SECTION - I  INTRODUCTION
MODULE 1: ADOLESCENCE EDUCATION IN INDIA

Introduction:

This section is focused on developing an appropriate understanding of the conceptual framework of adolescence education. Adolescence education is an educational response to the needs, concerns and realities of adolescents in India. This module describes the realities of Indian adolescents, and adolescence education as a systematic response to address their concerns. The objectives, guiding principles, scope and themes of adolescence education will be discussed. The module will also explain the significance of life skills, and of experiential learning methods, within Adolescence Education.

Learning Objectives:

At the end of this module, learners will be able to:

• Understand the concept of adolescence education and its objectives, guiding principles and scope;
• Identify the three major content areas and appreciate the reasons for including these in adolescence education;
• Develop an understanding of life skills as a generic concept, its contextual application, and the relevance of life skills development as a core objective of adolescence education;
• Comprehend the new teaching methods and transaction strategies for promoting experiential learning

Activity 1: Building Perspective for Adolescence Education

Time required: 45 Minutes

Material required: Fact Sheets, Writing Board, Chart Paper, Chalk/Marker

Learning Objectives:

To enable learners to:

• Develop an understanding of adolescence and its characteristics, issues, concerns and influences;
• Understand adolescence as a stage in life – its pleasures, challenges, dreams and sources of support;
• Develop an understanding of the need for adolescence education

Notes to facilitator:

• The facilitator should introduce the session by encouraging the learners to recall their own adolescence.
• This will enable the learners to try to understand the concerns of adolescents today, based on their own memories and experiences.
• Participants will be divided into small groups of 5 or 6 members each. Within each group, all the members will reflect and share some of their most important experiences and feelings, as adolescents. The learners should be encouraged to reflect on the pleasures, challenges and aspirations of being an adolescent.
• The learners will also discuss whether they got support from adults – from teachers, parents or any other. Did they have questions they could not ask anybody and that they remained unanswered? Who were their role models?
• One person from each group will report on
  o some common feelings (positive as well as negative) during adolescence;
  o whether parents/teachers were supportive and understanding;
  o whether they had questions that remained unanswered.
• Conclude the session emphasizing the need for adults to help provide information and guidance to adolescents, in an open and friendly way.

**Summing Up:**

The Facilitator will sum up the session:
• Adolescents are a positive resource. They have energy and idealism. Adolescence is a transition period between childhood and adulthood.
• Adolescents need information and somebody who will answer their questions.
• Adolescence education is a response to the adolescents’ need for authentic information, provided in a safe and friendly atmosphere.

**Activity 2: Needs, Concerns and Realities of Adolescents in India**

**Time required:** 45 Minutes

**Material required:** Fact Sheets, Writing Board, Chart Paper, Chalk/Marker

**Learning Objectives:**

To enable participants to:
• Understand the critical needs and concerns of adolescents

**Notes to facilitator:**

• Conduct a brainstorming session (10 Minutes) to answer the following questions:
  o Is adolescence distinct from childhood and adulthood? If ‘yes’, how?
  o Why it is said that adolescents constitute the most critical part of India’s population?
• Note down the points made in the brainstorming session.
• After the session, divides the participants into small groups, each group having not more than 5-6 members. Each group chooses one member as the group reporter.
• Assign one of the following questions to each group for reflection and discussion: discuss (10-15 Minutes). Since the number of groups may be more, one question may be assigned to more than one group.

Questions:

• What are the special needs and concerns of adolescents?
• Do young people get adequate information and support to resolve their concerns? If yes, who provides this information? If no, is it important to provide them necessary information and support to address their concerns? Please provide reasons for your response.
• In the absence of reliable sources of information, from where do young people get the necessary information and support to resolve their concerns?
• Who all should be responsible for equipping young people with information and skills to address their concerns comprehensively?
• After the group work is over, ask each group to make a presentation in the larger group.
• Note down all the points on the writing board or rolling chart.
• Make a power-point presentation or oral presentation based on the fact sheet at the end of the module highlighting the following:
  o Profile of adolescents in India, including their share in Indian population, concerns about their education and health, especially of adolescent girls, sexual abuse, HIV and AIDS, and substance/drug abuse

Summing Up:

• World Health Organization (WHO) defines that individuals in the age group of 10-19 are known as adolescents, in the age group of 10-24 as young people and in the age group of 15-24 as youth
• India has 327 million young people in the age group of 10-24 (WHO, 2007)
• Eighty three percent young men and 78% young women in the age group 15-24 expressed that they perceived family life education to be important (IIPS: Pop Council Youth survey, 2006-07)
• Young people (45% boys and 27% girls) voted for teacher as the most appropriate person to transact education on family life matters (IIPS: Pop Council Youth survey, 2006-07)
• Findings from the National Family Health Survey 3 (NFHS 3, 2005-06) also show that young people are poorly informed on issues related to HIV prevention. Only 28% of young women and 54% of young men in the age group of 15-24 had comprehensive knowledge about HIV/AIDS. This is worrisome in the light of the fact that over 35% of all reported AIDS cases in India occur among young people in the age group of 15-24 years and more than 50% of the new HIV infections occur also among young people (NACO, 2005).
• Substance abuse among young people is also a matter of concern. Findings from NFHS-3 show that in the age group of 15-24, 40% young men and 5% young women had ever used tobacco, while 20% of young men and 1% of young women had ever consumed alcohol.
Although young people are considered healthy, findings from NFHS 3 indicate that a substantial proportion of young people suffer from anaemia (56% of females and 25% of males in the 15-24 age group) that can adversely affect their physical growth, cognitive development, performance in school and at work as well as reproduction.

Findings from NFHS-3 also show that although most youth preferred to marry after age 18; as many as 19% of young women aged 20-24 were married before age 15, and 49% before age 18. Domestic violence is widely prevalent within marriage, with almost a quarter young (married) women reporting that they had been victims of one or other form of physical violence at some point of time within their marriage.

The findings from NFHS-3 do not indicate progressive gender role attitudes; 53% women and 56% men in the 15-24 age group felt that wife beating is justified under specific circumstances.

Sexual Harassment in public spaces, institutions of education, in and around home and at the workplace is also a well established fact. Child abuse, bullying and ragging are also common and more so among boys.

Hence, although India has a vast human resource at its disposal, the country will have to make consistent and substantive investments in the health and well-being of its young people in order to harness their potential.

Activity 3: Understanding the Framework of Adolescence Education

Time required: 30 Minutes

Material required: Fact Sheets, Writing Board/ Chart Paper, Chalk/Marker

Learning Objectives:

To enable learners to:
- Appreciate the conceptual framework and guiding principles of adolescence education
- Identify the three major content areas and appreciate the reasons for including these in adolescence education

Notes to facilitator:

- This is a session in which an interactive presentation is to be made on the conceptual framework of adolescence education, ensuring maximum participation of learners.
- In the large group, begin the session by asking learners to recapitulate the needs and concerns of adolescents that need educational intervention. It was a part of the group work of the first Activity in this Module.
- Ensure that maximum number of learners state these needs and concerns and note down the points made by them on the writing board or rolling chart.
- Make a power-point or oral presentation based on the fact sheet and highlight the following points:
  - Adolescence Education aims to respond to the concerns of adolescents, specifically the ones that are yet to be assimilated by school curriculum in full measure;
The overall objective of Adolescence Education is to provide adolescents with accurate, age-appropriate and culturally relevant information, promote healthy attitudes and develop skills to enable them to respond to real-life situations effectively;

- The guiding principles of Adolescence Education;
- Main content areas of adolescence education include: (i) the process of growing up, (ii) prevention of HIV and AIDS and, (iii) prevention of substance/drug Abuse;
- Understanding of life skills development as a core objective and as a generic concept, not only related to the selective concerns of adolescents like peer pressure or risk-taking behavior;
- The need for participatory teaching/transaction methods that build on the experiences of learners rather than didactic and rote teaching-learning methods.

Summing Up:

- One of the major objectives of adolescence education is to develop life skills to empower young people to respond to the real-life situations in positive and responsible ways. Life Skills are psycho-social abilities that enable individuals to translate knowledge, attitude and values regarding their concerns into well-informed and healthy behaviors. Empowered with skills; young people are able to take decisions based on a logical process of “what to do, why to do, how to do and when to do.”

- Guiding Principles of Adolescence Education are elicited below:
  - Adolescence is conceptualized as a positive stage of life, full of possibilities and potential. It should not be labeled as problematic and traumatic, and adolescents (and the ‘peer group’) should not be stereotyped in negative ways.
  - AE should recognize and respond to the reality that adolescents are heterogeneous: with diversity in terms of urban/rural, caste, class, religion, cultural beliefs, and so on.
  - The educational programme should be participatory, process-oriented and non-judgmental, not prescriptive, stigmatizing or fear-inducing.
  - AE should enable adolescents to understand and negotiate existing and constantly changing lived realities.
  - Teachers need to unlearn and learn in order to facilitate the effective transaction of this curricular area. This is relevant in respect of content, attitudes and pedagogical modalities.
  - The program should enable adolescents to articulate their issues and know their rights, counter shame and fear, build up self-esteem and self-confidence, and develop ability to take on responsibility for self, relationships and (to an extent) society around them.
  - Adolescence education should influence the entire school curriculum and ethos, rather than being an isolated, stand-alone component.
  - The AEP should have inbuilt flexibility- in terms of content and process to be able to respond to dynamic needs of young people.
  - The program should empower young people through participatory, process-oriented, non-judgmental approaches that build on the experiences of learners, and provide them with opportunities to think critically, analyze, and infer learning rather than being prescriptive.
  - Adolescence education should be strongly oriented towards the transformational potential of education, based on principles of equity and social justice, rather than having a status-quo orientation.
Activity 4: Life Skills Development: Core Objective of Adolescence Education

Time required: 30 Minutes

Material required: Fact Sheets, Writing Board, Chart Paper, Chalk/Marker

Learning Objectives:

• Develop an understanding of life skills as a generic concept, its contextual application, and the relevance of life skills development as a core objective of adolescence education;
• Comprehend the new teaching methods and transaction strategies for promoting experiential learning and development of life skills

Notes to facilitator:

• Divide the learners into small groups, each group having not more than 5-6 members and designate one learner as group reporter.
• Inform them that the groups have to discuss the following questions and note down the points made in the groups. Assign one question to each group. Since the number of groups will be more, one question may be assigned to more than one group.
• Ask groups to base the discussions on the earlier presentation on Conceptual Framework of Adolescence Education, especially the component on life skills. The questions are as follows:
  o What is the meaning of life skills and how is this concept different from other skills such as motor skills, mechanical skills, language skills or map reading skills?
  o In your opinion, what are some of the important life skills that enable adolescents to make optimal use of opportunities and respond to challenging situations effectively?
  o Will the objective of life skills development be achieved through the traditional teaching methods? If ‘yes’, give reasons. If ‘no’, what teaching methods will be effective and why?
  o Will it be valuable to use experiential learning approaches in the textual and other teaching materials so that teachers adopt these approaches focused on life skills development in the course of regular teaching? Give reasons for your answer.
• After the group work is over, ask each group to make a presentation that may be followed by discussion.
• Note down the main points made by each group and assimilate these points while summarizing the discussion, based on the Fact Sheets.

Summing Up:

• Life skills are psycho-social abilities that empower individuals to connect with self as well as others and develop healthy life style and positive behaviors. Life skills equip individuals with
competence to manage challenging situations and utilize existing opportunities optimally. These skills enhance coping resources and personal and social competencies of individuals.

- Life skills development is a life-long process that helps individuals grow and mature; build confidence in one’s decisions taken on the basis of adequate information and thought and discover sources of strength within and outside.
- It is noteworthy that from times immemorial, every culture and society has invested in educating and empowering its younger generation to lead fulfilling and responsible lives. For example, the ‘Panchatantra’ stories from India have important lessons in life skills enhancement that remain relevant for all generations.
- Education, and particularly school education plays a vital role in life skills development among individuals, as it exposes them to varied experiences in their formative years and has abundant potential to provide them with relevant simulated situations to learn and practice.
- Life skills are generic abilities, which can be effectively integrated in educational processes. These abilities can be contextualized to any specific setting, for example, adolescence education.
- Transaction approaches primarily focused on participatory and experiential modes of learning are effective for life skills development.
FACT SHEET

Adolescent Realities:

Adolescents are a positive resource for the country. They have unlimited energy, vitality and idealism, as well as a strong urge to experiment and create a better world. Adolescence is a transition period between childhood and adulthood, usually characterized by youthful exuberance as its most endearing hallmark.

During adolescence the physical, intellectual, and emotional characteristics and patterns of childhood are gradually replaced by adult ones, and girls and boys progressively evolve into a state of relative socio-economic independence (UNICEF, 1999). The definition given by WHO defines adolescence both in terms of age (10-19 years) and in terms of a phase of life marked by special attributes. These attributes include rapid physical, psychological, cognitive and behavioral changes and developments, including, urge to experiment, attainment of sexual maturity, development of adult identity, and transition from socio-economic dependence to relative independence.

The special attributes that mark adolescence include:
- Rapid physical growth and development
- Physical, social and psychological maturity, not necessarily at the same time
- Sexual maturity and onset of sexual activity
- Urge to experiment/ try out new things
- Development of adult mental processes and adult identity
- Transition from total socio-economic dependence to relative independence

Profile of Indian Adolescents:

The 2001 census tells us that 20 percent of the billion-strong population of the country would qualify as adolescents (age-group 10-19 years), i.e. every fifth person in this country is an adolescent. India is proud to be home to 327 million young people in the age group of 10-24 (WHO, 2007), and is also responsible for developing this vast human resource in the best possible ways.

A significant aspect of adolescence is related to psychological development. It is a critical period for the development of self-identity. The process of acquiring a sense of self is linked to physiological changes, and also learning to negotiate the social and psychological demands of being young adults.

Adolescents are affected by socio-economic disparities prevailing in the country. The National Family Health Survey 3 (NFHS 3) indicates high percentage of anaemia (56% of females and 25% of males in the 15-24 age group were anaemic), which affects their physical growth, cognitive development, performance in school and at work as well as reproduction.
A national-level study, ‘Youth in India: Situation and Needs 2006-07’ conducted by the Population Council, New Delhi and International Institute for Population Sciences, Mumbai, indicates that although most youth preferred to marry after age 18; as many as 19% of young women aged 20-24 were married before age 15, and 49% before age 18. Domestic violence is widely prevalent within marriage, with almost a quarter young (married) women reporting that they had been victims of one or other form of physical violence at some point of time within their marriage.

As high as 47% of women and 16% men reported they have never received any information on sexual matters from anybody. A large proportion of young people (78% young women and 83% young men) were in favor of imparting sex education or family life education to youth. The most commonly cited preferred sources for information were parents, teacher, health care providers and other professionals and friends.

The youth study showed that only 28% of young women and 54% of young men had comprehensive knowledge about HIV/AIDS. It is noteworthy that over 35% of all reported AIDS cases in India occur among young people in the age group of 15-24 years and more than 50% of the new HIV infections occur also among young people (NACO, 2005).

Substance abuse among young people is also a matter of concern. The projected number of drug abusers in India is about 3 million, and most are in the age group 16-35 (UNODC, 2003). Nearly 11% were introduced to cannabis before the age of 15 years and about 26% between the age of 16-20 years (UNODC & Ministry of Social Justice and Empowerment, 2004). Findings from NFHS-3 show that in the age group of 15-24, 40% young men and 5% young women had ever used tobacco, while 20% of young men and 1% of young women had ever consumed alcohol.

Gender roles are very distinctly defined, and adolescent girls continue to face gender based discrimination. This is evident in the declining sex ratio, incidence of domestic violence, underage pregnancy, unsafe motherhood and increasing incidence of sexual abuse, abduction and trafficking (UNFPA, 2006). The findings from NFHS-3 do not indicate progressive gender role attitudes; 53% women and 56% men in the 15-24 age group felt that wife beating is justified under specific circumstances. Sexual Harassment in public spaces, institutions of education, in and around home and at the workplace is a well established fact. Child abuse, bullying and ragging are also common and more so among boys.

**Adolescence Education: A Response to Adolescent Realities:**

It is universally accepted that the health needs, and particularly the reproductive and sexual health (ARSH) needs of adolescents, continue to be ignored and neglected. As they stand at the threshold of adulthood, they need authentic knowledge that helps them understand the process of growing up with particular reference to their reproductive and sexual health needs. By developing a critical understanding, they have to be well equipped to cope with the problems which they confront. They need guidance and independence simultaneously, education as well as opportunities to explore life for themselves in order to attain the level of maturity required to make responsible and informed decisions.
Objectives, Themes and Scope of Adolescence Education:

The concept of ‘adolescence education’ was preferred to terms like sex education, sexuality education, family life education, reproductive health education, puberty education, life skills education and AIDS education at the National Seminar on Adolescence Education, organised by NCERT in 1993. The National Seminar endorsed the use of the concept of adolescence education and recommended the introduction of “suitable components of adolescence education in the curricula at all stages of schooling” (NCERT, 1994). As a follow up to its recommendations, a General Framework of Adolescence Education was finalised through nationwide consultations focusing on the following three requirements:

- Incorporating all the critical concerns of adolescent reproductive and sexual health (ARSH) in the specific context of Indian socio-cultural ethos;
- Preparing the scheme of contents suitable to provide adequate coverage to ARSH concerns in consonance with the nature and scope of existing school syllabi of different stages; and
- Identifying curriculum transaction strategies focused on promoting experiential learning suited to the specific needs of this new curricular area.

Analysis of school curriculum showed that some concerns were already incorporated in it. It was, therefore, thought logical for the adolescence education framework to focus on those concerns were not incorporated in the school curriculum. Content analysis of the existing curricula indicated that the three closely interrelated areas – process of growing up during adolescence, prevention of HIV/AIDS and prevention of substance (drug) abuse were not adequately covered in the school curriculum. Although the school syllabi and textbooks contain contents on the biological aspects of the reproduction system; education in these content areas cannot be complete by providing biological information only. There is a need to focus on physiological, emotional and socio-cultural dimensions of adolescent reproductive and sexual health (ARSH) in a holistic manner.

Adolescence education was thus conceptualized as an educational intervention, focusing on critical elements that would enable young people to deal effectively with the issues related to:

- Growing up healthy, including issues related to reproductive and sexual health
- Prevention of HIV/AIDS
- Prevention of substance (drug) abuse

After serious consideration, a consensus has been reached in favour of the introduction of adolescence education in schools with a view to providing authentic knowledge to students regarding the process of growing up, HIV/AIDS and substance (drug) abuse, influencing their attitudes, and developing in them the needed life skills to respond to real-life situations effectively.

The 1993-96 version of the framework was missing out the element of life skills. In operationalising the framework, it was realised that adolescence education should lay emphasis on life skills development, so as to empower adolescents to meet the challenges and optimize opportunities that may come their way. The present revised framework not only lays specific emphasis on life skills development but also conceptualises it based on pedagogical principles.
Arguments For and Against Adolescent Education:

Arguments Against
Earlier there were many who did not think it proper to introduce elements relating to sexual development in the school curriculum. Even now such a mindset influences the thinking of some adults. They quite often put forth the following arguments:

- Sex and sexuality are intimately private matters which are not to be discussed in public, and that too with young children. In India individuals have been receiving information about these matters indirectly through different sources available in their respective socio-cultural settings. Therefore, there is no need to introduce such an educational programme in Indian schools.
- If schools start providing knowledge about sexual development, young children will be encouraged to experiment with the newly acquired knowledge. This will promote promiscuity and sexual permissiveness, spoiling the youth and also the school and social environment.
- The regular discussion of sex and sexuality, which is a treasured sublime instinct of human beings, will reduce it to a mundane routine affair. The young students will be desensitised and will not be able to appreciate its sublime value in their future lives.

Arguments For
All these arguments were considered during the process of consensus building for introducing adolescence education in schools:

- It is a myth to regard the socio-cultural traditions of India as a safeguard against irresponsible sexual behaviour of individuals. There is definitely a need to make interventions to enable individuals, including young people to practice responsible behaviour and protect themselves from risky situations.
- A number of studies show that adolescents would like to get accurate information about the changes in their bodies including sexual development. However, discussion on issues related to sexuality is a taboo and there are no reliable sources of information to educate adolescents on these issues. This situation creates anxiety and confusion and generates myths and misconceptions among adolescents about various dimensions of their growing up.
- Since the average age at marriage is increasing, young people have a longer interval between their sexual maturity and marriage. In such a context, it is necessary for school curriculum to equip adolescents with authentic information on sexuality, HIV-AIDS and sexually transmitted infections (STIs). This will enable adolescents to manage their sexual development responsibly and develop a healthy attitude towards sex and sexuality.
- Sexual abuse and exploitation of young girls and boys, and even minors, is a problem in our society. These situations demand urgent educational intervention, so that young people are made aware of the need to respect the inviolability of every person, and to safeguard themselves against abuse and exploitation.
- The impact of certain traditional values that used to influence sex-related behaviour of individuals has been waning. There is a need to reinforce those social and cultural values that may provide sustenance to responsible sexual behaviour.
• Children and adolescents are exposed to sex-related ideas and thoughts, and that too at times in a crude manner, through sources like cinema, film magazines and other periodicals, video parlours, commercial advertisements and certain television programmes. It is necessary to empower adolescents through education, so that they may appreciate and analyse such exposures in a proper perspective.

• The AIDS pandemic has added urgency to introduce adolescence education in schools. Preventive education is necessary to promote behaviour changes which can prevent the spread of HIV infection.

• Studies indicate an increasing incidence of smoking and use of tobacco, alcohol and other harmful substances by young persons. Frequently adolescents tend to see the use of these drugs as part of being grown up. It is, therefore, urgently needed to educate them on the effects of substance (drug) abuse.

• Studies indicate that education about reproductive and sexual health does not encourage students to experiment with their newly acquired knowledge. Rather, it encourages them to have positive attitude towards sex and inculcates in them responsible behaviour.

• The apprehension of teachers that teaching the elements of adolescence education will tarnish their "image" and promote indiscipline among students has been negated by experiences. Wherever teachers are responsive to the needs of adolescent students and help them cope with their problems, the teacher-pupil relation has become better and the school environment has improved.

• Although students always felt the need to get education in sex related matters, parents and teachers had serious apprehensions till very recently. But now a number of needs assessment studies conducted in different States have found that parents and teachers overwhelmingly favour the introduction of adolescence education in schools. The need to emphasise the development of life skills is being recognised on a greater scale.

Life skills: A Generic Concept and Its Contextual Applications

Generic Conceptualization of Life Skills:

Life Skills requires to be perceived as done in Dakar Framework for Action (World Education Forum, Dakar, Senegal, 2000), that stresses the need for not only psychomotor or practical skills, but also those psychosocial abilities – life skills - that will enable individuals to learn and use knowledge into action, to develop reasoning and analytical strengths, to manage emotions and to live with and relate to others.

• Life skills are abilities to be developed in every individual to equip them to meet the challenges of life and optimise opportunities to live a healthier, happier, productive and fulfilling life.

• These include all aspects of wholesome living necessary for adolescents to be equipped in approaching eventual responsibilities in adulthood. Adolescence is a critical period in self-understanding, finding one’s way and fitting into the society. Development of self-confidence with a positive self-image is the foundation of responsible adulthood. Providing enabling environments to support adolescents in this critical formative stage is the main mandate in development of life skills.
Life skills are generic abilities like any other, i.e., knowledge ability, attitude, interest, sentiments, value orientation, and so on. Ongoing education processes have focused solely on academics, and have not adopted an approach that can ensure development of life skills.

Life skills can be effectively integrated in educational processes, and the ability for their application in specific contexts can also be developed.

Life Skills as an Integral Part of Adolescence Education:

In view of the above, the revised framework of Adolescence Education incorporates life skills as one of the competencies, perhaps the most critical competency developed and inculcated through education. It is generally believed that a person who is educated is equipped with all the needed abilities including life skills. But in reality this does not happen. Knowing what needs to be done or knowing what needs to be changed does not mean that the learners automatically know how to bring about behaviour changes. It is the Life skills that, if properly developed, provide the know-how and the tools to actualize behaviour change.

Life Skills in this context need to be defined as psycho-social abilities that enable individuals to translate knowledge, attitude and values regarding all the concerned issues into action. These may not be confined to only those related to health, mental health, sexual development, HIV and AIDS and Drug abuse. Life skills development empowers learners to observe the process involving “what to do, why to do, how to do and when to do”. It encompasses the ability to build sound, harmonious relationships with self, others and the environment, the ability to act responsibly and safely, the ability to survive under a variety of conditions, and the ability to solve problems.

Life Skills are different from other Skills:

- Other skills like mechanical skills, livelihood skills, vocational skills or language skills are technical, life skills are psycho-social (personal, social, interpersonal, cognitive, affective and universal) directed towards personal actions or actions towards others;
- Life skills are interpersonal skills empowering individuals to interact with the self as well as others and develop healthy lifestyle and responsive and responsible behaviour.; and
- Other skills are product of continued practice, while life skills are developed through interactive experiential learning.

Life Skills Development: Approach Framework:

It is important to note that life skills development does not mean development of skills afresh by a set of educational interventions at a particular point of time. Life skills development is an integral part of the all-encompassing process of socialisation that continues throughout human life. School education is an integral part of this process. In fact, individuals apply the acquired life skills in different contexts differently. An individual may have acquired a life skill and she/he may also be equipped with the ability to apply that skill in a context that is fundamentally different from adolescent reproductive and sexual health. For example, an adolescent may be applying thinking skill or communication skill very effectively while interacting with her/his teacher or even peer group during a discussion on say, globalization or environmental pollution,
but she/he may not have the ability to apply those skills on an issue related to sex and sexuality or negative peer pressure. *Life skills development, therefore, may be more aptly defined as a process of acquiring the ability to apply concerned skills in the specific context and not the development of that skill afresh.*

Since life skills are generic by nature, an educational intervention aimed at the development of ability to apply them may be effective only when it is focused on the specific *context*. The intervention may have to be designed and operationalized differently for different contexts, more particularly for a culturally sensitive context like adolescent reproductive and sexual health concerns. It needs interventions to focus on acquisition of authentic knowledge, development of positive attitude, and empowerment for avoidance of risky behavior.

The design of educational intervention has to take note of the *content* area and also specific life skills. Since most of the contents of adolescence education are very sensitive, interventions need to be well conceived for doing justice to the content. Contextually relevant and age appropriate contents should be focused on. It is important to exactly identify which life skills are to be focused and also the reasons for doing so.

In order to organize educational interventions for life skills development effectively, it is important to identify curricular as well as co-curricular *activities* that have the potential for developing skill application ability. Certain specific activity will be more appropriate than others in respect of a particular life skill. For example, role play can be very appropriate in respect of negotiation skills or interpersonal skills or skills related to empathy.

One activity can be organized to attain different objectives. It is the *process* of organizing that activity that makes a fundamental difference by providing exact direction for attaining the desired objective. Group discussion may be able to attain knowledge, understanding and even attitude related objectives, but if it is to attain skill development related objectives, it has to be planned and conducted according to a particular process that sustains its focus throughout on skill development. Since life skills development primarily depends through the mode of experiential learning mode, the process of involving learners in the activity is very important.

**Integration of Life Skills in Content and Process of Adolescence Education:**

In order to ensure that the ongoing education system plays a proactive role in life skills development among learners, there is a need to integrate an approach to provide opportunities of experiential learning to them. This approach needs to be integrated right from the stage of curriculum development to syllabi and materials development, transaction of materials, organization of learning experiences and evaluation. All these aspects of education must actualize a process wherein the learner is no longer treated as a passive recipient of information and facts, but is made an active participant in gathering information, understanding issues and problems, examining the alternatives, seeking reasons, making decisions and solving problems.

The study materials, textual and other teaching-learning tools, need to be prepared in experiential learning mode. The materials must not make the learner accept the given knowledge/information/facts, but take her/him through a process wherein the learner constructs
her/his knowledge through analysis, reasoning, and deducing conclusions. This change has to be reflected in a big way in the process of teacher preparation, teaching-learning methods and examination reforms.

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