

MENTAL HEALTH AND WELLBEING

A Perspective



CENTRAL BOARD OF SECONDARY EDUCATION

The Greatest Gift

The greatest gift of all

Cannot be bought in stores or malls

It is the treasure of being heard

truly heard

It is the gift of listening to

hopes, fears, dreams, hurts

listening demonstrates

acceptance, caring and hope

taking time to listen

fosters trust and respect

the gift of your presence

truly listening opens doors to caring relationships

It's the greatest gift of all.



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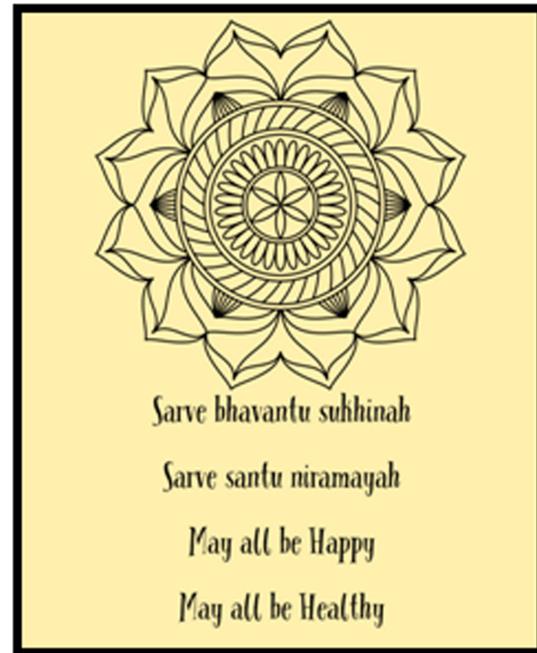
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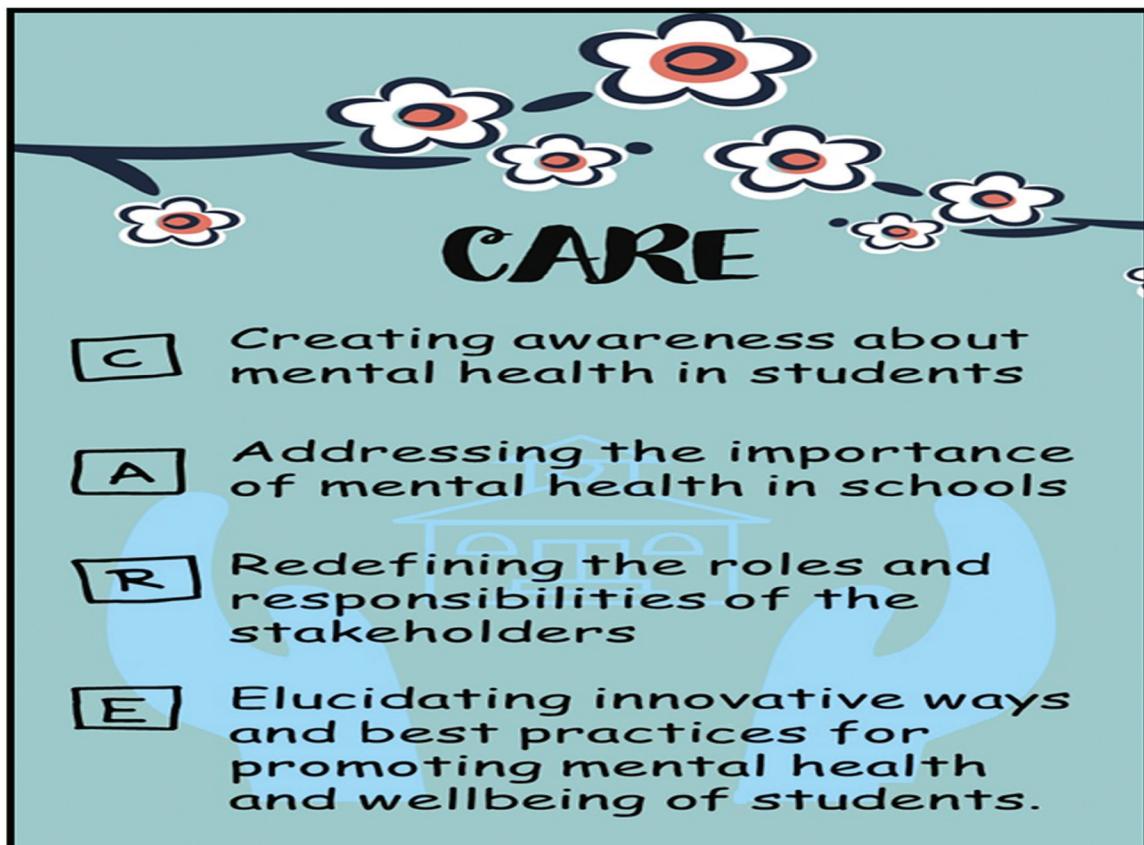
Mental Health and Wellbeing - A Perspective

Schools and family are important social units which anchor the health and well-being of all individuals. Schools have the prime responsibility to promote and optimize the physical, social and also the mental health of students. The emerging challenges have necessitated that the schools also shift the focus to the psychosocial needs of students and take care of the overall wellbeing. Identification and Prevention can essentially create safe ecosystems.

Perhaps first of its kind in the country, this publication attempts to align the role and importance of, parents, schools, teachers, counselors, special educators as immediate care givers at different developmental phases of students. It is earnestly hoped that this will lead to appropriate sensitization and a healthy discourse.



The purpose of this manual is CARE:



1

Importance of Mental Health and Wellbeing



“ WHAT MENTAL HEALTH NEEDS IS MORE *sunlight, more candor, more unashamed conversation*”
- GLENN CLOSE

Mental health and psychosocial wellbeing are one of the most neglected areas in our country. The National Mental Health Survey (2016), reports almost one hundred fifty million citizens of our country needing care and support for their mental health wellbeing. Additionally, it was discovered that between seventy to ninety percent of these people failed to receive early, timely and quality intervention. According to World Health Organisation (WHO) the self-harm rates in the adolescent age group are found in the highest numbers at a global level. Emotional stress and other concerns are a major contributing factor for most of the physical illnesses. Mental healthcare providers like psychiatrists, clinical psychologists, counsellors and allied professionals agree that early intervention can prevent many future mental health conditions.

Further research findings suggest that factors like physical illness, limited basic resources, inability to provide for self and family as well as unfulfilled desires in life are major factors that impact mental health and wellbeing.

A holistically healthy individual engages in productive activities, has fulfilling relationships with others, and displays the capacity to adapt to change and cope with adversity.



Mental Health Indicators

- Develop Psychologically, Emotionally, Intellectually and Spiritually.
- Initiate, develop and sustain mutually satisfying relationships.
- Use and enjoy solitude.
- Become aware of others and empathise with them.
- Play and learn.
- Develop a sense of right and wrong.
- Resolve problems and setbacks and learn from them.

1.1 The Need and Emergence



To ensure physical and psychological safety of our children, easy access to mental health service and support in schools is the first step. The ambit of mental health must encompass the emotional, behavioural, and social wellbeing of a child. The most important feature of mental health is 'adaptability', the ability to cope with daily life challenges effectively. Giving a secure environment to children in schools is important for this reason. Easy access, wellbeing and adaptability must be aligned together to create a comprehensive system in a school.

1.1.1 Positive Mental Health= Success In Life

Children's success in school and life is directly linked to their mental health. Some research

findings indicate that children who receive mental health support do better in academics, are flexible and adaptive to change. The overall mental health determines learning. Problem in activities and behaviour can be addressed by providing mental health support.

1.1.2 Reason for Growing Need

Research suggests that almost one-fifth of the children and adolescents experience a mental health concern like stress, anxiety, bullying, learning disability, and/or alcohol and substance abuse.

A large number of students do not receive the attention and care they need because of the prevalent stigma associated with mental illnesses. Therefore, it is important to have widespread awareness to address the mental health challenges faced by school students.

1.1.3 Need for Trained Professionals

School counselors are specifically trained to handle behavioural and emotional challenges faced by children and adolescents. They are attuned to understand the struggles of students. Teachers also receive practical training in child development.

1.1.4 Conclusion

Access to mental health services in schools is vital in improving the physical and psychological safety of students and schools. It is important to create a school culture that enables the student to report safety concerns. School mental health professionals provide support, identify and work with students over more intense or ongoing needs.



1.2. Paving Way to Smooth Transitions

One of the most important challenges is accepting and adapting to change and a child is expected to adapt to various challenges s/he experiences while growing up. We are raised to believe that change is the only constant in life. Transitions are an essential part of our life and they come in various life situations, starting from our childhood. Hence, transition from child's perspective can be very challenging. For example some children at pre-primary grade level at times feel insecure when they are expected to adapt to another setting and routine in primary school.

Most of the time we do not look at it as an issue and assume that the child will adjust to these changes. In most cases, this transition from home to school can be smooth for the child, but in some cases, it might be disturbing if not handled with care.

During the early developmental years, the child shows changes in the physical, motor, social, emotional, language, and cognitive skills. The role of families and parents is to ensure school readiness. Teachers with the support of families ensure within school transitions. The following table gives out important transition junctures and suggestions-

Pre-Primary to Primary wing	<ul style="list-style-type: none">- Preparing the children for change of routine (timings)- Talking about changing seating arrangements- Facilitating activities involving group work- Acquainting children to new classes or new block
Mother Teacher Concept to Subject Teacher Concept	<ul style="list-style-type: none">- The teacher can help the child understand that it is natural to feel worried during transitions- Plan an introduction well in advance before the session begins- It is better if the children are introduced to all the teachers who will be teaching them
Pencil to Pen Transition	<ul style="list-style-type: none">- The preparedness in the child should be seen- 9 years of age is a good time- Occupational therapists suggest that children must be encouraged to write with a good quality fountain pen- Practice fine motor and eye-hand coordination activities
Primary to Middle	<ul style="list-style-type: none">- Workshops about puberty and bodily changes can be organized- Small conversations about bullying and its ill-effects can be planned in classes- The new changes in curriculum (for e.g. Social Science dividing into History, civics, political science, geography, economics) should be explained in detail- Buddy system can be introduced for the children who have academic and behavioral concerns.- Certain workshops related to adolescent concerns like – goal setting, limit setting, self-esteem can also be organized
Grade XI - XII	<ul style="list-style-type: none">- Career guidance workshops can be planned- Each stream must be introduced to all the children and information about relevant careers can also be shared- There is a growing need to discuss Cyber bullying in this age group.

2

Mental Health in Schools, Families & Communities : A Holistic Approach



Family is the first socialization framework the child is exposed to. It is an important cornerstone for a child because attachment, emotions, personality traits, behaviours emanate from the family. Right from food preference to interest and social interaction all depend on this one unit.

The next framework of socialization is school. This provides plethora of opportunities and psychological space for holistic development.

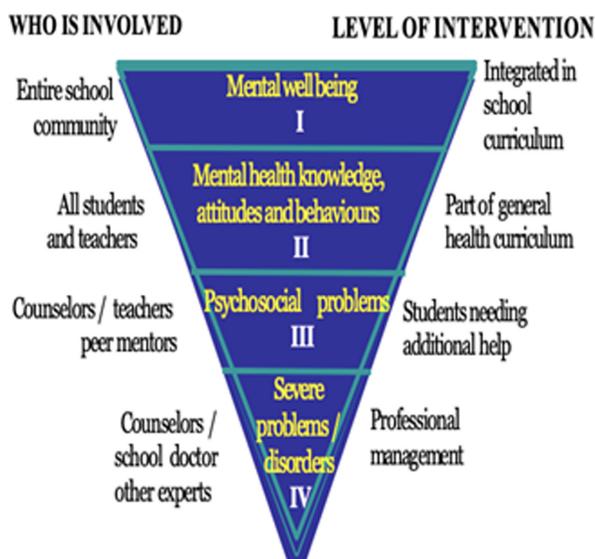
Community, from a developmental perspective has a broader meaning. It may include the teachers connected over a period of an academic year. It may imply the families and neighbourhood for the psychosocial support.

In short, it includes various places where children feel affiliated to and have a feeling of belongingness.

Children's relationship with environment starts from the family and gradually encompasses people outside. Teachers are a significant part of this relationship.

Conclusively, family, schools and communities together work hand in hand in fostering the mental health and wellbeing of the child. They are equal stakeholders in the upbringing of the child.

Model For Psycho Social Wellbeing



2.1 Role of School

Almost all children attend school and spend 6-7 hours of their time every day in that learning environment. Incorporating mental health into the school curriculum can have substantial influence on well-being of the students. A school that makes conscious effort to constantly promote mental health and wellbeing of its children strengthens its capacity as a healthy setting for living and learning. The increase in the reports of bullying and school violence emphasizes the importance of early recognition and response to the situations. In the last decade, school mental health has expanded to address school violence, bullying, substance abuse, discrimination and maintaining healthy discipline.

The priority in schools should mainly be about early identification at the individual and systemic level. There are two main goals here- bringing positive change to a children's behavior and optimizing their potential academically. It also focusses on preventing future negative outcomes for children. Hence, the school counseling program and policy are collaborative efforts having benefits for students and their multiple stake holders in a school setup i.e. parents, teachers, administration and management.

2.2 Role of Family

Family is the most valuable source of support for children. It includes parents, siblings,

grandparents, close relatives, especially when we are looking at the collectivistic culture quintessential to our country. In all the stages of life, the family support shows dynamic changes. For e.g., in healthy and functional families, during childhood, the children are completely dependent on all their needs on the family. As the child grows up, this dependence tends to modify.



There is a growing consensus about the positive influence of grandparents on their grandchildren's development and, consequently, on their mental health. The scenario of multigenerational families is a crucial part of the societal fabric of India. Growing-up years are often associated to 'nani ki kahaani' and 'dadi ke nuskhe'. Grandparents offer love, guidance and wisdom. Research indicates, "with changing family patterns, increased life expectancy, growing numbers of dual-worker households and higher rates of family breakdown, grandparents are now playing an increasing role in their grandchildren's lives". Hence, the concept of multigenerational families entails unconditional love, shared responsibilities, safety and security,

Parent-child relationships can be complex. If the child is experiencing emotional and behavioural difficulties, managing for parents may be difficult at times. A parent must take care and be patient, regularly spend quality time with the child and consult counselors and other mental health professionals about possible interventions.

2.3 Role of Community

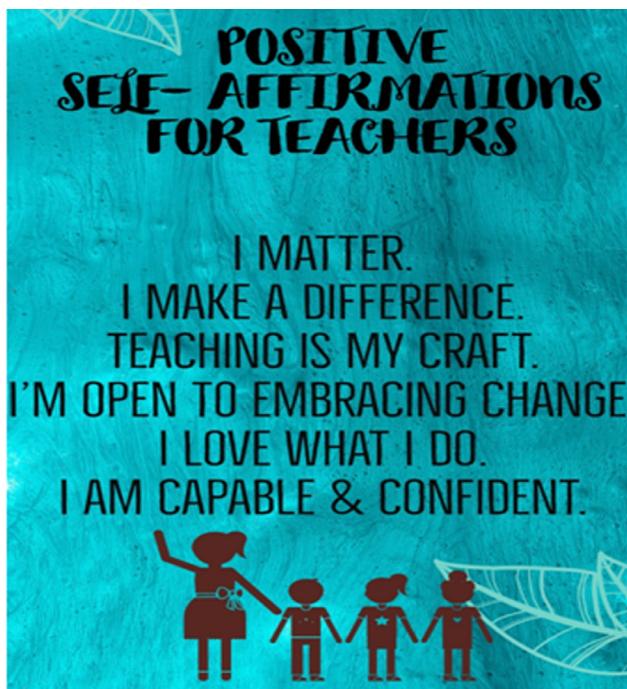
As the term 'community' is vast in its scope, some examples were mentioned before. Keeping

the essence of the term intact, community is anything that the child feels belonged to and derives a sense safety and support. The feeling of support and safety gives them the confidence to play, explore and learn. Hence, connection to the community creates a responsive, safe, and stable education and caring environment. Communities foster positive interactions and relationships between children, peers, and adults and strengthen outcomes. The overall aim is to create a school system that provides the most joyful, creative, exploratory and vibrant experience.



3

Teacher's Wellbeing



In an age where dialogues and discussions about mental health and protection of rights of children are on the rise, it becomes necessary for us to talk about mental health of teachers. Hence, schools become an important groundwork arena for positive mental health.

The teacher's work is not just limited to stoic pedagogies but is also altruistic in its essence. Small paychecks, poor incentives, perceived stagnation, and increasing demands have led to greater levels of stress in their jobs. With bags filled with notebooks to be corrected, meeting deadlines for submission of thoroughly checked assessment sheets, somewhere the teachers' wellbeing has never been a topic of discussion.

When we say that a teacher wears 'multiple-hats,' it is important for us to also acknowledge the weight of these hats. A teacher multiplies as a mentor, counsellor, coach, nurse, motivator, an event planner and the list is endless.

"An empty lantern provides no light. Self-care is the fuel that allows your light to shine brightly" (Unknown).

3.1 Need and Importance

The following table explores the need and importance of having a positive and enriching culture for teachers-

- | |
|--|
| • Teacher understands her/his own emotions better- in-turn understands the students-teacher relationship |
| • Helps in communication with children |
| • Helps manage students they may find challenging to teach |
| • Helps set up positive learning environment |
| • Helps develop a bond with the children |
| • Helps us to slow down when the stress levels are going up |

3.2 How can schools help?

Develop a positive work culture by facilitating small group activities involving light-hearted conversations

- ✓ Providing opportunities for self-care (examples given in graphic below)
- ✓ Reinforcing teachers with recognition of their efforts by rewarding and appreciating their efforts.
- ✓ Creating a culture of 'Mindfulness' (examples given in the graphic below)

A lot of people associate Mindfulness being a difficult task. However, it may be as simple as-

- A- Alert
- B- Breathe out
- C- Calm down

Such practices help a teacher to gain mindful presence, when it's most needed, allowing them to refocus their attention to the learning environment and the students' needs within the classroom.

A Mindful Minute for Teachers.

What can I hear?

What can I smell?

What can I see?

What can I feel?

**Take one minute, concentrate and think about what is happening right now.
All your worries will diffuse.
You will feel calm and relaxed.**

4

Teacher As A Facilitator



Schools provide a comprehensive framework that includes learning opportunities for students and the promotion of growth on all fronts—physical, emotional, psychological, and social. Teachers are one of the most crucial linkages to the positive mental health of students. They play a significant role in a student's life. They are embodiments of knowledge, moral support, encouragement and love. Teachers have a crucial role in shaping a student's future; they make students independent.

Essentially, a teacher offers learning support, innovates around the teaching aids and facilitates all possible guidance. At the classroom level, teachers can aid guidance and support by showing empathy for the students' personal, emotional or family related problems. One can try to understand the reasons which form the

base for some students' emotional disorders and their deviant behaviours. Having non-judgemental and unmasked communication with students may also help them tremendously. In many situations, a healthy and communicative relationship between the teacher and a student helps identify behavioural deviations and emotional conflicts, hence preventing a significant number of concerns.

After understanding a problem faced by a student, the role of a teacher is to help students to enable them and facilitate them to solve the problem independently. Such facilitation works on the principle that every individual, if guided properly, can develop better-coping skills. Empathy is considered as one of the most important skills for a teacher. Teacher addresses problems related to the school and beyond school.

A teacher may not replace or substitute the expertise of a counsellor, but in the absence of a trained counsellor, can don the role of a substitute help. A teacher would be the first to be able to raise the alarm and reach out to the counsellor or any mental health professional associated with the school if s/he notices any unhealthy emotions or behavioural manifestations.

The teacher-counsellor team would then be able to collaborate and work closely to help the child in situations as soon as the teacher notices.

How can a teacher ensure support to a student-

Building rapport: The teacher must allow the student to be comfortable around him/her. Verbal (by giving positive feedback) and non-verbal (by gestures like consistent eye contact) reassurances work best.

Encourage unmasked expression of emotions: having an open conversation in which the child

can vent out and paraphrasing the content shared helps children to assimilate better.

Non-judgemental listening and feedback: by showing empathy and compassion towards students.

Ensure complete confidentiality: Going by the dictum- "whatever you say to me will stay with me unless you are in danger or you may put others in danger."

HELPING A STUDENT

The focus is to provide a safe, secure and nurturing climate in which the child can develop healthy coping skills

1. Identify the problem
2. Listen to the child's problem
3. Create goals to facilitate positive change
4. Brainstorm alternatives together
5. Motivate the child to show positive change

5

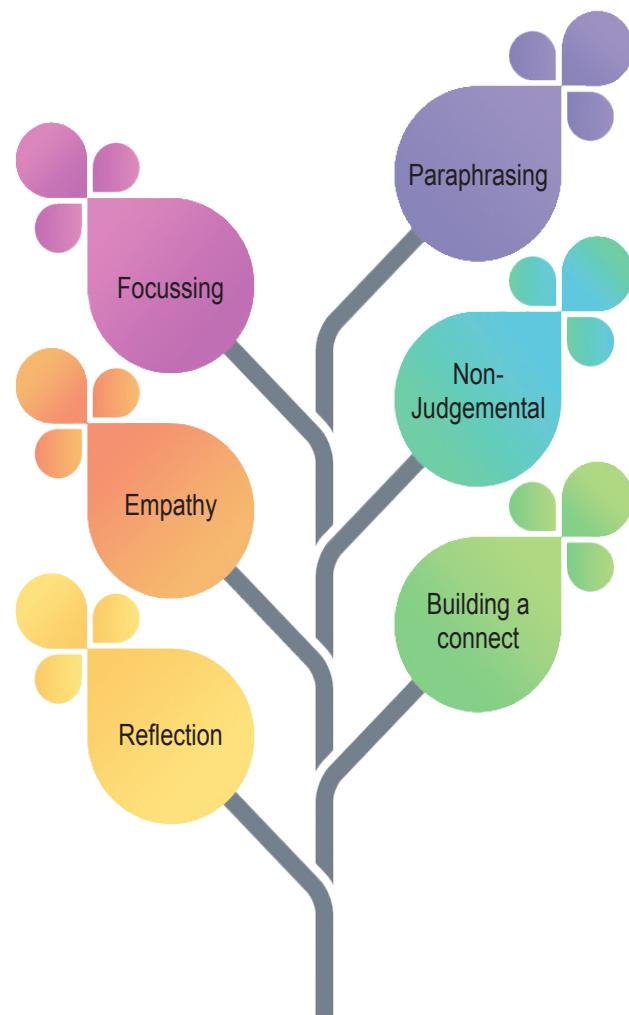
Role of School Counselors

There is a growing importance of School Counsellors as an important part of the educational leadership team as they provide valuable assistance to students. The complexities that exist in a school set up because a child is spending his maximum waking hours in school makes it important to have trained and dedicated counselors working towards students' mental health.

Counseling helps students in the following ways-

- Change maladaptive and unhealthy behavioral manifestations to adaptive and healthy ones.
- Build time management and organizational skills
- Establishing clear academic goals
- Resolving interpersonal problems and fostering positive group behaviour
- Conflict resolution
- Enhancing self-esteem
- Working through personal problems which cause emotional distress.

There is a positive uptick in the understanding and broadening of the role of counsellor within and outside the school hours. The increased awareness further strengthens this, and parent's dependence on school counsellors is crucial when it comes to managing their ward's emotional and psychological needs. In such times, the school counsellor's role expands further into a special-needs educator, a curative teacher, an investigator, and an advocate for the child's positive mental and emotional wellbeing.



**Basic
Counselling
Skills**

5.1 Counselling Services

Academic and career direction: Sometimes, students feel directionless in the absence of guidance at home or outside to actualize their academic potential. The school counselor can act as a mentor and help to better understand higher study options after school. Counselors today are expected to keep themselves abreast with the latest career trends and developments for this purpose.

1. Peer issues: serious issues like bullying, 'groupism', unhealthy exposure to social media are often seen in schools. Counselors are expected to be aware, and if required, assess and report such situations to the school authorities, and work with school and family members to rectify the situation.

2. **Psychosocial Problems:** A major part of a counselor's time in school is spent in identifying problematic behaviors in children and rectifying before they snowball into a major concern. In such cases, the counsellor may also seek parents' support to help enable the child to solve his/her issues.
3. **Collaborating with Parents:** The counselor may seek the help of parents to monitor the child's after school behaviour and ensure the strategies suggested are being used effectively.
4. **Working with Teachers:** Teachers have a crucial role in offering care, and referring students to the school counsellor whenever there is a need. Teachers can offer the support to a counselor in ensuring that a child manages to cope with pressure, and help unburden the child – emotionally and mentally.

Role of counsellors

<p>PARENTS</p> <ul style="list-style-type: none">1. Parent education2. Networking/ communicating3. Academic planning4. Career awareness programs	<p>TEACHERS</p> <ul style="list-style-type: none">1. Classroom guidance activities2. Academic support including learning style assessment and education to help students succeed academically.3. At-risk student identification and implementation of interventions to enhance academic success.
ROLE OF COUNSELOR WITH OTHER STAKE HOLDERS	
<p>SPECIAL EDUCATORS</p> <ul style="list-style-type: none">1. Collaborating with educators to devise a complete education program.2. Coordinating for planning effective remediation based on the Individualized Education Plan of the children.3. Coordination with the Occupational Therapist to understand needs of the students and facilitating integration	<p>ADMINISTRATORS</p> <ul style="list-style-type: none">1. Behavioral Management Plans2. School wide need assessment3. Student data and results4. Bus behaviour policy5. Anti-bullying policy

5.2 Key Roles and Responsibilities of the Counselors

Clause no. 2.4.12 of CBSE Affiliation Bye-Laws states: Every Secondary and Senior Secondary School shall appoint a person on full time basis for performing the duties of Counselor & Wellness Teacher. The person appointed as Counselor and wellness teacher shall be either a Graduate/Post Graduate in psychology or Post Graduate in Child Development or Graduate/ Post Graduate with Diploma in Career Guidance and Counseling. Schools having enrolment of less than 300 students in classes from IX to XII can appoint a Counselor & Wellness Teacher on part-time basis. The scope and understanding of the work of a counsellor changes with every age group.

During the primary years, collaborating with teacher and parents for early identification and intervention of problem is of prime importance. Counsellor must aim at observing and identifying barriers to learning, and helping the child remove those barriers. Promotion of academic, personal and social development is one of the most crucial tasks for a school counsellor in

the formative years of a child's school journey. Conclusively, effective behaviour management plans can be devised to help the child overcome their challenges, in turn fostering positive mental health.

One of the most important tasks of a school counsellor is to ensure personal and social development in the formative years of a child. For this, effective behaviour management plans can be devised for all stages including the middle and senior years. Identification and management of socioemotional, behavioral and academic concerns become lot more important. Programs focused on adolescent education and peer support become fundamental. For children showing maladaptive behavior, individualized behaviour management plans are designed.

Parental and teachers' counseling also helps in ensuring positive and facilitative environment for children. For students in secondary classes guidance on stream selection after class X board exams, vocational trainings and career counselling become vital. The role of counselor has been transformed from a substitute teacher to now a professional responsible for the promotion of overall mental health of students.

6

Role of Special Educators



Clause No. 2.4.11 of CBSE Affiliation Bye-Laws states

Every Secondary and Senior Secondary School should appoint a person on full time basis for performing the duties of Special Educator. The appointment and qualifications of Special Educator shall be in accordance with guidelines laid down by the Board and the minimum requirement laid down by Rehabilitation Council of India in this regard.

Special Educators are essentially case managers/experts and are responsible for the development, implementation, and evaluation of students' Individualized Educational Programs.

Such Individualized Educational Programs are specific and unique curriculum objectives which are made keeping in mind the individual student's needs.

Special Educators mainly provide the necessary information about special students, their needs, disability, medical concerns, equipment operation to the classroom teacher in advance. They essentially collaborate with teachers in adapting the curriculum, providing appropriate modifications, ensuring the implementation, and assessing overall progress of special students.

Duties and responsibilities of a Special Educator may include

1. Maintaining records of all students under their supervision and support.
2. Creating a detailed Individualised Education Plan, behaviour management plan tailor-made for the student under their supervision.
3. Keeping in touch with the students and parents, informing and discussing latest progress and developments.
4. Working as a team with the mainstream teachers.
5. Creating awareness about various learning difficulties.
6. Suggesting structural and pedagogical changes required for children with different abilities.

Cooperation, effective coordination and teamwork among special educators, teachers and school counselors is most important in an inclusive school set up.



7

Psychosocial Support : Dealing with Covid-19 and Beyond

COVID -19 is understandably a challenging time for everyone around the world. The global pandemic is not only serious medical concern but also brings mixed emotions and stressors for all.

Complete lockdown situations , suspension of regular classes and disrupted routine have impacted young and old alike. There are emerging mental health concerns related to the psychosocial wellbeing of students, families, and teachers across the country. This pandemic has brought new stress on families, parents, caregivers, including teachers. Uncertainty leads to ambiguity, stress, apprehension, and anxiety. There are Medical, Psychological, Emotional, Societal and Financial challenges and it is natural to feel stressed and anxious. One needs to adapt in the face of adversities, and build up what is called psychological resilience.

Practical Tips and Suggestions for Psychosocial Support and Management:

Gain authentic knowledge about the pandemic only from credible sources The source of most of our anxiety is the 'fear of the unknown' and 'lack of information' which leads us to preempt things and worry about things that are uncertain. Hence, individuals should get authentic knowledge from credible sources like government websites, portals and press releases.

Additionally, stress levels are enhanced due to the rumours which are spread by certain individuals.

This is unavoidable given the free access to social media and technology and this in turn leads to panic, especially for those who are have a pre-existing history of issues related to anxiety, depression.

Limiting overexposure to news: People must avoid constantly watching, reading, or listening to news stories. It can be overwhelming to hear about the crisis.

Dealing with Fear, Anxiety and Uncertainty: It is common to experience these emotions in a crisis situation.

- One should remain calm by reminding, there are thousands of individuals facing a similar situation and thousands who would be handling the situation well.
- Having faith in the agencies at different levels in the country who are tirelessly and selflessly working for the safety and health of the people.

Own up : it is crucial to come out and inform the authorities if any one in the family is at the risk of contracting the virus. This would ensure appropriate timely medical assistance. Hiding facts like travel history or contact with an infected person only puts the life at risk.

Cultivating Hope, Positivism and Optimism: One of the best ways to enhance immunity is by ensuring experience of positive mood states and emotions. Studies have indicated that individuals who experience

positive emotions like happiness, optimism, hope, gratitude have better immune systems. Hence despite the stress, one must endeavour to cultivate these emotions in self and others especially during quarantine or lockdown phases where one needs to positively utilize time in addition to enhancing psychological and emotional well-being. There are several ways by which this can be achieved:

- Listening to soothing music
- Indulging in a hobby or an activity one enjoys doing
- Enhancing skill set by learning something new for example taking an online course on something or reading and learning a new skill.
- Practice mindfulness, relaxation and meditation activities.

There is strong research evidence to suggest that these activities lead individuals to experience higher levels of positive emotions and consequently enhance other areas such as immunity, creativity, higher stress tolerance, better problem solving capacity.

Dealing with Stigma: This is understandably a concern unique to families and individuals affected by COVID-19. The fear of being stigmatised by others remains at the back of the mind for individuals who are either likely or confirmed cases of carrying the virus. Even their family members share the same concern for themselves.

THINK POSITIVE.



- Focus on the Positive.
- Amplify positive news stories
- Support care givers who work hard to fix the problem.
- Stay connected with friends & relatives.
- Engage in social interaction over phone or internet.

To sensitise people and avoid stigmatising people who are either affected by COVID, belong to a certain region/country or are associated with those affected by COVID. WHO has made clear that such individuals should not be referred as people with the disease as "COVID-19 cases", "victims" "COVID-19 families" or "the diseased". Rather they should be addressed as "people who have COVID-19", "people who are being treated for COVID-19", or "people who are recovering from COVID-19".

- Remember, that more than the stigma ,it is the health and life .Therefore facts should not be concealed
- It is all temporary and other people are facing this challenge too.

Creating and Providing Social Support: human beings, benefit greatly from social ties and support especially in the face of a crisis. Social support not only helps in generating more resources to help function more effectively but also creates a psychological buffer, a support system to derive an emotional and moral boost. Hence it is good to connect with friends, relatives, co-workers, family members and share feelings, thoughts and concerns.

- Sharing of feelings, positive interactions and guidance from close ones helps in relieving the pent up emotions and to put things in perspective.
- Utilising this crisis to reconnect, bond and show care and concern for the other is a productive step.

Caring for Self: In any crisis situation, capitalizing on own strengths and taking care of one's emotional, physical and psychological health is crucial to optimally function during protracted period of stress and uncertainty such as in this situation. It is important to be healthy and functional so as to look after and provide support to others around

- Adequate sleep and rest indulging in pleasurable activities is always better.
- Regular exercise for good physical health. meditation, mindfulness or yoga to reduce stress and anxiety and enhance calmness and balance in emotions should be followed.
- Routine brings predictability, order and discipline in life as humans feel more comfortable in situations which are

predictable, familiar and have order and structure.

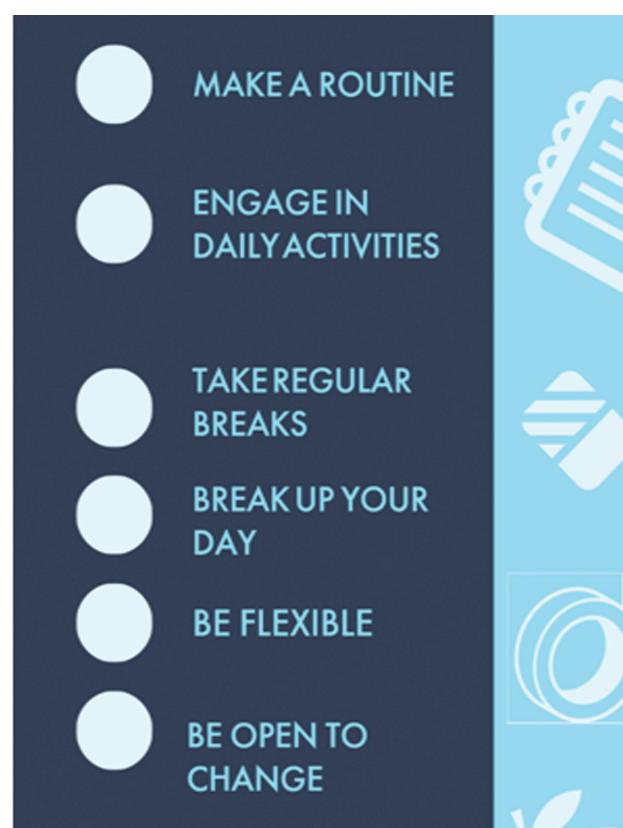
- Remember, we have to prepare for a longer journey to ensure good health, hygiene, care and precautions of self and others.

Caring for family: It will not be incorrect to say that the individuals most affected during a crisis are the ones whose family members are either suspected to or have been tested positive for the virus, are in isolation/ hospitalized or quarantined.

- **Accept the situation:** In this situation, first and foremost step is to accept the reality and the new conditions of living given the DOs and DON'Ts.
 - Accept emotions of others around especially the one affected by COVID.
 - One must be observant, sensitive and empathetic to the emotions of others in the family, provide the required emotional support.
 - Avoid anger, frustration, helplessness and fear.
- **Staying Connected:** Using social media and other forms of communication like phone calls, video/audio messages to stay connected provides the emotional

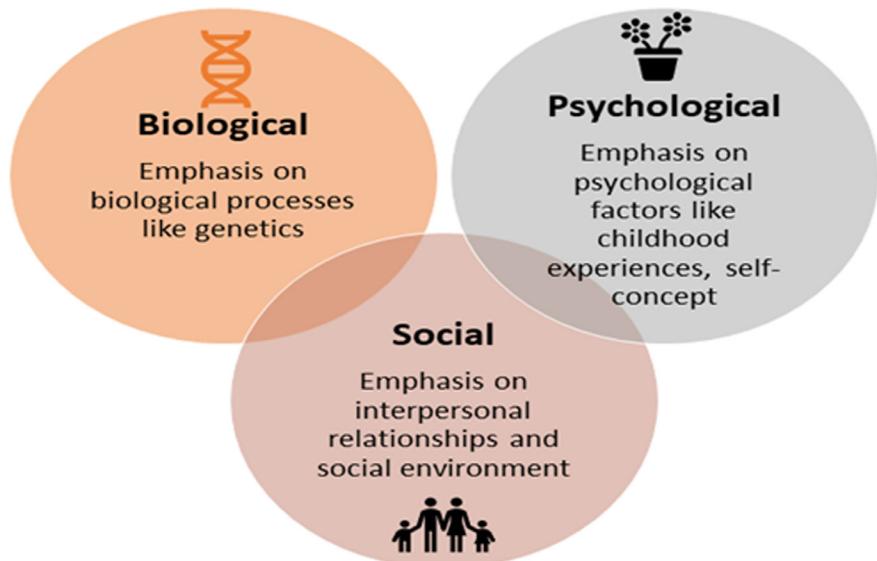
support needed to the one who might be separated from the family due to isolation/ quarantine. This helps both ways as the family can observe progress and wellbeing of the loved one which is reassuring for the patient and the family too.

- **Focus on the positives and change the discourse:** It is important to share successful, hopeful stories along with positive images of others who have had a similar experience of COVID-19 or any other crisis and have recovered. Sharing and focus on positives create a perspective of hope and optimism.
- **Sharing Responsibilities:** Caring for a loved one who is affected by COVID can be challenging and taxing at the same time. Hence the family facing this situation must distribute work-load and duties and not depend on one person to take care or look after the affected individual as this is emotionally, physically and mentally challenging for one person. The key is to keep members productively engaged so as to remain busy and engage in pursuits aimed at helping the sick and other members to cope with the situation too. This will provide a sense of purpose and meaning to all.



8

Risk Factors of Mental Health Conditions



Every child is unique. Individual differences among children are due to genetic, environmental, and socio-cultural factors. Children may experience disturbance in emotions, behaviour, and relationships which may impair their social functioning. The bio-psycho-social model has a strong legitimacy in the understanding of any challenge or struggles on the mental health of an individual.

8.1 Biological Factors

Mental health has been associated with the performance of nerve cells or neural pathways that connect various parts of the brain. Defects or injury to certain areas of the brain have been associated to many mental health conditions. A few biological factors that may be involved in the development of mental health conditions are given below:

1. **Genetics (heredity):** the disposition of many mental health conditions may be transferred through genes from one generation to the next. It is believed that many such conditions are linked to faulty genes and how these genes interact with the environment. Stress, trauma or abuse may also influence or trigger.
2. **Infections:** brain damage and the development of mental health conditions may also be due to certain infections.
3. **Brain defects or injury:** Injury caused by physical damage to brain may also be linked to certain mental health conditions.
4. **Prenatal damage:** Disruption in the early stages of foetal development or trauma at the time of birth are also probable causes

of mental health conditions like Autism Spectrum.

5. **Other Factors** like poor nutrition or exposure to toxins such as Lead may be linked as one of the leading causes of mental health conditions.

8.2 Psychological Factors

Psychological factors that may contribute to mental health conditions include:

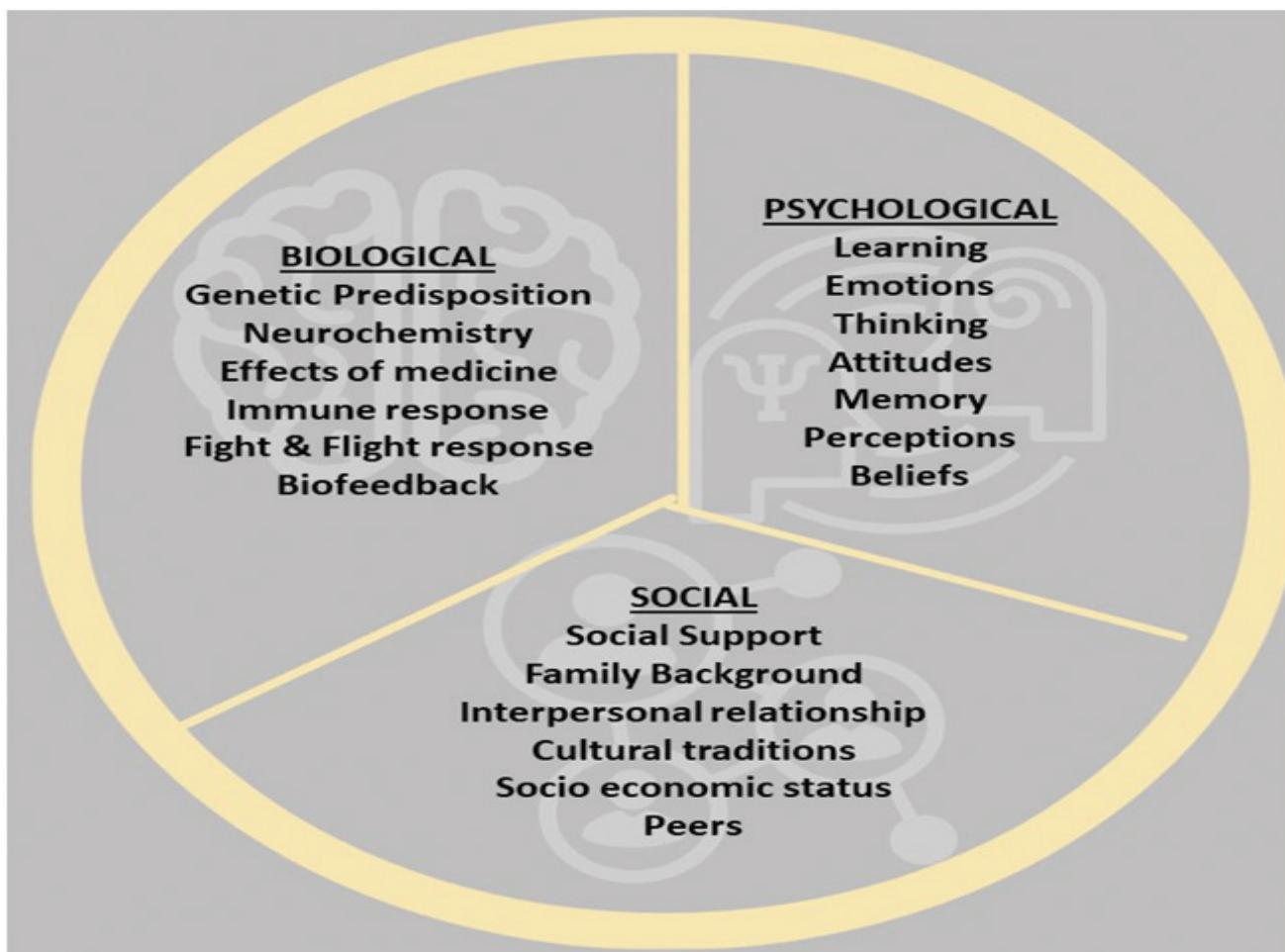
- Traumatic events experienced in childhood may include abuse in any form
- Loss of a parent or a caregiver
- Neglect by the caregiver

- Insecure attachment between child and parent when governed by fear towards the parent is called insecure attachment in the primary development years.

8.3 Environmental Factors

Certain stressors can trigger mental health conditions in children. These stressors include events like loss of a loved one, divorce/separation of parents, dysfunctional family life, shift of residence, social and cultural expectations, expectations set by media, substance abuse to name a few.

In summary, the following are Bio-Psycho-Social Factors:



9

Specific Mental Health Conditions and Challenges in Early and Middle Childhood

9.1 Attachment Concerns

Attachment may be understood as a bond between children and their parents or caregivers that affects the child's growth and their ability to build meaningful relationships in life. Caregivers or parents may notice that a child has problems with emotional attachment as early as their first year of birth. However, with care and patience, it is possible to overcome attachment challenges.



Alarm Signals

A child may:

- ❖ Avoid eye contact.
- ❖ Have an aversion to touch or any physical affection
- ❖ Not smile in situations calling for such a response.
- ❖ Not show or express guilt, regret or remorse despite showing unwarranted behaviour
- ❖ Not have any emotional reaction when left alone
- ❖ Be unable to express genuine care or affection
- ❖ Express anger in the form of tantrums or passive-aggressive behavior
- ❖ Lacks interest in playing games or with toys

Probable Causes

- A child who is living in an orphanage, foster home, or any sort of institutional care may be at risk of developing such problems.
- Sometimes extreme neglect shown by caregivers may push children to a higher risk of developing attachment struggles.
- Parents or caregivers themselves battling mental health concerns or issues like drug abuse or anger management problems may become the reason for the same.

- Separation from parents in the context of a job transfer, change in partners, temporary care of grandparents, or other relatives.
- Any form or degree of physical, sexual, or verbal abuse may become the reason for a child to show such concerns.
- A child who is removed from an abusive home environment may be susceptible to experience struggles of a similar kind.

How can we help?

- ✓ **Help the child:** Help the child in becoming self-aware. Acknowledge that all feelings are 'okay' and help them explore healthy ways to express their emotions.
- ✓ **Flexible school timings** are helpful in reducing stress in children.
- ✓ **Adopt a plant/toy:** Since the child may have difficulty in forming a bond with others, a simple and fun strategy may be encouraged. A child may adopt a small plant/ toy or within school premises, to develop a positive association and sense of responsibility. The Buddy system in school may also help.
- ✓ **Encourage the child to practice yoga and meditation:** The idea is to enable the child to learn to control overwhelming emotions.
- ✓ **Stay patient.** The caregivers must understand that the process may not be as quick. Therefore, patience and small improvements should be followed.

9.2 Bowel and Bladder Control

Losing control of bowel and bladder is considered as psychologically and socially debilitating in an otherwise healthy child. It can lead to severe emotional impact like feelings of intense embarrassment, isolation, sadness, loss of self-esteem and self-confidence. The extent of the negative emotional impact and social isolation which the child would have to go through can be well imagined.

Alarm Signals

- ❖ Usually, a child experiences incontinence beyond the age of 6 years.
- ❖ Probable signs or concerns about sexual abuse may increase the risk for the child.
- ❖ The child may also face similar concerns due to performance pressure and examination

anxiety.

- ❖ There can be constant leaking of urine through a child's bladder if it's not completely empty.
- ❖ A physical impairment or other mental health struggle may become the reason for the same

Probable causes

- Any physical or medical condition can be a reason for this. It may, at times be indicative of infection or diabetes.
- Some children don't respond and act to the urge of going to relieve themselves. They may fidget, squirm, and hold on to their perineal areas. This issue is also resolved when the children grow up.

How can we help...

- ✓ Teach the child to practice pelvic floor exercises- Direct the child to contract the pelvic muscle for a few seconds, then expand for a few seconds. They can do these three times for ten repetitions each.
- ✓ With the help of counselor, behavioral techniques can be adopted, such as Bladder training. The counselor may train the child to delay urination
- ✓ Coping and support can be provided by making suggestions to the parents.
- ✓ It's best to contact a physician for the same.

9.3 Communication Issues

Children may have trouble communicating with others both at school and at home. They may have particular difficulty in the classroom, especially as they get older in age. This is because the higher grades require improved writing skills and advanced communication skills (e.g., persuading, negotiating). Having difficulty in communication may lead to poor self-esteem, poor academic and social success, and a high dropout rate.

Alarm Signals

Children may:

- ❖ Avoid interacting with others
- ❖ Have trouble understanding the message being conveyed to them.
- ❖ Have a limited vocabulary.

- ❖ Have difficulty asking for clarification.
- ❖ Struggle to talk about thoughts and feelings.
- ❖ Have difficulty organizing information.
- ❖ Have difficulty telling stories.
- ❖ Have difficulty getting a message across clearly.
- ❖ Struggle to maintain conversation
- ❖ Have trouble understanding idioms, riddles, jokes, sarcasm, and slang.

Probable Causes...

Some causes of communication problems include

- Physical impairments such as cleft lip or palate or hearing loss
- Injury in brain or vocal cord
- A child with autism may have a communication issue
- A child with low intellectual functioning
- Emotional issues, wherein the child has undergone some kind of trauma.
- Developmental concerns such as delayed in speech and language milestones

How can we help...

- ✓ The best way to approach treatment for a communication issue is to focus on prevention and early intervention.
- ✓ The child may be provided with a non-judgmental environment where s/he feels safe to express
- ✓ The teacher should avoid correcting the child's vocabulary in front of other children and teachers; it may hamper the self-esteem of the child
- ✓ Give opportunity to the child to interact with other students- like playing games
- ✓ The class should be sensitized to accept the child the way s/he is.
- ✓ The child should be given plenty of opportunities to respond and encouraged to talk even if it's hard to pay attention to what s/he says.
- ✓ A speech/ language therapist may be contacted if any delay or impairment is noticed.
- ✓ Interactive and communication-based activities may work with the child.

9.4 Separation Anxiety

Children usually display separation anxiety till the age of 3, which is considered as a part of healthy development. However, if seen beyond the age of 3 or 4 it may affect a child's daily activities and tasks like going to school or peer interaction. It is characterized by experiencing extreme anxiety or even having panic attacks and completely hampers the functionality of a child.

Alarm Signals

The child may be:

- ❖ Feeling extremely sad/ uncomfortable when away from parents or primary care givers.
- ❖ Having irrational worries of losing a parent to illness or death.
- ❖ Refusing to be away from home because of fear of separation
- ❖ Showing reluctance to sleep away from home without a parent
- ❖ Complaining of headaches, stomach aches when separation from a parent is anticipated.

Probable causes...

- A child may experience extreme anxiety because of a distressing life event like illness or death of a close one or a pet the child is attached to.
- Individual Differences: certain children are predisposed to show more anxiety than others.
- Anxiety may also be a learnt reaction from role models.
- Having an experience of a disaster that involved traumatic separation.

How can we help...

- ✓ In the morning, the child may be received by a teacher or a buddy at the school gate.
- ✓ Introduce a fun ritual when the child comes to school, like watering a plant, spending five minutes in the play area, or anything the child may want to do aligning with her/his interests.
- ✓ Identify a non-threatening place where the child feels comfortable in school. It could be

meeting the teacher/ counsellor with whom the child is comfortable or giving access to a soft toy/ pillow, which facilitates contact comfort.

- ✓ The child may be allowed a phone call at home if there is extreme anxiety.
- ✓ Facilitate conversations with peers. Help from teacher/ counsellor may be beneficial for the child and the other children they're interacting with.
- ✓ The child may be allowed to come late but gradually trained to be punctual.
- ✓ Be generous with praises given to the child
- ✓ The child should be trained to practice deep breathing exercises and relaxation techniques.

9.5 School Refusal

Refusal to go to school is a big issue these days with children of all ages. This can lead to severe implications and effects on their academic, psychological, and social development. Typical characteristics of school refusal include tantrums, shouting, and usage of excessive physical force. More behavioral characteristics that manifest physically are headaches, stomach aches, fever, dizziness, shortness of breath.

Alarm Signals

Many students show temper tantrums or extreme behaviours like running from or hiding in school, but many engage in more subtle behaviors.

The children with school refusal concerns may:

- ❖ Complain of physical pains in head, chest.
- ❖ Frequently visit the school medical room without a reason
- ❖ Report illness on days of assessments
- ❖ Make frequent requests to call home
- ❖ Refuse to engage with peers or participate in social activities
- ❖ Show unwillingness to complete their work

Probable reasons...

- Bullying - instances such as intimidation, teasing,
- Body shaming, verbal abuse, cyber conflicts.

- Marital discord between parents (divorce or altercations)
- The unexpected demise of a family member
- Sibling rivalry/jealousy, especially with a younger one
- Overtly concerned parents

How can we help...

- ✓ The right way to deal with such a situation is mutual team-work between teachers, counsellors, parents, school authorities and the child.
- ✓ The probable reason for school refusal has to be understood by the teacher and counselor. The parent's support is also important here.
- ✓ Peer buddy: Assign a peer buddy to help the child in recess or lunch
- ✓ Rewarding participation in school activities will increase confidence and interest in coming to school.
- ✓ Social skills Training: Sometimes, especially during early teens, a child can feel overwhelmed by the school's social circle and might feel isolated. in such cases, the school counsellor can help guide the child and ensure he/she feels comfortable moving in larger school circles.

9.6 Inattention & Hyperactivity Difficulties

Children are naturally energetic and love to move around. Sometimes it becomes difficult for the parent or the teachers to keep them busy. Sometimes it is observed that children are constantly in motion, moving from one activity to another.

Children experiencing such struggles are typically distracted by sights and sounds. They are unable to focus attention to details. They essentially make lots of mistakes in their written work as they are never able to take multiple instructions given to them. The characteristics are inattention, hyperactivity and impulsivity.

Alarm Signals

Inattention	Hyperactivity	Impulsivity
<ul style="list-style-type: none"> • Failing to give close attention to details • Difficulty sustaining attention • Not listening • Easily become distracted • Forgetfulness 	<ul style="list-style-type: none"> • Fidgeting • Inability to sit at one place • Difficulty playing quietly • Always 'on the go' or 'driven by motor' • Excessive talking 	<ul style="list-style-type: none"> • Blurting out answers before the question has been completed • Difficulty awaiting a turn • Interrupting or intruding on others

Probable reasons

- While the exact reason for hyperactivity is not clear some of the factors responsible for hyperactivity include genetics or problems in the central nervous system
- Another reason maybe it runs in the family, such as a parent or sibling, with hyperactivity.
- Sometimes it may be the use of drugs or alcohol or smoking during pregnancy.

How can we help

- ✓ Consistency helps a lot. They struggle at dealing with change, even if it is for good. They work better in a structured environment.
- ✓ Frequent breaks
- ✓ Breaking tasks into smaller components.
- ✓ Seating such children in front rows of the class room.
- ✓ Use colors and shapes to help them organize.
- ✓ A quiet study area that is free from distraction helps.
- ✓ Try to help the child function within his/her attention span.
- ✓ Children respond better to visual cues, so one could make things more visual/tactile, which may help them grasp better. They should avoid tasks that require memorizing words.
- ✓ The caregiver needs to take frequent breaks and so does the child.

Few Strategies for the Teachers

- ✓ Structure of the classroom environment and child's routine.
- ✓ Child to sit near the teacher's desk and make frequent eye contact.
- ✓ Intermittently tasks can be given, like cleaning the blackboard, distributing papers.
- ✓ Teach concepts, reduce memory burden.
- ✓ Precise direction to be given to children.
- ✓ Work should be divided into small chunks and frequent breaks should be given.
- ✓ Avoid blaming the child
- ✓ Allow the child to have a small stress ball which s/he can press.
- ✓ Promote the child's strengths and praise his achievements to build his self-confidence.

9.7 Conduct and Related Issues

Children with struggles to following rules and behaving in a socially acceptable way is the key feature of such concerns. Tendencies like aggression or deceitful behaviours that can violate the rights of others are seen commonly in children showing conduct related issues.

Such a condition may reflect into a child's poor school and work performance, antisocial behavior, impulse control problems, substance

use concern, and even self-harm behaviours in some cases. They are often labeled and considered as 'delinquents' which may be extremely debilitating for the child.

Alarms Signals...

Features of such concerns generally begin during the preschool years. Sometimes it may develop later, but almost always before the early teen years. These behaviors cause significant distress with family, social activities, school, and work.

FLAG SIGNS	
<ul style="list-style-type: none">• Stealing• Running from home/school• Lying• Setting fires• Breaking into someone's house, building or car	<ul style="list-style-type: none">• Use of a weapon• Initiating physical fights• Physical cruelty to people and animals• Deliberate destruction of another's property

Probable causes...

Some probable causal factors are listed below:

- Genetics
- Family environment where there is lack of supervision, inconsistent or harsh discipline, physical/ drug abuse, or neglect.

How can we help...

- ✓ Cooperation of the family is necessary parents; teachers and the child need to talk together about the problem.
- ✓ Teacher must be non-judgmental and try to establish a connection with the child.
- ✓ It is important to separate the problem behaviour from the child. "The problem is the problem; the child is not the problem".
- ✓ Restore the child's self-esteem by exploring her/ his strengths and abilities.
- ✓ Long term help is more beneficial as the child needs to adapt to new attitudes and behaviours which may take a lot of time.
- ✓ Encouraging the desirable behavior and defining the appropriate and non-appropriate behavioral consequences to the child and parent. The support of counselor is important here.
- ✓ Early intervention always helps.

9.8 Autism Spectrum

Autism is primarily a condition related to brain development that impacts how a child perceives and socializes or communicates with others, causing problems in these areas. Characteristically it is seen as having repetitive patterns of behaviour and speech. "spectrum" is a term usually used to depict the array of symptoms, signs, levels of functionality. The effects of Autism are all-pervasive causing struggles in almost all areas of life- school, work, peer relationships.

Alarm Signals

- ❖ Unable to respond to his or her name or seems to have not heard you at times
- ❖ Resists cuddling and holding and prefers playing alone
- ❖ Has poor eye-contact and lacks facial expression
- ❖ Does not speak or has delayed speech, or loses ability to say words or sentences
- ❖ Not able to start a conversation or keep it going
- ❖ Uses only one word to make a request or pinpoint to objects to communicate.
- ❖ Speaks in a peculiar tone like- humming or

robot-like speech

- ❖ Repeats words or phrases which are said to her/him as it is, but does not understand how to use them
- ❖ Does not understand simple questions or directions
- ❖ Unable to express emotions or feelings and appears unaware of others' feelings
- ❖ Unable to point at or bring objects to share an interest
- ❖ Struggle in recognizing nonverbal cues, such as interpreting other people's facial expressions, body postures or tone of voice

Patterns of behaviour

- ❖ Engages in repetitive movements, such as spinning, rocking or hand flapping (like a bird)
- ❖ Engages in activities causing self-harm, such as biting or head-banging
- ❖ Unable to accept any routine change. Even the slightest change would disturb him
- ❖ Struggles with body coordination. May show odd movement patterns, for example, clumsiness or walking on toes, and has odd, stiff or exaggerated body language
- ❖ The child may be fascinated by details of an object, such as the spinning wheels of a toy car, but doesn't understand the overall purpose or function of the object
- ❖ The child may be sensitive to light, sound or touch, yet may be indifferent to pain or temperature
- ❖ The child finds it difficult to engage in imitative or make-believe.
- ❖ The child may have specific food preferences, such as eating only a few foods or refusing foods with a certain texture

Probable reasons

- There is no single known cause.
- Genetics or environmental- both can be linked as causal factors.

How can we help...

- ✓ Early intervention is very helpful as it improves the behaviour, skills, and language development.
- ✓ Skill-building such as communication

programs and social skills.

- ✓ Teaching ways to greet through flashcards
- ✓ Teaching appropriate behavior in class through social stories
- ✓ Teaching how to express emotions through Video Modelling
- ✓ Teaching skills through role-plays
- ✓ Define rules and regulations of school using the Picture Exchange Communication Program.
- ✓ Pictures to communicate washroom, playground.
- ✓ Speech and language therapy is important for the children to develop their communicative capacities to the fullest
- ✓ Help from the multidisciplinary team i.e., other mental health care providers such as a clinical psychologist, occupational therapist, speech therapist, special educator.
- ✓ Support from peer buddies can uplift the emotional wellbeing of the child.
- ✓ Preferably one or two-word prompts/ commands should be used. The communication and instructions should be kept simple and direct. Excessive use of verbal language in the commands should be avoided.
- ✓ A curriculum that is tailored to individual strengths and needs should be designed. The learning task should be appropriate and broken into small steps.
- ✓ The teacher must suggest parents to devise effective home-plans and structured routine for the child

9.9 Intellectual Functioning

Intellectual disabilities are neuro-development disorders that begin in childhood and are characterized by intellectual difficulties as well as difficulties in conceptual, social, and practical areas of living".

- I.Q. score falling between 70-84 (approx. 14% of the population)
- Problems with adaptive functioning
- The onset of this deficit is during childhood.

Alarm Signals...

There are many signs and symptoms of learning difficulties that may appear during infancy.

These symptoms may not be evidently seen until the child reaches school. More severe cases, however, are more noticeable. Some common signs of intellectual disability are:

- ❖ Achieving physical milestones like walking, crawling late
- ❖ Achieving speech milestones late (or not achieving them at all)
- ❖ Struggles in toilet training, grooming or showing any kind of independent living skills like feeding
- ❖ Difficulty with complex tasks involving problem-solving or logical thinking
- ❖ Poor memory
- ❖ Inability to connect actions with consequences

Probable causes...

The most common causes of intellectual difficulties are:

- Genetic conditions: For example, a parent with low intellectual functioning can pass on gene to the child.
- Problems during pregnancy: In certain case, if the mother during her pregnancy has consumed alcohol or drugs, then it might interfere in brain development. Malnutrition or certain infections may also be a probable cause.
- Problems during childbirth: (Premature birth or lack of oxygen during childbirth)
- Physical illness like meningitis, whooping cough or measles may cause intellectual disability.
- Severe injuries like- injuries on head or near-drowning.
- Environmental factors like severe and extreme malnutrition or infections in the brain, exposure to toxic substances such as lead, and severe neglect or abuse.

How can we help...

- ✓ Early intervention with collaboration of speech therapy, occupational therapy, physiotherapy, family counseling, training with special educators.
- ✓ Providing the child with independent living skills and ensuring that the child is successfully doing them with supervision.
- ✓ Providing guidance whenever needed

- ✓ Giving positive feedback when a child does something well or masters something new.
- ✓ Parents and educators work together to create an Individualized Education Program, or IEP, which outlines the child's needs.
- ✓ Involve the child in group activities and socialize with other kids.

9.10 Difficulties in Learning

Difficulty in Learning is a concern that interferes with a student's ability to listen, think, comprehend, synthesize, speak, write, spell, or do mathematical calculations and operations. Students may struggle with reading, writing, or math.

'Difficulty in Learning' is an umbrella term that may describe many different types of learning issues, which may be reflected in the form of Word Struggles, Number Struggles, and Organizational Struggles.

Alarm Signals

Learning difficulty includes struggles in domains of words, numbers and organizational skills.

Probable causes...

- Mother's illness during pregnancy or premature birth.
- Complications at the time of birth (e.g., lack of oxygen to the brain.)
- Consumption of alcohol or substance during pregnancy
- An accident/ illness/ injury in early childhood affecting brain development.
- In some cases, people with additional physical disabilities and/or sensory impairments may develop learning difficulties.

How can we help...

Remember-'if they can't learn how we teach, we must teach how they learn'. Some approaches that work well with children who experience learning difficulties.

- ✓ Use a systematic approach of step-by-step Learning
- ✓ Give individualized instructions and avoid giving instructions in group.

- ✓ Make concepts more concrete, meaningful and personal
- ✓ Use "cause and effect" to support thinking skills and draw connections between "if... then" and train students to use critical reasoning by thinking and inferring
- ✓ Use a multi-sensory approach to keep students engaged
- ✓ Teaching must be inquiry-based to support students to seek answers and monitor themselves
- ✓ Choose materials which are clearly printed
- ✓ Try using visual aids
- ✓ Speak slowly and give one instruction at a time
- ✓ Ensure the student fully understands all instructions
- ✓ Provide lots of repetition and review
- ✓ Ensure the student is attentive before giving instructions or help
- ✓ Summarize key points
- ✓ Give feedback
- ✓ Reduce distractions and keep the work area clear
- ✓ Provide immediate feedback
- ✓ Organize workspace
- ✓ Ensure the student knows what to do
- ✓ Help the student set up an agenda

Types of Learning Difficulties

WORD STRUGGLES

- Difficulty in reading and writing
- Slow reading and writing
- Problem in spelling
- Avoiding reading related tasks in class
- Unable to pronounce names or words, or struggles in retrieving words
- Struggles in understanding jokes or idiomatic expressions such as "piece of cake" meaning "easy."
- Unable to accurately summarise a story
- Letter reversals and confusions (e.g., confusion in 'b' and 'd')
- Makes up words



NUMBER STRUGGLES

- Problems with understanding numbers
- Struggles in basic calculation and arithmetic procedures
- Confusion in numbers and estimating quantities
- Makes many guesses
- Difficulty in mental calculations

ORGANISATIONAL STRUGGLES

- Poor organization of work
- Forgets details
- Errors in Punctuation
- Avoids work and has difficulty in note-taking in class
- Poor Eye-hand coordination
- Problem with time and sequence

CAUTION:

- Alarm Signals are only suggestive in nature depending upon the frequency, duration and severity. Labeling a child should be avoided.
- Immediate caregivers should seek help of Mental Health Professionals, if required.

Note: For Exemption to Children with Disabilities, refer to CBSE website www.cbse.nic.in at the link <http://cbse.nic.in/newsite/attach/CWSN%20April%202019.pdf>

10

Adolescence: The Charms and Challenges

10.1 Defining Adolescence

World Health Organisation's (WHO) definition of adolescence includes dynamic changes in attributes of a person in terms of age (between 10 and 19 years) and in terms of a phase of life. These attributes include:

- **Growth and development:** Spurt in physical growth and development

- **Maturity:** Having maturity in physical, social, and psychological aspects
- **Formation of Identity:** Development of adult mental processes and adult identity.
- **Independence:** Transition from dependence to relative independence.

Changes During Adolescence

Children begin to think and plan for their future vocations during this phase. They may need advice, support and understanding from adults.

During early adolescence, the children develop signs of physical growth and maturity

Exploration and discovery begin to form one's own identity, new relationships, capabilities and potential.

Young people mature psychologically as well and develop a sense of identity and self-worth during adolescence

10.2 Changes during Adolescence

The Brain of An Adolescent



Is working to learn IMPULSE CONTROL- thinking through actions before acting them out.



Is learning to develop EMOTIONAL REGULATION- to remain calm in emotional state



Is developing ORGANIZATIONAL SKILLS – to keep things in order.



Is learning to RATIONALISE OR ANALYSE.



Is developing REASONING – which means using emotions and not facts.



Is on RISK TAKING MODE.

10.3 Key Issues & Concerns of Adolescents

Developing an identity & vocation for life

Having skills like self-awareness often helps adolescents understand themselves by establishing a strong sense of personal identity. There is more to explore about the adolescent and expand her/his definition of his existence in terms of achievement and exploration of potential.

Managing Emotions

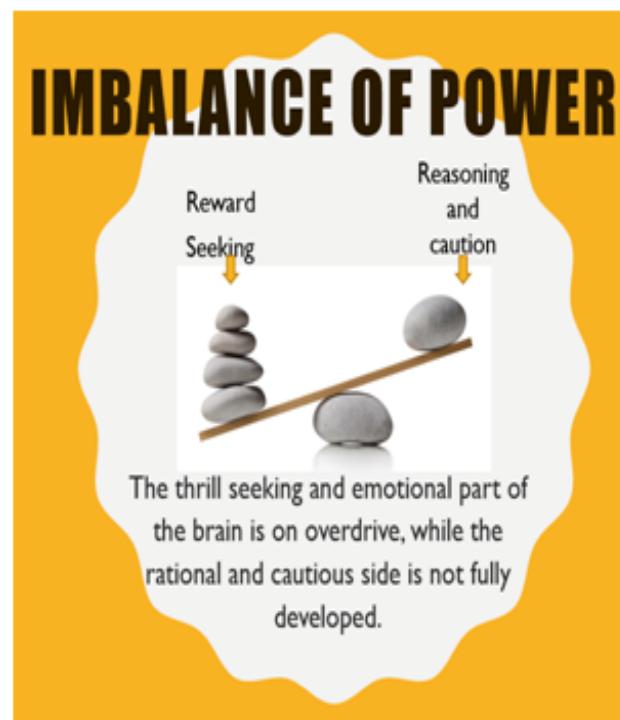
Adolescents experience frequent mood changes. They reflect feelings of anger, happiness, sadness, fear, guilt, shame, and love. They are mostly unable to understand the turmoil that they experience.

Building Relationships

- During adolescence, people often redefine the relationships they have with their peers, parents, and people of the opposite sex. Parents often have high expectations from them and do not understand their feelings.
- During this age, social skills are required for having positive and healthy relationships with others, including people of the opposite sex.

Resisting Peer Pressure

- It is difficult to resist peer pressure as the adolescent is tempted to try aggressive misconduct, occasional irresponsible sexual behaviors, and substance abuse. These involve greater risks with regard to physical and mental health.



Helpful Tips for Adolescents



PRACTICE DEEP BREATHING



TRY YOGA



TRY COUNTING UPTO 10 BEFORE REACTING.



WATCH VIDEOS ON ORGANISING AND PLANNING.



GET ADVICE FROM ADULTS WHEN MAKING BIG DECISIONS.



STAY AWAY FROM NEGATIVE INFLUENCES.

Body Image and Related Concerns

Body Image is the perceived image of physical appearance. This perception usually evokes a plethora of feelings and thoughts for that person. At times, this may manifest in the form of false assumptions and gross- generalizations.

These thoughts and feelings may be both positive and negative. One of the major factors

which influence this perception is one's own self-esteem and the host of environmental factors, including media. These concerns are rampant in teens, which makes it necessary to talk about this age bracket.

The increasing concerns for body image may have a simple pattern, as given below

See	Feel	Think	Look
The false perception of the way one SEEs physical appearance	The way one FEELS about the body affects the body image	The way one THINKs about the body image increases preoccupation with weight and body-shape	One is dissatisfied with the LOOK; this lack of satisfaction becomes the behavioral aspect.

Alarm Signs:

- ❖ If a child is spending too much time in front of the mirror.
- ❖ Thinking markedly different about physical appearance than actual shape and size.
- ❖ Friend or constantly comparing body with a media figure/celebrity.

Probable causes

- The role of media maybe one of the major causes.
- Low self-esteem
- With reinforcements from the family and friends, they may find themselves constantly

obsessed over their body image and weight.

- The latest researches suggest a genetic angle to such concerns.

How can we help?

- ✓ Encourage practicing Self-Acceptance amongst adolescents.
- ✓ Focusing on other attributes like their 'bravery' and 'intelligence'.
- ✓ Having honest and non-judgmental conversations always helps.
- ✓ Focus on building Self-Esteem
- ✓ Discourage unmonitored engagement with social media.

10.4 Depression

Feeling sad and upset in certain situations is normal, and everyone goes through this phenomenon. In case the feelings are severe, prolonged, unexpected, seem unusual, or have no apparent cause, there is a reason to be concerned. Depression is a condition fraught with problems and uncertainties. These relate to every aspect of depression, from symptoms to diagnosis and from treatment to after-effects. The main problem in relation to the word 'depression' is that it is a word used too loosely and generally in a normal routine. This sometimes makes it ineffective in describing the mental health condition of the person that, in some cases, can be very serious.

Alarm Signals

- ❖ Losing interest/pleasure in most activities
- ❖ Emotionally fragile (cries easily) Frequent bouts of crying, feelings of sadness, helplessness or hopelessness. Having episodes of fear, tension or anxiety, sometimes losing temper
- ❖ Feeling of rejection by others, social isolation or losing friends
- ❖ Repeated emotional outbursts, shouting or complaining and sometimes feeling discouraged or worthless
- ❖ Irregular sleep and eating habits (up at night and sleep during the day)
- ❖ Sudden drop in school grades
- ❖ Experience of fatigue and loss of energy at all times
- ❖ Having feelings of restlessness/ Feeling fidgety
- ❖ Feeling frustrated, irritable, and having emotional outbursts
- ❖ Having excessive feelings of guilt and/or inappropriate self-blame
- ❖ Repeated medical complaints without a known medical cause (headaches, stomach aches, pain in arms or legs)
- ❖ Too much or too little sleep
- ❖ Resorting to use and abuse of substances in some cases

Probable causes...

- **Family history and predisposing biological factors-** There has been a strong evidence of

depression being linked to genetic factors. Research also suggests that it is more common in girls as compared to boys. It is linked with chemical changes in the part of the brain that controls mood.

- **Traumatic events, stress, and personal experiences-** In some cases, the trigger can be the loss of a loved one or financial problems in the family or poor personal relationship. The reason for depression can be any traumatic event. One can become depressed after sudden changes in their life, like a change of school or house, family breakdown, neglect, abuse, bullying, and physical illness.
- **Pessimistic Outlook-** Children who have extremely low self-esteem and an overall negative outlook are generally at a higher risk of becoming depressed.
- **Physical conditions-** Serious and prolonged medical conditions like HIV or cancer can lead to depression. Depression may make health worse, as it negatively affects immunity and can make pain hard to bear. Sometimes, depressive mood states can be caused by medications used to treat the illness.
- **Other Mental Health Conditions-** Other condition like anxiety disorders, eating disorders, substance abuse are seen to coexist with this condition.

How can we help...

Noting and observing which signs in children are showing up in their behavior.

- ✓ Determining when these symptoms began and whether they have happened before.
- ✓ Figuring out how the impact of the symptoms and how these symptoms affect the child's daily life and relationships.
- ✓ Talking about the stressful life events or a loss of loved one can make the symptoms worst.
- ✓ Try to gather the family history. By asking, did any of their family members have had a history of any mental health condition like depression, suicide, bipolar disorder, or other forms.
- ✓ Making a note of any other mental health or medical concerns one may have (such as anxiety or substance use disorder)
- ✓ Exploring the medications, the child is taking could be contributing to their symptoms.

10.5 Bullying

Bullying causes long-term damage to self-esteem as it affects the child's physical or emotional health and, in some cases, psychological wellbeing. It involves physical, social as well as emotional damage. It has been observed that those who are bullied are at a higher risk of mental health problems, headaches, and adjusting to school. The most common issues seen in children or adolescents who are bullied are high risk for substance use, academic difficulties, or harm to self or others.

Bullying can happen in various forms and can impact children severely. It may be seen as Physical/ Verbal/ Social/Cyber forms. Sometimes bullying can be inflicted without any reason. The other person intentionally and repeatedly causing discomfort or injury to another person without any reason. Bullying

behavior impacts everyone involved at an equal level and not just the targeted child. A child's mental health is adversely affected, and many negative outcomes, including substance abuse, and in extreme cases, self-harm thoughts or feelings may follow.

There are two broad modes of bullying:

- Direct: happens between the children who are involved in a given situation.
- Indirect: happens in the form of passing on insulting comments or spreading rumours about the child, damaging a child's social reputation, peer relationships, and attacking the child's self-esteem.

Alarm Signals

Bullying can be seen in various forms. The most common ones are shown in the graphic below:-

Don't stand by, Stand up!

TYPES OF BULLYING

1. PHYSICAL BULLYING
Hitting, kicking, tripping, pinching, pushing, damaging property, spitting, slapping

2. VERBAL BULLYING
Name-calling, Insulting, Teasing, Intimidation, Homophobic or racist remarks, Verbal abuse, Inappropriate language

3. SOCIAL BULLYING
Social isolation of the child, Harm someone's social reputation, Cause humiliation, spreading lies and rumours, Negative or abusive, physical gestures, Cracking nasty jokes to embarrass and humiliate, Mimicking unkindly, Encouraging others to socially exclude someone, Damaging someone's social reputation or social acceptance.

4. CYBER BULLYING
Posting inappropriate content on social media., Abusive or demeaning texts emails or posts, images or videos., Deliberately excluding others online.

5. SEXUAL BULLYING
Sexual name-calling, Inappropriate verbal comments, Vulgar gestures, Uninvited touching, sexual propositioning

Probable causes...

- The child may be feeling powerless
- The child may be jealous or frustrated
- Lack of understanding or empathy in the child
- Looking for attention
- Bullying behavior of the other child is getting rewarded
- Inability of the child to regulate emotions

How can we help...

Bullying can be reduced by implementing comprehensive programs that improve the overall school climate. Bullying prevention strategies in schools can be divided into two broad types:

- ✓ Some programs executed in classroom should aim at improving students' social and problem-solving skills for dealing with

conflict and managing emotions.

- ✓ To have **Zero Tolerance Policy** towards bullying. Anyone found involved in any form of bullying will have to bear consequences that are predefined and well communicated to all students. Closer supervision of the school grounds and other areas.
- Programs that effectively reduce Bullying are:
 - Having a preventive approach for such situations
 - Workshops for parents and students and the community
 - Anger management workshops
 - Regular classroom talk
 - Teacher mentoring sessions
 - Peer Education or Peer Counselling or Buddy System



NEVER GIVE PERSONAL INFORMATION PASSWORDS TO ANYONE

Personal information includes name, the names of friends or family, address, phone number, school name, passwords, photographs.

ALL INFORMATION ON THE INTERNET IS NOT TRUE

Most information on the internet is not authenticated. One must not go by what they read on the internet.

CHILDREN MUST LEARN NETTIQUETTES

Acceptable way of using the internet is called netiquette. For example being polite with others when you are online and if someone behaves rudely with you then you should not respond. THINK before you type.

DON'T OPEN MESSAGES FROM UNKNOWN SENDERS

If in doubt, it is best to seek parental guidance.

IF IT DOESN'T LOOK OR "FEEL RIGHT", IT PROBABLY ISN'T.

While surfing the internet, if you find something you don't like, or it makes you feel uncomfortable or scares you, then you should tell an adult immediately.

STOP COMMUNICATING WITH CYBERBULLIES.

Even though the you may really want to give a reply and respond to any nasty message sent by a bully, you must NOT RESPOND and stop any form of communication.

10.6 Substance Abuse

Substance abuse in adolescence is an important social issue as its development and consequences impact directly on academic achievement, high school dropout rate, early sexual initiation, and troubled interpersonal relationships.

The effects are far reaching on the emotionality of the child.

Alarm Signals

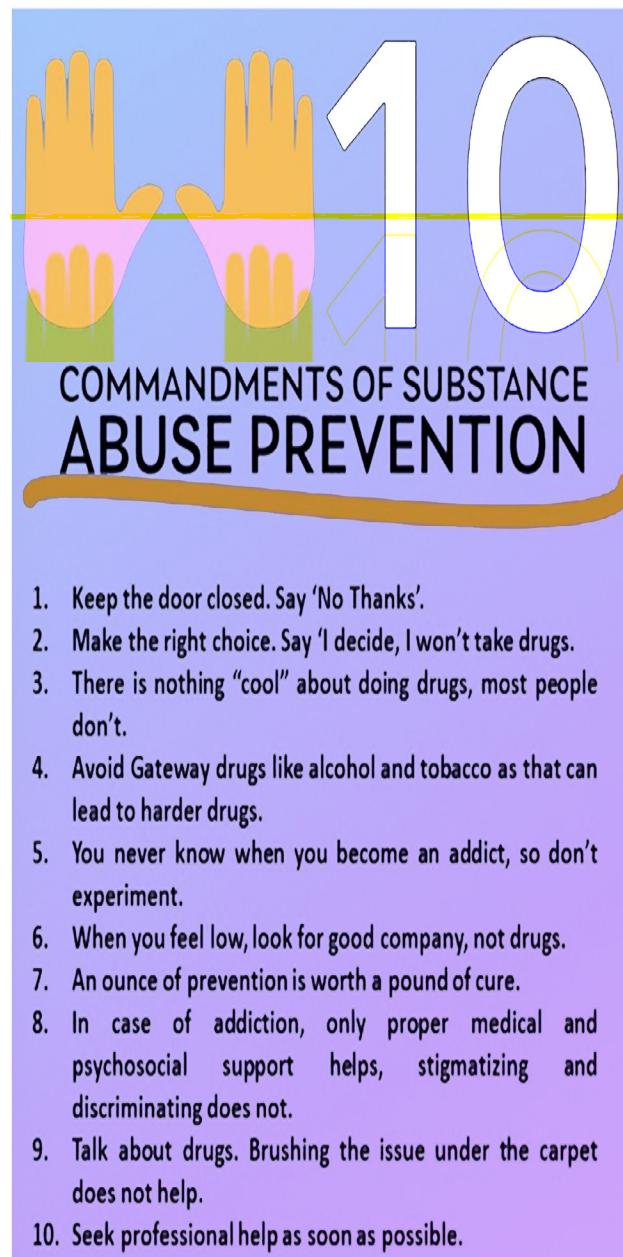
- ❖ Poor academic performance
- ❖ Drastic changes in weight
- ❖ Money problems
- ❖ Difficulty in focusing
- ❖ Mood swings
- ❖ Violent outbursts
- ❖ Irritability
- ❖ Painful sensations
- ❖ Changes in urination and bowel movements
- ❖ Dilated pupils
- ❖ Troubled sleeping patterns
- ❖ Loss of appetite
- ❖ Withdrawal from friends and family and pleasurable activities

Probable causes...

- Lack of family bonding. The child may be a loner.
- Poor parenting style. The parents may be either too strict or too lenient.
- Dysfunctional families with lot of conflicts.
- Involvement of any family member in drug or alcohol.
- Peer pressure of friends who are in use of drugs.

How can we help...

Reinforcing the following commandments will help. The first and foremost thing to do is to encourage the child to seek professional help.



1. Keep the door closed. Say 'No Thanks'.
2. Make the right choice. Say 'I decide, I won't take drugs.'
3. There is nothing "cool" about doing drugs, most people don't.
4. Avoid Gateway drugs like alcohol and tobacco as that can lead to harder drugs.
5. You never know when you become an addict, so don't experiment.
6. When you feel low, look for good company, not drugs.
7. An ounce of prevention is worth a pound of cure.
8. In case of addiction, only proper medical and psychosocial support helps, stigmatizing and discriminating does not.
9. Talk about drugs. Brushing the issue under the carpet does not help.
10. Seek professional help as soon as possible.

10.7 Cyber Issues

Cyber issues like Internet Addiction, Compulsive Internet Use, Computer Addiction, Internet Dependence and Problematic Internet Use - all of these are inter-changeable terms that have been applied to those who spend excessive amounts of time online.

Alarm Signals

Signs and symptoms of cyber issues may present themselves in both physical and emotional manifestations. Some of the emotional symptoms and physical symptoms of cyber issues may include:

Emotional

Feelings of guilt, low mood states

Anxiety, Feelings of euphoria when using the computer, Inability to prioritize or keep schedules, Isolation, No sense of time, Defensiveness, Avoidance of work, Agitation, Mood swings, Fear, Loneliness, Boredom with routine tasks, Procrastination

Physical

Backache, Headaches, Insomnia, Poor nutrition (failing to eat or eating excessively to avoid being away from the computer), Poor personal hygiene (e.g. not bathing to stay online), Neck pain, Dry eyes and other Vision problems Weight gain or loss

Probable causes

- It is observed that Internet addiction may also be symptomatic of other problems such as depression, anger and low self-esteem.
- In dysfunctional families it is seen that children are spending more time on the internet.
- Children with poor body image tend to spend lot of time on internet
- Children who are introvert and having poor social interaction might also be at a higher risk of suffering from Internet addiction.

How can we help...

- ✓ Explore the interest of the child and help them to channelize their energies in that direction.
- ✓ Help the child to prioritize work.
- ✓ Apprise the family about the cyber safety and involve them to monitor the screen time.
- ✓ Organize class talks on impact of Internet usage in young people.
- ✓ Have cyber safety workshops.
- ✓ Involve the child in few hours of physical activities daily.

10.8 Obsessive- Compulsive Behaviours

Obsessive-compulsive behaviours are marked by having obsessions which involve many unwanted thoughts, feelings, or fears over which one has no control, hence making them anxious. To relieve the obsessions and anxiety, the child is compelled to do certain behaviour called compulsions (also called rituals). These obsessions and compulsions interfere with the daily functioning of a child.

Alarm Signals

- ❖ Child might take longer than usual to do day to day tasks, for example, taking a bath, brushing teeth, getting dressed, packing bag, completing homework.
- ❖ Child may be unusually angry or upset if the task is not completed perfectly or if something is out of place.
- ❖ Child may insist on the parent doing a task in an exact way all the time.
- ❖ Child might be too obsessed with cleanliness or hygiene.
- ❖ Child may have too much fear of committing a mistake
- ❖ Children may worry too much about bullying.
- ❖ A child may behave in an awkward manner in public.

- ❖ Abstaining from shaking hands or touching doorknobs.
- ❖ Child may be in the habit of regularly counting either mentally or aloud while doing routine chores.
- ❖ Consuming food in a peculiar manner.
- ❖ Being stuck with some thoughts or words repeatedly.
- ❖ Urge to perform certain tasks for a specific number of counts.
- ❖ Constant awareness of blinking, breathing or other body sensations

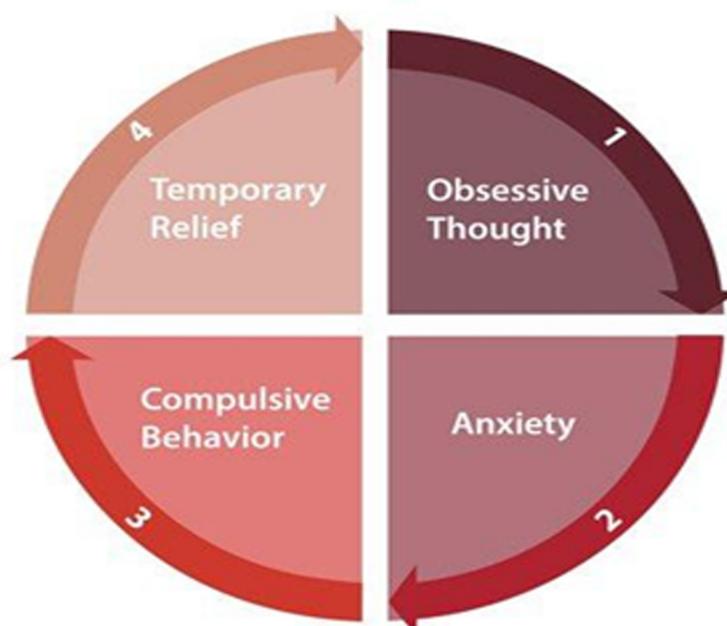
Probable causes...

- Scientists don't yet know why children may show such a behaviour, but they know biological factors play a role.
- Some differences in brain structures and brain activity in children are linked with such behaviours.

How can we help...

- ✓ Make the child feel secure and safe.
- ✓ Avoid judging and criticizing the child.
- ✓ Make the child feel competent by encouraging.
- ✓ Be tolerant, even if the child is repeating a particular type of behavior again and again.
- ✓ Make them comfortable to talk openly about their extreme emotions.

The Vicious Cycle of OCD



10.9 Abuse and Trauma

A state of great shock or sadness can be understood as trauma. It is mainly a situation that's shocking, intense, and distressing. The response to such a distressing event overwhelms the child's ability to cope is known as trauma.

Abuse is a kind of trauma. It causes feelings of helplessness, diminishes their sense of self and ability to feel the emotions and experiences.

Effect of Abuse

It is important to get help for coping with past trauma.



Trust and Self-esteem – Experiences of abuse may impair one's belief that the world is a safe place and impair the ability to trust others. This may be particularly difficult if the child has had a close relationship with the abuser. One may blame himself or herself for the abuse, even though it isn't their fault.

Coping with stress and Self Harm – The child may have a lot of negative feelings, which may make it hard to cope with everyday stress. One may even resort to self-injurious behaviors that may even prove to be fatal in some cases.

Anger and impulsivity – a child experiencing abuse may have manifestations like inability to control anger or being very impulsive

Dissociation – A child may entirely separate her/himself from the trauma experienced by forgetting the incident. Understood as 'defense' to pain and fear, a child may have a hard time remembering what happened.

Trauma and its Consequences

Alarm Signals

One might feel extremely sad while discussing about a particular event (trauma).

- ❖ Get angry about small things and deny accepting his/her emotions
- ❖ Be scared and ashamed to express his/her thoughts.

CAUTION:

- Alarm Signals are only suggestive in nature depending upon the frequency, duration and severity. Labeling a child should be avoided.
- Immediate caregivers should seek help of Mental Health Professionals, if required.

- ❖ Trouble in sleeping
- ❖ Stays alone and avoids proper meals, has frequent headaches.
- ❖ Night terrors (flashbacks)- sleeping issues such as insomnia or disturbed sleep due to flashbacks of the trauma.
- ❖ Mood swings and irritability
- ❖ Poor concentration
- ❖ Bed wetting
- ❖ Tension, excessive thoughts and feeling of uselessness
- ❖ When the signs prolong and adversely affect the child's ability to function, they may be experiencing serious trauma which might later affect their ability to cope with daily life activities.

Probable causes...

- The body, at times, produces a high level of 'Adrenaline', which is the fight and flight hormones.
- 'Arousal level', which is the response to trauma, is the survival mechanism that may be different for different children. Children with hyperarousal may be more susceptible to such conditions.

How can we help...

- ✓ **Avoid pressurising** the child to talk about the trauma. A child may struggle to talk about it as it might bring back traumatic memories.
- ✓ **Do not preach** by telling them what to do.
- ✓ **Patience** is the key to make the child feel settled.
- ✓ **Acceptance** of the varied mood states.
- ✓ **Be a good listener and be non-judgmental**- Sometimes, it might be hard to listen to the child's trauma, but it's important to respect their feelings and emotions.
- ✓ **Be genuine and build trust** - Be genuinely interested in the child and show trust.
- ✓ **Talk about the child's strengths** - Point out all the positive qualities and achievements of the child.

Appendices

Activities for Children (Suggested for Classes I to V)

- ✓ Bucket of Kindness
- ✓ Your Body Belongs to You
- ✓ Superhero for a Day
- ✓ 123- Calm Down
- ✓ SAY NO to Bullying
- ✓ I feel, I Empathize
- ✓ Living and Learning in Family

Activities for Adolescents (Suggested for Class VI onwards)

- ✓ I Love Myself
- ✓ Reflecting on Adolescence and growing up process
- ✓ How best can I communicate?
- ✓ Discussing feelings
- ✓ Understanding Anger
- ✓ Controlling Anger
- ✓ Understanding and Dealing with Loss and Sadness
- ✓ Improving Relationships with others
- ✓ Learning to say NO
- ✓ Decision- Making in the face of Peer Pressure



Activity 1: Bucket of Kindness

Skills: Compassion, interpersonal skills and empathy

Duration: 20 mins

Things required:

- Small bucket
- Kindness Slips

Process:

- ✓ Let children sit in a circle. Keep a small bucket or box in class and name it as 'The Bucket of Kindness'.
- ✓ Children will come one by one and will be asked to pick one slip at a time.
- ✓ The child reads what is written in the slip. This becomes their task for the day.
- ✓ Fold the slips of paper and put in the bucket.
- ✓ The next day they are asked to share what they did with the facilitator.
- ✓ The entire class discusses with facilitator and acknowledges / encourages the act of kindness.

Ideas for the acts of kindness which can be written on the slips:

- Compliment the first three people you talk to.
- Write a handwritten note to a teacher.
- Say "good morning" to all the nannies and helpers in school and home.
- Pick up litter. Spend 10 minutes cleaning a park or your neighbourhood.
- Make a Thank You card for your parents.
- Make a Thank You card for your grandparents.
- Send flowers to a friend.
- Clean Up after you eat and say thank you to the person who served food.
- Give someone a big hug.
- Feed a stray dog.
- Talk to someone who is new in school or your class.
- Help at home to make dinner.
- Make a gift for a friend with things you have at home.

Key Messages

- ✓ Cultivating Compassion
- ✓ Unravelling the inner virtue of Sharing
- ✓ Improving the chances of good interpersonal interaction with others

Activity 2: Your Body Belongs to You!

Skills: Self-awareness, communication and assertive skills

Duration: 20 mins

Things Required:

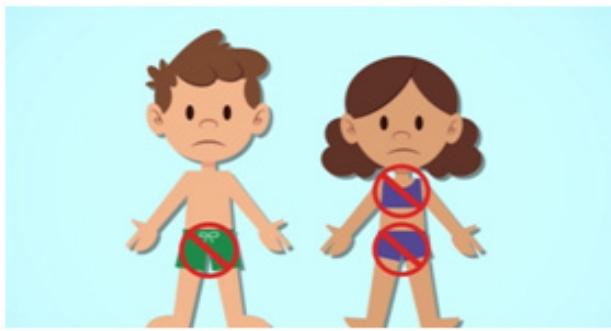
- Card for Safety Rules
- Activity sheet – My safe people
- No-Go-Yell and Tell Rule Card
- Swim suit rule card

Process:

- 1) The activity requires children to sit in a circle.
- 2) The children are shown the Card for Safety Rules*
- 3) A brief discussion is done on these cards.
- 4) The children are then shown the Swimsuit Rule Card*
- 5) A brief discussion is done by taking examples in situations where someone can break their body safety rules.
- 6) The ‘No Go Yell Tell’ card is shown as the next step.
- 7) The children are then instructed to do the activity sheet attached about their ‘safe people’.
- 8) The facilitator at the end of the activity discusses the importance of ‘safe people’ in one’s life

Key Messages

- ✓ Understanding about their own body
- ✓ Developing self-awareness about their own safety
- ✓ Learning the art of communicating to the ‘safe people’



Name : _____

Class & Section : _____

Date : _____

My Safe People



Name : _____

Class & Section : _____

Date : _____

My Safe People



Activity 3: Super Hero for A Day!

Skills: Self Esteem and Self Awareness

Duration: 20 mins

Things Required: Activity Sheet

Process:

- 1) This activity requires the students to sit in a circle
- 2) The facilitator starts the activity by discussing with children about their favorite super hero.
- 3) The Activity Sheets are distributed.
- 4) A brief discussion is done with students about their own strengths. It is said that just like 'superheroes have powers, we also have strengths and positive qualities'.
- 5) The Sheet is read out and the students are asked what all will they do if they become a superhero for a day.

Key Messages

- ✓ Reflection- Reflecting upon their own strengths.
- ✓ Understanding Oneself- Know oneself and others in the group.
- ✓ New Ideas- Scaling their creativity to new heights.
- ✓ We have strengths and positive qualities.

SUPER ME	
My Strengths	
1.	_____
2.	_____
3.	_____
If I become a Superhero for a day, what will I do?	

Activity 4: 123 Calm Down

Skills: Navigating Emotions, coping with emotions, interpersonal skills

Duration: 20 mins

Things Required:

- Calming Down Cards
- Situation Cards

Process:

- 1) The activity requires children to sit in a circle.
- 2) There are four situation cards given. The facilitator reads out the situation.
- 3) Children identify the emotion.
- 4) The emotion is identified and discussed about during the session. The facilitator may use animated actions with children for them to engage.
- 5) Facilitator enacts the six options given in the Calming Down Cards one by one. Children will repeat.

Situation Cards :

Situation 1

You went to the market and saw your favourite game. But mummy said we will buy it later, not now. How do you feel? What do you do?

Situation 2

You want to watch T.V. but daddy asks you to complete your work right now. How do you feel? What will you do?

Situation 3

You are eating ice-cream and want to eat 1 more. Your parents say you cannot because it's going to spoil your teeth. How do you feel? What do you do?

Situation 4

Today it's raining and the weather is beautiful. You want to go out in the rain. But daadi says no because you have a dictation test tomorrow. How do you feel? What do you do?

Calming Down Cards

	Sit on your chair
	Feet on the floor
	Fold hands and Close your eyes
	Take three deep breaths
	Count to 10
	Say: Good Job Done!

Key Messages:

- ✓ **Awareness-** The activity will make the children aware of their own feelings and thoughts.
- ✓ **Compassion-** The activity will enhance empathy and courageous compassion for others as it involves self-work.
- ✓ **Engagement-** The activity will enhance self-regulation skills and confidence to be a part of a group as it involves social play.

Activity 5: Say No Bullying

Skills: Communication, empathy, coping with stress, problem solving skills

Duration: 20 mins

Things required:

- Story Card

Process:

1. This activity requires all the children to sit in a circle.
2. Read out the story to the students and ask the questions given at the end of the story in the class.
3. Discuss the story with questions mentioned and highlight the life skills involved in this activity with all the students.

STORY

In Primary School, there was a boy named Bishno (name is changed) who was in Mrs. Walia's class. He was a bully and caused so much trouble in her class that she found it hard to teach class. He would push other children. Not only in the classroom, but in the playground as well. He would take their lunches and sometimes even call them names.

Bishno had no friends. Until one day a new boy named Rahil came to the same school. Bishno started right off pushing Rahil around. But, the more he tried to disturb Rahil, the more Rahil would talk to him and tell him that he just wanted to be his friend. He said "Why do you always try to make others not like you? We could be good friends."

Bishno started thinking. He said "Maybe we **could** be friends. **ok**, let's try it. We could eat lunch together." So that's what they did. After school they walked home together. They also found out that they lived close to each other.

So, from that day on Bishno and Rahil were the best of friends. Bishno also made other friends because of his friendship with Rahil. He found that being a friend made him a lot happier than being a bully.

Are you wondering if you are a bully? Here's a quick way to tell. Look at the following list. If your answer is "yes" to any two or more of these questions, you could become a bully and you need to find ways to change your behavior.

- i. Do you pick on people who are weaker than you or on animals?
- ii. Do you like to tease and taunt other people?
- iii. If you tease people, do you like to see them get upset?
- iv. Do you think it's funny when other people make mistakes?

Key Messages

- ✓ Conflict Resolution- Respond constructively to conflict and facilitate collaboration, reconciliation, and peaceful relations.
- ✓ Helping Others- Offer help to others according to their needs and proportionate to one's ability.
- ✓ Empathic Listening- Listen attentively for the purpose of understanding others.
- ✓ Skillful Communication - Communicate compassionately in a way that empowers self and others.

Activity 6: I Feel, I Empathize

Skills: Empathy, coping with emotions and decision-making skills

Duration: 20 minutes

Things Required:

- Worksheet

Process:

1. Distribute the worksheet to all the students.
2. Ask them to read the instructions carefully.
3. Discuss the responses with your partner.
4. The facilitator would then summarize the responses as a whole.

Key Messages:

- ✓ Understanding others.
- ✓ Cultivating positive emotions.
- ✓ Better understanding of self

WORKSHEET

S.NO.	Situation	Tick below
SITUATION : I want to go out with my friends for a movie, my parents say 'No'.		
A	I cry and yell.	
B	I refuse to eat and close the door of my room.	
C	I try to understand why they might have said 'No'.	
SITUATION : I want my team to win, but they lose.		
A	I call the winning party names or I 'hoot' them and say they have cheated	
B	I talk negative things about them with my friends.	
C	I try to reason out and understand that someone must win or lose.	
SITUATION : My friend does not talk to me in school and say he/ she wants to be alone, so I better get out of his/her sight.		
A	I am so angry and furious that I do not want to talk to him/her.	
B	I turn my back and move off, promising myself that I will never talk to him/her again.	
C	I reflect that perhaps he/she was not well, or something might have happened to him/her. I try to understand him/her.	
SITUATION : It is getting late for school. I cannot find my English course book.		
A	I shout everyone in the house.	
B	I throw my things pell-mell around the house.	
C	I accept the delay and assume responsibility for it, resolving that in future I will be more orderly and careful.	

Activity – 7: Living and Learning in Family

Skills: Communication and interpersonal skills

Duration: 20 Minutes

Things Required:

- Pens or Pencils, and Paper

Process:

1. Ask students to identify people in their life that form family. For some people a family is obvious (mother, father, siblings etc.) but for others it may be only consisting of a relative such as uncle, grandparents, friends or a neighbor.
2. Once the group shares about families, give each student a piece of paper and ask them to brainstorm and make a list of ten things their family enjoys doing together. (Anything from tea time to going out of station).
3. Further ask them to look at their list and put different symbols against each activity. Write this on a sheet paper.
4. Now the students are asked to circle their three favorite activities and think about what these activities may say about family lifestyle and values.
5. Divide the large group into smaller groups of 5 to 7 students. Ask the group to choose a group representative who help in summarizing group discussion after brainstorming has been done using the discussion prompts given below.
6. Take the feedback from all the group representatives and summarize it in take home messages.



Symbol	Activity
₹	If the activity costs more than ₹ 1,000
»	If you must travel more than 100 Kms. away for the activity
O	If the activity brings your family closer
0	If your family has done this in the last three months

Discussion Prompts

- What do these activities say about your family values or lifestyle?
- Do your activities require lot of money to be spent?
- Do you need to travel far for many of the activities?
- What are the things that you would like to do with your family members but have not done till now?

Key Messages:

- ✓ Family helps to develop patterns of communication and also it promotes cultural values through the process of imparting social values and norms.
- ✓ Highlight the greater need for communication within families and how spending time together can enhance relationships.



Activity -1 : I Love Myself

Objectives of the Activity

Time: 45-60 minutes

Students will

- Identify the potentials that are present in them and use these potentials to achieve self- confidence.
- Explore different talents that they possess which will help them to enhance their self - confidence.

Information for Facilitator

Self-esteem is defined as a value judgment of an individual about himself or herself. It is their own thoughts and opinions about themselves. It describes as what a person believes when they about themselves such as their self - perceived physical features, personality traits, abilities and social stature. Overall, it is the sum total of their 'self- definition' or 'self-images.'

Process

1. Ask the adolescents to think about some of the good things about themselves, which they are proud of having. For example, any physical, behavioral or attitudinal trait or sometalents.
2. Ask them to take a sheet of plain paper and paste two gold stars for extraordinary attributes that they feel proud of and also write what theyare.
3. Then ask the adolescents to think of two general attributes that they feel proud of having and paste two blue stars for it and write what it is that they place in this category.
4. Ask the adolescents to divide themselves into pairs and to share among themselves what attributes they themselves have which make them feel proud of themselves and for which they have allotted gold and blue stars why?
5. Now ask each adolescent to share with the entire class the talents that they possess. Encourage the adolescents to come forward and perform some of their talents.
6. Make all others clap for each performance.

Possible Responses

Possible responses to question 2

- "I am very proud of my eyes"
- "have a lovely voice"

Possible responses to question 3

- "I feel proud to have such supporting and caring parents."

■ “I feel proud to be the prefect of my class.”

Possible responses to questions 4

- “I have given my eyes a gold star as everyone has appreciated them very much. I feel very proud about it.”
- “I have allotted a gold star to myself for my wonderful habit of empathizing with my grandparents.”
- “I have allotted a blue star to myself for my being liked by everyone in my class.”

Possible responses to question 5

- “My friend Sheena feels proud of having beautiful eyes as everyone tells her that she has wonderful eyes.”
- “My friend Shalu has given a gold star to herself for having the habit of spending time with her grandparents, as they feel proud of her and she also feels proud of them”

Possible responses to question 6

- “Like to sing or dance”
- “To tell a joke”
- “To take part in debate”
- “Good at drawing”

Assessment of Activity

Assess if the adolescents could think of two extra ordinary attributes about themselves and two general attributes that they feel proud of and also find out if each one of them could share his/ her talents in front of the whole class. If so, proceed to the next activity.

Key-messages

- ✓ An adolescent who feels confident about oneself will have a healthy self-image.
- ✓ They also realize that they are worthy of love and a person with integrity.
- ✓ They will become a person with a strong belief, one who has a lot of faith,
- ✓ wisdom, courage to use their talent affectively.

Activity 2: Reflecting on Adolescence and the Growing Up

Objectives of the Activity

Time: 30-40 minutes

Students will

- Understand changes during adolescence.
- Appreciate the feelings associated with growing up.

Materials

- Chart papers, pens, markers, magazines, glue stick, board, and chalks.
- Prepare presentation slides to be displayed in or use blackboard for the same.

Process

1. Peer educators begin with presenting and discussing about the "*Physical changes during adolescents and ways to deal with them*".
2. Then Peer educators divide the students into six groups and ask them to discuss on the following topics:
 - "*Social changes during adolescence*",
 - "*emotional changes during adolescence*",
 - "*areas of concern of adolescents*",
 - "*adolescents in view of physical health*",
 - "*how does change during adolescence influence health*",
 - "*how can adolescents deal with these physical, social and emotional changes*".
3. Peer educators ask them to use any method to present their discussion e.g. as a collage, drawing, points written on chart paper, etc.
4. Peer educators invite each group to present their work and they write the important points under each heading on the blackboard.
5. The peer educators ensure that some of the important points are substantiated using slides given below:

Health

- According to World Health Organization, **Health** is defined as a state of complete physical, mental, and social well-being and not merely the absence of illness or disease.
- **Physical wellbeing** refers to the appropriate and healthy functions of body and body organs within the limitation of age, gender and occupation of an individual.
- **Mental wellbeing** refers not only to the absence of mental illness but also to the awareness and contribution of one's talents, abilities, emotions, strengths and weaknesses. Thus, also being productive for the society.
- **Social wellbeing** refers to one's ability to interact with and adjust to other members of the society. It also means being responsible towards oneself, one's family, community and country as a whole.
- "**Adolescence**" is a significant period of lifespan development that occurs between childhood and adulthood.
- **Puberty** is the period that defines several physical, emotional, social and cognitive changes that happen to girls and boys as they grow up.
- '**Adolescents'** age group (Boys and girls) are between 10–19 years.
- '**Young People'** age group is between 10 – 24 years.

Physical Changes (in Girls)

- Growth spurt occurs
- Enhancement of Breasts
- Skin becomes oily
- Waistline may narrow
- Appearance of underarm hair
- Pubic hair also appears
- Enlargement of external genitals
- Ovulation (may/may not) occurs
- Menstruation cycle begins

Physical Changes (in Boys)

- Growth spurt occurs
- Development of muscles
- Skin becomes oily
- Broadening of Shoulders

- Deepening of Voice
- Appearance of facial hair
- Enlargement of reproductive organs
- Sperm production begins

Emotional and Social Changes

- Preoccupation with body changes
- Concrete thinking but confused at times
- Fantasy and idealism
- Mood changes
- Attention seeking behavior
- Attraction towards opposite sex
- Need to establish one's own identity
- Inquisitiveness and curiosity
- High energy level
- Changes in appearance and dress code
- Future-oriented (academic or career)
- Self-exploration and Experimentation
- Conflicts with family's interest
- Need for attachment to a peer group or attraction for opposite gender.
- Forms new relationships with others
- Need for autonomy and independence
- Begins taking decisions for themselves and others

Key Messages

- ✓ Adolescence is a natural and normal process.
- ✓ This stage of development may differ in terms of timing, years, etc.
- ✓ Biological or physical changes may vary in time, but they follow a specific pattern of development.
- ✓ **Ask-** Do not be afraid to ask questions to parents, teachers or someone you trust.
- ✓ **Take care of one's body** - it means looking after physical needs (fitness, nutrition,) and emotional needs (thoughts, feelings) health.

Activity -3 : How Best Can I Communicate?

Objectives of the Activity

Time: 30-40 minutes

Students will

- Discover the skill to appreciate others in order to maintain friendship.
- Learn to greet each other with verbal and Non-verbal gestures.

Information for Facilitator

Tell the adolescents that we need to initiate and work hard to keep up relationships. It is continuous effort to maintain a relationship, not to hurt people, and if hurt, how to deal with it. All of us have people in our lives that matter to us the most and we depend up on others for support. Both verbal and non-verbal gestures are used to initiate and maintain friendship. Verbal communication includes introducing oneself, what they do and who they are, etc. on the other side, non-verbal gestures include making eye-contact, holding hands, shaking hands, hugging, etc.

Process

2. Divide the adolescents into two random groups, with equal numbers in each group. Let the adolescent from two circular groups, facing each other. Maintain a distance of at least 6 feet between the two.
3. Make both the group stand opposite to each other.
4. Now tell them to step forward and greet each other one by one.
5. Ask them to go back to their original position after greeting.
6. Now ask the adolescents to assemble once again in two random groups and share with one another not only non-verbal gestures but also share a few words of who they are and what they do etc.
7. Now ask them to discuss with the whole class on how they felt sharing with each other such verbal and Non-verbal greetings.

Possible Responses

Greetings each other with non-verbal gestures

- Bending and folding hands
- Shaking hands and smiling
- Hugging and patting on the back
- Eye to eye contact and a smile.

Verbal Gestures

- “Hi, I am Seema, I live in Delhi.”
- “I am Naren. What is your name?”
- “I belong to hilltop school, and live in an apartment, how about you?”

Sharing How They Felt Greeting Each Other

- “It was exciting even with those whom I hardly interact.”
- “I felt good about it.”
- “I was excited.”

Assessment of Activity

Assess if the adolescents have experienced the warmth in verbal and non-verbal greetings from each other, of sharing; if so, they can proceed to the next activity.

Key Messages

- ✓ This activity will help adolescents in building positive and healthy relationships with others and maintain social communication.
- ✓ They will be able to initiate and maintain friendly relationships, which can be of great importance to their mental and social well-being.
- ✓ They will also be able to express opinions, desires, needs and fear.
- ✓ It may act as a medium to ask for help in the time of need.

Activity 4- Discussing Feelings

Objectives of the Activity

Time: 30-40 minutes

Students will

- Develop interpersonal skill with one another and the trainer before the session.
- Learn to express and share their feelings as well as emotions with others.

Information for Facilitator

Tell the adolescents, “*Feelings and emotions, which means the same thing, are the reactions we experience as we respond to the world around us*”.

During this period of their lives, it is normal to have a wide range of feelings.

Process

1. Ask each adolescent, one by one, to share how she/he was feeling while entering the classroom.
2. Divide the class into groups of four adolescents each.
3. Ask them to express their feelings that they have experienced earlier in any desired manner, whether it be drawing, singing, dancing, speech.

Possible Responses

Happy	Joyful	Silly	Unhappy	Jealous
Pleased	Sparkling	Angry	Depressed	Annoyed
Cheerful	Jolly	Sad	Suspicious	Irritated
Comfortable	Warm	Lonely	Uncertain	Furious
Light hearted	Thrilled	Isolated	Bitter	Offended

Assessment of Activity

Assess if adolescents are comfortable with one another. If you feel that they are not, extend the discussion further. If they are comfortable, proceed to the next activity.

Key-Messages

- ✓ It is important for adolescents to realize that the feelings they have and their rapid changes in mood are normal in adolescents.
- ✓ This will enable them to accept and deal with their emotions instead of being afraid or frustrated.
- ✓ They will be able to recognize the emotions within themselves and others.
- ✓ Adolescents will become aware of how emotions influence behavior and will also be able to respond to emotions appropriately.

Activity-5: Understanding Anger

Objectives of the Activity

Time: 30-40 minutes

Students will

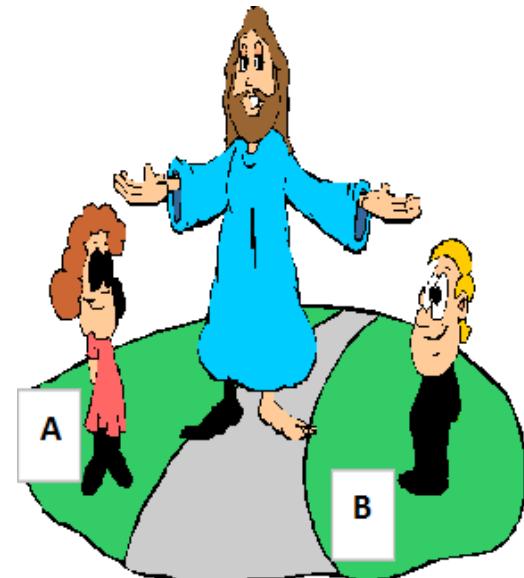
- Identify healthy and unhealthy reactions to anger
- Exchange and share ideas on healthy ways to deal with anger

Materials

- Refer to Table showing “When you are Angry you are most like.....” (for the facilitator /peer educators)
- Pens or pencils, marker board, blackboard or chalk.

Process

1. Write “A” and “B” with chalk on the floor on the two opposite sides of the room.
2. The facilitator reads from “*When you are Angry you are most like.....*” and asks students to make their own choice.
3. Based on their respective choice, students have to stand in either “A” area or “B”.
4. After each choice is read and students make their own choices, the facilitator asks them to explain why they made that particular choice.
5. Then get the group back together and go on to the next set of choices. The facilitator leads a group discussion among the students using the prompts given below.



Discussion Prompts

1. What was your reason to pick your response?
2. Explain the benefits of being like a cat vs. a tiger.
3. How does behaving like a lake feel?
4. What do you think about your choice? Is it really the best choice?

6. The facilitator using the answers of the 'Discussion Prompts' takes opinions on whether their response is healthy or unhealthy.
7. The facilitator summarizes the session using the Key messages given below.

Key Messages

- Anger is a natural emotion. However, how we behave in anger is under our control.
- There are healthy and unhealthy ways of expressing anger.
- Some simple steps you can try to manage your anger are:
 - o Breathe deeply. Picture your breath coming up from your "gut."
 - o Slowly repeat a calm word or phrases such as "relax," "take it easy." Repeat it to yourself while breathing deeply.
 - o Visualize a relaxing experience, from either your memory or your imagination.
 - o Yoga-like activities can relax your muscles and make you feel much calmer.

Reference Table

When you feel angry, you are more like.....	
A	B
Pond	River
Hammer	Nail
Swimmer	Cricket player
Guitar	Trumpet
Tiger	Kitty cat
Lava	Rain

Activity-6: Controlling Anger

Objectives of the Activity

Students will

- Understand the connection between thoughts and emotions.
- Learn and practice self-instruction training for managing anger.

Materials

- Role -play scenarios for ‘Controlling Anger’ for the students.
- Explain the Handout for “Controlling Anger” (teachers/facilitators only)
- Pens or pencils, marker, board, chalk.

Process

1. Facilitators discuss with participants the rationale for the topic. They can provide information about how our thoughts may influence our emotions. The facilitators may also provide the following examples:
 - Our friend shouts at us. If we think she wants to show us down, we will get angry or if we think that she is just having a bad day, we may not get angry or at least less angry.
 - Our brother/ sister spills something on our school project. If we think he/ she did it deliberately to get us into trouble, we will get angry. If we tell ourselves it was just an accident, we are less likely to get angry.
 - Mother comes home late. You have come back from school and are hungry and waiting for her to give you food.
 - a. If we think she is shopping and having fun without you, we are going to get angry.
 - b. Or, if we think she has been stuck with some important work, we may feel worried.
 - c. And if we think she is just running late and we will ask her where she has been, we are less likely to feel bad.
2. Facilitators ask for two volunteers from the class. They give the volunteers one of the role-play situations. As soon as they depict the situation, they ask them to pause. They ask the student audience what are some self-statements the role play actors can make to keep anger under control.

Self-Instruction/talk examples (Role Play-1):

"OK, "It's alright. Keep calm" "Be calm."

"Relax."

"She has changed her mind."

"She must have forgotten about the first job."

"I'll talk to her and find out what she wants."

"Don't worry about showing her mistake; she will be happy that both jobs were done".

Repeat with the second role-play.

Self-Instruction/talk examples (Role Play2):

"Calm down."

"Relax."

"I did make a mistake."

"He didn't have to yell at me and over react that much but it won't help to yell back."

"Fix the problem, apologize and talk to him later about the yelling."

Facilitators summarize with key messages in the end of the activity.

Key Messages

- ✓ Our thoughts may influence our feelings and therefore behavior as a whole.
- ✓ If we give ourselves positive self-talk during the provoking situation, we will be more likely to respond appropriately with others.

HANDOUT: CONTROLLING ANGER

STEP 1: Prepare for the provoking situation

Make yourself ready for a potential conflict, if possible. Think of statements such as:

"I can handle this. I know how to control my temper. This could get ugly, but I know how to handle myself. I'll remember to breathe. If it is not going well, I'll calmly excuse myself and deal with it later."

STEP 2: Confront with the provoking situation

While the problem situation is going on or after it has happened and you are about to address it, make statements such as:

"Keep calm. Be cool. This is not that big of a deal. I will control the situation if I stay in control. Yelling and screaming is not going to solve anything. This person is really acting poorly, she must really be upset. I can help this person if I remain calm. I am not going to let him upset me."

STEP 3: Coping with the arousal and stress

When you start to notice your body getting stressed and you may be losing your cool, make statements such as:

"I can feel my heart pounding, take a few breaths. My head is pounding, take a break and talk about it later. I have reason to be annoyed, but I am going to stay in control. He can probably see that I am getting upset, but my voice and words will be calm. Even though I am steaming, I am going to try to work this problem out. I am way too upset to confront her; I will talk to her later."

STEP 4: Self-Evaluation

After the provoking episode is over, think and make statements such as: "That was not so bad. I got a little peeved, but I stayed in control. I did a good breathing exercise. My breathing helped me. I did a good job. I can see keeping my cool really helped in that situation."

Activity-7: Understanding and Dealing With Loss and Sadness

Objectives of the Activity

Time: 45-60 minutes

Students will

- Identify personal losses and share them with the group
- Understand the reactions to loss.
- Gain an understanding of the healthy ways of dealing with sadness and loss.

Materials

- Copy of the 'Loss Cycle Model' for the peer educators.
- Pens or pencils, marker, board and chalk.

Note

In this activity the peer educators must be accompanied with the teacher facilitator and they should be empathetic in their discussion as this is a sensitive topic.

Process

1. Peer educators divide the class into small group of 10-15 students. They ask the group members to share some episode when they felt really sad.
2. Then request each group to share their responses and write them on the black board. Common responses include the following:
 - Someone passed away
 - A friend moves away.
 - A pet dies.
 - We changed house.
 - A brother or sister leaves home.
 - I failed in a subject.
3. The peer educators tell that sadness is a normal response to loss. It is an emotional suffering when something/someone loves is taken away.
4. Peer educators brainstorm with the whole group by asking "How do people express sadness?" They note the responses on one side of the blackboard.
5. They then draw/display the "The Loss Cycle" and explain the stages of coping with sadness.

The five stages of response to a loss or sadness

- **Denial:** "This can't be happening to me."
- **Anger:** "Why is this happening? Who is to blame?"
- **Bargaining:** "Make this not happen, and in return I will ."

- **Depression:** "I'm too sad to do anything."
- **Acceptance:** "I'm at peace with what happened."

Now, the peer educators ask the group, "What are some of the common false beliefs associated with sadness?" Present each myth given below (attached here) and then the correct fact.

6. Peer educators summarize the session using the Key messages.

Key Messages

- ✓ Sadness is a natural response and a personal experience.
- ✓ How one experiences sadness depends on several factors, including temperament, personality traits life experiences, faith, severity of the loss and coping style.
- ✓ The responses to sadness are also varied and the grieving process takes time. There is no correct or incorrect way to grieve — but there are healthy ways to cope with the sadness.
- ✓ Family and friends are major part who supports us to overcome from the loss.

MYTHS AND FACTS ABOUT SADNESS

MYTH: The sadness will go away quickly if you ignore it or do not pay attention to it.

- **Fact:** Trying to ignore your sadness or keep it from surfacing may only make it worse for future. For real healing, it is necessary to face your sadness and actively deal with it.

MYTH: It is imperative to "be strong" in the face of loss or pain.

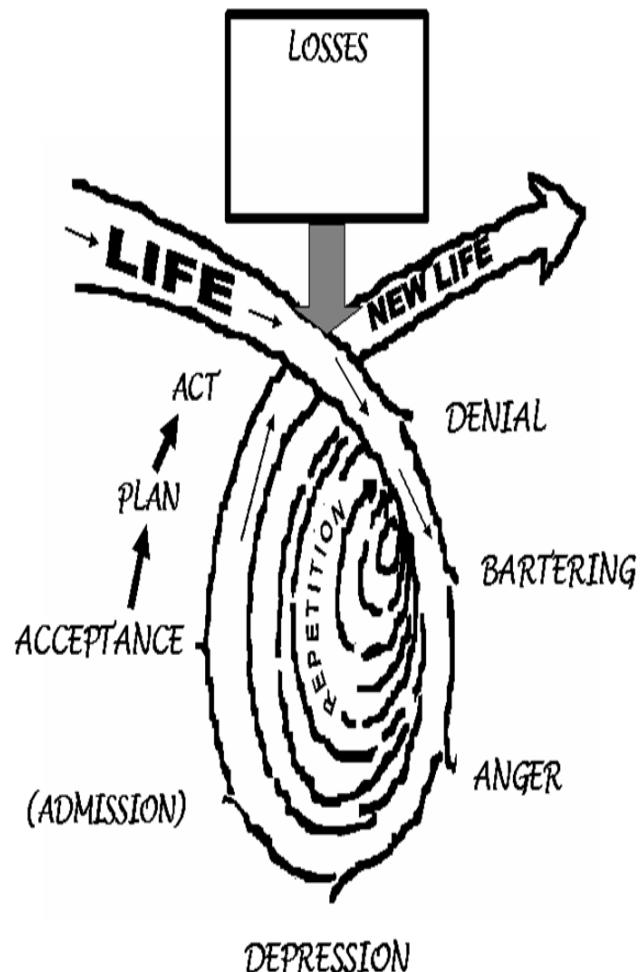
- **Fact:** Feeling sad is a normal reaction to loss. Crying never means that you are weak. Showing your true inner feelings can help you as well as others to support you.

MYTH: If you don't cry, it means you are not sorry about the loss.

- **Fact:** Crying due to sadness is a normal response. Crying is not the only way to express pain or loss. It depends upon individual to individual.

The Loss Cycle

The Normal Cycle for All Losses



Activity -8: Improving Relationships

Objectives of the Activity

Time: 30-40 minutes

Students will

- Develop and practice listening skills.
- Learn different ways of effective communication with others.
- Understand another person's view point- verbal and non-verbal - in a better way through demonstration.

Information for Facilitators

Communication is a two-way process. it is not merely talking and listening. Verbal communication is only one medium of communication between two or more people. Without using verbal cues, we can communicate with our facial expression, gesture and body language. Appearance, posture, gait and voice tell us more about people than words. These elements of interaction are called non-verbal communication.

Explain that because gestures and other non-verbal behaviors often represent a variety of emotions; it is easy to "misread" them.

It is important for the adolescents to understand that to be part of a group is one of the basic needs of people. Everyone wants to belong to their friend circle, also want to be recognized and appreciated by others. Sincere compliments help each other. A gift, like a compliment, makes them feel nice and raises their confidence and self-esteem. Adolescents need to understand that they all are peers in "patches", i.e. friends may agree in some ways and disagree in others. You may stress that most of the time we lose friends due to misunderstanding that is caused by miscommunication.

Process

Introduce active listening through the following exercise.

1. Ask all the adolescents to pick one partner for these exercises.
2. Tell them to sit in certain postures as mentioned below, and ask them to discuss the topics corresponding to the future.

Posture	Topic of discussion
Sitting back to back	Best movie that they have seen
One sitting and the other standing	The best moments that they cherished
Both showing equal interest in the conversation by sitting face to face.	Future plans

3. Following each demonstration, discuss with the adolescents about their feelings while assuming the posture like:
 - How did you feel making a conversation in this posture?
 - How did it feel to listen actively to your partner?
 - Was it different from the way you usually listen?
 - How did it feel to be actively listened to?
4. Ask examples of times when adolescents have guessed wrong about how another person was feeling or other have guessed wrong about their emotions.
5. What clues were they misreading?

Now

1. Ask each one of the adolescents to approach at least five other adolescents and give an appropriate compliment.
2. Then ask them to assemble back, ask them to share his or her own experiences by asking the following questions:
 - What compliment did she/he receive and from whom?
 - How did they feel when they receive the compliment? (Ask all the adolescents)
3. Ask them to give some imaginary gift (which can be called a “mental gift” to one another. Mental gift is just an imaginary gift which could be abstract but should be understood and felt whereas; a compliment is appreciating one another’s appearance or some qualities. Mental gifts are what one feels like giving to another person- a positive enabling attribute that will help the other person.)
4. Discuss the following questions with the whole class on what “gift” they gave and received.

Possible Responses

Compliments

- “Hi, you look nice.”
- “Thanks, you did that really well.”
- “Good luck for your exams.”
- “Congratulations on your success.”

Feelings while receiving various compliments from others

- “I was thrilled to get that compliment.”
- “I felt overwhelmed to listen to the best wishes from my friend.”
- “I was happy and excited to receive congratulations.”
- “I am glad to know that she said, I look nice, do I?”

Mental Gifts

- “I gift you the confidence.”
- “I gift you the power to analyze situations.”
- “I gift you the skill to communicate effectively.”

Assessment of Activity

Assess if the adolescents have demonstrated verbal and non-verbal ways of communication, and have also given compliments by way of gestures to all. Ask them to share at home with their parents whatever they learnt in the classroom.

Ask them to keep practicing the skills that they learnt. Tell them that they may maintain a diary in which they can note down the compliments and gifts that they give to people and the ones that receive from others.

Key-Messages

- ✓ Communicating with people help them to know the importance of having friends and family.
- ✓ Adolescents will become aware of their strength and their weaknesses in maintaining their relationships.
- ✓ Adolescents will be able to find out the reason for gaining worthy and unworthy relationships.

Activity – 9 : Learning to Say “No”

Objectives of the Activity

Time: 45-60 mins.

Students will

- Understand peer pressure and how to be assertive under pressure.

Materials

- Refusal techniques handout (for peer educator)

Process

- Students are asked about what they understand by the term 'peer pressure'.
- Ask them to give examples of real life situations when they have experienced this kind of pressure.
- Randomly ask students to get up and give them situations to practice assertive response.



Problem 1	A cousin offers you a cigarette.
Problem 2	You see some older school children smoking at a school picnic.
Problem 3	You are preparing for examination and someone offers you some medicines to increase your concentration.
Problem 4	Your classmates offer you alcohol to try when you are attending a friend's birthday party.
Problem 5	You have a stomachache and someone offers you a random medicine from a strange looking packet.
Problem 6	You see some of the seniors in your school transferring beer into empty coke cans in the toilet on farewell party in your school.

- Highlight whenever you see the participants showing characteristics of assertive communication.

Key points (Characteristics) of Assertive Communication

- Aware of others feelings
 - Strong voice
 - To the point and direct statements
 - Statements beginning with 'I'
 - Confident and Honest
 - Maintain Eye-to-eye contact
 - Open to resolution of problem situation
- Conclude the session by highlighting the following key messages.

Key Messages

- ✓ Peer pressure is likely to happen in almost everyone's life.
- ✓ Certain level of positive peer pressure may be used for bringing about desirable change.
- ✓ Display the 10 commandments of substance abuse prevention. (as mentioned earlier)

Activity 10: Decision Making in the Face of Peer Pressure

Objectives of the Activity

Time: 45-60 minutes

Students will

- Recognize the role of their own values in the decision-making process
- Encourage to think about possible changes in their values.

Information for Facilitators

Explain to the adolescents that we all have to make many decisions, important ones as well as trivial ones. Some of our decisions will affect our whole life; others will have less of an effect. Our decisions reflect on our values. Thus, decision making, is a process that involves assessment of one's own values and beliefs. This activity will make adolescents explore their own values through the choices they make in a number of situations.

Process

1. Distribute Alternatives and Decision-Making Exercise- as attached with this activity.
2. Ask them to carefully read each situation in the attachment and to consider their response before listing their choice as (a) or (b). Once the adolescents have responded to all the situations, have each one tally the number of (a) and (b) responses.
3. Now divide the class into small groups and ask them to discuss within their group about the responses to the various situations.
4. Encourage them to discuss their reasons for making each choice. Give 15 minutes for discussion within the group.
5. Reassemble the groups for class discussion. Encourage discussion using the following questions.
 - o How did you find the task of making decisions in the situations given? Difficult? Easy? Why?
 - o Do you face similar situations in your life?
 - o Why do you think it is difficult to stand firm in some situations?
 - o What are the values involved in these situations?
 - o Did you find yourself altering your choices after the group discussion? Why? What does that indicate?

Possible Responses

Examples of responses to questions 1-5 are as follow:

1. It was difficult to make decisions in some situations because I felt uncertain.

2. Yes, we do face such similar situations in our life.
3. Sometimes we do get tempted because of friends.
4. The values are such that we have to be strong from within.
5. Yes, in some cases I changed my opinion as I found my friends were right. It indicates that we can be influenced by others.

Assessment of Activity:

Assess if the adolescents are able to recognize the role of their own values in the decision-making process. Also, if they are able to make decisions after due consideration. In evaluating risky situations, the following questions can be helpful :

- ✓ What are the possible consequences of their decision?
- ✓ What are the short-term benefits (such as the feeling of fitting in) versus the possible long-term outcomes (harmful)?
- ✓ Can peer pressure affect your decision-making process, if yes, then how?
- ✓ Where is the additional support or advice that you can seek, if you need it?

ALTERNATIVES AND DECISION-MAKING EXERCISE

No.	Situation	(a)	(b)
1.	You are taking the test for a professional course. You are very keen on scoring high marks. Suddenly you realize you have a chance to copy from the best student. You.....	Resist the temptation to copy.	Copy the clever student's answer as much as you can.
2.	Your parents disapprove of your friends. You....	Obey your parents and stop associating with them.	Say, "You keep off this. I'm old enough to choose my own friends."
3.	Your friends ask you to miss a class and go to a movie with them. You....	Refuse to go with them.	Join the group and go.
4.	Your parents ask you to study harder. You...	Obey them and do it.	Refuse and say "Certainly, not!"
5.	Your friends invite you to drink or take drugs with them. You....	Say, "No".	Say, "Ok" and join the party.
6.	You returned home late after going to a party without your parent's permission. You....	Apologize and say that you will never do it again.	Lie about where you were.

7.	Your friends crack dirty jokes in the presence of your younger brother/sister. Everyone laughs. You....	Express your disapproval and refuse to join the laughter.	Laugh with the crowd.
8.	Your trainer shouts, "All of you shut up and sit down ". You.....	Settle down and listen.	Shout out a wisecrack and make everybody laugh.
9.	Someone else has been falsely accused of something you have done. He or she is going to be punished undeservedly. You....	Own up your fault and accept the due punishment.	Keep quiet and let the innocent person receive the punishment.
10.	You find a purse in the campus with lots of money in it. You....	Hand it over to the authorities.	Take the money for yourself.
11.	Some students unjustly accuse an unpopular students in your presence. You....	Speak up in defence of the accused.	Keep silent.
12.	Some of your classmates win the school election, get a high rank or win a prize. You.....	Congratulate them.	Resent their success and make nasty comments behind their back.
13.	You over hear a group gossiping about one of your trainers. You....	Stand up for the trainer talked about.	Join the conversation and add your share to it.
14.	You discover some people are spreading lies about you. You....	Ignore them.	Blow up and hold a grudge.
15.	You are with friends. Your parents are not at home. Your friends propose to screen an indecent video movie. You.....	Refuse to join in.	Settle down and see the movie.
16.	Your family is at prayer. You....	Participate willingly.	Avoid prayer giving the excuse of studying for a test.
17.	You haven't studied for a test. You....	Take the test anyway and face the consequences.	Skip class pretending to be sick.
18.	Some adolescents tease you and make fun of you in a hurting manner. You....	Ignore them.	Insult them and threaten to get even.
19.	You are visiting a family and you accidentally break a valuable vase. You....	Own up and apologize.	Deny you broke it and put the blame on someone else.

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