank one-year calendars
- Coloring pencils or crayons

Explain to participants that the activity will proceed over several months. To avoid misunderstandings at home, consider informing parents or caregivers about this activity before you assign it to them.

The single most important fact to share with the participants about the calendars is that they will remain *confidential*. Neither you nor fellow participants should at any time have access to anyone else's calendar.

1. Present each girl with a calendar for the year. If buying calendars for everyone is not affordable, have them make their own in a notebook. They can put each month on a different page of the notebook like the following:

January

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

2. Tell the girls that for each month, they are to mark the day that their period starts with a *large* “**X**” and then mark every day that there is bleeding with a *small* “**x**.” They should also mark those days on which they observe secretions with a *small* “**o**.” Below is a sample calendar.

Sample Menstrual Cycle Calendar January

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10 X	11 x	12 x
13 x	14 x	15	16	17	18	19 o
20 o	21 o	22 o	23 o	24 o	25 o	26
27	28	29	30	31		

3. As the months progress, remind participants that you are expecting them to mark their calendars each month.
4. Ask the girls to calculate the length of their cycle each month. This means counting the number of days between the first day of their period to the day before they get their next period. Ask them to observe the number of days in their short cycles and in their long cycles—and then ask them what they think the typical pattern might be. Ask them to

add up each cycle length and divide by the number of cycles to get the average length of their cycles for the year. The following is a sample calculation based on nine cycles:

Cycle 1	26
Cycle 2	28
Cycle 3	33
Cycle 4	31
Cycle 5	33
Cycle 6	28
Cycle 7	29
Cycle 8	29
<u>Cycle 9</u>	<u>28</u>
Average	29

Stress that many girls have irregular periods when they first begin menstruating, and if they miss a month, it does not necessarily mean there is a problem.

5. Toward the end of the year, tell participants more about the personal essay that you expect from each of them about the process of keeping the calendar. Go over what the personal essay should contain. Explain that the essay should answer the following questions:
 - What did you think of keeping the calendar—positives and negatives?
 - Were you surprised at how regularly or irregularly your body acted?
 - What did you learn about your body that you did not know before?
 - How did you feel during menstruation physically and emotionally?

Content for Session 2

What Is Menstruation?

Menstruation is the normal, healthy shedding of blood and tissue from the uterus. It is also called a woman's "period." It usually lasts between three and seven days. Menstruation happens for most women about once a month. It is a sign that a woman can possibly become pregnant if she has sexual intercourse. Women stop menstruating during pregnancy but then start again after they have the baby.

At What Age Does a Girl Start Menstruating?

Just as some girls begin puberty earlier or later than others, the same applies to periods. Some girls may begin to menstruate as early as age nine or 10, but others may not get their first period until a few years later.

What Is the Sign That Menstruation Has Started?

A woman knows that she has started her period when a little blood comes out of her vagina. The blood does not pour like water from a tap. It comes out slowly. Usually by the time she has noticed a feeling of unusual wetness, her panties have absorbed any blood that has come out. This is why it is important to anticipate approximately when each month she will start bleeding, so she can wear a sanitary napkin or other protection to prevent the blood from staining her clothing.

How Much Flow Is There?

The menstrual flow—meaning how much blood comes out of the vagina—can vary widely from person to person. Usually, an entire period consists of a few to several spoonfuls of blood—how much depends on the individual. The blood often starts off as a rusty color and then gets redder. It lightens to a rust color again until it stops. The amount of blood can also vary from day to day.

What Is the Menstrual Cycle?

The menstrual cycle is the period of time beginning on the first day of a woman's period until the day before she begins her

next menstrual period. Since this happens regularly, it is called a “cycle.”

What Is the Length of the Menstrual Cycle?

The length of the menstrual cycle (the time between one period and the next) varies for each woman. For some, the cycle is as short as 21 (or even fewer) days. For others, it is as long as 35 days or more. Irregular periods are common in girls who are just beginning to menstruate. It may take the body a while to adjust to all the changes taking place. For example, a woman may have the same length cycle for two months, then miss a month, or have two periods with fewer days in between them. Her menstrual cycle will probably become more regular, although she may continue to have irregular periods into adulthood. Sometimes she might have some spotting of blood for a day or two in the middle of her cycle. This is usually nothing to worry about.

When Is a Woman or Man Fertile?

A woman is fertile when she has the ability to become pregnant. A woman is fertile only certain days of each menstrual cycle—these are the days when she can become pregnant. A woman is fertile for a few days each cycle from her first menstruation until menopause.

Beginning with his first ejaculation, a man is fertile every day and has the ability to father a child for the rest of his life.

What Is Ovulation?

Ovulation is the periodic release of a mature egg from the ovary. This usually happens around the middle of a woman’s menstrual cycle.

What Is Menopause?

Menopause is the stage at which a woman’s menstruation ends. It ends because the hormones that cause eggs to mature in her ovaries stop. Menopause usually occurs when women are in their late forties or early fifties. But, menopause can take place earlier or later than this. Some women may stop menstruating by the time they are 35, and some not until their late fifties.

How Does the Body Feel during Menstruation?

Sometimes a woman may experience physical or emotional changes around the time of her period. Not everyone has these feelings—some women do not feel anything. A woman may experience:

Physical symptoms: cramps, pain, bloating, weight gain, food cravings, swollen or painful breasts, swollen hands or feet, skin problems, headaches, dizziness, or irritability.

Emotional symptoms: short temper, aggression, anger, anxiety or panic, confusion, lack of concentration, nervous tension, fatigue, or depression.

These changes are sometimes referred to as premenstrual syndrome (PMS). PMS is related to changes in the body's hormones. As hormone levels rise and fall during a woman's menstrual cycle, they can affect the way she feels, both physically and emotionally.

She may find that taking pain relievers, hot water compresses, herbal teas, or other local remedies can give her relief from menstrual symptoms. If these do not help, she should visit a health provider and discuss the matter.

What Are Secretions?

Girls can sometimes see secretions on their underpants or experience a feeling of wetness. These secretions are a whitish liquid. Girls often get secretions around the time of ovulation, when the body is ready to receive and nurture a fertilized egg. Secretions help sperm travel through the uterus to meet the egg for fertilization, so when a girl has secretions, she knows that this is the time when she is fertile.

Paying attention to vaginal secretions helps girls understand their bodies. Knowing what is normal for the body helps girls recognize things that are not normal. For example, yellow or strong-smelling secretions are not normal. These kinds of secretions are often a sign of infection, and she should visit a health provider.

What Products Do Girls Use during Menstruation?

Clean rags: These are cut to fit in the panty area by sewing several layers of cotton rags on top of each other. These must be clean. They must be washed thoroughly and hung in a private but sunny place to dry. They should not be shared with others.

Toilet tissue: One can use toilet tissue by making a thick, long wad of toilet tissue. Sometimes toilet tissue is too rough, however, and it can cause irritation and soreness to the skin. It also may not be sufficient to absorb the quantity of blood.

Pads or sanitary napkins: These are designed to fit the panty area close to the body. They have strips of tape that keep them attached to the panties, and the panties help to hold the pads close to the opening of the vagina. Pads have a plastic lining to minimize the spill of blood. If a woman uses pads, she needs to throw them down a pit latrine, bury them, or burn them after use. They should not be left in the garbage pile or flushed down the toilet, as they will cause blockage.

Tampons: These are small, compressed cotton objects, formed into solid, tube-like shapes, that are pushed up into the vagina during menstruation. The cotton softens as it absorbs the blood that comes into the vagina from the uterus. Attached to the tampon is a strong, soft cotton thread, which hangs out of the vagina. Pulling this thread removes the tampon.

A girl must always wash her hands before and after inserting a tampon. A tampon also needs to be changed frequently, because it could cause infection if left in the vagina. One should never leave a tampon in for more than eight hours.

Whatever a girl uses (rags, toilet tissue, pads, or tampons), she should change it frequently to avoid staining and odor. When menstrual blood comes in contact with air, it can develop a stale odor.

Pads and tampons cost more than toilet paper and rags, but all work equally well. A girl can usually ask her sister, mother, or other close female relative what she uses.

A girl might be worried that her friends might see her carrying such products with her. She should know that placing these in a simple plastic bag in her purse, school bag, or backpack usually prevents any embarrassment.

If a girl's panties or clothes get stained with blood, she can soak them in cool, mildly salty water. Hot water will cause the blood to set and remain as a permanent stain.

What Is an Erection?

An erection occurs when the penis fills with blood and becomes hard and straight. Erections happen sometimes as boys fantasize and think about sexual things, or sometimes for no reason at all. Boys do not have any control over when this will happen. It is very common for boys to wake up with an erection

in the morning. While asleep at night, a boy's penis will probably become erect and then go down about five to seven times. This is completely normal and healthy. Having erections is *not* a sign that a boy needs to have sex.

When the penis is erect, a boy will find that he cannot urinate easily because a muscle closes off the bladder. He will have to wait until the erection goes down before he can urinate.

What Is Ejaculation?

Ejaculation is when semen comes out of a boy's or man's erect penis due to sexual excitement. A man does not have to ejaculate every time he has an erection. If he waits, the erection will go down on its own without causing any harm.

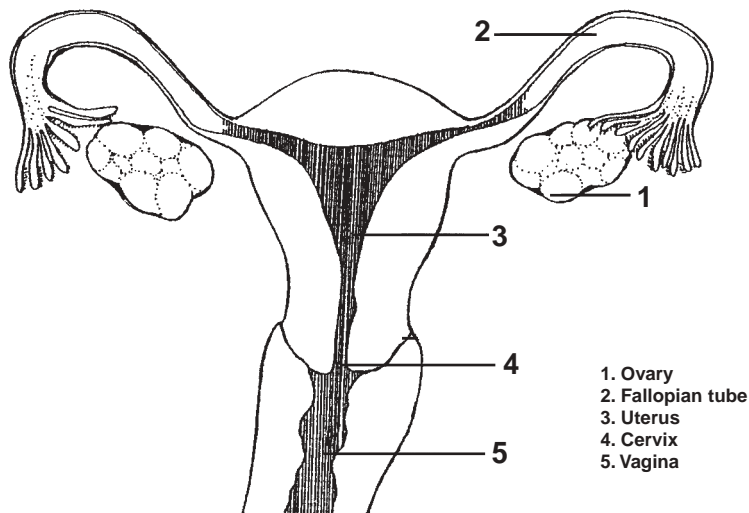
When a boy begins puberty, the ejaculated semen tends to be slightly clear or slightly yellow. As the boy grows into a man, he begins making a larger amount of mature sperm, and his ejaculation will probably become more whitish. Boys are not born with sperm; they begin to produce them during puberty. A boy begins to produce sperm and continues to produce them through his entire life. If the sperm is ejaculated into the woman's vagina, she may become pregnant. The ejaculate can also carry diseases that could infect a woman.

What Is a Wet Dream?

A wet dream (or nocturnal emission) is when a boy's penis becomes erect, and he ejaculates while sleeping. This causes the boy's underwear or the bed to be a little wet when he wakes up.

If a boy does not know about wet dreams, he could be worried or confused. Wet dreams are completely natural and normal. A boy cannot stop himself from having wet dreams.

Handout: Female Reproductive System—Internal Genitalia



Session 2

Every female is born with thousands of eggs in her **ovaries**. The eggs are so small that they cannot be seen by the naked eye. Once a girl has reached puberty, a tiny egg matures in one of her ovaries and then travels down a **fallopian tube** on its way to the **uterus**. This release of the egg from the ovary is called **ovulation**. The uterus prepares for the egg's arrival by developing a thick and soft lining like a pillow. If the girl has had sex in the last few days before she ovulates, by the time the egg arrives in the fallopian tube, there might be some sperm waiting to unite with the egg. If the arriving egg is united with the sperm (called **fertilization**), the egg travels to the uterus, and attaches to the lining of the uterus and remains there for the next nine months, growing into a baby. If the egg is not fertilized, then the uterus does not need the thick lining it has made to protect the egg. It throws away the lining, along with some blood, body fluids, and the unfertilized egg. All of this flows through the **cervix** and then out of the **vagina**. This flow of blood is called the "period" or **menstruation**.

Key Words

Cervix: Lower portion of the uterus, which extends into the vagina.

Fallopian tubes: Tubes that carry the egg from the ovaries to the uterus.

Fertilization: Union of the egg with the sperm.

Menstruation: The monthly discharge of blood and tissue from the lining of the uterus.

Ovaries: Two glands that contain thousands of immature eggs.

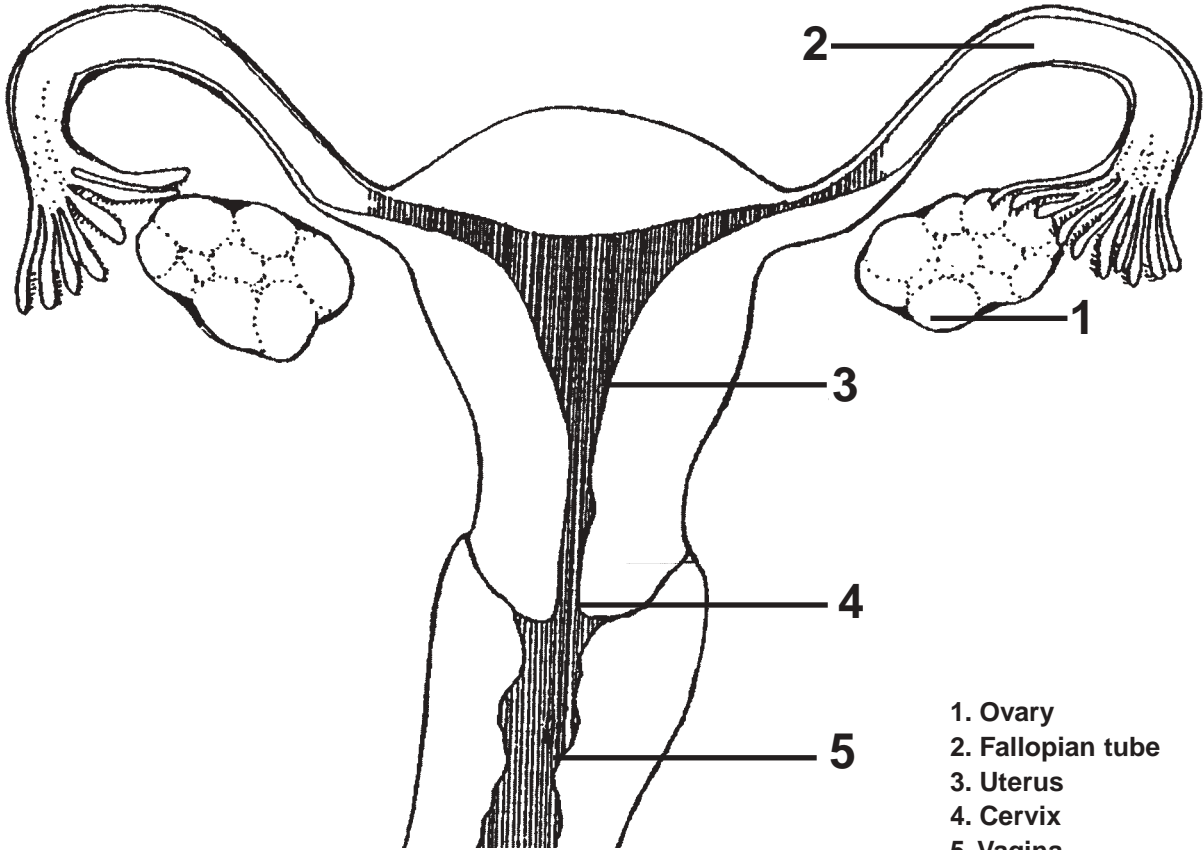
Ovulation: The periodic release of a mature egg from an ovary.

Secretion: The process by which glands release certain materials into the bloodstream or outside the body.

Uterus: Small, hollow, muscular female organ where the fetus is held and nourished from the time of implantation until birth.

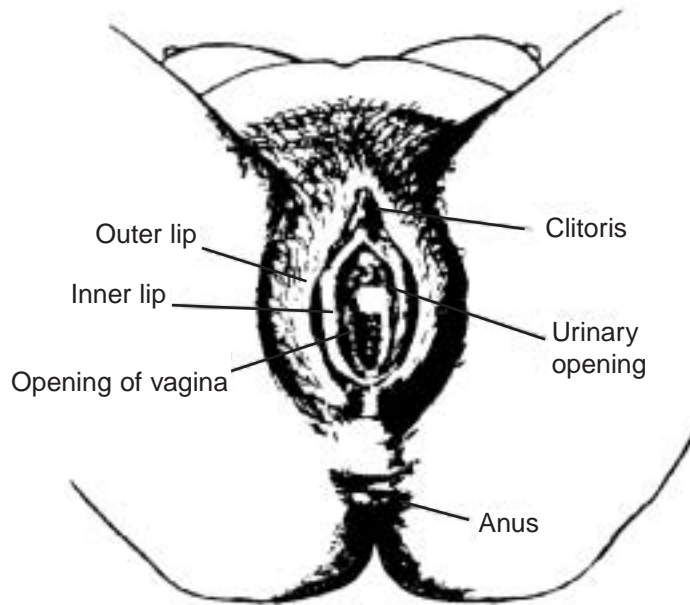
Vagina: Canal that forms the passageway from the uterus to the outside of the body.

Female Reproductive System—Internal Genitalia



- 1. Ovary
- 2. Fallopian tube
- 3. Uterus
- 4. Cervix
- 5. Vagina

Handout: Female Reproductive System—External Genitalia



Session 2

The external genitalia includes two sets of rounded folds of skin: the **labia majora** (or **outer lips**) and the **labia minora** (or **inner lips**). The labia cover and protect the vaginal opening. The inner and outer lips come together in the pubic area. Near the top of the lips, inside the folds, is a small cylindrical body called the **clitoris**. The clitoris is made up of the same type of tissue as the head of the male's penis and is very sensitive. The **urethra** is a short tube that carries urine from the bladder to the outside of the body. Urine leaves a woman's body through the **urethral** or **urinary opening**. The **vaginal opening** is the place from which a woman menstruates. Both the urethral opening and vaginal opening form the area known as the **vestibule**. Altogether, the external genital organs of the female are called the **vulva**.

Key Words

Clitoris: Small organ at the upper part of the labia, which is sensitive to stimulation.

Labia majora (outer lips): Two folds of skin (one on either side of the vaginal opening) that cover and protect the genital structures, including the vestibule.

Labia minora (inner lips): Two folds of skin between the labia majora that extend from the clitoris on each side of the urethral and vaginal openings.

Urethra: Short tube that carries urine from the bladder (the place where urine is collected in the body) to the outside of the body.

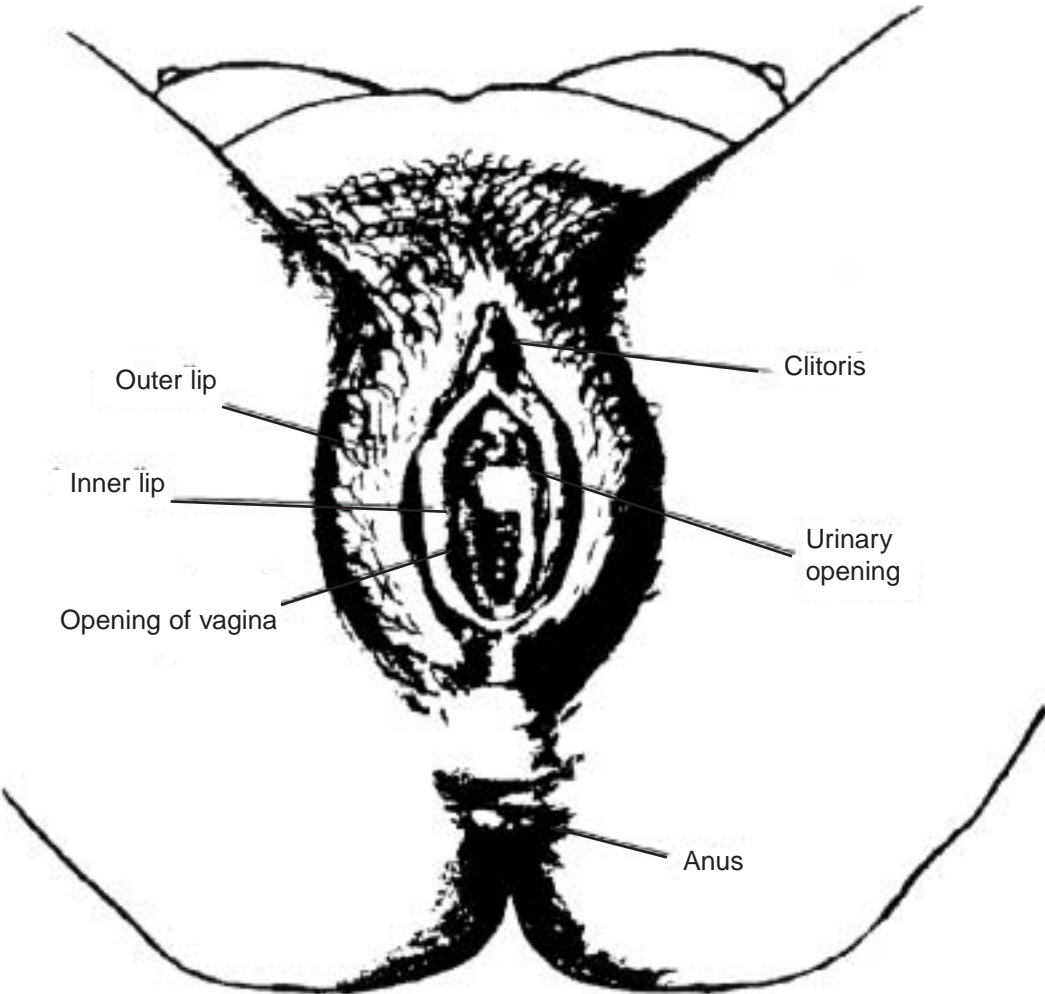
Urethral (urinary) opening: Spot from which a woman urinates.

Vaginal opening: Opening from the vagina where menstrual blood leaves the body.

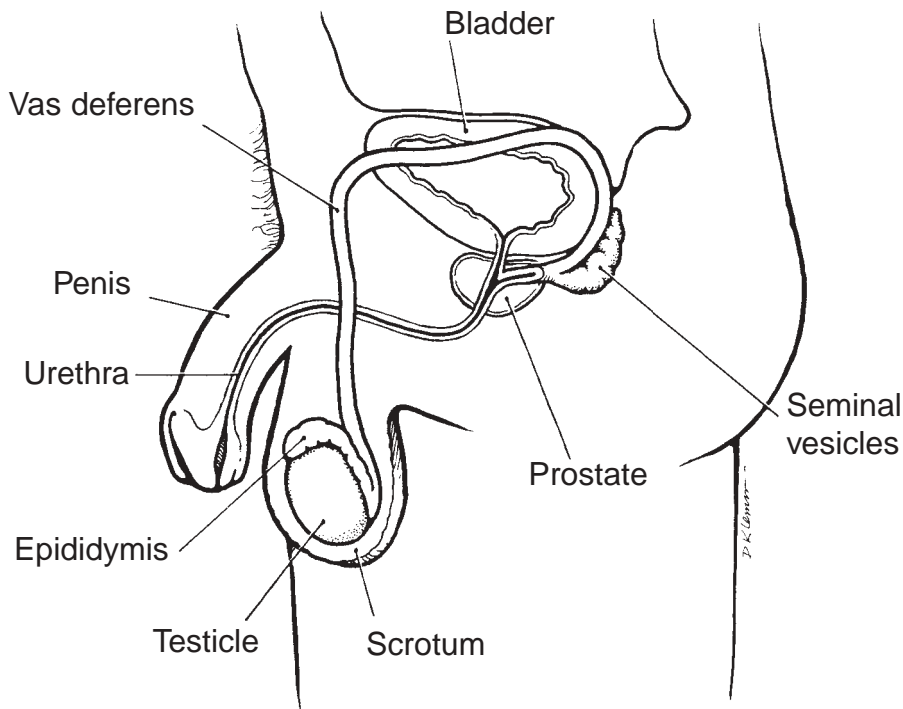
Vestibule: Area of the external female genitalia that includes the vaginal and urethral opening.

Vulva: The external genital organs of the female, including the labia majora, labia minora, clitoris, and vestibule.

Female Reproductive System—External Genitalia



Handout: Male Reproductive System



Session 2

From puberty on, **sperm** are continuously produced in the **testicles** (or **testes**), which are found inside the **scrotum**. As the sperm mature, they move into the **epididymis**, where they remain to mature for about two weeks. The sperm then leave the epididymis and enter the **vas deferens**. These tubes pass through the **seminal vesicles** and the **prostate gland**, which releases fluids that mix with the sperm to make **semen**. During **ejaculation**, the semen travels through the **penis** and out of the body by way of the **urethra**, the same tube that carries urine. The **urethral** or **urinary opening** is the spot from which a man urinates or ejaculates.

Key Words

Ejaculation: Forceful release of seminal fluid from the penis.

Epididymis: Organ where sperm mature after they are produced in the testicles.

Penis: External male organ through which semen or urine leave the body.

Prostate gland: Gland that produces a thin, milky fluid that enables the sperm to swim and become part of the semen.

Scrotum: Pouch of skin behind the penis that holds the testicles.

Semen: Fluid that leaves a man's penis when he ejaculates.

Seminal vesicles: Small glands that produce a thick, sticky fluid that provides energy for sperm.

Sperm: A male sex cell.

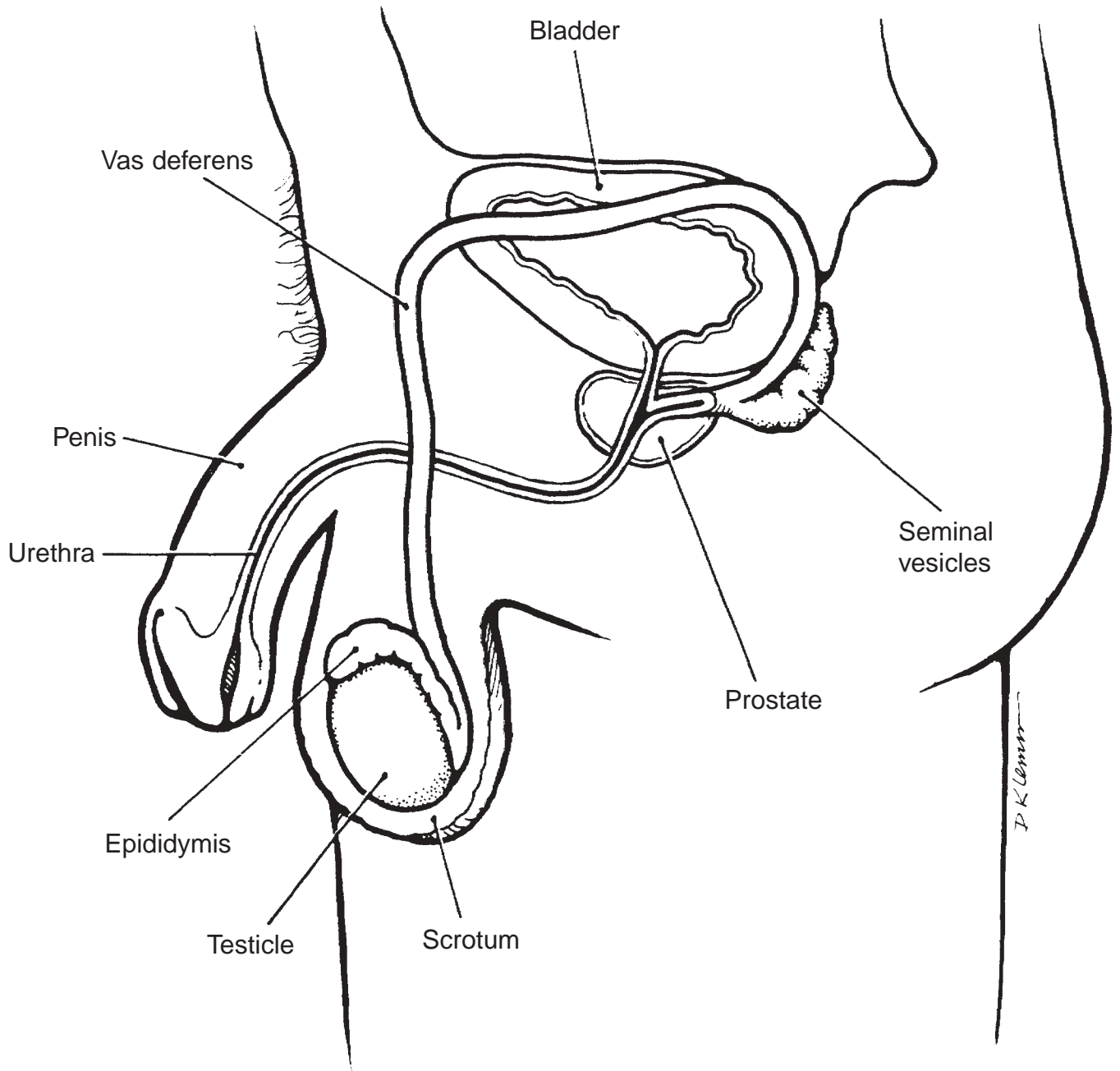
Testicles (testes): Male reproductive glands, which produce sperm.

Urethra: Canal that carries urine from the bladder (the place where urine is collected in the body) to the urinary opening. In males, the urethra also carries semen.

Urethral (urinary) opening: Spot from which a man urinates.

Vas deferens: Long, thin tubes that transport sperm away from the epididymis.

Male Reproductive System



Session 3

Combining Female and Male Fertility: Fertilization

Objectives

By the end of this session, the participants will:

1. Describe three things that must occur for a girl or woman to get pregnant.
2. Define fertilization and pregnancy.
3. Understand the importance of recognizing signs of fertility.



Materials Needed

- Scissors
- Tape
- Flash Cards

There are two options: 1) to make a fertility awareness necklace; or 2) to draw a paper copy of the fertility awareness necklace if beads are not readily available.

1) Materials to Make a Fertility Awareness Necklace:
For each participant and yourself, provide: A copy of the How to Make the Fertility Awareness Necklace with Beads handout (page 90), a copy of the How to Use the Necklace as a Way to Track the Menstrual Cycle handout (page 93), one plastic bag or small container, 1 red bead, 19 dark beads, 12 white or light beads, and 30-60 centimeters of string (depends on the size of the beads). All beads should be approximately the same size. The beads should be made of material that can be marked on with a pencil or other marker.

Facilitator Note

The beads might be difficult to find in your setting. If this is the case, you have the option of drawing a paper copy of the necklace.

2) Materials to Draw the Fertility Awareness Necklace:
For each participant and yourself, provide: A copy of the How to Draw a Paper Version of the Fertility Awareness Necklace handout (page 91), a copy of the How to Use the Necklace as a Way to Track the Menstrual Cycle handout (page 93), and coloring pencils or crayons in red, a dark color (such as brown), and a light color (such as yellow).

Session 3

Before You Begin

- Carefully read all of **Content for Session 2** (pages 44-54) and **Session 3** (pages 80-95).
- Read each step of the session. Think about how you will perform each step and what you will add to every session.
- For Step 1, prepare 31 flash cards (one for each day) like the Menstrual Cycle Review Flash Cards handout (pages 82-89). You can cut out the cards from the page or make your own using these as a guide.

For Making the Bead Necklace:

- Divide the beads into sets, being sure that each participant has 1 red bead, 19 dark beads, and 12 light or white beads. Each participant also should have a piece of string 30-60 centimeters long. Place each set of beads and string in plastic bags or small containers.
- Prepare photocopies of How to Make the Fertility Awareness Necklace with Beads handout (page 90) and How to Use the Necklace as a Way to Track the Menstrual Cycle handout (page 93) for each participant.
- Make one necklace for yourself.

For Making the Paper Necklace:

- Provide participants with the How to Draw a Paper Version of the Fertility Awareness Necklace handout (page 91) and How to Use the Necklace as a Way to Track the Menstrual Cycle handout (page 93), as well as coloring pencils or crayons. You will need coloring pencils for each participant as described on the previous page.



Time

Activity	Minutes
Step 1: Menstrual Cycle Review Using Flash Cards	20
Step 2: How Does a Woman Get Pregnant?	15
Step 3: Make Your Own Necklace	45
Step 4: Question and Answer Using the Necklace	25
Step 5: Take-Home Messages	20
TOTAL MINUTES	125

Step 1: Menstrual Cycle Review Using Flash Cards

Large Group Discussion (20 minutes)

Take the flash cards you have prepared for this step. Give each participant a flash card with a number (and picture) on it. If there are not enough people, have some people take more than one card. Have each person tape the flash cards to his or her chest. Ask all participants to form a circle in the order of the numbers on their cards.

Tell the group that they will pretend to be a menstrual cycle that lasts 31 days for a woman named Sarah. Stress again that not all cycles last 31 days; some are shorter and some are longer, but they are just going to look at Sarah's cycle, which usually lasts 31 days.

Ask each participant to look at his or her flash card(s). Ask each participant to say what is happening on his or her card(s). Once they describe the picture, ask them to state why they think this is happening. Pose the following questions to each participant. The answers are in parentheses:

- What is happening to Sarah on Days 1 through 6? (*She is having her period.*)
- What is happening to Sarah on Days 11 through 17? (*She may be having secretions, and she may feel wetness. With each passing day, it is more likely that she will have secretions.*)
- What is the purpose of secretions? (*They protect and nourish sperm and aid them to travel toward the egg.*)
- What is happening to Sarah on Day 15? (*She is ovulating.*)
- What is happening to Sarah in her vaginal area on Days 30 through 31? (*She has no secretions.*)
- What is happening to the rest of Sarah's body on Days 30 through 31? (*She may have a backache, headache, skin problems, bloating, food cravings, etc.*)
- What is happening on what would have been Day 32? (*She starts her period again. This is the beginning of her next cycle.*)

Emphasize again to the participants that a woman's menstrual cycle happens in phases

1. She has her period and bleeds.
2. There is no bleeding for a few days.
3. She may start to have secretions.
4. She ovulates.
5. She has no secretions.

6. She may start to experience bodily or emotional changes just before her next period.
7. The cycle starts all over again.

Step 2: How Does a Woman Get Pregnant?

Large Group Discussion (15 minutes)

Tell the group that now that they know about female and male fertility, they are going to talk about what happens when female and male fertility are combined.

Ask participants to volunteer common stories of how babies are made. Common ones include:

- Babies drop from heaven.
- Babies come from the airplane.
- Babies come out of the nurse's or doctor's bag.

Next, ask a participant to volunteer to stand up and demonstrate the real way in which a baby is conceived using their hands as props (demonstrate this yourself).

To reinforce the point, show participants how to create puppets with their hands to show fertilization. They should:

- Hold up their right hand and wave it back and forward like a worm to represent the sperm.
- Hold up their left hand like a fist to represent the egg.

Repeat the following sentence:

I was conceived when my parents had sexual intercourse and the sperm from my father (wave the right hand like a worm or sperm) and the egg from my mother (fist the left hand) came together (join your hands) and created me.

Have participants repeat this a few times. Make it fun.

Draw an egg and sperm on the flip chart or chalkboard.

Emphasize that there are three things that must happen for a pregnancy to occur: 1) an egg must be present in one of the woman's fallopian tubes; 2) sperm from the male must join the egg to fertilize it; and 3) the fertilized egg must attach itself to the lining of the woman's uterus.

Point out that everyone in the room was conceived through the act of sexual intercourse.

Ask participants:

- What is sex or sexual intercourse?

This is just to open up discussion. Encourage them to offer what they know about the process and let them know that they will study this further during the session.

Stress the Following

- The time when the union between the egg and the sperm occurs is called *fertilization*.
- Sperm enters a woman's vagina through *sexual intercourse* with a man.
- The egg must be released from the ovary and be present in the fallopian tube. The egg is usually released around the middle of her menstrual cycle, but one cannot predict exactly what day this will be. A woman's egg only survives in the fallopian tube for 24 hours after it is released from her ovaries, while the sperm can survive up to six days.

Step 3: Make Your Own Necklace

Self-Exercise (45 minutes)

There are two possible versions for this exercise. In the first version, participants will make a fertility awareness necklace using beads and string. If you do not have materials for making a necklace, you should use the second version in which participants draw a necklace on a handout.

To Make the Necklace Using Beads:

Distribute the How to Make the Fertility Awareness Necklace with Beads handout as well as one set of necklace materials to each participant.

Go over the directions for making the necklace. Let them know that they will use this later to learn more about fertility.

Ask each person to make a necklace using the handout as a guide.

To Draw the Necklace:

Distribute the How to Draw a Paper Version of the Fertility Awareness Necklace handout as well as coloring pencils or crayons.

Go over the directions for drawing the necklace. Let them know that they will use this later to learn more about fertility.

Ask each person to draw a necklace using the handout as a guide.

Facilitator Note

If you are unable to copy the handout for drawing the necklace, you can have the participants draw the necklace on a blank sheet of paper using coloring pencils or crayons.

Step 4: Question and Answer Using the Necklace

Large Group Discussion (25 minutes)

Distribute the How to Use the Necklace as a Way to Track the Menstrual Cycle handout. Ask each participant to take turns reading the handout.

Using either your bead or paper necklace as an example, state the following:

- Look at the red bead (*show the group the red bead*).

This represents Day 1 of the menstrual cycle, the day on which bleeding begins.

- After the red bead, there are six dark beads (*show the group*). A woman has her period during some or all of these days. During this time, a woman's body is not yet ready to receive a fertilized egg. These days are infertile days, when a woman cannot get pregnant even if she has sexual intercourse.
- After these dark beads, there are 12 white or light beads (*show the group*), which are the fertile days. These are the days when a woman can get pregnant if she has sex. You will notice that there are 12 white or light beads in this necklace even though a woman can usually become pregnant for only five to six days each cycle. A woman is fertile for only 24 hours, but because sperm can stay alive for up to six days in the fallopian tube and wait to fertilize the egg, a woman can become pregnant for up to six days. We use 12 beads because we do not know exactly which days these are. These 12 beads represent the approximate time of fertility.
- After these white or light beads, there are 13 more dark beads (*show the group*). These are the days that are infertile days.
- Some women use this necklace to help them keep track of their menstrual cycle and identify the days on which they may be fertile. It will also help them know when to expect their period.

Pose the following questions to the group to confirm comprehension. Ask them to demonstrate on their necklaces while giving their answers:

- Mary has her period today; on what bead should she make a mark? (*Red bead.*)
- If she makes a mark on the next bead every day, on what color bead would she make a mark in six days? (*Dark bead.*) In twelve days? (*White or light bead.*)

- Mary would like to get pregnant. What color beads represent the days when she is fertile (could get pregnant if she has sexual intercourse)? (*White beads.*)
- Mary does not want to get pregnant. What color beads represent the days when she is infertile (could not get pregnant if she has sexual intercourse)? (*Dark beads.*)
- What should Mary do when she gets her period again? (*She should erase all the marks on the beads and make a mark on the red bead again. Or, she should draw another necklace and make a mark on the red bead.*)

Facilitator Note

Women with regular menstrual cycles and supportive partners can use a necklace called CycleBeads™ as a family planning method. However, in order to do this, additional screening and counseling is needed to ensure the method will meet their needs and is used correctly.

Step 5: Take-Home Messages (20 minutes)

Close the session by stressing the following:

- The union of a sperm and an egg is called fertilization.
- A woman can only get pregnant on certain days of the month. These are called *fertile days*. On other days, she cannot get pregnant. These are *infertile days*.

Every time a woman has sexual intercourse during her fertile days, she has a chance of becoming pregnant.

A woman is capable of getting pregnant as long as she continues to have her menstrual cycle. When she reaches menopause, she stops menstruating and thus cannot get pregnant.

Even though a girl who has started to menstruate is physically capable of getting pregnant, it is best that she wait to have sex until she is physically and mentally prepared for sex and having a baby.

A male who has reached puberty can get a woman pregnant for the rest of his life. He is fertile every day.

Stress the Following

Thank them for being an enthusiastic group. Tell them that it is hard to talk about one's body sometimes, and that you are proud of them for participating and sharing with each other.

Session 3

Possible Questions and Answers

Fertilization and Pregnancy

Q. Why are there some women who cannot get pregnant?

A. Infertility—or not being able to get pregnant—may be caused by: hormonal problems in the man, woman, or both; blocked fallopian tubes; low sperm count in the man; or older age. Sometimes doctors cannot determine the cause of permanent infertility.

Q. Can a girl get pregnant during her period?

A. Yes, it is possible although not common. It depends on the length of her cycle, how many days her period lasts, and when she has sexual intercourse, because the sperm can stay alive up to six days in the body.

Q. Can a girl become pregnant before she has her first period?

A. Before a girl's first period, her ovaries release the first egg during ovulation. She can become pregnant if she has intercourse around the time of her first ovulation, before she has her first menstrual period.

Q. From what age can a girl get pregnant?

A. When a girl starts having menstrual periods it means that her reproductive organs have begun working and that she can become pregnant if she has sexual intercourse. It does not mean she is ready to have a baby, only that she is physically capable of getting pregnant.

Q. Can a girl become pregnant even if she does not have sexual intercourse?

A. There is no evidence to prove that if a boy's penis goes near a girl's vagina and he ejaculates that she will get pregnant. However, if there is contact between a boy's penis and a girl's outer genitalia, sometimes it is possible to get a sexually transmitted infection.

Q. What causes a woman to have twins?

A. The explanation depends on whether the twins are fraternal or identical. Fraternal twins may resemble each other, but are not "identical." They may be of either the same or different sexes. They occur when two eggs are in the fallopian tubes at the same time and are fertilized by two separate sperm cells. Identical twins, always of the same sex and same appearance, occur after fertilization when a single developing egg divides in two.

Q. What determines whether the baby is a boy or a girl?

A. When a human egg is fertilized with sperm, the sex of the baby is determined immediately. Sperm contain agents called "chromosomes." There are two types of chromosomes—either an X or a Y. If the sperm contains a Y chromosome, the child will be male; if it contains only an X chromosome, the child will be female. The man's sperm determines whether the baby is a boy or a girl.

Q. What are the things I should think about before getting pregnant?

A. Having a baby is a very serious issue to consider. A young mother-to-be would have to ask herself the following questions:

- **Am I emotionally ready?** A child needs attention 24 hours a day, seven days a week. It takes a lot of patience and attention.
- **Am I financially ready?** A young mother or couple would have to find a source of money to pay for the baby's daily needs—food, medicine, clothes, childcare—as well as the mother's own needs.
- **Am I willing to compromise my education?** It is very difficult to raise a baby while going to school. Many young girls find that they have to drop out of school and ultimately give up their plans for the future after having a baby.
- **Will the father of the baby support me?** It is very difficult to raise a child without a father. Single mothers often struggle to support themselves and their children financially and emotionally, and many young women are forced to depend on their parents or others for such assistance.
- **Do your parents or caregivers want you to have a child? Will they help you?** If a young mother tries to stay in school or needs to work, she will need help in taking care of the baby.
- **What do my culture and religion say about a young unmarried woman having a baby?** In many cultures, young unmarried women who have babies are disapproved of and may even be discriminated against.

Sex

Q. Does sex hurt for a woman?

A. Some women do not experience pain the first time they have intercourse and others do. Everyone is different.

Q. Does a woman always bleed when she has sex for the first time?

A. No. Some women bleed when they have sex for the first time; others do not. Absence of bleeding the first time one has sexual intercourse is not a sign that one was not a virgin.

Q. What happens to semen after it has been ejaculated into a woman's vagina?

A. Semen, if ejaculated into the vagina, could travel into the uterus, seep out, eventually dry up, or all three. Semen that remains in the body will carry sperm that can survive in the body for up to six days. When semen evaporates in the open air, the sperm it contains die.

Q. Does a girl lose her virginity if she sticks her finger in her vagina?

A. No. Most people agree that women and men lose their virginity the first time they have sexual intercourse.

Q. What is an orgasm?

A. When a man has an orgasm, his penis gets larger and hard, and semen comes out. Then his penis gets smaller and soft again. The orgasm takes about five to 20 seconds. When a woman has a vaginal orgasm, her vagina squeezes together. It lasts about the same time as a man's orgasm, but can last longer. A woman can also have an orgasm when her clitoris is stimulated, either through masturbation or during sexual intercourse. A woman can get pregnant even if she does not have an orgasm.

Q. Do people ever have sex any way except for the man's penis to be inserted in the woman's vagina?

A. People express their sexual feelings in many different ways. It depends on their own feelings and the way they, their culture, and partners feel about sex.

Q. When is a good age to have sex?

A. Having sex for the first time can be an important emotional event. There are many questions that should be considered before actually doing it:

- Am I really ready to have sex?
- How will I feel about myself after I have sex?
- How will I feel about my partner afterward?
- Am I having sex for the right reasons?
- How will my parents and friends feel about me having sex?
- What do my religion and culture say about sex and sex before marriage?
- How will I protect myself against unintended pregnancy or infection?
- If I have sex, will I have to lie about it later?
- Will I feel guilty?

Q. Can a man get a woman pregnant if he removes his penis from her vagina before he ejaculates?

A. Yes. Sometimes even before he ejaculates, a tiny bit of fluid comes out of the penis, called pre-ejaculate, that contains sperm.

Emotions around Sex

Q. What is the difference between being in love and having sex?

A. There is no "right" definition of love for everybody. Being in love with someone involves feelings of

romance, attraction, caring, etc. Having sex is an event or physical act.

Family Planning (Contraceptives)

Q. How do couples prevent pregnancy?

A. When a man and a woman want to have sexual intercourse without having a child, they can use a family planning method to prevent pregnancy. There are many types of family planning methods, also called contraceptives. The couple's choice is based on physical and emotional reasons. A couple can also avoid a pregnancy by abstaining from sex during the woman's fertile time, if they know when she is fertile.

When a couple is using a family planning method correctly, this means they are "protected." Unprotected sexual intercourse means sex without any contraception.

Q. What kinds of family planning methods are there?

A. [Note: If someone poses this question and samples of family planning methods are available, show them while offering an explanation of the methods.]

- **Abstinence.** Abstinence is the total avoidance of sexual intercourse between partners. It is the safest and most effective way to prevent pregnancy and STIs.
- **Male Condom.** The male condom is a thin rubber tube. It is closed at one end like the finger of a glove so that when a man puts it over his penis, it stops the sperm from entering a woman's vagina.
- **Female Condom.** The female condom is a rubber sheath that fits inside the vagina and covers the vulva, preventing sperm from entering a woman's vagina.
- **Intrauterine Device (IUD) or Intrauterine Copper Device (IUCD).** IUDs (sometimes called coils or spirals) are small plastic or metal devices of varying

shapes and sizes that are placed in the uterus to prevent pregnancy.

- **Diaphragm.** The diaphragm is a shallow, dome-shaped rubber cup with a flexible rim. It fits into the vagina and over the cervix, keeping sperm from joining the egg. It is most effective when used with spermicidal cream, jelly, or foam.
- **Oral Contraceptives.** Oral contraceptives (sometimes called birth control pills or “the pill”) contain hormones. These pills stop the release of an egg every month—but do not stop periods. A woman must take all of the pills in each pack to be fully protected.
- **Injectable Hormonal Contraceptives (Injectables).** The injection works the same as the pill. However, a woman receives a shot every eight or twelve weeks (depending on the type of injectable used) instead of taking a pill every day. Common names for these contraceptives are DMPA, Depo-Provera, and NET-EN.
- **Emergency Contraceptive Pills (ECPs).** Often called the “morning-after pill” or postcoital contraception, ECPs can reduce the risk of pregnancy after unprotected sexual intercourse. They work by using increased doses of certain oral contraceptive pills within 72 hours after sexual intercourse. The sooner ECPs are taken after unprotected sexual intercourse, the greater their effectiveness.
- **Lactational Amenorrhea Method (LAM).** LAM suppresses ovulation because breastfeeding changes the body’s physiology so that ovulation does not occur. Women who are exclusively using breastfeeding as the baby’s nutrition can use this method.
- **Natural Family Planning and Fertility Awareness Methods.** These are methods by which couples time sexual intercourse to avoid the woman’s days of fertility in her menstrual cycle. Women with regular menstrual cycles can use the necklace as a family

planning method to identify when a woman is fertile. Other women may want to use other ways to know which are their fertile days. They can check each day to see whether or not they have secretions. If they do, they will know that they are fertile on those days. They can also take their temperatures to determine when they are ovulating.

- **Spermicides.** Spermicides are chemical agents inserted into the vagina that keep sperm from traveling up into the cervix.
- **Male Sterilization (Vasectomy).** This is a surgical operation performed on a man. A small portion of each sperm duct is cut. Afterward, the sperm, which are produced in the testicles, can no longer be transported to the seminal vesicles. Therefore, the ejaculate of a man who has been sterilized does not contain any sperm.
- **Female Sterilization (Tubal Ligation).** This is a surgical operation performed on a woman in which the fallopian tubes are tied and cut, thus blocking the egg from traveling to the uterus to meet sperm.

Q. Can a woman use the necklace as a family planning method?

A. Yes. Women with regular menstrual cycles and supportive partners can use a special kind of necklace, called CycleBeads™, to help keep them from getting pregnant. However, in order to do this, additional screening and counseling is needed to ensure the method will meet their needs and is used correctly.

Sexually Transmitted Infections (STIs)

Q. What are the names of common STIs?

A. Syphilis, chancroid, gonorrhea, chlamydia, genital herpes, trichomoniasis, hepatitis B, human papilloma virus (HPV), and HIV.

Q. What are the signs or symptoms of an STI in a man?

A. Men may experience painful urination, urethral discharge, ulcers, or sores, depending on the STI. Adolescent boys should be counseled to seek treatment as soon as possible if they have any of these symptoms.

Q. What are the signs or symptoms of an STI in a woman?

A. Women may experience genital sores or ulcers, lower abdominal pain or tenderness, unusual vaginal discharge, vaginal itching, painful urination, or painful sexual intercourse, depending on the STI. Adolescent girls should be counseled to seek treatment as soon as possible if they have any of these symptoms.

Q. Is it possible for a person to have an STI and not know it?

A. Yes. STIs in women commonly go untreated because they are often asymptomatic, which means signs or symptoms are not experienced.

Q. How can I protect myself against STIs?

A. The only methods for protecting oneself against STIs are engaging in abstinence or using condoms. If you do contract an STI, it is important that you see a health provider in order to treat the infection with medicine.

Q. Can someone get an STI from any kind of sexual activity?

A. STIs are spread via sexual contact, which includes sexual intercourse and anal or oral contact.

Q. Can there be serious long-term health problems when a person contracts an STI at a young age?

A. Yes. Some STIs cause permanent infertility, chronic pain, and cancer of the cervix. Without treatment, heart and brain damage can develop 10 to 25 years after initial exposure to syphilis.

HIV/AIDS

Q. What is HIV?

A. HIV is the abbreviation for the human immunodeficiency virus. HIV is the virus that causes AIDS.

Q. What is AIDS?

A. AIDS is the abbreviation for acquired immunodeficiency syndrome. AIDS refers to a group of illnesses due to infection by HIV and is the last stage of HIV infection. The virus weakens and finally causes a collapse of the body's ability to fight off illness.

Q. How do people become infected with HIV?

A. There are three major ways of becoming infected with HIV:

- Through any type of unprotected sexual intercourse.
- Through the exchange of blood, primarily by sharing needles, but also by blood transfusions.
- From an HIV-infected woman to her baby during pregnancy or birth or through breastmilk.

Q. Can someone become infected with HIV from food, air, or water?

A. No. There have been no known cases of HIV infection from toilet seats, clothing, dishes, sneezing, coughing, sharing food, biting, kissing, or simple contact with a person who is HIV-positive or has AIDS. One cannot get HIV from living with someone who is infected.

Q. Can anyone become infected with HIV?

A. Anyone who has unprotected sexual intercourse or receives contaminated blood through transfusions, sharing needles, or other means, is at risk for HIV infection.

Q. Is there a cure for AIDS?

A. No. There are treatments for helping people with HIV infection to lead longer, healthier lives, but there is no cure and no vaccine to stop it from ever happening.

Q. How do you know if someone has HIV ?

A. There are tests that can tell if a person is infected with HIV. However, it is not possible to look at a person and know whether or not he or she is infected. A person can look healthy but actually be infected.

Q. How can one protect oneself from getting an infection like HIV/AIDS?

A. The best method for preventing HIV is abstaining from sex, or for a person who does not have HIV/AIDS to only have sex with another person who does not have HIV/AIDS. Because it is hard to tell who is infected without a test, a couple should always use a condom.

Dual Protection**Q. Is it possible to prevent pregnancy and STIs at the same time?**

A. Yes. A couple can use the male or female condom to protect against *both* pregnancy and STIs, including HIV. A couple may also use two contraceptives (for example, a condom and an IUD) to protect against both pregnancy and STI/HIV transmission. Lastly, the surest form of protection from unintended pregnancy and infection can be achieved through abstinence, the avoidance of sexual intercourse altogether.

Q. How does one get one's partner to use a condom?

A. Sometimes people are reluctant to use condoms, because they think that condoms diminish the

experience of sexual intercourse. It is easier to promote condom use between two partners when they talk about using them *before* engaging in sexual intercourse. Talking about preventing an unintended pregnancy or STI *before* sexual intercourse helps partners understand the importance of using condoms.

Specific Cultural Practices

Q. What is male circumcision?

A. This is a procedure usually performed on male babies soon after birth, although in some cultures it is performed later. This procedure removes all or part of the foreskin of the penis. The operation is not usually considered medically necessary but is done for religious or cultural reasons. Circumcised and non-circumcised penises perform and feel the same. There is increasing evidence that male circumcision lowers the risk of HIV transmission, though more research is needed to confirm this.

Q. What is female genital cutting?

A. In some African and Middle Eastern cultures, a girl may have her clitoris removed and/or labia removed or closed at birth, during childhood, or at puberty. This procedure is meant to prevent young girls from being promiscuous or sexually stimulated or becoming pregnant outside of marriage. This is illegal in many countries, because it can cause a great deal of emotional and physical pain for the woman at the time of the procedure and often for the rest of her life.

Q. Are there some places where boys and girls get married at a younger age?

A. Yes. In some societies, early marriage is an ongoing practice. Though most countries dictate the minimum age to be married is 18, there are some

countries that have minimum ages as low as 13. Often, such early marriages are arranged without the consent of the boys or girls involved.

Extra Activities

The following are optional activities you may do with the group.

Activity 1: Essay on How Our Society Talks about Fertility

Invite the group to write an essay on the way their society shares information about fertility. Ask them to write about each of the following points:

- How do boys in our society usually learn about male and female fertility?
- How do girls in our society usually learn about male and female fertility?
- How are messages for boys and girls different?
- Do you think our society should change the way boys and girls learn about fertility, or do you think things should stay the same? Why?
- If you were teaching a course on fertility to people your age, what topics would you include?

Activity 2: Fertility Awareness Crossword Puzzle

Photocopy the Fertility Awareness Crossword Puzzle handout (page 94) and distribute it to each participant. Ask participants to either work on it at home or in pairs during the session.

Activity 3: Use the Necklace to Track Fertility

Ask each menstruating girl to use the drawing of the fertility awareness necklace for a month. Non-menstruating girls can ask a female relative (older sister, aunt, mother, etc.) to use the drawing. Have all participants describe in a short one-page written plan how she is going to use or teach her female relative to use the drawing.

After the month is over, ask all participants to write a short essay on using the necklace drawing. The following questions should be answered in their essays:

- Were there any problems using the drawing of the necklace? If so, what?
- Was it easy to remember to mark the bead each day?
- What did you (or your female relative) learn about the body when using the necklace?
- How did it feel to use the drawing of the necklace?

Facilitator Note

For low-literate or younger participants, you can modify this activity—ask the participants to discuss these questions as a large group or in smaller groups.

Activity 4: Consequences of Sexual Intercourse

Ask participants to make a list, with either words or pictures, of how they spend their time each day and how much time they spend doing those activities. It might be helpful to have them list all 24 hours in the day so that they do not forget about their free time in the mornings and evenings. After students are finished,

have them share their lists with the class. As they speak, list the activities on the flip chart or chalkboard. Sample activities may include: school; eating; sports; sleeping; extracurricular activities; reading; doing chores at home, the farm, or the family business; visiting with friends; singing; dancing; etc. Include in the discussion how the students feel about spending their free time outside of school doing their chores or other activities. Also discuss the responsibilities of doing chores, such as getting to work on time, being responsible for your tasks, etc.

Ask students what type of responsibilities they think are involved in being a parent. List some of the suggestions on the flip chart or chalkboard. You may prompt them to include any responsibilities they leave out or forget. Once again, you want to be sure to cover 24 hours of time so that they can understand the full effect of caring for a baby.

Have the participants compare and combine the two lists of responsibilities that they just made. When the comparison is made between the teens' and parents' responsibilities, have the students circle the activities that are required (feeding the baby, bathing the baby) and place an "X" by those that are optional (hanging out with friends, sports). Discuss the activities they could not do if they had a baby as a teenager.

Stress that pregnancy often results when young people have sexual intercourse, because they do not think of the consequences of this important event. Stress that young people might be physically ready to have sexual intercourse, but they usually are not emotionally ready. In addition, young people often are not prepared to use protection to guard themselves against pregnancy or STIs.

Content for Session 3

What Happens during Sexual Intercourse?

Sexual intercourse is when a man's penis moves in and out of a woman's vagina until he has an ejaculation of semen. The sperm from his semen swim into the uterus, then into the fallopian tube, searching for an egg to fertilize. During sexual intercourse several million sperm are ejaculated. Some will live up to six days inside the woman.

How Does Fertilization Occur?

During the menstrual cycle, the egg is released from a woman's ovary. The egg floats down the fallopian tube toward the uterus. During the 24 hours that the egg is moving slowly through the fallopian tube, it has a chance of meeting sperm, if present. The egg is many times larger than each sperm. Only one sperm can penetrate or fertilize the egg. Once fertilized, an egg plants itself into the uterus lining. This takes about six days. Once safely planted, the fertilized egg begins to grow.

How Do You Know If You Are Pregnant?

Soon after implantation of the egg, hormones are secreted in the body to prevent menstruation from occurring and to ensure the development of the fetus. These hormones can be detected in tests of the woman's blood and urine. Many women know they are pregnant because they do not menstruate or because they notice bodily changes like breast swelling or tenderness and weight gain. Not menstruating, however, is not a sure sign of pregnancy.

Purpose of the Necklace

The fertility awareness necklace is used to help girls learn about and understand the menstrual cycle. The necklace has 32 beads. Each bead represents one day in a menstrual cycle. The *red bead* represents Day 1 of the menstrual cycle, the day on which bleeding begins.

The *six dark beads* represent the time of menstruation and a few days afterward. These days are infertile days, when a woman cannot get pregnant even if she has sex.

These days are then followed by *12 white or light beads*, which are the fertile days. These are the days when a woman can get pregnant if she has sex. You will notice that there are 12 white beads in this necklace even though a woman can really become pregnant for only five to six days each cycle. A woman is fertile for only 24 hours, but because sperm can stay alive inside a woman for up to six days, a woman can become pregnant for that many days. There are 12 beads because we do not know exactly which days these are. These 12 beads represent the approximate time of fertility.

These white or light beads are followed by *13 dark beads*, which are infertile days.

The necklace represents the menstrual cycle of most women. Each woman's cycle may be a little different, so the necklace does not represent the menstrual cycle of a specific woman. For example, a cycle may last 28 rather than 32 days. Both are normal. If a woman is using this necklace to keep track of her cycle, she should realize that her next cycle starts when she has her period, even if there are several dark beads left.

Facilitator Note

If a woman wants to use CycleBeads™ as part of her family planning method, it is important for her to have additional information. She should contact her family planning provider. The fertility awareness necklace or the drawing of the necklace is different from CycleBeads™ and is not intended for use in family planning.

Menstrual Cycle Review Flash Cards

Day 1

Day 2

Day 3

Day 4

Day 5

Day 6

Session 3

Day 7

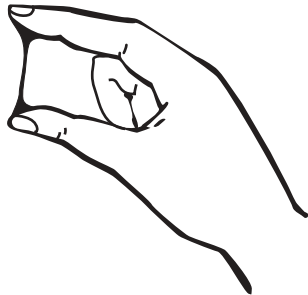
Day 8

Flash Cards Continued

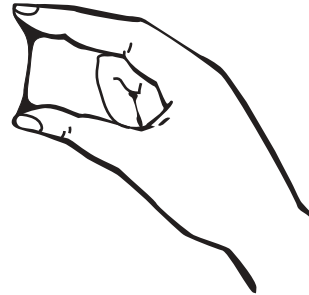
Day 9

Day 10

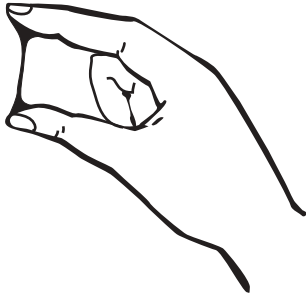
Day 11



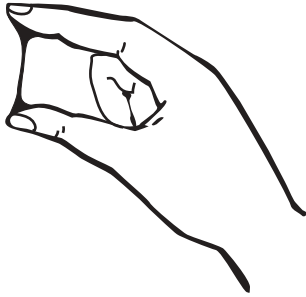
Day 12



Day 13

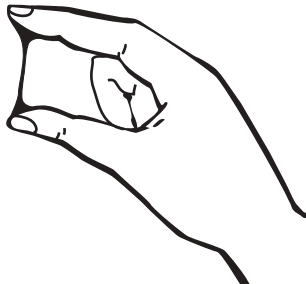
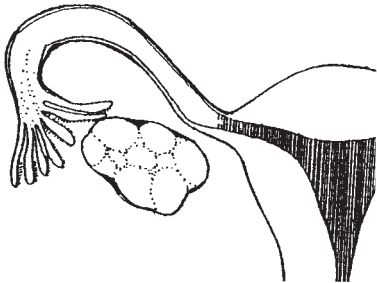


Day 14

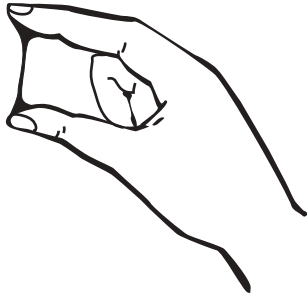


Session 3

Day 15

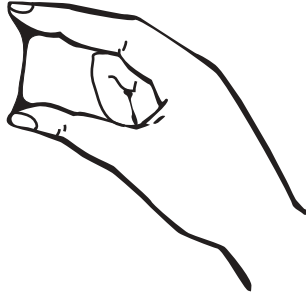


Day 16



Flash Cards Continued

Day 17



Day 18

Day 19

Day 20

Day 21

Day 22

Session 3

Day 23

Day 24

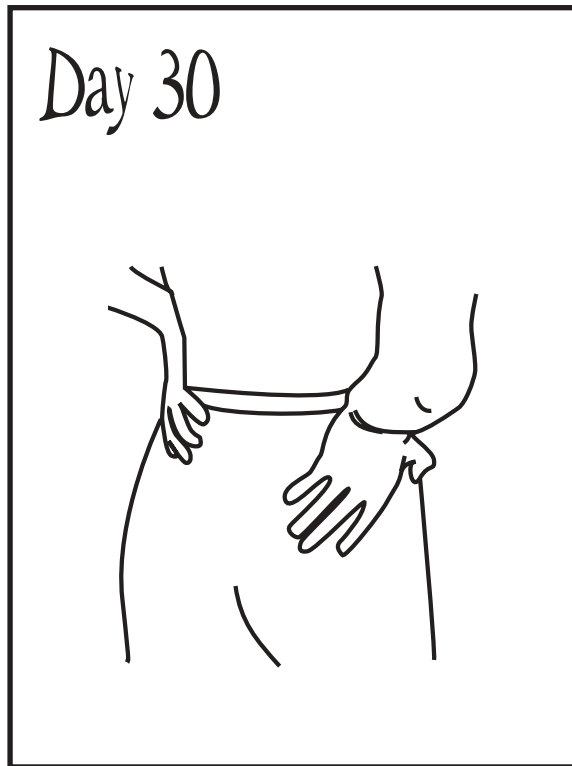
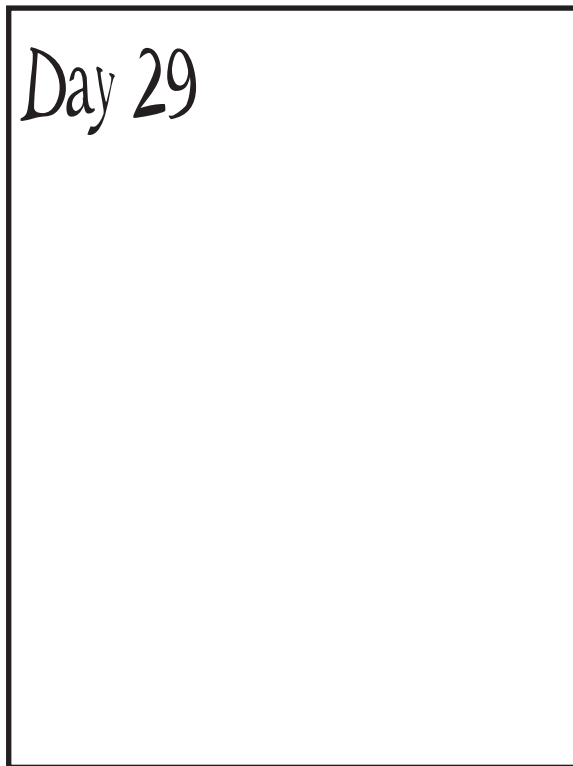
Flash Cards Continued

Day 25

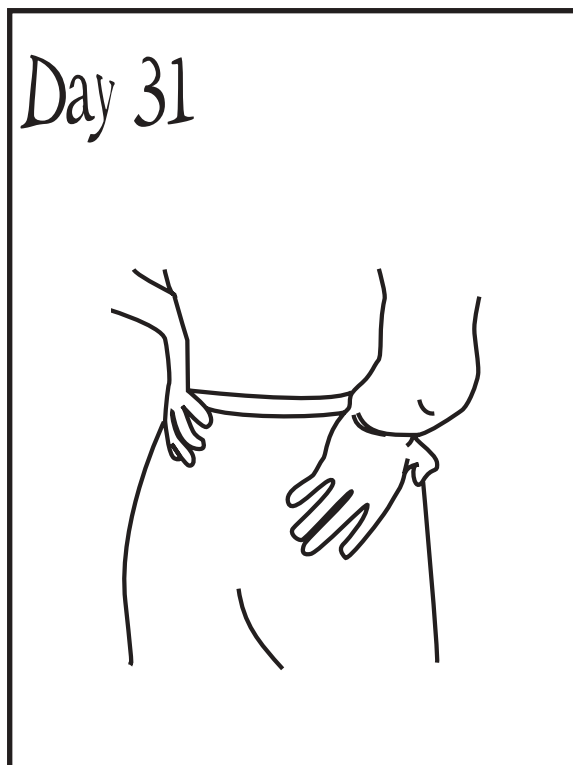
Day 26

Day 27

Day 28



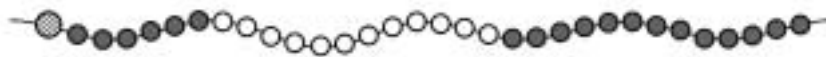
Session 3



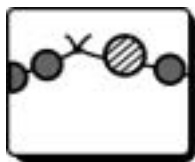
Handout: How to Make the Fertility Awareness Necklace with Beads

Step 1: *String the beads in the following order:*

- 1 red bead (for the first day of menstrual bleeding)*
- 6 dark beads (for the early infertile days)
- 12 white or light beads (for the fertile days)
- 13 dark beads (for the later infertile days)

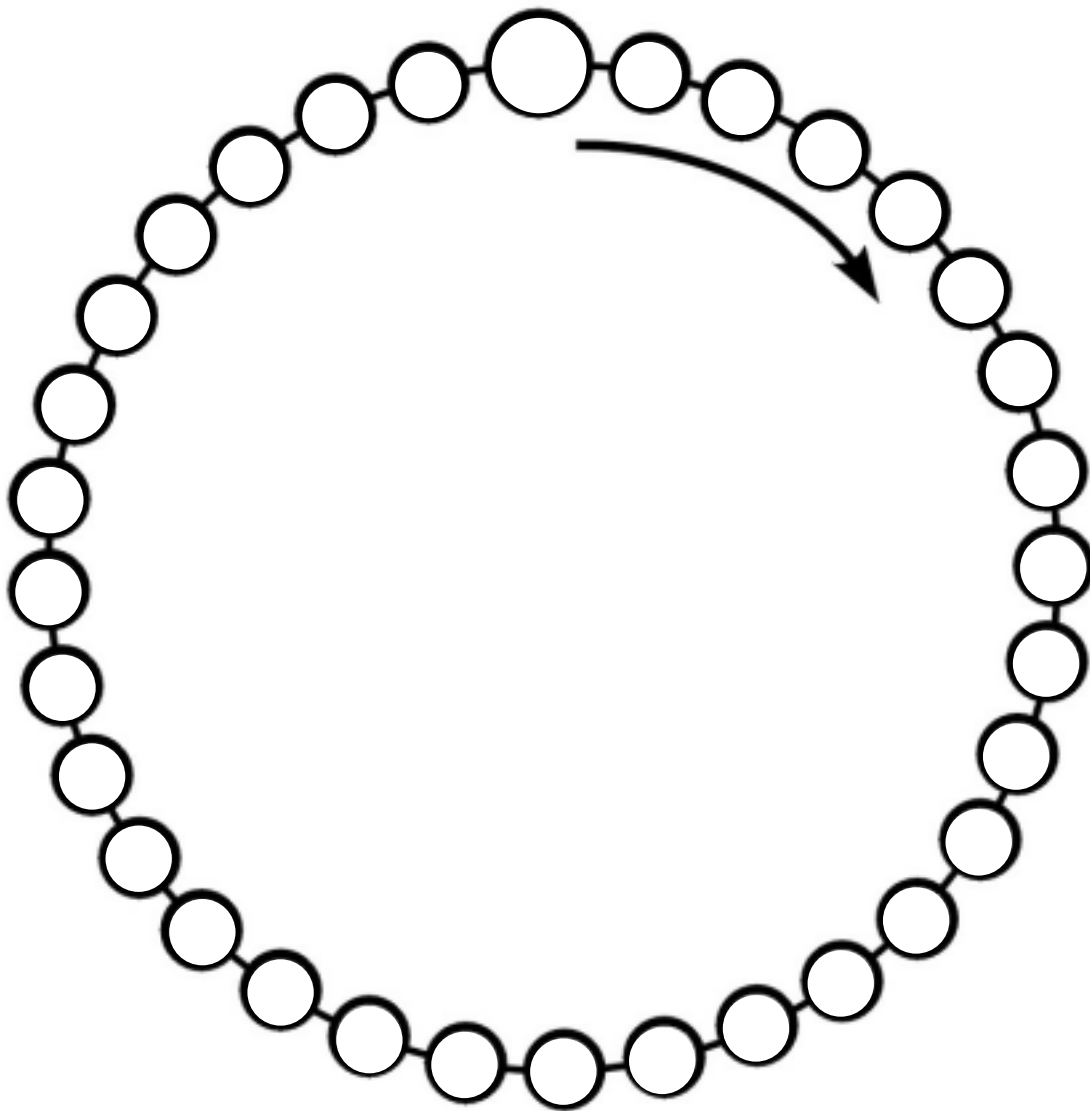


Step 2: *Fasten or knot the necklace securely.*



* Because the document type is in black and white, please note the red bead is represented by a striped bead throughout the manual.

Handout: How to Draw a Paper Version of the Fertility Awareness Necklace



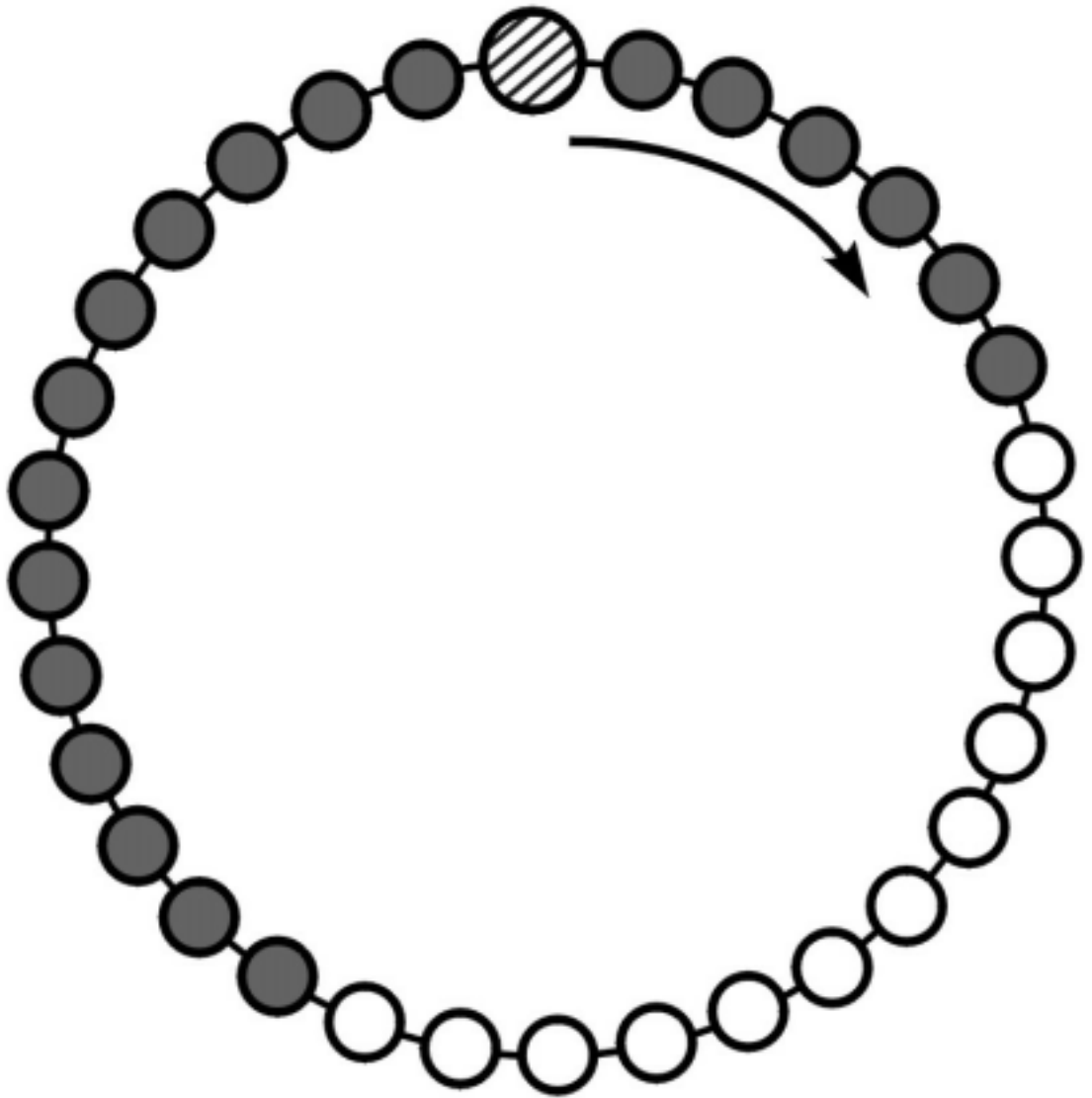
Session 3

Step 1: *Draw a necklace with 32 round beads, as shown above.*

Step 2: *Color the beads in the following order:*

- 1 red bead (for the first day of menstrual bleeding)
- 6 dark beads (for the early infertile days)
- 12 white or light beads (for the fertile days)
- 13 dark beads (for the later infertile days)

Handout: How to Draw a Paper Version of the Fertility Awareness Necklace—Answer Key



Handout: How to Use the Necklace as a Way to Track the Menstrual Cycle

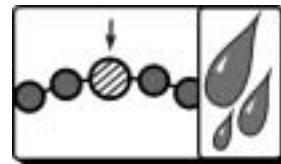
This necklace represents a woman's or girl's menstrual cycle. Each bead is a day of the cycle. The necklace has beads of different colors.



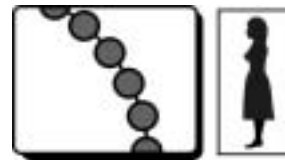
Session 3

A woman or girl can make the necklace to know when to expect her period; help her keep track of her menstrual cycle; and understand the changes occurring in her body during her cycle.

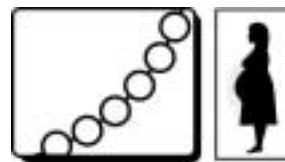
The marked red bead represents the first day of a woman's or girl's period.



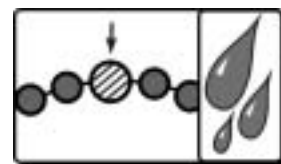
Dark beads represent infertile days. These are days when a woman is very unlikely to get pregnant.



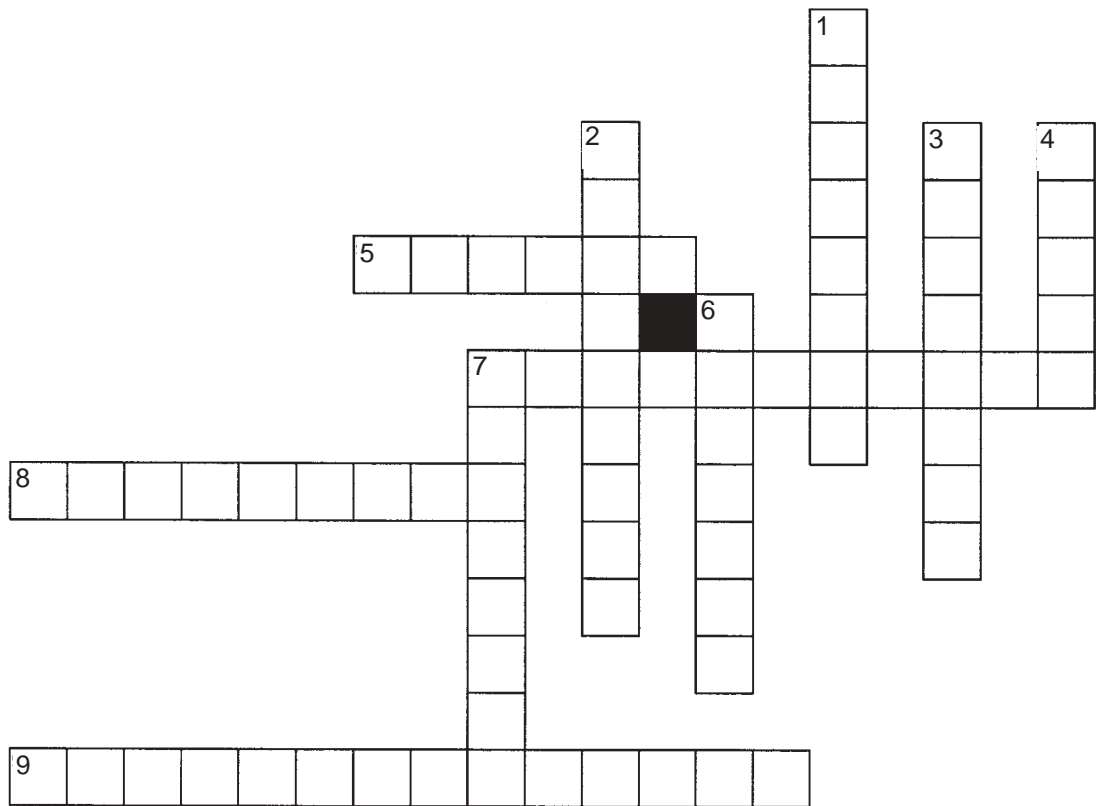
White or light beads represent fertile days. These are days when a woman can get pregnant.



On the day her period starts again, a new menstrual cycle has begun.



Handout: Fertility Awareness Crossword Puzzle



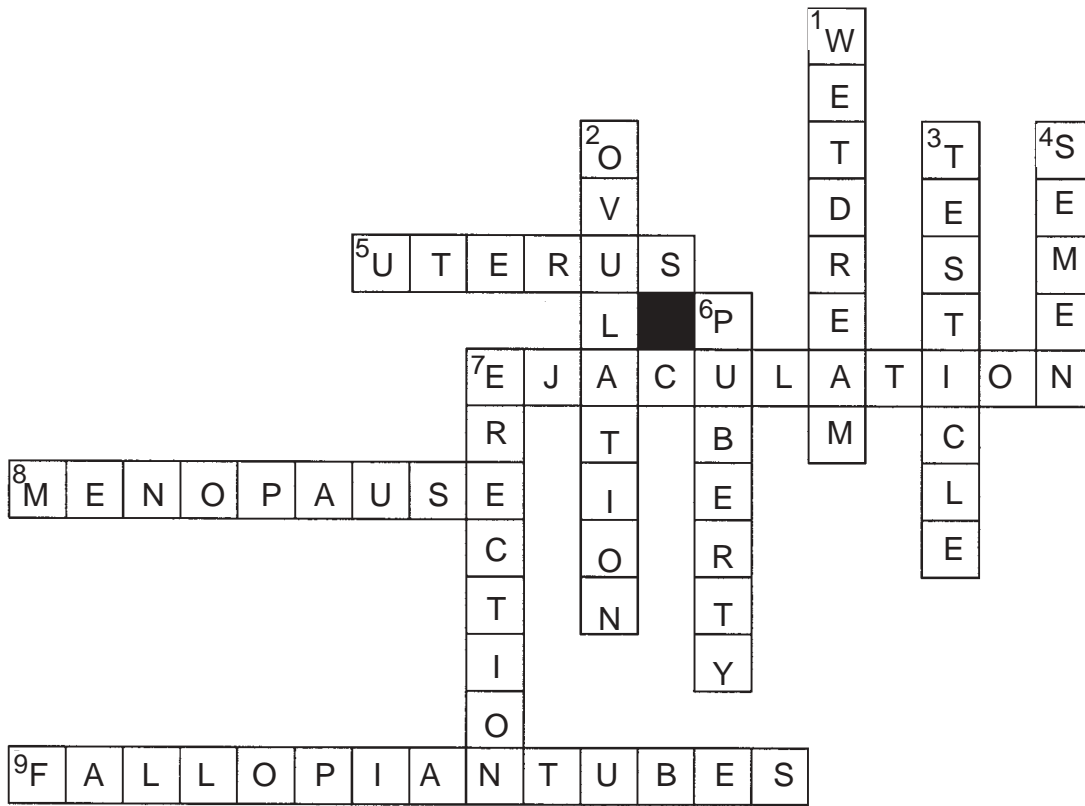
Across

5. The place where a baby develops
7. Forceful release of semen from the penis
8. Time in life when a woman's menstruation ends
9. The part of the woman that takes the egg from the ovaries to the uterus (two words)

Down

1. Passing of semen during sleep (two words)
2. Release of an egg from an ovary
3. Place where sperm is produced
4. A thick fluid that is discharged from the penis during ejaculation
6. Process of becoming an adult
7. Hardening of the penis

Handout: Fertility Awareness Crossword Puzzle—Answer Key



Session 3

Session 4

Concerns about My Fertility: Female and Male Group Discussions

Objectives

By the end of this session, the boys will:

1. Dispel three concerns about male fertility.

By the end of this session, the girls will:

1. Dispel three concerns about female fertility.



Materials Needed

- Strips of paper or note cards

Before You Begin

- Carefully read all of the **Content for Session 1** (pages 26-28), **Session 2** (pages 44-54), and **Session 3** (pages 80-95).
- Read each step of the session. Think about how you will perform each step and what you will add to every session.
- Decide how you will teach Step 2.
- Carefully read the Facilitator Notes on masturbation on pages 102-103 and 109.
- Though there is no medical evidence that masturbation is “bad” in any way, there are many myths that say it is harmful to the mind or body. As a result of such myths, many people feel extremely anxious or guilty about masturbating, and thus worry about the consequences of touching themselves. Masturbation is discouraged in some cultures, societies, and religions. Your own society might have taboos around the topic. With this in mind, you will

have to decide how to teach Step 2. At a minimum, you can define what masturbation is and dispel any beliefs around the topic that are not medical fact.

- Break the participants into two groups.
- For this lesson, boys and girls will be separated. Ideally, a male leader will work with the boys and a female leader will work with the girls.
- Tell the group in advance about the separate sessions. Explain that you want to give them time alone with an adult of the same sex in case they have any questions that they have been embarrassed to discuss in front of the whole group. Make sure that participants understand that it is very appropriate for boys and girls to discuss puberty or sexuality issues together. However, at their age, they sometimes want time alone with members of the same sex, and that is okay, too.
- Introduce the activity before separating participants by saying, “Today the girls will be with Ms. _____ and boys will be with Mr. _____. Girls will get extra information about menstruation and boys will get extra information about wet dreams. Both groups will receive additional information about their bodies.”

Session 4



Time

Activities for Boys	Activities for Girls	Minutes
Step 1: Addressing Male Fertility Concerns	Step 1: Addressing Female Fertility Concerns	45
Step 2: My Body Feels Good	Step 2: My Body Feels Good	10
TOTAL MINUTES		55

ACTIVITIES FOR BOYS**Step 1: Addressing Male Fertility Concerns****Male Group Discussion****(45 minutes)**

Read each of the following statements. Tell them they are from typical boys like them:

“My first wet dream came to me as a shock because I never had any knowledge about it. Then my brother explained to me what it was.”

“I didn’t know what the erection was. I was very upset and felt shy both with my parents and my peers. I even prayed and asked God to make that thing go away. I later realized it was part of life.”

“Having these wet dreams made me miserable. I felt so embarrassed.”

“My father told me these would happen; I just didn’t realize how little control I would have.”

Ask participants if they can relate to what these boys are saying. State that most boys feel the same and that is why participants have this special time to ask questions.

Ask participants to write down any questions they have about puberty on the strips of paper or note cards. These questions can be about the material covered in all of the previous sessions or about other things about puberty and fertility awareness heard outside of the course. Collect the strips of paper or note cards and then read each question out loud. It is important not to identify any question with a particular participant. After each question, ask the group if they know the answer. If no one responds, provide your response.

Facilitator Note

As you recall from the other sessions, the **Possible Questions and Answers** are optional. If participants ask questions, the answers are there for you to use. *Session 4 is different.* Even if participants do not ask the following questions, you can try—depending on how much time you have—to raise these questions with the group. These questions are common ones among young people, and it would be beneficial for participants to know the answers.

Try to keep the discussion lively, yet be aware of boys who may be self-conscious and shy.

Facilitator Note

Although there is not a specific question below related to child abuse, it is a question that may be raised by your participants—some of them may even be victims of physical or sexual abuse, incest, or coerced sex. Therefore, it is important that you are sensitive to this issue, and that you point out to participants that no one deserves to be physically or sexually violated, and it is not their fault if they are. Young people often blame themselves if they are abused, and this makes them even more afraid to tell anyone. But a trusted adult, such as a parent, health provider, teacher, or religious leader, can often help. Anyone who has experienced child abuse, sexual abuse, incest, or coerced sex, or suspects that a young person has been the victim of such a violation, needs to tell someone and get assistance as soon as possible. People and places that can provide assistance include: health provider, school principal, teacher, women's center, religious leader, police, lawyer, etc.

Q. Do boys get a period?

A. Boys do not get a period, or menstruate, because they have a different reproductive system than girls. Menstruation is the breaking away of the lining of the uterus—the place where a fetus develops during a pregnancy. Since only women have a uterus, only they have periods.

Q. Do men stop having ejaculations when they get older?

A. When a man gets older, perhaps age 60 or beyond, he may have less sperm in his ejaculate. But if a man is healthy, he should be able to have ejaculations all his life.

Q. Can semen and urine leave the body at the same time?

A. Some boys worry about this because the same passage is used for both urine and semen. A valve at the base of the urethra makes it impossible for urine and semen to travel through this tube at the same time.

Q. What is the right length of a penis?

A. The average penis is between 11 and 18 centimeters long when it is erect. There is no standard penis size, shape, or length. Some are fat and short. Others are long and thin. There is no truth to the idea that a bigger penis is a better penis.

Q. Is it normal to have one testicle hanging lower than the other one?

A. Yes. Most men's testicles hang unevenly.

Q. Is it a problem for the penis to curve a little bit?

A. It is normal for a boy or man to have a curving penis. It straightens out during an erection.

Q. What are those bumps at the head of the penis?

A. The bumps are glands that produce a whitish creamy substance. This substance helps the foreskin slide back smoothly over the glans. However, if it accumulates beneath the foreskin, it can cause a bad smell or infection. It is important to keep the area under the foreskin very clean at all times.

Q. How does one prevent having an erection in public?

A. This is normal. Even though you may think it is embarrassing, try to remember that most people will not even notice the erection unless you draw attention to it.

Q. Will wet dreams or ejaculation make a boy lose all of his sperm?

A. No. The male body makes sperm continuously throughout its life.

Q. What do I do if someone touches me in a way that makes me feel uncomfortable?

A. Your body is your own, and no one should touch you in a way that makes you feel uncomfortable. You have a right to ask someone to stop touching you if it makes you feel bad. If this is happening to you, remember it is not your fault, and you should talk to a trusted adult for help and keep talking to as many people as necessary until someone takes action.

Q. What if a man or woman wants to have sex and the other person does not?

A. Sex should be a pleasurable and consensual act between two persons. A man or woman should never be forced to have sexual intercourse or do anything else with his or her body that he or she does not want to do. A person must offer his or her permission before letting anyone touch him or her. If a situation arises in which someone is inappropriately touching another person without permission, the person should seek help immediately.

Step 2: My Body Feels Good

Group Exercise (10 minutes)

Ask the group to think of a favorite activity or thing. Ask them how it feels to be doing, holding, or eating this thing. Ask them to describe the feelings of pleasure they experience. Ask if they have ever heard of getting a feeling of pleasure from touching their own body. Ask them what the word for this is. If they do mention masturbation, briefly describe what it is and why it happens, stressing that medical professionals say it is completely normal, but some cultures and religions do not support it. Encourage the group to say what they have heard about masturbation. Make sure the following *myths*, and others that may be common in your community, are covered and corrected:

- Masturbation makes you insane.
- Masturbation makes you grow hair on the palms of your hands, causes pimples on your face, or makes you go blind.
- Masturbation makes you pale and uses up all the boy's sperm.
- Masturbation makes you weak and makes it impossible for a man to father children.
- Masturbation causes you to lose your desire for the opposite sex.
- Girls who masturbate are obsessed with sex.

Facilitator Note

Discussing myths around masturbation will help make the topic seem less personal. There might be different myths about masturbation in your culture. Adapt this exercise to include any myths in your society.

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After doing the exercise, explain to participants what masturbation is. Masturbation is rubbing, stroking, or otherwise stimulating one's sexual organs—penis, vagina, and breasts—to get pleasure or express sexual feelings. Both men and women can relieve sexual feelings and experience sexual pleasure through masturbation. Boys may stroke their penises until they ejaculate. Girls' vaginas may become wet, moist, or tingly from self-stimulation, and they may experience orgasm.

Many people, males and females alike, masturbate at some time in their lives. There is no scientific evidence that masturbation causes any harm to the body or mind. Masturbation is only a medical problem when it does not allow a person to function properly or when it is done in public. However, there are many religious and cultural barriers to masturbation. The decision about whether or not to do it is a personal one.

Session 4

Stress the Following

- Masturbation is often the first way a person experiences sexual pleasure.
- Many boys and girls begin to masturbate for sexual pleasure during puberty.
- Some boys and girls never masturbate.
- Masturbation does not cause physical or mental harm.
- Some cultures and religions oppose masturbation. If you have questions about your religion's position, talk to your religious leader.

Thank them for being an enthusiastic group. Tell them that it is hard to talk about one's body sometimes and that you are proud of them for participating and sharing with each other.

ACTIVITIES FOR GIRLS

Step 1: Addressing Female Fertility Concerns

Female Group Discussion (45 minutes)

Read each of the following statements. Tell them they are from typical girls like them:

“My period came to me as a shock because I never had any knowledge about it. Then my mother explained to me why I had to go through it.”

“I didn’t know what the period was. I was very upset and felt shy both with my parents and my peers. I even prayed and asked God to make that thing go away. I later realized it was part of life.”

“I was unsure of what was going on. I had no information on how to deal with it. Menstruation made me miserable.”

“I was happy when I got my period because I knew that meant I was growing up.”

Ask participants if they can relate to what these girls are saying. State that most girls feel the same and that is why participants have this special time to ask questions.

Ask participants to write down any questions they have about puberty on the strips of paper or note cards. These questions can be about the material covered in all of the previous sessions or about other things about puberty and fertility awareness heard outside of the course. Collect the strips of paper or note cards and then read each question out loud. It is important not to identify any question with a particular participant. After each question, ask the group if they know the answer. If no one responds, provide your response.

Facilitator Note

Explain that most girls wonder about situations they will find themselves in when they begin menstruating. State that it can be helpful to think about those situations and plan what you would do. Stress that even if you already have had your period, this exercise will be useful because you might not know all there is to know.

Facilitator Note

As you recall from the other sessions, the **Possible Questions and Answers** are optional. If participants ask questions, the answers are there for you to use. *Session 4 is different.* Even if participants do not ask the following questions, you can try—depending on how much time you have—to raise these questions with the group. These questions are common ones among young people, and it would be beneficial for participants to know the answers.

Try to keep the discussions lively, yet be aware of girls who may be self-conscious and shy.

Facilitator Note

Although there is not a specific question below related to child abuse, it is a question that may be raised by your participants—some of them may even be victims of physical or sexual abuse, incest, or coerced sex. Therefore, it is important that you are sensitive to this issue, and that you point out to participants that no one deserves to be physically or sexually violated, and it is not their fault if they are. Young people often blame themselves if they are abused, and this makes them even more afraid to tell anyone. But a trusted adult, such as a parent, health provider, teacher, or religious leader, can often help. Anyone who has experienced child abuse, sexual abuse, incest, or coerced sex, or suspects that a young person has been the victim of such a violation, needs to tell someone and get assistance as soon as possible. People and places that can provide assistance include: health provider, school principal, women's center, teacher, religious leader, police, lawyer, etc.

Session 4

Q. How does a girl know when her period is about to start?

A. No one can be sure exactly when this will happen. Most girls begin menstruating between the ages of 12 and 16. The average age is 12 or 13. The best way a girl can know is to look for signs. Underarm hair and a whitish discharge from the vagina are signs that the period probably is not too far away.

Q. What if a girl's period never starts?

A. Periods will start sooner or later. However, if a girl

reaches age 16 and has not yet had her first period, she should visit a health provider.

Q. What causes period pain?

A. During a period, the uterus contracts, tightening and relaxing so that the menstrual flow empties from the body. Some girls and women get cramps that are more severe than others. Pain relievers, such as aspirin, exercise, a hot bath, or a heat compress can help this.

Q. Can anyone tell when a girl has her period?

A. No. Unless she tells someone, it is her private secret. When she gets her first period, she should tell her mother (or father or another adult she trusts). That way, there will be somebody to answer questions she might have.

Q. Are there any foods to avoid during a period?

A. No. The idea that certain foods should not be eaten at this time is a myth.

Q. Why are periods irregular?

A. Once a girl starts getting her period, it will probably take two or more years for the menstrual cycle to settle into a regular pattern. During this time, hormone levels change and ovulation does not necessarily occur on a regular basis. So, the interval between periods, the amount of menstrual flow, and the duration of the period are likely to vary considerably from cycle to cycle. Girls may be concerned about differences between their cycle and that of their friends. They may worry if, after their first period, they do not menstruate again for two to three months. Such variation is normal.

Q. Can a virgin use tampons?

A. Yes. A virgin is simply someone who has not had sexual intercourse. The vagina has an opening that

allows menstrual fluid to flow out, and that same opening can hold a tampon inside.

Q. Why do my sister and I get our periods at the same time each month?

A. Although it is not completely understood, it is not unusual for women who live together to have their periods around the same time. Sisters, mothers, daughters, and close friends may have their periods around the same time if they live together.

Q. I am scared about getting my period. Does it hurt?

A. The process of menstruation itself is painless. As we discussed, some women do experience cramps or other symptoms before or at the start of their period. A woman should not be scared of getting her period. It is a completely normal event.

Q. What do I do when I first get my period?

A. If you know about menstruation before it happens for the first time, you will be better prepared to handle this situation without fear or embarrassment. If it does come unexpectedly, do not panic. Your teachers, family members, and youth leaders usually can provide you with directions on what products to use to soak up the menstrual flow.

Q. What do I do if someone touches me in a way that makes me feel uncomfortable?

A. Your body is your own, and no one should touch you in a way that makes you feel uncomfortable. You have a right to ask someone to stop touching you if it makes you feel bad. If this is happening to you, remember it is not your fault, and you should talk to a trusted adult for help and keep talking to as many people as necessary until someone takes action.

Q. What if a man or woman wants to have sex and the other person does not?

A. Sex should be a pleasurable and consensual act between two persons. A man or woman should never be forced to have sexual intercourse or do anything else with his or her body that he or she does not want to do. A person must offer his or her permission before letting anyone touch him or her. If a situation arises in which someone is inappropriately touching another person without permission, the person should seek help immediately.

Step 2: My Body Feels Good**Group Exercise
(10 minutes)**

Ask the group to think of a favorite activity or thing. Ask them how it feels to be doing, holding, or eating this thing. Ask them to describe the feelings of pleasure they experience. Ask if they have ever heard of getting a feeling of pleasure from their own body. Ask them what the word for this is. If they do mention masturbation, briefly describe what it is and why it happens, stressing that medical professionals say it is completely normal, but some cultures and religions might not support it. Encourage the group to say what they have heard about masturbation. Make sure the following *myths*, and others that may be common in your community, are covered and corrected:

- Masturbation makes you insane.
- Masturbation makes you grow hair on the palms of your hands, causes pimples on your face, or makes you go blind.
- Masturbation makes you pale and uses up all the boy's sperm.
- Masturbation makes you weak and makes it impossible for a man to father children.

- Masturbation causes you to lose your desire for the opposite sex.
- Girls who masturbate are obsessed with sex.

Facilitator Note

Discussing myths around masturbation will help make the topic seem less personal. There might be different myths about masturbation in your culture. Adapt this exercise to include any myths in your society.

After doing the exercise, explain to participants what masturbation is. Masturbation is rubbing, stroking, or otherwise stimulating one's sexual organs—penis, vagina, and breasts—to get pleasure or express sexual feelings. Both men and women can relieve sexual feelings and experience sexual pleasure through masturbation. Boys may stroke their penises until they ejaculate. Girls' vaginas may become wet, moist, or tingly from self-stimulation, and they may experience orgasm.

Many people, males and females alike, masturbate at some time in their lives. There is no scientific evidence that masturbation causes any harm to the body or mind. Masturbation is only a medical problem when it does not allow a person to function properly or when it is done in public. However, there are many religious and cultural barriers to masturbation. The decision about whether or not to do it is a personal one.

Session 4

Stress the Following

- Masturbation is often the first way a person experiences sexual pleasure.
- Many boys and girls begin to masturbate for sexual pleasure during puberty.
- Some boys and girls never masturbate.
- Masturbation does not cause physical or mental harm.
- Some cultures and religions oppose masturbation. If you have questions about your religion's position, talk to your religious leader.

Thank them for being an enthusiastic group. Tell them that it is hard to talk about one's body sometimes and that you are proud of them for participating and sharing with each other.

Session 5

Hygiene and Puberty

Objectives

By the end of this session, the participants will:

1. Explain the need for increased hygiene during puberty.
2. Describe hygiene procedures for adolescents.



Materials Needed

- Note cards
- Several poster-size sheets of paper
- Markers

Before You Begin

- Carefully read all of the **Content for Session 5** (pages 116-117).
- Read each step of the session. Think about how you will perform each step and what you will add to every session.
- Prepare note cards for Step 2, as directed.
- Make your own advertisement, song, or rap for Step 2 to share as an example.



Time

Activity	Minutes
Step 1: Taking Care of Your Body	15
Step 2: Body Care Advertisement/Commercial	45
Step 3: Question and Answer Race on Hygiene	30
Step 4: Take-Home Messages	10
TOTAL MINUTES	100

Step 1: Taking Care of Your Body

Large Group Discussion (15 minutes)

Ask the following questions to promote discussion and use the opportunity to introduce a new topic:

- We talked before about bodily changes in puberty. Does this mean we have to care for our bodies differently? How?
- Why is it important to keep different parts of our body clean?
- How can you keep each area of your body clean?

Mention any other areas or aspects of the body that they forgot (*face, hair, teeth, odor, and genital area*).

Step 2: Body Care Advertisement/Commercial

Small Group Activity (45 minutes)

Divide the participants into pairs or small groups and assign one of the following topics to each group. Using the Content for Session 5, create a note card for each of these topics with basic information about each topic and give it to each group (or alternatively, make a photocopy of each page and distribute one topic to each group).

- Washing the Body
- Smelling Good
- Hair
- Teeth and Mouth
- Underwear
- Genital Area (Boys)
- Genital Area (Girls)

Ask groups to review the information about their topics.

Ask each group to create either a television/radio commercial or newspaper/magazine advertisement to publicize an exciting new product or method to manage their topic. For example, an advertisement could be a poster that gives the complete steps and process for smelling good. Encourage participants to be creative. For example, they may invent a product to use; act in the role of “expert” on the subject; incorporate an activity, such as new dance steps, to use while brushing and flossing teeth; or develop a “keep clean” rap.

Show them what you made as a sample.

After completing their work, ask the participants to share their commercial/advertisement with the larger group.

Step 3: Question and Answer Race on Hygiene

Large Group Game (30 minutes)

Divide participants into two teams. Ask Team 1 a question from the list below. The team has 30 seconds to answer. If the answer is correct, then the team receives one point. If the answer is incorrect, give the same question to Team 2. Continue until all the questions have been answered correctly. The team with the most points wins.

1. What should boys and girls use to wash their genitals?
(*Soap and water.*)
2. If a boy’s penis is not circumcised, how should he wash it?
(*Gently pull the foreskin of the penis back and wash the head of the penis.*)
3. What is the best way to take care of acne on your face?
(*Washing your face at least twice a day with soap and water.*)
3. What is the best way to stay clean?
(*The answer should be what is most common in your country.*)

4. What is the best way to brush your teeth? (*The answer should be what is most common in your country.*)
5. Why do we brush our teeth? (*To avoid cavities and keep them clean.*)
6. Why do we wear clean underwear? (*To avoid infection and keep the genital area clean.*)
7. When do you always wash your hands? (*Before meals, after meals, and after going to the bathroom.*)
8. Why should you always wash your hands after going to the bathroom? (*To avoid the spread of bacteria and infection.*)
9. Should women put perfume (herbs, douche, etc.) into their vagina? Why or why not? (*No, this will cause dryness, irritation, or infection.*)

Step 4: Take-Home Messages

(10 minutes)

Close the session by stressing the following:

- Keeping clean means keeping healthy. Keeping clean should be a routine part of your day.

Stress the Following

Thank them for being an enthusiastic group. Tell them that it is hard to talk about one's body sometimes and that you are proud of them for participating and sharing with each other.

Possible Questions and Answers

Q. My sister told me that it was good to put perfume, herbs, douches, etc. in the vagina to keep it smelling nice. Is there something wrong with that?

A. Yes, this will cause dryness, irritation, or infection in the vagina. Some women put products there because they do not like the secretions that come out. But the secretions are normal. Women should not try to fix this by putting unusual products there.

Q. How often should you wash your hair?

A. Every day or every two or three days is okay. For others, once a week is fine, especially for those of African descent.

Q. Do all men shave?

A. No. Some men grow beards or moustaches. Some men do not have to shave because they do not grow much facial hair.

Q. Is it okay to pick at acne on the face?

A. It is important to try not to pick at, or squeeze, the spots as this can cause them to become infected. It also leads to scarring.

Session 5

Content for Session 5

Washing the Body

Washing the body helps one to stay clean, avoid infection, and avoid becoming sick.

Bathe with water or soap and water once or twice per day.

Wash hands before and after meals. Wash hands after using the bathroom to prevent the spread of bacteria and infection.

Washing the face at least twice a day with soap and water can help keep acne away or make it less severe.

Smelling Good

Use deodorant, baby powder, or the most common product in your country for smelling good under your arms.

Hair

Shampoo your hair regularly to keep it clean. Every day or every two or three days is fine. Once a week is fine, too, especially for those of African descent. It also depends on cultural beliefs.

Boys should talk to a parent, an older brother, or another adult they trust about shaving. Girls can ask a female they trust about shaving their legs. Not all men and women shave. This depends on culture and choice.

Teeth and Mouth

Use what is most common in your country to clean the teeth after every meal and before bed each night. Cleaning teeth helps avoid cavities or rotted teeth. Using toothpaste with fluoride can also help to strengthen your teeth.

Underwear

Wear clean underwear every day to avoid infection and keep the genital area clean.

Genital Area (Boys)

It is important to wash and clean the penis every day. Wash the scrotum, between the scrotum and the thighs, in between the buttocks, and the anus with soap and water every day.

For uncircumcised boys, it is important to pull back the foreskin and gently clean this area. Whether a boy is circumcised or not, it is important to wash and clean the penis and the area around the anus every day.

Genital Area (Girls)

Girls need to wash the area around the vulva and the anus with soap and water every day. The inside of the vagina cleans itself naturally. You should never try to wash inside the vagina unless a health provider instructs you to do so. Unfortunately, some girls and women try to wash inside the vagina with harsh soaps. Some women also use deodorants, perfumes, herbs, or douches to clean the vagina. None of this is necessary, and it can even be harmful because such products can change the normal fluids inside the vagina and can irritate the skin inside the vagina and cause infection.

Girls should try to wipe from front to back after they use the bathroom. Whether or not a girl uses toilet tissue, paper, water, grass, or leaves to clean herself, she should make sure she avoids wiping forward. If she wipes forward, she risks pulling germs from the anus to the vagina and urethra. This can give her an infection.

Regularly change the pads or whatever else you use during menstruation.

Session 6

Review

Objectives

By the end of this session, the participants will:

1. Have their previous knowledge of female fertility reinforced.
2. Have their previous knowledge of male fertility reinforced.
3. Be aware that they should wait before engaging in sexual activities with others.
4. Understand the importance of taking care of and protecting their bodies so they can grow into healthy adults.



Materials Needed

- Strips of paper or note cards (enough for two separate activities)
- Large basket or hat
- Copies of Helen's Story handout (page 125) and Fred's Story handout (page 126) for each participant
- Several poster-size sheets of paper
- Markers

Before You Begin

- Read each step of the session. Think about how you will perform each step and what you will add to every session.
- Write Step 1 questions on strips of paper or note cards and place them in the basket or hat. Add any questions about topics that you think your participants need to review.

- Make copies of Helen’s Story handout and Fred’s Story handout for each participant.



Time

Activity	Minutes
Step 1: Fertility Review	20
Step 2: Puberty Stories	25
Step 3: Menstrual Cycle Mix-up	15
Step 4: Fertility and the Future	30
TOTAL MINUTES	90

Step 1: Fertility Review

Large Group Game (20 minutes)

Write on strips of paper or note cards the questions below and place them in the basket or hat.

Form two teams. Ask each participant to choose paper from the basket or hat. A participant from Team 1 should read his or her question to the group and ask their team to answer it. If the question is answered well by the team, they earn a point. Alternate each team and try to give all participants a chance to ask a question. Remember that it is important to promote an environment of healthy competition that allows for learning.

1. What is fertilization? (*When a woman’s egg unites with a man’s sperm.*)
2. What is menstruation? (*The expulsion of the unfertilized egg and interior lining of the uterus through the vagina.*)
3. What happens on the first day of a woman’s menstrual cycle? (*She bleeds.*)
4. When does the menstrual cycle end each month? (*On the last day before the next menstruation or period.*)

5. What is ovulation and when does it occur? (*When the egg leaves the women's ovary. This occurs approximately in the middle of the woman's menstrual cycle.*)
6. Can a woman become pregnant during every day of her cycle? (*No.*)
7. Can a woman become pregnant the first time she has sexual intercourse? (*Yes.*)
8. What are fertile days? (*The days a woman can become pregnant.*)
9. What are infertile days? (*The days a woman cannot become pregnant.*)
10. After he starts puberty, is a man always fertile? (*Yes, he can be fertile every day for the rest of his life.*)
11. Who begins puberty earlier, girls or boys? (*Most girls begin puberty one to two years earlier than do boys, but boys eventually catch up.*)
12. How do uncircumcised boys clean their penises? (*Pull back the foreskin and clean gently.*)
13. Where does the sperm meet the egg in a woman's body? (*The fallopian tube.*)
14. What is the purpose of vaginal secretions? (*They aid the sperm to travel up through the vagina.*)
15. Do all boys have wet dreams? (*No. However, most do, and it is perfectly normal.*)
16. Will a woman have her period the rest of her life? (*No. She will stop when she reaches menopause.*)
17. What are some of the changes a woman might experience just before or during her period? (*Cramping, bloating, weight gain, food cravings, skin problems, headaches, etc.*)

Step 2: Puberty Stories³

Small Group Activity (25 minutes)

Begin by telling the group that you want to find out how much they remember about puberty, specifically about menstruation in girls and wet dreams in boys. Tell the group that you have some unfinished stories that you want them to complete. They will need to use their knowledge and their creativity so that each story will be unique.

Have participants form small groups of four or five people and pick a person to take notes. (Distribute a copy of both Helen's Story handout and Fred's Story handout to each group.) Ask the small groups to fill in the blanks for both stories. After about 10 minutes, have the recorder read the group's version of Helen's Story. Then do the same with Fred's Story.

When the groups are finished, lead a discussion covering the following:

- Which story was easier to complete? Why?
- Whom would you consider asking if you had a question about puberty or sexuality?
- Would people act differently than Helen or Fred? Why?

³ Center for Population Options. *When I'm Grown: Life Planning Education for Grades 5 and 6*. (Washington: Center for Population Options, 1991) 11.

Step 3: Menstrual Cycle Mix-up

Small Group Activity (15 minutes)

Divide the participants into groups of six people. Give each group a set of note cards with one of the following phrases written on each card.

- The woman starts her period.
- The uterus prepares the lining for the egg.
- An egg matures.
- An egg is released from the ovary.
- The uterus gets rid of the unfertilized egg.
- A sperm does not fertilize the egg.

Have each participant in the group take one note card. Tell them that these cards represent what happens in the menstrual cycle. Tell the group to arrange themselves in a line so that the cards are in the right order of events.

Facilitator Note

The answers to the mix-up are:

1. An egg matures.
2. An egg is released from the ovary.
3. The uterus prepares the lining for the egg.
4. A sperm does not fertilize the egg.
5. The uterus gets rid of the unfertilized egg.
6. The woman starts her period.

Step 4: Fertility and the Future

Small Group Activity (30 minutes)

Begin the exercise by stating the following: “There are many kinds of love, and many ways to express love and affection for another person. Love between parents and young people or brothers and sisters, love between

friends, and romantic love are some of the different kinds of love. How do you show someone that you love him or her? How do you show your parents? Your brother or sister? Your friend? A boyfriend or girlfriend? Talking, smiling, kissing, hugging, and touching are ways of expressing love and affection.”

Divide the participants into small groups of three to four people. Ask each group to draw a large heart on a poster-size sheet of paper. Ask participants to list, inside the heart, all the things a boy and girl could do to show that they like each other. These things can include places to go, activities to do, gifts to give, or favors to do for others. Each small group can read their list to the rest of the group.

Have participants decide whose list represents the most exciting, creative, and affordable ideas for participants. See the Sample List below for ideas.

Tell them that the coming years will be a time of significant change for their bodies and their minds. Reinforce the idea that participants might be changing emotionally and physically, but they are still children growing into a more mature body. Stress that they might be physically becoming an adult and may even be having some adult feelings in thinking about kissing or touching someone sexually, but they are not ready yet to act on these feelings.

Sample List

- Take a nice walk
- Talk
- Watch movies
- Go shopping
- Play computers
- Watch the sunset
- Eat chocolate
- Hang out with friends
- Laugh
- Play or listen to music
- Write
- Dance
- Play sports
- Visit family
- Watch a play (theater)

Stress the Following

Thank them for being such an enthusiastic group. If they have other questions in the future, encourage them to always ask you and other adults they trust. Tell them that you will keep your Question Box available for any questions they might have in the future.

Handout: Helen's Story

Complete Helen's story by filling in the blanks. Try to fill in every blank. This is not a test, so do not worry about getting the "right" answers.

Helen is 12 years old. After learning about menstruation in a fertility awareness course, she was feeling _____ about starting her period. One day she went to the bathroom and noticed _____. She had started her period. Helen felt _____

_____.

She got _____ from _____ to prevent getting a spot on her pants.

As soon as school was over, she rushed to tell _____.

Helen knew that her period would last about _____ days but she wanted to find out _____.

_____.

_____.

_____.

Now that she had finally started, Helen was glad that _____.

_____.

Something new had happened to Helen. It meant that she was _____.

_____.

_____.

Handout: Fred's Story

Complete Fred's story by filling in the blanks. Try to fill in every blank. This is not a test, so do not worry about getting the "right" answers.

One morning Fred woke up and discovered that he had his first wet dream the night before. He knew this because _____

_____. Fred remembered that another name for a wet dream is _____.

Although Fred had learned about wet dreams in school and knew that he was normal, he still felt a little embarrassed that _____

_____.

On the other hand, Fred felt good about _____

_____.

Fred thought a lot about wet dreams that day. One of the questions on his mind was _____

_____.

To find out the answer, he decided to ask _____

_____.

Something new had happened to Fred. It meant that he was _____

_____.

Evaluation: How Much Do You Know?

You can use this evaluation to find out how much the boys and girls have learned from the fertility awareness manual. Ask them to think about what they now know about the changes that boys and girls experience as they enter puberty and grow into men and women. Go through each statement below with the young people, correcting any misunderstandings they may have.

Statement	True	False
Sperm are produced in the penis.		X
“Wet dreams” are common for boys during puberty.	X	
Semen contains seminal fluid and sperm.	X	
When a boy or man has an erection, he always needs to ejaculate.		X
A boy’s breasts never change during puberty.		X
Men usually stop having ejaculations when they are around 60 years old.		X
During puberty a boy’s shoulders broaden and he begins to grow taller.	X	
Circumcision is an operation performed only on boys.		X
New thoughts and feelings accompany the physical changes of puberty.	X	
At puberty, a boy is capable of becoming a father.	X	
If a girl does not get her period by the time she is 14, there is something wrong with her.		X
If a woman misses a period, she could be pregnant.	X	
The period or menstruation always lasts five days.		X
All women have a menstrual cycle that lasts 28 days.		X
Ejaculation happens only during sexual intercourse.		X
Both men and women masturbate.	X	
Masturbation can cause people to go crazy.		X
A girl can get pregnant the first time she has sex.	X	
Sexual intercourse is a physical act in which the man’s penis enters the woman’s vagina.	X	
During puberty, body hair does not grow in new places.		X
During puberty, rapid changes in height and weight take place in boys and girls.	X	

Glossary

Adolescence: The time between puberty and adulthood.

Cervix: The lower portion of the uterus, which protrudes into the vagina.

Circumcision: For males, it is the removal of all or part of the foreskin of the penis. For females, it is the removal of the clitoris or removal of the clitoris and labia at birth, during childhood, or at puberty.

Clitoris: A small organ at the upper part of the labia that is sensitive to stimulation.

Egg: A female sex cell.

Ejaculation: Forceful release of seminal fluid from the penis.

Epididymis: Organ where sperm mature after they are produced in the testicles.

Erection: Hardening of the penis.

Fallopian tubes: Tubes that carry eggs from the ovaries to the uterus.

Fertility: Ability to produce offspring (children).

Fertilization: Union of the egg with the sperm.

Fetus: The product of conception from the end of the eighth week of pregnancy to the moment of birth.

Foreskin: Loose skin covering the end of the penis.

Genitals: Reproductive organs.

Glans: The end, or head, of the penis.

Growth spurt: A rapid increase in height and weight, which typically occurs during puberty.

Hormones: Special chemicals secreted by endocrine glands that cause changes in specific areas of the body.

Labia majora (outer lips): Two folds of skin (one on either side of the vaginal opening) that cover and protect the genital structures, including the vestibule.

Labia minora (inner lips): Two folds of skin between the labia majora and the vestibule that extend from the clitoris on each side of the urethral and vaginal openings.

Masturbation: Touching yourself for sexual pleasure.

Menopause: The stage at which menstrual activity ends.

Menstrual cycle: The period of time measured from the first day of the menstrual period through the series of regularly occurring changes in the ovaries and uterus to the first day of the next menstrual period.

Menstruation: The monthly discharge of blood and tissue from the lining of the uterus.

Nocturnal emission (wet dream): The passing of semen from the urethra during sleep.

Ovaries: Two glands that contain thousands of immature egg cells. Each month an egg ripens and breaks out of its sac, a process called ovulation.

Ovulation: The periodic release of a mature egg from an ovary.

Penis: External male organ through which semen or urine leave the body.

Premenstrual syndrome (PMS): Symptoms such as cramps, tension, anxiety, breast tenderness, and bloating, which begin several days prior to the onset of menstruation and subside when menstruation begins.

Prostate gland: This gland produces a thin, milky fluid that becomes part of the semen.

Puberty: The period of life during which an individual becomes capable of reproduction.

Pubic hair: Hair over the pubic bone, which appears at the onset of sexual maturity.

Reproduction: The process of conceiving and bearing children.

Scrotum: The pouch of skin behind the penis that holds the testicles.

Secretion: The process by which glands release certain materials into the bloodstream or outside the body.

Semen: The fluid that leaves a man's penis when he ejaculates.

Seminal vesicles: Small glands that produce a thick, sticky fluid that carries the sperm.

Sexual intercourse: The erect penis of the male entering the vagina of the female.

Sperm: A male sex cell.

Testicles (testes): Male reproductive glands that produce sperm.

Uterus: The small, hollow, muscular female organ where the fetus is held and nourished, from the time of implantation until birth.

Urethra: A canal that carries urine from the bladder to the urinary opening in both males and females. In males, the urethra also carries semen.

Urethral or urinary opening: The spot from which a man or woman urinates.

Vagina: The canal that forms the passageway from the uterus to the outside of the body.

Vaginal discharge (secretion): A normal, white or yellowish fluid from the cervical canal or vagina.

Vaginal opening: Opening from the vagina where menstrual blood leaves the body.

Vas deferens: The long, thin tubes that transport sperm away from the epididymis.

Vestibule: The area of the external female genitalia that includes the vaginal and urethral opening.

Virgin: A person who has not had sexual intercourse.

Vulva: The external genital organs of the female, including the labia majora, labia minora, clitoris, and vestibule of the vagina.

Wet dream (nocturnal emission): The passing of semen from the urethra during sleep.

Organizations and Reproductive Health Web Sites

Institute for Reproductive Health (Institute)

Part of Georgetown University, the Institute conducts research, advances scientific information, and provides policy support in natural methods of family planning and fertility awareness.

Institute for Reproductive Health, Georgetown University, 4301 Connecticut Avenue, NW, Suite 310, Washington, DC 20008 USA; Telephone: 202-687-1392; Facsimile: 202-537-7450; Web site: www.irh.org

Family Health International (FHI)

FHI works to improve reproductive and family health around the world through biomedical and social science research, innovative health service delivery interventions, training, and information programs.

FHI leads YouthNet, a global program committed to improving the reproductive health and HIV prevention behaviors of youth 10 to 24 years old. YouthNet collaborates with youth, parents, religious and community leaders, policy-makers, schools, health professionals, employers, the media, nongovernmental organizations (NGOs), and other youth networks to improve the reproductive health of young people worldwide.

FHI Headquarters, P.O. Box 13950, Research Triangle Park, NC 27709 USA; Telephone: 919-544-7040; Facsimile: 919-544-7261; or FHI HIV/AIDS and YouthNet Departments, 2101 Wilson Boulevard, Suite 700, Arlington, VA 22201 USA; Telephone: 703-516-9779; Facsimile: 703-516-9781; Web site: www.fhi.org

Advocates for Youth

This organization is dedicated to creating programs and advocating for policies that help young people make informed and responsible decisions about their reproductive and sexual health.

Advocates for Youth, 1025 Vermont Avenue, NW, Suite 200, Washington, DC 20005 USA; Telephone: 202-347-5700; Facsimile: 202-347-2263; Web site: www.advocatesforyouth.org

Alan Guttmacher Institute (AGI)

AGI's mission is to protect the reproductive choices of women and men in the United States and around the world. AGI seeks to inform individual decision-making, encourage scientific inquiry, enlighten public debate, and promote the formation of sound public- and private-sector programs and policies.

Alan Guttmacher Institute Headquarters, 120 Wall Street, 21st Floor, New York, NY 10005 USA; Telephone: 212-248-1111; Facsimile: 212-248-1951; or 1120 Connecticut Avenue, NW, Suite 460, Washington, DC 20036 USA; Telephone: 202-296-4012; Facsimile: 202-223-5756; Web site: www.agi-usa.org

Centers for Disease Control and Prevention (CDC)

CDC's mission is to promote health and quality of life by preventing and controlling disease, injury, and disability.

Centers for Disease Control and Prevention, 1600 Clifton Road, Atlanta, GA 30333 USA; Telephone: 800-311-3435; Facsimile: 770-488-3110; Web site: www.cdc.gov

International Planned Parenthood Federation (IPPF)

IPPF and its member Associations are committed to promoting the right of women and men to decide freely the number and spacing of their children and the right to the highest possible level of sexual and reproductive health. IPPF links with autonomous national Family Planning Associations (FPAs) in over 180 countries worldwide.

International Planned Parenthood Federation, IPPF Public Affairs Department, Regent's College, Inner Circle, Regent's Park, London NW1 4NS, UK; Telephone: 44-171-487-7900; Facsimile: 44-171-487-7950; Web site: www.ippf.org

National Campaign to Prevent Teen Pregnancy

This organization is dedicated to preventing teen pregnancy by supporting values and encouraging acts that are consistent with a pregnancy-free adolescence.

National Campaign to Prevent Teen Pregnancy, 1776 Massachusetts Avenue, NW, Suite 200, Washington, DC 20036 USA; Telephone: 202-478-8500; Facsimile: 202-478-8588; Web site: www.teenpregnancy.org

Pathfinder International

Pathfinder International provides women, men, and adolescents throughout the developing world with access to quality family planning information and services. Pathfinder works to halt the

spread of HIV/AIDS, provide care to women suffering from the complications of unsafe abortion, and advocate for sound reproductive health policies in the United States and abroad. Pathfinder also implemented the FOCUS on Young Adults program which worked to improve the health and well-being of young adults in developing countries through the creation and strengthening of effective reproductive health initiatives.

Pathfinder International, 9 Galen Street, Suite 217, Watertown, MA 02472 USA; Telephone: 617-924-7200; Facsimile: 617-924-3833; Web site: www.pathfind.org

Planned Parenthood Federation of America (PPFA)

PPFA is the world's largest and most trusted voluntary reproductive health care organization. PPFA believes in the fundamental right of individuals to manage their own fertility regardless of income, marital status, race, age, sexual orientation, and national origin. PPFA believes that reproductive self-determination must be voluntary and preserve the individual's right to privacy.

Planned Parenthood Federation of America, 810 Seventh Avenue, New York, NY 10019 USA; Telephone: 212-541-7800 or 800-230-PLAN refers you to your local Planned Parenthood organization; Facsimile: 212-245-1845; Web site: www.plannedparenthood.org

Reproductive Health Gateway

The Health Information Publications Network (HIPnet) has developed the Reproductive Health Gateway, a powerful one-stop on-line search site that searches through more than 20,000 pages in over two dozen Web sites selected for information on reproductive health.

Web site: <http://www.rhgateway.org>

Reproline®

ReproLine® is a free source of up-to-date information on selected reproductive health topics, including family planning. It is designed for policy-makers with technical or clinical backgrounds involved in setting policy for service delivery. ReproLine® is managed by the JHPIEGO Corporation.

Web site: <http://www.reproline.jhu.edu>

Sexuality Information and Education Council of the United States (SIECUS)

The mission of SIECUS is to affirm that sexuality is a natural and healthy part of living; to develop, collect, and disseminate

information; to promote comprehensive education about sexuality; and to advocate the right of individuals to make responsible sexual choices.

Sexuality Information and Education Council of the United States Headquarters, 130 West 42nd Street, Suite 350, New York, NY 10036-7802 USA; Telephone: 212-819-9770; Facsimile: 212-819-9776; or 1706 R Street, Washington, DC 20009 USA; Telephone: 202-265-2405; Facsimile: 202-462-2340; Web site: www.siecus.org

United Nations Population Fund (UNFPA)

UNFPA helps developing countries find solutions to their population problems. It is the largest international source of population assistance. UNFPA has a number of resources and programs in reproductive health including family planning and sexual health.

United Nations Population Fund, 220 East 42nd Street, New York, NY, 10017 USA; Telephone: 212-297-5020; Facsimile: 212-557-6416; Web site: www.unfpa.org

Web Sites for Youth

Girls Incorporated: www.girlsinc.org/ic/

This site is from a U.S. nonprofit, youth organization dedicated to inspiring all girls to be strong, smart, and bold.

Go Ask Alice: www.goaskalice.columbia.edu

This site has questions and answers on relationships, sexuality, and sexual health issues.

I Wanna Know: www.iwannaknow.org

This site offers information on STIs, basics about body changes, and advice on how to deal with peer pressure.

It's Your (Sex) Life: www.itsyoursexlife.com

This site provides reliable, objective sexual health information for young adults.

Mezzo: www.ippf.org/mezzo/index.htm

This site is an on-line guide to love and relationships for young people by young people.

Sex Etc.: www.sexetc.org

This site helps youth become sexually healthy people and avoid pregnancy and disease during their teenage years.

Teenwire: www.teenwire.com

This site gives you information on young men's and women's bodies, how not to have sex if you do not want it, safer sex, and dealing with breaking up.

Voices of Youth: www.unicef.org/voy/

This site has discussion forums on how the world can become a place where the rights of every child are protected.

X-press: www.ippf.org/x-press/index.htm

This site is IPPF's newsletter by and for young people.

Yo! Youth Outlook: www.pacificnews.org/yo/

This site is a monthly newspaper by and about young people.

Youth HIV: www.youthhiv.org

This site includes information on living with HIV infection.

Youthshakers: www.youthshakers.org

This site is a global network of youth working to promote positive sexual health through providing sexual health information, peer education, and youth leadership development.