



***Addressing Puberty Related Harmful Social Norms  
Affecting Adolescents SRHR in Bangladesh***

**Submitted by**

Dr. Julia Ahmed<sup>1</sup>

Sanzida Akhter<sup>2</sup>

Subas Biswas<sup>3</sup>

Selina Ferdous<sup>4</sup>

Iqbal Lutfi Hamad<sup>5</sup>

---

<sup>1</sup> Lead Consultant, Bangladesh

<sup>2</sup> Associate Consultant, DU Bangladesh

<sup>3</sup> Associate Consultant, Brac Bangladesh

<sup>4</sup> Associate Consultant, PA, Bangladesh

<sup>5</sup> Director WE Program, JOHUD, Jordan

## **Acknowledgement**

*It is a great pleasure to acknowledge the sincere support we received from the Royal Tropical Institute, Netherlands and the Share Net International that allowed us to produce this knowledge product.*

*Our sincere thanks to the research respondents for sharing their insightful thoughts and recommendations; all were very helpful to design the content materials of the tailor-made training guide.*

*Our profound thanks to Sagorika Das, the School Principal of the Shohag Shawpnodhora Pathshala and Antara Farnaz Khan, the CEO of Orodhho Foundation who supported us to pilot this training guide in their respective venues.*

*Our grateful thanks to Share Net Jordan for their important feedback to the first draft of this training guide.*

*Our thanks to the participants of the dissemination events, where we shared the findings of this training guide. Their thoughtful comments, questions and suggestions helped us to fine tune the training guide.*

*Last but not least, our sincere thanks to Share Net Bangladesh for supporting us to conduct the online dissemination event to a wider group of people working in the SRHR sector.*

## 1. Organization of this Guide

### 1.1 Background and objectives

#### Background

The idea of developing this **Knowledge Product: ‘Tailor-made training guide to address puberty related harmful social norms affecting Adolescent’s SRHR’** is originated in the second global Co-creation Conference, supported by Share Net International and hosted by Share Net Bangladesh in January 2020. The focus of this online conference was on Adolescence and Youth SRHR. While these papers<sup>6,7,8,9</sup> showed that social norms influence adolescents’ health behavior, however, this paper<sup>10</sup> mentioned that adolescents continue to suffer from unsafe sexual health decisions despite the availability of school based interventions. Bangladesh Demographic Health Survey (2017-2018) further supported that adolescent fertility<sup>11</sup> and girl’s marriage<sup>12</sup> both are continuing to keep very high figures.

While many high-income countries used social norms strategies to address health behavior; however, there are very little evidence found<sup>13</sup> for low income countries.

In the above situation, literature search indicated that there is a definite lack of training materials that delved on puberty related harmful social norms issues in connection to realizing adolescent’s SRHR. Following this, a proposal was developed, submitted and awarded from the Share Net International under their small grant fund.

---

<sup>6</sup>Stark L, Asghar K, Seff I, Cislighi B, Yu G, Gessesse TT, Eoomkham J, Baysa AA and Kahtrine F. How gender- and violence-related norms affect self-esteem among adolescent refugee girls living in Ethiopia. *Global Mental Health* 2018;17(5).

<sup>7</sup>Albert D, Chein J and Steinberg L. The Teenage Brain: Peer Influences on Adolescent Decision Making. *CurrDirPsycholSci* 2013. April;22(2):114–20.

<sup>8</sup>Eisenberg ME, Neumark-Sztainer D, Story M and Perry C. The role of social norms and friends’ influences on unhealthy weight-control behaviors among adolescent girls. *SocSci Med* 2005. March;60(6):1165–73.

<sup>9</sup>Templeton M, Lohan M, Kelly C, Lundy L. A systematic review and qualitative synthesis of adolescents’ views of sexual readiness. *JAdvNurs*. 2017 Jun; 73(6):1288-1301.

<sup>10</sup>Evidence brief, co-creation conference 2021

<sup>11</sup>28% (BDHS 2017-2018)

<sup>12</sup>59% of women age 20–24 marry before age 18 (BDHS 2017-2018)

<sup>13</sup>Cislighi B, Shakya H. Social Norms and Adolescents’ Sexual Health: An introduction for practitioners working in Low and Mid-income African countries. *African journal of reproductive health*. 2018 Apr 18;22(1):38-46. doi:10.29063/ajrh2018/v22i1.4.

## Process of developing this training guide:

Prior to developing this training guide a formative research was conducted to understand key stakeholders thoughts, comments about issues around puberty related harmful social norms; and their recommendations upon which the first draft of the content matter of this training guide developed.

The draft training guide shared with Share Net Jordan for their review. Later, a dissemination event was organized to share the findings of this training guide with the wider SRHR practitioners, representatives to seek their suggestions for further improvement of this guide.

## Objectives of this training guide

### Objectives:

- Knowledge building on scientific facts about Sexual Reproductive Health related facts, concepts that adolescents face during puberty.
- Facilitate discussions about puberty related harmful social norms issues; allowing participants to think and question critically about the practice of harmful social norms and how best to address these norms.
- Develop an action plan for the implementation of this training guide as a by-product of the training

**Aim:** Participants of this training supported by follow-up trainings will step into new roles capacitated with SRHR activisms, advocacies, and training skills. They will be engaged in social movement building platforms about the urgency of redefining these harmful social norms and realizing SRHR for all.

## 1.2 Broad topics, sub-topics, methods, materials of this training guide

Broad Topics	Sub topics	Method	Materials
Introduction	<ul style="list-style-type: none"><li>- Welcome and Introduction</li><li>- Why this training</li><li>- Briefing about Training Schedule</li><li>- Setting ground rules</li></ul>	<ul style="list-style-type: none"><li>-Introduction</li><li>-Interactive discussion</li><li>-Q/A</li></ul>	Marker, VIPP card, VIPP board Flip chart, Flip board Multimedia Laptop Power point slides

	- Pre-Test Assessment	Written test	Questionnaire
My Body and My Puberty	- Human Reproduction: How we come to this world?	-Interactive discussion	Multimedia Laptop- Power point slides
	- Reproductive and Sexual Anatomy	-Lecture using posters Q/A	Flip chart, Flip board, Marker, Posters on female and male reproductive Organs
	- Puberty related physical and mental changes  - Role of hormones in reproductive system & corresponding changes during puberty	- Group work -Discussion -Q/A	
	Working definitions of: <ul style="list-style-type: none"> <li>- Adolescence</li> <li>- Puberty</li> <li>- Sex</li> <li>- Sexuality</li> <li>- Sexual health</li> <li>- Reproductive health</li> <li>- Sexual Reproductive Health Rights</li> </ul>		
Social Norms, Puberty related Harmful Social Norms affecting Adolescents SRHR	Understanding about Norms  Types of norms: <ul style="list-style-type: none"> <li>- Social norm</li> <li>- Gender norm</li> <li>- Legal norm</li> <li>- Moral norm</li> <li>- Harmful social norms</li> </ul>	Interactive discussion  Q/A	Multimedia  Flip chart, Flip board, Marker
	Harmful social norms during puberty & their effect on Adolescents SRHR	Group work  Group presentation	Flip chart, Flip board, Marker

	Sources of harmful social norms		
	Key arguments for redefining harmful social norms: Effective questioning	Case study analysis: who-what-where-when-how Interactive discussion Q/A	Multimedia  Flip chart, Flip board, Marker
Setting Action plan	- Develop Action Plan: Planned activities	Group work on planning of activities  Presentations on Action Plan	Flip chart, Flip board, Marker
Post Test	- Post Test Assessment	Written test	Questionnaire
Recap and Closing	- Recap of salient points by the Facilitator - Remark by the Participants - Certificate distribution for participation - Closing remarks by Facilitator.	- Recap by the Facilitator  - Remarks by Participants  - Distribution of Certificate - Closing remark by the Facilitator	

### 1.2.1 Duration of training

This training is planned for two-day. Time allocation of each session will be decided by the facilitator.

### 1.3 For whom this training guide

This training guide can be customized for the use of adolescents, youth, parents, teachers, NGO workers and SRHR advocates considering their respective contexts.

### 1.4 How to use this guide

#### Selection of Facilitator

Youth leaders, trainers, and SRHR advocates who have at least 2 years working experience in SRHR sector.

### **Facilitation principles:**

- Establish ground rules to initiate discussion
- Create positive space for effective participation
- Listen, and encourage asking questions, comments
- Encourage open mindedness and showing respect to other views, arguments
- Maintain constant neutrality solving disputes

### **Facilitator's preparation to conduct training**

- Thorough conceptualization of the content mater, clarity about each topics so that each session can be imparted with confidence
- Seek help from SRHR NGOs to select participants to conduct this training
- Plan for budget, training aids and venue
- Keep ready pretest and posttest assessment sheets, handouts, flipchart, paper, marker, note-pads, pens, certificates
- Preparation for tea-break and lunch
- Documentation of the workshop proceedings
- Prepare a to-do checklist

## **2. Training proceedings: Getting started**

### **2.1 Session 1: Introduction of the workshop**

#### **Topics of this session**

- Welcome and Introduction
- Why this training
- Setting ground rules for training
- Conduct Pretest

#### **Outputs of this session:** After this session

Participants will be:

- Introduced and familiar with each other
- Able to explain why this training is

- Aware about the need of active participation, open mindedness, and respectful attitudes to other views and dispute clarifications
- Pretest questionnaires will be filled-out by the participants to assess their pre-training knowledge on the topics of training

### Major steps to be followed

<b>Steps</b>
1. Welcome and Introduction
2. Discussion on why this training
3. Expectations from this training
4. Briefing about training schedule
5. Setting ground Rules
6. Pre-test assessment

### Facilitator's Note:

*Facilitator should be well prepared to start the training with the thought in mind that this is a different type of training. It will be dealing how to address and eliminate the scourge of the harmful social norms practices that effect negatively on the SRHR wellbeing of the adolescents, youth and society at large*

### Session proceedings:

#### Topic: Welcome and Introduction

Facilitator will welcome participants, tell them to introduce themselves by telling name, where they are from, what they do (profession) and one thing they like to do and one think they do not like to do ( Facilitator can plan this introduction session creatively by own choice).

#### Topic: Why this training

S/he will explain that this training is designed to address one of the important areas that adolescents face during puberty. It is focused on puberty related harmful social norms issues that affect sexual reproductive health and rights (SRHR) during adolescence (10 to 19 years, defined by WHO).



Facilitator will highlight that the practice of harmful social norms is such that puberty related changes are treated as taboo and stigmatized subject that are to be kept secretly, and not to talk openly. Thus, while adolescents have many questions to ask that they face during puberty, they are fearful and hesitant to raise questions. Facilitator will also mention that it is common not to find anyone knowledgeable to whom adolescents can turn to ask their questions as a result they continue to suffer from stigma, ignorance, and confusion.

In the above context, the objectives are to expose participants with scientific knowledge facts allowing to receive scientific knowledge on puberty related changes in connections to SRHR and respective harmful social norms issues; and know-how on to bring a change in the existing practice of these norms.

Facilitator will emphasize that the ultimate aim of this training is that with these new knowledge and skills participants will be able to raise voice and can ask questions logically about the practice of these existing norms.

**Topic: Participant's expectations from this training**

Facilitator will pass different colored cards to participants and ask them to write their expectations on the card.

After completion of this task, facilitator will collect these cards and paste on VIPP board.

**Topic: Briefing about training schedule:** Here facilitator will clearly brief one by one about the content material of the training schedule. After the briefing s/he will ask participants whether they have any question. If not, go to next session.

**Topic: Setting ground rules**

Ask participant to share their expected rules to follow during training

Each participant will tell minimum one rule

Examples of some common rules:

- Listen and participate actively
- Give everyone a chance to talk
- Avoid side conversations when session is going on
- Respect each other, create space to talk freely and honestly

- Express opinions, concerns and ask questions, there are no stupid questions
- Keep mobile phones in silent mode

**Topic: Pretest assessment of knowledge that will impart in this training**

After briefing why this pre-test assessment and explaining each questions, facilitator will pass pre-test questionnaires

**Pretest questions (tentative time 15 minutes):**

**1. Do I know what is adolescence period (Circle one)**

- 1.1. Yes
- 1.2. No

**2. If yes, what age range does adolescence referred by WHO? (Circle one)**

- 2. a. 7-15
- 2. b. 15-19
- 2. c. 10-30
- 2. d. 10-19
- 2. e. 15-24

**3. Do I know why I experience changes in my body and mind during this phase?**

- 3.1. Yes
- 3.2. No

**4. Name three organs of female reproductive system**

-----

-----

-----

**5. Name three organs of male reproductive system**

-----

-----

-----

**6. Did I experience social pressure not to talk about menstruation or wet dreams?**

**6. a : Yes**

**6.b : No**

**7. What is harmful social norm?**

-----

**8. Please give two examples of harmful social norms? And how do these harm?**

	Description of harmful social norms	How does it harm?
<b>8.a</b>		
<b>8.b</b>		

**9. Write two reasons why harmful social norms need to be changed**

**1.**

**2.**

**After the pretest assessment, collect the questionnaires and file it for later use.**

## 2.2 Session 2: My Body, My Puberty

### Topics of this session

- What is human reproduction: How I come to this world?
- Reproductive and Sexual anatomy, their functions
- Changes that girls and boys face during puberty
- Role of hormones on reproductive system
- Working definitions: Adolescence, Puberty, Sex, Sexuality, Sexual health, Reproductive health and Sexual Reproductive Rights

## Outputs of this session

After this session, participants will

- Have clear understanding about how human reproduction take place
- Able to describe female and male reproductive organs, their functions
- Have scientific knowledge about physical and mental changes and the role of female and male hormones that work on reproductive system during puberty
- Able to describe meaning of adolescence, puberty, sex, sexuality, sexual health, reproductive health and sexual reproductive health rights

## Major steps to be followed

Steps
1. Human reproduction: How I come to this world?
2. Reproductive and Sexual anatomy and their functions
3. Physical and mental changes that girls and boys face during puberty
4. Role of hormones on reproductive system and functions
5. Working definitions: Adolescence, Puberty, Sex, Sexuality, Sexual health, Reproductive health and Sexual Reproductive Rights

## Facilitator's Note

**Note:** *This session is designed to give scientific knowledge about hormones, about female and male reproductive and sexual anatomy in connection to puberty related physical and mental changes that adolescents face during this phase of life.*

## Session Proceedings

### Topic: Human Reproduction

This session will start with a basic question: How we have come to this world?

Here the objective of asking this question is to initiate a discussion that will be helpful to connect human reproduction, reproductive and sexual organs, and sexual act, sexuality that are involved in the process of birthing a child to this world.

After hearing participants, facilitator will say, now let us talk scientifically how we have come to this world i.e. about Human Reproduction.

Facilitator will explain that human reproduction is a biological process through which a baby is born. During sexual intercourse if semen<sup>14</sup> is ejaculated<sup>15</sup> into a female vagina, it led sperm to travel from the vagina to the fallopian tube to meet the female egg to fertilize<sup>16</sup> it. This fertilized egg eventually travel down from fallopian tube to uterus. It calls zygote that contains the genetic material (46 chromosomes), half from female (23) and half from male (23) and starts growing in the uterus (where the baby grows); in this maturation process over the course of the pregnancy (nine months), the zygote first becomes into an embryo, then into a fetus<sup>17</sup>, and finally a newborn baby.

Having explained this, facilitator will invite questions from participants. After Q/A session, facilitator will tell now let us get introduced with male and female reproductive and sexual anatomy to understand human reproduction system more clearly.

### **Topic: Female and male reproductive and sexual anatomy and functions<sup>18</sup>**

Facilitator will start this topic by displaying two poster papers on Female and Male Reproductive Organs. It will initiate discussion by asking participants to name female reproductive; followed by naming male reproductive organs.

---

<sup>14</sup> Semen: The fluid that contains millions of sperm

<sup>15</sup> Ejaculation is a process when the penis is stimulated and muscles around the reproductive organs contract and force the semen pushed out from male's penis into female vagina.

<sup>16</sup> Human fertilization is the union of male sperm and female ovum to create a fertilized egg, which will initiate the first step of forming the future baby.

<sup>17</sup> A fetus is a developing baby that starts in the 11th week of pregnancy. Total pregnancy takes place with 40 weeks, in which fetus becomes a matured baby.

<sup>18</sup> Information was adopted from: <https://www.plannedparenthood.org/learn/health-and-wellness/sexual-and-reproductive-anatomy>

After hearing from participants, facilitator will share the following table and explain female reproductive, sexual organs and their respective functions:

**Table 1: Basics of female reproductive and sexual anatomy and functions<sup>19</sup>**

<b>Female reproductive &amp; sexual organs</b>	<b>Functions</b>
<b>External organs</b>	
<p><b>Vulva</b> It forms the outer part of female genital organs including labia major, minor, clitoris, vestibules and vaginal opening.</p>	<p>Vulva provides protection of all genital organs that are situated outside.</p>
<p><b>Labia</b> There are two folds of skin around vaginal opening, called labia major (outer lips) and labia minor (inner lips). These lips are fleshy structures and covered with hair.</p>	<p>The Labia major provides protection of labia minor and clitoris. It contains sweat and sebaceous glands that produce lubricating secretions. During puberty, hair appears on the labia major.</p> <p>The Labia minor contains rich supply of blood vessels. During sexual stimulation, these blood vessels become engorged with blood, causing the labia minor to swell and become more sensitive to stimulation.</p>
<p><b>Clitoris:</b> The clitoris, a small sensory organ, located toward the front where the folds of the labia join.</p>	<p>The clitoris is very sensitive to sexual stimulation and cause orgasm during sexual intercourse.</p>
<p><b>Vestibule</b> The vestibule is a small space that led to the urethra and the vaginal opening.</p>	<p>-</p>

<sup>19</sup> Information was adopted from: <https://www.plannedparenthood.org/learn/health-and-wellness/sexual-and-reproductive-anatomy>

<p><b>Vagina:</b> The <b>vagina</b> is a muscular, hollow tube that extends from the vaginal opening to the uterus.</p>	<p><b>The vagina serves three purposes:</b></p> <ul style="list-style-type: none"> <li>- It's where the penis is inserted during sexual intercourse.</li> <li>- It's the pathway (the birth canal) through which a baby leaves a woman's body during childbirth.</li> <li>- It's the route through which menstrual blood leaves the body during periods</li> </ul>
<p><b>Internal organs</b></p>	<p><b>Functions</b></p>
<p><b>Uterus</b> The uterus, also called womb is a hollow muscular organ located in the pelvic cavity (lower abdomen). The uterus contains some of the strongest muscles in the female body. These muscles are able to expand and contract to accommodate a growing baby and then help push the baby out during labor.</p>	<p>The uterus holds the baby throughout the entire process of pregnancy. It provides the entire support the embryo needs to grow into a fetus than into a full grown baby during the entire course of pregnancy (40 weeks).</p>
<p><b>Fallopian tube</b> The fallopian tubes connect uterus to the ovaries. There are two fallopian tubes, each attached to the upper corners of the uterus.</p>	<p>Fallopian tubes are responsible to hold the ovum inside the tube that matures in the ovary. Fertilization of ovum and sperm takes place inside the fallopian tube. After the fertilization is completed, fallopian tube helps to carry the embryo to the uterus.</p>
<p><b>Ovaries</b> The <b>ovaries</b> are two oval-shaped organs that lie to the upper right and left of the uterus and connected to uterus through fallopian tubes.</p>	<p>Ovaries are responsible to produce, store, and release eggs (ovum) into the fallopian tubes in the process called ovulation. Ovaries are also responsible to produce female sex hormones (estrogen and progesterone).</p>

After finishing female reproductive and sexual anatomy, their functions facilitator will show following table to discuss male reproductive and sexual anatomy and functions.

**Table 1: Basics of male reproductive and sexual anatomy and functions<sup>20</sup>**

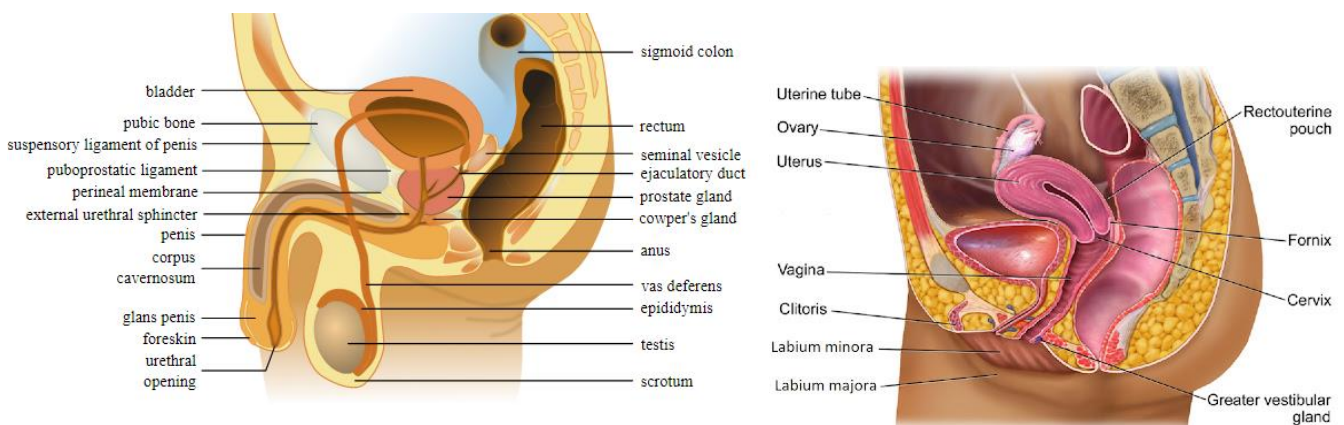
Male reproductive & sexual organs	Functions
<b>External organs</b>	
<p><b>Scrotum:</b> It is a bag of skin where 2 testes are located.</p> <p>Scrotum is located outside the body.</p>	<p>Scrotum holds and helps to protect the testes. This is important because testes to make sperm, the temperature of the testes needs to be cooler than the inside of the body. This is why the scrotum is located outside of the body.</p>
<p><b>Testes:</b> The testes are 2 small organs that are found inside the scrotum.</p>	<p>The testes are responsible for making sperm. Testes are also involved in producing male hormone called testosterone.</p> <p>Testosterone is an important hormone that plays a major part for male development during puberty.</p>
<p><b>Penis:</b> It is located above the scrotum. It reaches its full size during puberty. It contains a tube called the urethra, which carries semen.</p>	<p>The penis is used for:</p> <ul style="list-style-type: none"> <li>- Urination</li> <li>- Sexual intercourse</li> <li>- Human reproduction</li> </ul>
<p><b>Duct system:</b> It is made up of the epididymis and the vas deferens.</p>	<p>Vas deferens and duct system of male reproductive organs help to lubricate the sperm and pass to penis.</p>

---

<sup>20</sup> Information was adopted from: <https://www.plannedparenthood.org/learn/health-and-wellness/sexual-and-reproductive-anatomy>



	Epididymis is also a place where sperm complete their development after they produce in testes.
<b>Internal organs</b>	<b>Functions</b>
<p><b>Accessory glands of male reproductive organs:</b></p> <p>These are seminal vesicles and prostate gland.</p>	<p>The seminal vesicles and prostate gland make a whitish fluid called seminal fluid. This fluid mixes with sperm to form semen when a male is sexually stimulated. These accessory glands: seminal vesicles and prostate gland provide fluids to lubricate the duct system and nourish the sperm.</p>
<p><b>Urethra</b></p> <p>It is a channel that forms male reproductive organs.</p>	<p>The function of urethra is to carry sperm through the penis.</p> <p>The urethra is also part of the urinary system because it is also the channel through which pee passes as it leaves the bladder and exits the body.</p>



Picture: 1: The male Reproductive System and The female Reproductive System<sup>21</sup>

<sup>21</sup> Photo source: <https://courses.lumenlearning.com/boundless-ap/chapter/the-female-reproductive-system/>

After discussion on reproductive, sexual organs; and their functions; facilitator will ask participants whether they have any questions or comments.

After addressing their question and comments facilitator will go to the next session.

**Topic: Physical and mental changes that adolescents face during puberty**

Facilitator will brief about the group work on this topic and divide the group into two (male and female). to write down physical and mental changes that adolescents face during puberty on flip chart as follow:

- Physical and mental changes of girls during puberty
- Physical and mental changes of boys during puberty

After hearing group presentations from the participants, facilitators will show following power point slides and explain further about these changes.

**Table 3: Physical and mental changes during puberty in Girls<sup>22</sup>**

Physical Changes	Mental Changes
<ul style="list-style-type: none"> <li>▪ Growing taller</li> <li>▪ Breasts and hips get bigger</li> <li>▪ Pubic hair grows</li> <li>▪ Periods start</li> <li>▪ Vaginal discharge begins</li> <li>▪ Acne grows</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mood swing</li> <li>▪ Conscious about breast size and physical appearance</li> <li>▪ Depression during period</li> <li>▪ Feel confused, uncertain</li> <li>▪ Look for an identity</li> <li>▪ Wants to spend more time with friends then family</li> <li>▪ Peer pressure</li> <li>▪ Conflicting thoughts</li> <li>▪ Look for new experience</li> <li>▪ Fantast thoughts</li> </ul>

**Table 4: Physical and mental changes during puberty in Boys<sup>23</sup>**

<sup>22</sup> Information collected from <https://raisingchildren.net.au/>, <https://ufhealth.org/puberty-and-adolescence> and <https://apps.who.int/adolescent/second-decade/section2/page1/recognizing-adolescence.html>

<sup>23</sup> Information collected from <https://raisingchildren.net.au/>, <https://ufhealth.org/puberty-and-adolescence> and <https://apps.who.int/adolescent/second-decade/section2/page1/recognizing-adolescence.html>

Physical Changes	Mental Changes
<ul style="list-style-type: none"> <li>▪ It starts with enlargement of testes and scrotum</li> <li>▪ Followed by lengthening of penis</li> <li>▪ Growth of pubic hair</li> <li>▪ Arms, legs, hands and feet start growing faster than the rest of his body</li> <li>▪ Wet dream starts</li> </ul>	<ul style="list-style-type: none"> <li>▪ Feel confused, uncertain</li> <li>▪ Look for an identity</li> <li>▪ Wants to spend more time with friends then family</li> <li>▪ Fantasy thoughts</li> <li>▪ Peer pressure</li> <li>▪ Conflicting thoughts</li> <li>▪ Look for new experience</li> <li>▪ Sexual desire</li> <li>▪ Masturbation</li> </ul>

After the Q/A session, facilitator will ask whether participants know why these physical and mental changes occur during puberty. After a brief participatory discussion, facilitator will go to the next topic to explain it.

**Topic: Role of hormones in puberty related changes<sup>24</sup>**

*Facilitator will explain about hormone as follows:*

Hormones<sup>25</sup> are chemical messengers that are produced in endocrine glands of body's endocrine system. The functions of these hormones are to coordinate important processes of body functions including metabolism, growth, sexual functions, reproduction, emotions, mood, sleep etc. Facilitator will mention that are many hormones secret in our body, however, only sex hormones will be discussed here as these play significant role during puberty.

*S/he will show the following diagram in particular ovaries (female) and testes (male) from which sex hormones secret and will explain about .*

24 In

25 In

**Sex Hormones:**

**Female Sex Hormones:**

- Estrogen
- Progesterone

**Male Sex Hormones:**

- Testosterone

## Female Sex Hormones:

Female sex hormones include a) Estrogen and b) Progesterone. The ovaries (mainly) and adrenal glands<sup>26</sup> (small amount) are the main producers of female sex hormones.

- **Estrogen**

Estrogen plays important role in sexual and reproductive system development during puberty. It helps growth of breast, normal functioning of menstrual cycle, growth of pubic and under arm hair.

- **Progesterone:**

Progesterone prepares uterus for pregnancy it thickens uterus lining so that a fertilized egg to implant and gradually mature to a child.

## Male Sex Hormone

**Testosterone:** This hormone is used in the followings:

- Regulate sex drive
- Achieve penis erections
- Produce sperm inside testes
- Regulate functioning of the testes

*After explaining about sex hormones, facilitator will invite participants for Q/A time. After finishing this, facilitator will go to the next topic.*

**Topic: Working definitions of Adolescence, Puberty, Sex, Sexuality, Sexual Health, Reproductive Health, Sexual Reproductive**

### Facilitators Note

*Before going to discuss this topic facilitator will briefly recap the discussions that were held reproduction, reproductive and sexual anatomy; physical and mental changes, and role of hormonal functions during puberty. This recap is important because it will allow participants to connect the previous session with this session logically.*

---

<sup>26</sup> Situate at the top of two kidneys

Having said this facilitator will start discussing the following working definitions in relevance to puberty one by one:

<b>Concepts</b>	<b>Brief description<sup>27</sup></b>
Adolescence	Adolescence is the period between puberty and adulthood. WHO defines adolescence from 10-19 age bracket.
Puberty	Puberty is the time in which a child's sexual and physical characteristics mature. It is the stage when the immature reproductive system in boys and girls matures and becomes capable for performing sexual and reproductive functions.
Sex	Sex refers to the biological characteristics that define humans as female, male, transgender. Note: Often sex is referred as sexual activity either penetrative or non-penetrative.
Sexual Activity	Meant to be an intimate act either self-pleasuring or shared with someone consensual basis. It is extremely important to remember that sexual activity takes place through consensus between two, it is protected from unwanted pregnancy, sexually transmitted diseases and from coercive sex.
Sexuality	Sexuality is the way people express sexual feelings, thoughts, attractions and behavior towards other people. Sexuality defines identity building.
Reproductive Health	Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so.
Sexual Health	<b>Sexual Health</b> Sexual health impacts on sexual practice and action of the ongoing process of physical, psychological and social-cultural well-being related to sexuality.

---

<sup>27</sup> Adopted from WHO documents

	Sexual health, when viewed affirmatively, requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.
Sexual Reproductive Health and Rights (SRHR)	Sexual reproductive health rights (SRHR) covers all the means, services, care and information that people need to make free and responsible decisions about their sexuality, and the rights that they have in this regard.

After Q/A session facilitator will go to the next session.

### 2.3. Session 3: Social Norms, Puberty related Harmful Social Norms affecting Adolescents SRHR

#### Topics of this session

- Understanding about norms
- Types of norms
- Harmful Social Norms during puberty and how it harms
- Sources of harmful social norms

#### Outputs of this session

After this session participants will be able to

- Articulate what is social norm
- Differentiate between different types of norms
- Explain puberty related harmful social norms and their impacts
- Sources of harmful social norms

#### Steps of the session

Steps
1. Norms in general
2. Types of norms <ul style="list-style-type: none"> <li>• Social norm</li> <li>• Gender norm</li> <li>• Legal norm</li> <li>• Moral norm</li> </ul>

• Harmful social norm
3. Harmful social norms during puberty
4. Sources of harmful social norms

## Facilitators Note

*This session will be talking about one of the core components of this guide i.e. harmful social norms affecting adolescent's SRHR during puberty. As very little work is done on these issues, it is important that facilitator has clear conceptual understanding about connecting norms, social norms, legal norms, moral norms, harmful social norms, puberty, adolescents and SRHR together in one thread. Facilitator will initiate this session by asking participants about their understanding on Norms in general.*

## Session Proceedings

### Topic: General understanding about Norms<sup>28</sup>

After hearing from participants, facilitators will discuss about Norms as follow.

Norms are set of rules or expectations that are socially enforced; these act as either to encourage positive behavior (example 'be kind to animals'); or to discourage negative behavior (example 'do not lie'). Facilitator will highlight that in this way norms contribute to keep social order in harmony<sup>29</sup>.

Saying the above facilitator will invite questions, comments from participants; after a brief discussion on this s/he will go to the next topic to discuss about different types of norms showing following table.

### Topic: Types of Norms<sup>30</sup>:

<p><b>Social Norms</b> Social norms are shared beliefs about what is typical and appropriate behavior that are valued by a reference group<sup>31</sup>.</p>
<p><b>Gender Norms</b></p>

<sup>28</sup> <https://www.oxfordbibliographies.com/view/document/introduction-norms>

<sup>29</sup> Adopted from: Norms, **Christine Horne**, September 2019; <https://www.oxfordbibliographies.com/view/document/>

<sup>30</sup> These information are adopted from the DFID guidance note, Social Norms, Jan 2016

<sup>31</sup> The reference group are people that matter to an individual's choices.

Gender norms are governed by social rules that dictate how a girl/woman and a boy/man will behave in certain context. These norms define certain roles and responsibilities between girls/women and boys/men, which are often discriminatory to girls/women.

**Legal norms:** Legal norms are formally written laws. Violation of these laws results in formal punishment, fine, or even death.

**Example:** Child Marriage Restraint Act.

**Moral norms:** Moral norms are mostly motivated by conscience than social expectations. It relate to deeply-held belief rather than a matter of judgment.

**Example:** It is moral to help someone in need.

**Harmful social norms:** Harmful social norms are those that are based on false assumptions of others beliefs and behaviors and are forced to be accepted.

**Harmful social norms during puberty:** These are unwritten rules that standardize Dos & Don'ts that dictate forming belief, attitude, behavior and practice in terms of puberty related SRH. Examples: Information restrictions to adolescents, anti LGBT sentiment, girl's marriage.

Facilitator will emphasize about the importance of having understanding about different types of norms; because it will enable to use these new knowledge and to think logically about the basis of the practice of harmful social norms issues. Importantly, participants will aware about the existence of certain laws that they can use in their arguments while challenging harmful social norms.

Facilitator will further highlight that knowing about moral norms will enable them to differentiate between good and harmful social norms while addressing puberty related harmful social norms issues.

After Q/A session, facilitator will conclude this topic and go to the next topic.

### **Topic: Harmful Social Norms during puberty and its affect on Adolescents SRHR**

Facilitator will start this session by connecting harmful social norms that was discussed earlier: *Harmful social norms are those that are based on false assumptions of others beliefs and behaviors and are forced to be accepted. Examples: Information restrictions to adolescents, anti LGBT sentiment, girl's marriage.*



After that facilitator will explain about group work and divide participants in three groups to work on harmful social norms with regard to menstruation, Wet Dream and Sexuality as following:

Harmful Social norms about Menstruation	Affect on Girl's SRHR
<ul style="list-style-type: none"> <li>▪ It is a taboo topic, it cannot be discussed openly</li> <li>▪ Menstrual cloth should not be dried openly, it will be a matter of shame</li> </ul>	

Harmful Social Norms about Wet Dream	Affect on Boy's SRHR
<ul style="list-style-type: none"> <li>▪ Wet-dream is a disease condition</li> <li>▪ Bad boys have this experience</li> </ul>	

Harmful Social Norms about Sexuality	Affect on Adolescents SRHR
<ul style="list-style-type: none"> <li>▪ Sexualizing teen age girls</li> <li>▪ Boys have powerful sexual urges that are hard for them to resist.</li> </ul>	

After completion of group work, facilitator will ask each group to present their group findings, and ask other group members to share their comments, feedback.

After all group's presentation, facilitator will summarize the findings and will go to the next topic.

### **Topic: Sources of harmful social norms**

Facilitator will explain that there are multiple sources that create, contribute and sustain these harmful social norms.

S/he will invite participant to share their thoughts, experience on this.

After hearing from participants, facilitator will share that family; school; community; state; and religion all contribute as source of harmful social norms.

Family: Families with conservative traditional attitudes are big enemy for the children. It hinders upbringing of children with open-mindedness, creativity and growing-up with progressive thoughts.

Religion: It plays a huge role in mindset, opinion and attitude forming.

School: Poor recruitment of school teachers, in general education institutions are not trained to talk on social norms issues.

## 2.4 Session 4: Key arguments for redefining harmful social norms

Topic of this session

- Key arguments
- Action Plan Development

Output of this session: After this session

Participants will be

- Able to define key arguments for redefining harmful social norms
- Develop two action plans

Steps to be followed

Steps
1. Defining logical statements against given harmful social norm issue
2. Develop action plan on Change Agent Creating
3. Develop action plan on Implementation on Training Guide

Facilitators Note

Facilitator will invite open discussion about rationales for redefining harmful social norms using effective questioning.

Here are some examples that facilitator will give as clue for open discussion.

- *Harmful social norms force adolescents to keep silent and to suffer from confusions and un-certainty; adolescents cannot judge what is right, what is wrong for them.*
- *Son always gets better treat than girl. It promotes the idea that it is OK for the boys to be aggressive, impatient.*
- *Girls should be submissive, low-voice and not to complain when go to in-laws house.*
- *Puberty related changes are seen as taboo topic, not to be discussed, it causes adolescents to be extremely vulnerable to sexual violence.*

After identification of rationale arguments, facilitator will ask participants to go to the next topic.

### **Topic: Develop Action Plan**

Facilitator will initiate this topic by explaining that breaking established norms is not easy. There will be many backlashes from certain vested groups. Thus, it is important that well researched plans are developed engaging diverse range of stakeholders in this journey.

Facilitator will divide participants in two group work; one group will work on developing Change-Agent; other group will work on implementation of the training guide as following two tables:

<b>Group A: Action plan of bringing change Agents in one Platform</b>
Key change agents at national level
Key change agent at division level
Key change agent at district level
Key change agent at grassroots levels?
Time frame

<b>Group B: Action Plan on the implementation of this training guide</b>
Identifying key groups who will be trained on this training guide
Key resources required
From where resource will be mobilized
Who will be the facilitators of this training?
Time Frame

## **2.5 Session 5: Recap and Closing session**

Topic of this session

- Post Test

- Recap of salient points
- Reflection from participants
- Certificate distribution for participation in this training
- Closing remark by the facilitator

Output of this session: After this session

- Post-test questionnaires will filled-out by the participants (knowledge change will be assessed between pre-test and post-test assessment).
- Salient points of this training will be recapped
- Participants receive certificate of successful completion of this training
- Facilitator will deliver the concluding remark

Steps to be followed

Steps
1. Post Test Assessment
2. Recap salient points by the facilitator
3. Remarks by participants
4. Distribution of certificates for participation
5. Closing remark by facilitators

Facilitators Note

- Facilitator will distribute post-test questionnaires with a short briefing; after completion, facilitators will collect filled-out questionnaires.
- Facilitator will recap salient points of this training with the support of the participants.
- Facilitator will ask participants to share their reflections.
- Participant will be given a successful training completion certificate.
- Closing remarks by the facilitator by thanking everyone.