

**Facilitating Attitude Change in Adolescents
Through Sexuality Education and
Gender Sensitization Programme**



(Research Report of Major Project funded by ICSSR, New Delhi)

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**The data in this report can be used for research reference
by giving due credit.**

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Research has no more remained the activity of a lone traveler. It has to be a team work so as to reach its set objectives. Specially, research in humanitarian/social sciences involves the efforts and active role of many people. As a principal investigator, I consider it important to acknowledge their due share in the work.

In the current research, '**Facilitating attitude change in adolescents through sexuality education and gender sensitization for age group 14 - 19 years**' also, many friends have made important contributions.

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Executive Summary

Today, society is facing lot of sexuality related problems like adolescent pregnancies, sexual abuse, abortion of female fetus and the HIV/AIDS. All these problems are surely related to concepts and practices of sexuality. Indian culture is not very open to talk freely about these issues and also the effect of media and many other agencies also add to problems related to sexuality and gender. The objective of this study was to facilitate the students to conceive a constructive attitude towards sexuality and gender. Students of age 14 to 19 were chosen for this facilitation as this age is the actual age of forming concepts about sexuality and the same is under a great influence of media so it is most vulnerable group.

The design of the present study was 'Pre- Post Experimental Design'. The sample was drawn by using incidental sampling technique. A total sample of 370 for experimental group and 170 for control group was taken from three levels- standard 9th, 11th and F.Y. Senior college. There were three tools used for assessment namely: 1. Stepping in to youth: Knowledge Test, 2. Stepping in to youth: Attitude Test and 3. Stepping in to youth: Gender Concepts. There were separate forms for senior and junior groups. The detailed intervention plan included twenty sessions(of one clock hour each) covering topics like- developmental changes, male and female anatomy and physiology, media, beauty, addiction, gender issues, friendship and other issues related to adolescent life and their sexuality. The training module was executed in two different ways as:

1. Spread out plan (twenty sessions spread in six months) and 2. Condensed Plan (all topics covered in two full days). Thus there were two experimental groups and one control group for each standard (i.e. 9th, 11th and F.Y. Senior college). To find out the effect of the training program, 't' test and MANOVA were used. Standard wise, sex wise and treatment wise differences were also studied. It is observed that the students benefited significantly from both the intervention programs. 'Spread out' training was found to be slightly better than condensed training. Std. 11th benefited more than std. 9th. In case of senior students overall benefit was seen but condensed training showed better effects than Spread out' training. Both male and female students are equally benefited form the intervention program but in case of junior group, female students showed more gain on knowledge than male students.



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Chapter 1

Introduction and review of literature

Adolescence is an age of storm and stress. Research is ongoing throughout the world to study the adolescents' reproductive health and the various problems occurring because of mismanaging of the important developmental changes.

It has been observed globally that there is an increasing need to impart sexuality education in the early adolescent years and also to develop a gender sensitive attitude in youth. Sex education, which is more precisely called '**sexuality education**' or '**sex and relationships education**', is the process of acquiring information and forming attitudes and beliefs about sex, sexual identity, relationships and intimacy. Sex education is also about developing young peoples' skills so that they make informed choices about their behaviour, and feel confident and competent about acting on these choices. . (AGI, 1994)

The situation in India is also becoming increasingly alarming day by day. Increasing incidences of sexual abuse, irresponsible sexual behaviour and problems are leading to distorted identities and adjustment problems, HIV issues, premarital issues in adolescents pointing towards the need of a 'one to one dialogue' with the youth about all these issues. (Sathe Anant, 2002). Our society is closed or has double standards on sexuality related issues (Panthaki Dhun, 1998). The children need to know about psychological correlates of sexuality along with physiological and anatomical details in a balanced way. It has been observed that people providing sex education may have their own rigid attitudes and beliefs about sex and sexuality and it is important not to let these influence negatively the sexuality education that they provide. (Darroch J.E., 2000). Effective sexuality education starts early, before young people reach puberty, and before they have developed established patterns of behaviour and it discusses attitudes, beliefs, skills for development enabling young people to face relationship challenges.

Some efforts have been made by agencies like TARSHI, indicating that notions of sexuality and norms around sexuality are in a state of tremendous confusion. (Khanna Renu, 2008) Also, the National Population Education Trust has identified this need and has published material which can contribute in a balanced training of this topic. (NPET, 2002).A survey conducted by the centre for youth development and activity, points out that 94% children feel the need to get scientific education about sexuality. A surprisingly 74% of them are satisfying it through sources like T.V., blue films, or peer comments and other such material. (Kothekar, M., 2008)

The discomfort of parents and teachers regarding imparting this knowledge, reduces sexuality education to merely reproductive biology, thus disconnecting it from the larger issues of sexuality such as love, relationships, commitment, honesty, openness, aesthetics, communications and so on. (The Hindu, 2006). Programs which supported both abstinence and the use of condoms and contraceptives, a full two-thirds showed positive behavioural effects. (Kirby. D. ,2001).

Laws in different countries have different viewpoints towards this issue. Rakesh Meher in 'The Hindu' argues that keeping young people ignorant about sexuality can be counter productive to their wellbeing. It should be made clear that sex education is about healthier relationships and not just procreation and recreation. (Sathe A.2005 ,) Opinions and attitudes which do not favor the implementation of sexuality education mostly focus on the assumed probability of children drifting away from their educational goals. They dismiss the need of special education regarding sexuality issues and (Batra D. 2009) comment that it has been forced through the westernization of education. They also offend the western world of selling the impression of HIV as a very fierce / deadly disease and caution the society not to get

flabbergasted by it without thinking about the real intentions behind. (Bhandari M., 2009) On the contrary, Mahatma Gandhi, in one of his writings in 'Harijan' strongly favors teachings young boys and girls the significance and right use of their generative organs. (Gandhi M.K., 1936). A study points out that rural mothers were quite ignorant of the various problems of adolescent group pertaining to sexuality but they had a positive attitude towards education. Urban women were significantly ahead in expecting information about reproductive system and organs in it than the rural women. (Mahajan P., Sharma N., 2005)

It has been observed that adolescents are concerned about their sexuality but hesitant to discuss it with the parents of teachers. The main source of information is media - blue films, TV and foreign films leading to lot of misconceptions. (Sathe A. G., Sathe S. A., 2005). The survey conducted by UNO shows that very end of adolescent age is culminating in married life for nearly 50% of girls (19.3yrs). Issues like homosexuality, problems of the special needs group are still more complicated. (Thatte S., 1999)

The deteriorating / falling sex ratio of girl child is becoming a serious concern for the social thinkers and activists (Shetye P., 1999). Unprotected premarital sex always carries a risk of pregnancy and the risks and impact of such a trauma in future is hardly thought of. (Joshi, Javdekar S., 2002). Women as a group have some special needs. Working women experience tremendous inconvenience regarding hygienic care. Experiences of sexual abuse, manipulation etc. are common (Gokhale - Rustom B., 2001). Child abuse and body trafficking has increased at an alarming rate posing a serious threat to children's mental and physical health. (Virani P., 2007)

Research shows that adolescent boys have many problems in adapting to their sexuality. Stereotyping not only hurts girls but also hurts men equally. The adolescent population is at high risks with respect to HIV infection which multiplies significantly as commercial sex workers are often involved (Brahme R.G., Sahay S., Malhotra-Kohli R., Divekar R.o. 2005). It has been also observed that children are poor in technical / scientific awareness of their own bodies, ignorant about the risks and responsibilities regarding their sexual behavior (Nirmalkar A., Sahay S., Kundu A., Mehendale S., 2006)

Media impact is indicated from the display of the image of a 'woman' having undergone subtle but definite change from the 1980's to the first decade of 21st century. (Nina E., Tsangaris M., 2008)

The adolescents are glittered with the idea of 'love'. From their point of view 'love' is equivalent to attraction, sexy looks and physical involvement (Dalavi Jayamati, 2002.) It is reinforced by distorted images and attitudes in media, internet adding to the gravity of this problem. It is directly responsible for an increase in child pornography and other forms of sexual abuse. (Norland and Bartholet, 2001) Efficiency, alienation and depersonalization as well as power and influence are issues of concern in this respect (Steven E. Stern, Hardel A.D., 2001). Sexual messages on TV are almost universally presented in a positive light, with little discussion of the potential risks of unprotected sexual contacts and a few portrayals of adverse consequences (Gruberr E., Grube J.W. 2000). Advertisements on Indian television are also adopting western face thus slowly penetrating / planting the western norms of sexuality in the still closed Indian society regarding sexuality issues. (Chatterji S. 2006) (Bakre S. 2001) The images of relationships between men and women portrayed in the media showing an imbalance in personalities. (Wood Julia, 2005) . 'Gender stereotypes' develop very rapidly as a product of the situational influences and that of the significant others.. (Narkar Sonia, 2007). Concepts of sexuality and gender stereotyping are very closely related.

It has been also observed through research that the need for such education was perceived while imparting other skills training to adolescents. (Renuka K.R., 2004) . It is also expected to

impart accurate information about risks of teen sexual activity, addressing social processes, avoiding abuse etc. (Kirby, D. 2001) Some activists argue that it should also be linked with psychological and social aspects of sexuality with the same gravity and misuse of media (Lavalekar, 2009)

Addressing gender concepts and facilitating egalitarian gender roles is also considered important by many activists. (Media awareness Network, 2009) it has been observed that attitude of adolescent toward sexuality is culturally and traditionally influenced, imparting sexuality education did not encourage them to overrule the moral bindings and have sex at an earlier age. (Sangeetha S., Shobha S. R., Shamira P. 2007) These results are encouraging and had to be strengthened by further explorations in this topic. (Panday J., Yadav S., Sadhuk, 1999 July). The present research is also an important effort in the same direction.



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 या workshop मधून, I learn many new dimensions of sexuality education. As a doctor, Anatomy & Physiology was not new, but the mental or moral aspect related to it was important. Also, role plays & small games were interesting. Simple, simple language needed to explain children was gained.
 Needed:-
 Some more information about perversions or how if difficulty/queries asked by children, how to answer - expected.
 Dr. Prudhina


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To,
 Ms. Vishakha Vejankar
 Member, Sanwadini Group

Respected Sir/ Madam,

We on behalf of all members of Kaveri College of Science & Commerce thank you for your contribution as a resource person for "One Day Workshop on Women's Personality Development on Saturday, 5th January, 2013 for the girl students of our college." We hope that you enjoyed the event. We appreciate your presence and we thank you for your valuable insights.

Thank you again for taking out your valuable time for us. We look forward for your long lasting relationship with our institution.

Sincerely,


 Ms. Anagha Mahajan
 Students' Welfare Officer


 Dr. S.B. Kharosekar
 Principal

Feedback from Institution/college authorities

↑
 Feedback of participants in
 'Trainer workshop'

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स्त्रोप वेगवेगळे. संवेदनशील असे विषय साध्या, सरळ, शास्त्रासुद्ध पद्धतीने हाताळले गेल्याने दोन दिवसांची ही कार्यशाळा स्त्रोप ज्ञान झाली. हे सगळे विषय चर्चा करूयासाठी स्त्रोपच मोठे प्रयुक्त होऊनही ओढक्यात पण मुद्देमुद्द अशी प्रत्येक विषयावर चर्चा झाली. मुलांसमोर किती प्रभावीपणे सादरीकरा होऊ शकते हे या कार्यशाळेत अनुभवला आले. पालक स्त्रोपही प्रत्येक गोष्टी नव्याने समजून घेण्याची संधी मिळाली. संवादिनीच्या सर्व मैत्रीणीं शुभेच्छा व धन्यवाद.

Chapter 2

Methodology

Objectives of the Study

- ◆ To develop objective tools for assessing knowledge about sexuality, attitude towards sexuality and gender concepts.
- ◆ To develop a comprehensive training programme in sexuality education, inclusive of the issues related to adolescent's life.
- ◆ To implement and see effect of the programme on the sample under study.

Research Design

In this study a **Pre test- Post test Experimental Design** has been used. This design is widely used mainly to explore the effect of any planned treatment on the subject / sample.

- ◆ Independent variables : Treatment plan for students, Sex, Educational level
- ◆ Dependent variables : Knowledge about Sexuality, Attitude towards Sexuality, Gender Concepts.

Operational Definitions:

● **Knowledge about Sexuality** : refers to the information about sexuality issues. It includes scientific information related to anatomy and physiology, myths and misconceptions related to sexuality, medical and health issues and lastly evil practices in sexuality.

● **Attitude towards Sexuality** : includes ten different sub factors related to different issues of sexuality namely :

- **A1 : Attitude towards one's own sexuality** : refers to the feeling of comfort one's own sexual 'identity', openness to information about development of sexual identity and openness to sharing issues related to one's own sexuality.
- **A2 : Attitude towards personal sexual needs** : refers to acceptance of developmental changes, openness to one's own sexual needs, acceptance of natural urge of sexual expressions and awareness of those needs.
- **A3 : Attitude towards pre-marital Relationships** : refers to a sense of responsibility about any sexual activity, awareness of its impact on personal and social health, consideration of partner's consent. (This topic is included only for senior college students)
- **A4 : Attitude towards socio - cultural correlates** : refers to balanced attitude towards media, cultural impressions on the concepts of sexuality, attitude towards social stereotypes. (readiness to challenge them based on factual scientific knowledge), inter-personal aspects of sexuality (sharing, modelling, learning etc.), balanced outlook towards varied sexual orientations.
- **A5 : Attitude towards sexual abuse** : refers to condemning the act of abuse, respecting the victim, readiness to defend oneself / protest, readiness to defend others and help abused people, readiness to "act against" the abuser (even near or dear one.)
- **A6 : Attitude towards media** : refers to awareness of the present use of sexuality in media, building strong psychological defences against misuse of sexuality in media, readiness to pursue others for it.
- **A7: Attitude towards concept of beauty** : refers to importance not just for physical

appearance, equal importance to dormant psychological traits as criteria of beauty, presentable nature(and not attention seeking), acceptance of one's physical looks and identifying /appreciating beauty in a broader sense.

- **A8 : Attitude towards (sexuality within) friendship :** refers to heterosexual friendship for affiliation (comfort level), gaining individual maturity, understanding limitations of such friendship, avoiding mixing of other intentions and understanding the difference between infatuation and love.
- **A9 : Attitude towards other's sexuality:** refers to openness to accept variations, avoiding misuse of information about sexuality (porno jokes, films, taunting etc.)
- **A10 : Attitude towards sexuality education:** covers Agreement with necessity of sexuality education for getting proper knowledge to become a better human being rather than for manipulation / freehand experimentation.

● **Gender concepts:** Includes understanding the difference between biological sex and gender. It is seen whether the participants perceive both the genders as equal and respond from this egalitarian view.

Tool development:

Tools are very important part of any research program. In the present project researchers have used three basic tools.

1. **SYKT : Stepping into Youth - Knowledge Test :** which assesses the level of scientific information about physiology-anatomy , misconceptions about sexuality.

2. **SYGC : Stepping into Youth -Attitude Test :** A Likert type scale assessing attitude towards various issues related to sexuality

3. **SYAT : Stepping into Youth - Gender concepts/ Test :** A forced choice scale uncovering the underlying stereotypes regarding gender.

Sample : The sampling was done using method of incidental sampling.

Table A: Sample distribution

	9th			11th			Senior College			Total		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Exptal Spread out Training G1	21	23	44	20	22	42	15	32	47	56	77	133
Exptal Condensed Training G2	95	47	142	16	19	35	18	42	60	129	108	237
Control Group	28	18	46	29	13	42	32	50	82	89	81	170
Total	144	88	232	65	54	119	65	124	189	274	266	540

Experimental group: the group of students who was given training in sexuality education and gender sensitization

Experimental Groups :

Two experimental groups were included for two reasons:

1. Possibility of sample loss due to academic / personal reasons
2. To assess the difference between 'spread out training' and 'condensed training'

Note : 'Spread out training' implies sessions spread over a period of six months while

'condensed training' implies an 'at a stretch training input' covered in two days.

Control group: the group which was not given training but was matched with the experimental group with respect to age, socio economic background and scores on pre test

The sample included students from the lower middle class and the upper middle class only. They came from semi- rural, and urban backgrounds. All were day scholars at school/ college levels.

Data Collection and Data Analysis

The actual experimental intervention was conducted during June 2009-Feb 2009 in a

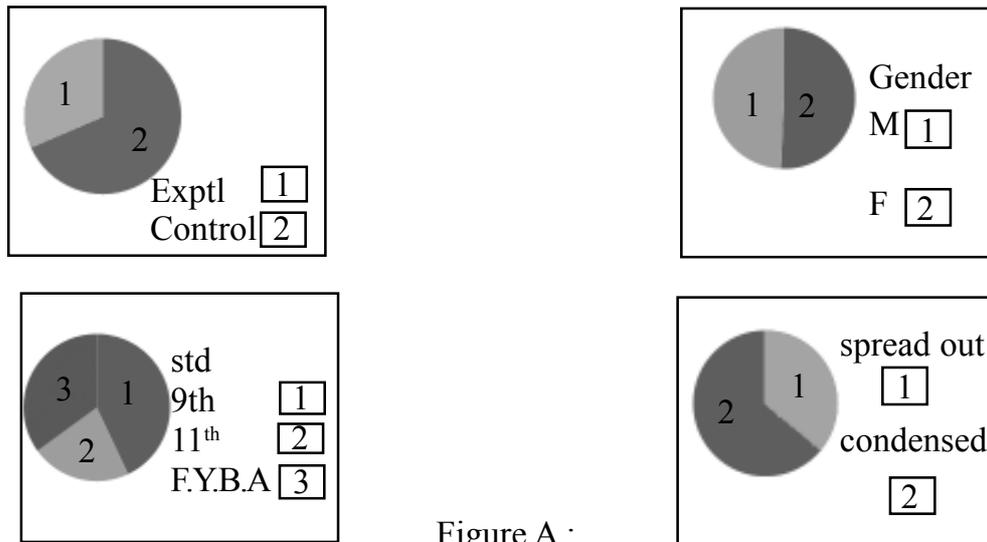


Figure A :
Sample distribution

'pre-test- intervention program- post-test' manner. Trainers' training and pilot session preceded the actual intervention.

The training program

The full fledged training aimed to cover the following major topics in approximate 20 sessions, each of 45 min. duration:

Panchkoshas, (Indian concept of personality), mass media, reproductive system, health issues, HIV/AIDS- in depth, other issues related to reproductive health, sex determination, sexual abuse, concept of beauty, intimate relationships , gender stereotypes, gender equality, goal setting, causes of stress, coping mechanisms.

Structure of the report:

This report comprises six small chapters including this introductory one. Chapter one and two talked more about the conceptual background, and methodology in depth. Chapter 3 explains the rigorous tool development process required to make the study more objective. Chapter 4 elaborates on the training inputs provided to the experimental group. Chapter five, talks about the Effect of training on the total group, on different age groups, different time schedules and effect of training on males and females respectively. Chapter six discusses the need of future research and application in this light.



Chapter 3

The development of sexuality measures

Tool development was a challenging aspect of the present research. The subject being very sensitive and not so frequently addressed, it was the researchers' responsibility to design the tools avoiding social desirability or superficiality in the answers. Based on the operational definitions, three different measures were developed for three aspects of sexuality.

These tests are developed with the help of medical experts, educationists and psychologists to make them scientifically sound. The researchers have tried to keep the difficulty level of the items appropriate for general population, have avoided leading questions, and used scientific language to make it more and more objective.

Stepping into Youth- Knowledge Test (SYKT)

This test attempts to assess the basic knowledge about 'sexuality'. High score in this test denotes high level of appropriate knowledge about sexuality and low score shows low level of knowledge. The junior and senior forms were developed separately keeping in view the socio-cultural exposures and scenario in Indian population. Different reference books were used for this purpose.

Step One : Content Finalization

As the first step of test construction, knowledge about sexuality was considered to include:

- a. Knowledge of anatomy and physiology of both sexes related to the concerned topic
- b. Myths and misconception about sexuality issues
- c. Health issues related to sexuality
- d. Evil practices in sexuality

SYKT is a 'multiple choice' questionnaire. There are two forms of the test. Junior Form (JF) and Senior form (SF). These forms are developed keeping in mind the changing need for information about sexuality with increasing age.

Step Two : Item Writing :

The test questions and statements are based upon each of the above mentioned factor. Total 47 items were constructed. After first scrutiny 41 items were retained for junior form. Each factor was discussed thoroughly by a team of experts and expected information necessary for the adolescents was identified. Two items irrelevant for senior group were deleted from JF and five new items (related to premarital sexuality issues) were added in senior form. Thus total 45 items were retained in senior form.

Step three : Item Analysis :

Item analysis was done to select the final items for the tests: 35 for JF(junior form) and 40 for SF.(senior form)

Step Four : Scoring Procedure :

Every correct answer gets '2' points while an incorrect answer is gets '0' points. Partially correct answers get '1' point.

Table B.1: Test-retest Reliability

SYKT	Pearson Correlation	Spearman's rho
(JF, N=87)	0.43(**)	0.44(**)

SYKT (JF,N=82)	Pearson Correlation 0.71(**)	Spearman's rho 0.64(**)
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** - significant at 0.000 level

Table B.2: Split-Half reliability

SYKT (JF, N=834)	Pearson Correlation 0.41(**)	Spearman's rho 0.38(**)
---------------------	---------------------------------	----------------------------

SYKT (SF,N=320)	Pearson Correlation 0.51(**)	Spearman's rho 0.50(**)
--------------------	---------------------------------	----------------------------

** - significant at 0.000 level

Table B.3 : Content- validity (Inter rater agreement)

percentage of rating agreement	No. of Items in SYKT_JF	No. of Items in SYKT_SF
100	10	14
>80	18	10
>60	4	5
>40	2	8
>20	1	3
>0	0	0
Total no. of Items	35	40

As we can see in the table D, 32 items in SYKT-junior form have received rating above 60% (Total 35 items) by all five raters. Similar case is with SYKT-senior form, no. of items which have received rating above 60% by all five raters is 29. Only 3 items in SYKT-JF and only 11 items in SYKT-SF are having rating below 40%.

2. Stepping into Youth: Attitude Test (SYAT)

Step One : Content finalizing :

This test measures the students' attitude towards sexuality. High score on this test means positive attitude towards sexuality and low score denotes negative attitude.

This tool adapts the Likert type format for responding. There are two different forms of this questionnaire depending upon the exposure level and current issues in students' lives. 'SF' (Senior Form) includes an additional area named 'attitude towards pre-marital relationship' which is excluded from JF (Junior Form). To respect privacy of the respondents and to keep consistency and continuity of the questionnaire, separate forms for BOYS and GIRLS were made as JF-B and JF-G, as they may not have any specific attitude for the statements which are irrelevant to their sex. JF-G and JF-B are parallel forms in which separate questions for boys and girls, measuring the same factor are formulated.

Step Two : Item writing :

First the 'attitude towards sexuality' was operationally defined with the list of its ten subtopics- 'A1' to 'A10'. Then the items were written accordingly. Out of these ten subtopics, A3- attitude towards pre-marital relationships- is excluded from JF. Initially, total 79 items were written and then they were separately included in JF-G, JF-B and SF forms.

Step three : Item analysis :

Initially, there were 59 items in JF and 66 items in SF. After item analysis 55 items for each junior form (JF-G and JF-B each) and 60 items for SF were retained.

Step Four : Scoring procedures : This questionnaire is 'Likert type'. The responses range from 'Completely Agree' to 'Completely Disagree' (respectively A, B, C and D). E is interpreted as 'Don't Know' which refers to complete ignorance.

Category	Options	Marks to be given to each option	
		If 'A' is correct	If D" is correct
Completely Agree	A	4	1
Slightly Agree	B	3	2
Slightly Disagree	C	2	3
Completely Disagree	D	1	4
Don't Know	E	0	0

Thus JF has highest possible score of 220, SF has 240

Table C.1 : Test-retest Reliability

SYAT	Pearson Correlation	Spearman's rho
(JF,N=87)	0.46(**)	0.45(**)
SYAT	Pearson Correlation	Spearman's rho
(SF,N=82)	0.65(**)	0.66(**)

** significant at 0.000 level

Table C.2: Split-Half reliability

SYAT (JF,N=834)	Pearson Correlation	Spearman's rho
	0.689(**)	0.678(**)
SYAT(SF,N=326)	Pearson Correlation	Spearman's rho
	0.728(**)	0.702(**)
	0.000	0.000

** - significant at 0.000 level

Table C.3 : Content -Validity : (Inter rater agreement)

percentage of rating agreement	No. of Items SYAT_JF	No. of Items SYAT_SF
100	10	22
>80	20	19
>60	20	14
>40	9	6
>20	0	3
>0	0	0
Total No. of items including separate items for boys and girls	59	64

In case of SYAT-junior form 50 items are rated 60% and above and only 9 items are rated 40% and below. In SYAT-senior form 55 items are rated 60% and above. Only 9 items have been rated 40% and below. This proves that almost eighty-five percent of items of both the attitude test are rated 'valid' hence are appropriate to be included in the test.

3. Stepping into Youth: Gender Concepts (SYGC)

This test attempts to assess the students' concept about gender stereotypes. High score on this test means more egalitarian gender concepts and low scores denote rigid/ traditional/ less egalitarian gender concepts.

Step One : Content finalization :

Life areas which reflect the gender concepts were identified, namely:

- a. Physical characteristics perceived as gender specific by majority people
- a. Gender roles in daily life
- b. Professional choices
- c. Personality characteristics/habits
- d. Availability of opportunities to learn/ work
- e. Leisure time activities.

Form: Same form was used for the junior and senior groups.

Step Two : Item writing :

Fourteen items per strata were generated by experts denoting typical 'man-women Stereotypical traits 98 items were pooled. After scrutinizing these items, 70 items were retained and used for pre-pilot testing.

Step Three : Scoring :

A ten point scale is provided in front of each item. Number '1' denotes complete male orientation and number '10' denotes complete female orientation. The respondent has to encircle the number as per his/her impression regarding each item. Positions 1, 2, and 9,10 show extremely biased gender concepts at both ends and receive lowest scores. Positions 3, 4 and 7, 8 show moderately biased gender concepts and receive moderate scores while numbers 5 and 6 show egalitarian gender concepts and receive highest score. Total maximum possible score for this test is 210.

Scale	1	2	3	4	5	6	7	8	9	10
Marks to be given	1	1	2	2	3	3	2	2	1	1

Step Four: Item Analysis : Considering the simple nature and easy comprehension on part of the subjects in pilot testing, all the items were retained.

Table D.1: Test-retest Reliability

SYGC	Pearson Correlation	Spearman's rho
(JF, N=87)	0.228(*)	0.215(*)
SYGC	Pearson Correlation	Spearman's rho
(SF, N= 82)	0.622(**)	0.566(**)

** - significant at 0.000 level , * - significant at 0.00 level

Table D.2: Split-Half reliability

SYGC	Pearson Correlation	Spearman's rho
(JF, N=87)	0.608(**)	0.558(**)

SYGC	Pearson Correlation	Spearman's rho
SF,N= 82)	0.564(**)	0.558(**)

** - significant at 0.000 level

Table D.3: Content-Validity: (Inter rater agreement)

percentage of rating agreement	No. of Items Gender Concepts
100	10
>80	12
>60	16
>40	15
>20	10
>0	7
Total no. of Items	70

In case of gender concepts, total 38 items have agreement rating above 60%. Those between 40 to 60 percent are 15 in number. This covers almost 80% items in the test. This shows that the test bears high content validity.




 महाराष्ट्र शासकीय उच्च शिक्षण संस्थान
महात्मा गांधी विद्यालय
 ७५ मध्यमिका, ता. हवेली, जि. पुणे - ४१२ २०२
 शासकीय : १९.०५.००९ / २००९-१०

ना.श्री. शशचंद्रकांत पवार
 ना.श्री. रविशंकर काचम
 ना.श्री. सोपानराव काचम
 ना.श्री. राजेशम काचम

दि. १६/२/२०१०
 मंगळवार

प्रति,
 'संवादिनी' सदस्या,
 ज्ञान प्रबोधिनी, पुणे.

विषय - 'उमलत्या वयाशी जुळवून घेताना'
 महोदया,
 आज मंगळवार, दि. १६/२/२०१० रोजी आपण आमच्या
 विद्यालयात सकाळी ११.३० ते ५.३० असेलत इ. ९ वे मधील
 मुलांमुलींशी उपरोक्त विषयवर संवाद साधतात.
 अजून शरीराच्या विकासाला स्वमजून घेताना, मुलांच्या
 मनातील शंकांचे योग्य शब्दांत निरसन केलेत. केंद्री, स्वातंत्र्य,
 प्रसार अश्यांमार्गांमार्गा यावरची माहिती यांश्रीय रथदतीने
 मुलांपर्यंत पोहोचवण्यासाठी, त्यांच्या विचारांना योग्य दिशा
 देण्यासाठी उपयुक्त मार्गदर्शन केलेत.
 त्यांबद्दल हार्दिक आभार!


 ना.श्री. रविशंकर काचम
 ना.श्री. सोपानराव काचम

R.E. Society's
R. P. Gogate College of Arts and Science
 And
R. V. Jogalekar College of Commerce, Ratnagiri.


PRINCIPAL Dr. S. A. Deo, M.Com, M.A, M.Phil, Ph.D.
 EX-MEMBER OF SENATE, University of Mumbai.
 ASSESSOR, National Assessment and Accreditation Council, Bangalore.

ना.श्री. कार्यशाळा / २४७ / २००९ - १०
 दिनांक : १८ जुलै, २००९

प्रति,
 डॉ. अन्या लवळेकर,
 समन्वयक,
 संवादिनी, द्वारा ज्ञान प्रबोधिनी,
 पुणे.

विषय : कार्यशाळेचे आयोजन.
 महोदया,
 दोन वर्षांपूर्वी आपण आमच्या महाविद्यालयात "तरुणाईची आव्हाने" या विषयावरील कार्यशाळा
 घेण्यासाठी आला होतात. त्या उपक्रमाला विद्यार्थ्यांचा चांगला प्रतिसाद मिळाला. यावर्षीही ऑगस्ट महिन्यातील
 सोमवार व मंगळवार दिनांक ०३ व ०४, १० व ११ किंवा १७ व १८ यापैकी कोणत्याही एका कालावधीत
 कार्यशाळा घेण्यासाठी यावे, असे निमंत्रण या पत्राद्वारे देतो. या संवेधीच्या तपशीलासंदर्भात श्रीमती कल्पना
 आठल्ये आपल्याशी संपर्क साधतीलच.
 कळावे.
 आपला,
 प्राचार्य

Feedback of Institution/college authorities

Chapter 4

The Experimental Intervention

Experimental intervention was the most challenging part of this project. The training needed to be interesting but at the same time certain controls had to be followed looking at the age group under study. The scope of content and the delivery had to be designed in such a way so as to stimulate the participants' thought processes about sexuality and shape their attitude in a constructive way. The full-fledged training aimed to cover the following major topics in approximate 20 sessions, each of 45 min. duration:

Session plan in details

1. Introduction - Panchkoshas.(Indian concept of personality)
2. Mass media - Types in general, focus on print, advertisement, and T.V. soap operas.
3. Mass media - Focus on movies, electronic media, mobile, and internet.
4. Introduction to reproductive system. -
 - Hormonal and related body changes (physical, psychological)
 - Structure, functions of human body
 - List of reproductive organs and brief description.
 - Reproductive system - structure and function (in depth)
 - Overview of development in both sexes .
 - Misconceptions about sexuality.
 - Hygiene and care with respect to sexuality
 - Risks in immature/inappropriate sexual behaviours and ways of dealing with them.
5. General health Issues regarding sexuality
 - STDs, spread and cure.
6. HIV/AIDS - in depth.
7. Other issues related to reproductive health including sexual orientation.
8. Sex determination.
 - Medical termination of pregnancy - use and misuse
 - Contraceptive methods
 - Medical Intervention/treatments
9. Sexual abuse - Nature and Effects
10. Sexual abuse - Coping, Healing, Rehabilitation.
11. Concept of Beauty - Health, attitude towards oneself (physical fitness)
12. Concept of Beauty - Health, attitude towards oneself (psychological fitness)
13. Relationships :
 - Heterosexual attraction
 - Love - infatuation
 - Risks - responsibilities
14. Relationships :
 - Peer pressure
 - Negative influence of peer pressure

- Substance abuse -effects and efences
15. Gender stereotypes.
 - Physical aspects and psychological aspects.
 16. Gender stereotypes.
 - Skill related stereotypes
 - Causes - ways of overcoming them.
 17. Gender equality - necessity, future world, women's movement etc.
 18. Causes of stress
 19. Coping mechanisms with stress.
 20. Compilation and consolidation of the training content.

The trainers' training :

The topic under study being a very sensitive and vital issue from the socio-psychological perspective, the need for developing a uniform training module for each topic was of paramount importance. For this the team of experienced field trainers was identified which had minimum 5 years of experience in handling such topics. All the trainers, (the chief investigator being one of them) were given a reorientation to all these issues. A weekly meeting of preparation for the future sessions was conducted and common flow charts for each session were provided to each trainer to maintain objectivity and impersonal approach in the training. The meetings involved the flow charting of sub topics to be covered and brainstorming on the methods, activities, and equipments to be used in them. This preparation pattern proved to be highly useful in maintaining the quality and uniformity of the session content and process throughout the training period.

Pilot training :

A pilot training was organised for all the age groups. It included a one day intensive workshop for all the age groups separately. The workshops for 9th and 11th were conducted at Pune, while that for the senior collage group was conducted at Ratnagiri (A district place in Konkan region). These pilot workshops gave the trainers an idea about the prospective needs, response patterns, possible queries that may arise during the full fledged training and a guideline regarding the various activities to be included in it.

The actual experimental intervention :

Pre -testing was conducted for the selected sample in June 2009. The training (both-condensed and spread out) was conducted during July 2009 to January 2010 followed by the post-testing. The spreadout training included weekly sessions as a part of the regular timetable in the respective schools and colleges. In all 18 sessions of intervention followed by two sessions of post-testing were conducted. Each group (9th ,11th , F.Y.) was further subdivided in two subgroups randomly so as to make the content delivery easy to comprehend and give personal attention.

The condensed training was organised in the period appropriate from the viewpoint of authorities of the school/ college boards. The students present in each session were noted so as to locate the group for final analysis. Pre-testing followed an intensive workshop and then post -testing was done after a gap of two months so as to assess the consolidation of information passed over to them.

Methods used in training:

Main emphasis in the training was information along with discussions on the topic. However , for making the sessions more attractive, many activities were used as initial or midsession triggers. They included role plays, check lists, films, paper pencil tasks,

questionnaires, debates within class, dilemma tasks, group tasks. etc.

The format most favoured by the trainees was role plays and debates as they could participate in it more freely. The college youth enjoyed the dilemmas and the discussions. Elaborative charts and models were used as teaching aids for the anatomy and other medical information.

Sample 'Flow-chart' of training session :

Sample Session I

(given to trainers at the time of trainers' training, to be used as a guideline.)

Panchkosha Vikasan

Introduction :

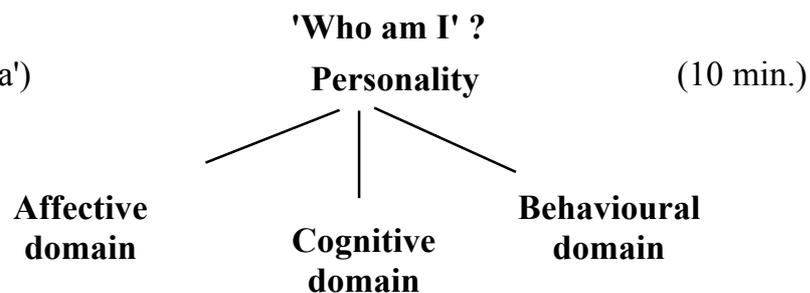
Aim of the session-

- To make children understand the concept of Personality development,
- To help them for developing healthy 'Mindset'
- To motivate them to give an outlet to all their feelings and thoughts.

Ice-breaker Game :

(Based on 'Panchkosha')

Discussion:



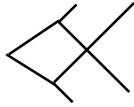
Points to be debriefed: Indian Concept of 'Panchakosha'

1. Anamay Koṣā : Heredity and food habits constitute Anamaya Kosa. Mostly unchangeable. Some changes can be done through consistent efforts.
Changes can be triggered by *Physical Excercise *Good food habits *Medicines *Cosmetic touch up. In these four, first two help for sustaining and other two are mainly supportive as and when required.
2. Pranamay Koṣā : 'PRANA' is energy which is expressed through our actions and speech. e.g. body language, walking, talking, etc.
'Grace, accuracy, softness in speech are some of its signs. e.g. A soldier's walk, dancer's grace, orator's speech, singer's voice quality etc.
3. Manomay Koṣā : This constitutes all the aspects related to the emotions,
 - We need to know 'basic emotions' and 'shades of emotions.'
 - Nature of mind (Tukaram's story, cup of tea.)
 - positive thinking -story-A Lincoln behind you ...
 - Control over emotions.
4. Vijñanamaya Koṣā : All intellectual strengths, grasping, understanding, memory,

analysis, synthesis, creativity, knowledge quest and hard work, problem solving.

- e.g. APJ Abdul Kalam - Journey from a rural child of to 'The President's house.'
- Spontaneity : Acharya Prahlad .K. Atre - A Donkey's Story.

Puzzles - Just shift only three of the sticks and change the direction of the fish.



- What's the need of developing this aspect? To know the world, to understand, evaluate, to have deeper knowledge of any subject, academic success.
- What to do for this? : concentration, using brains as much as you can and to for different purposes, self-study, observation, self analysis.

5. Anandamaya Kosa : Core of personality, blossoms slowly. Some people may develop it in an earlier age, some may realize it at a later stage. One gets involved in it totally. All the fun of life and the liveliness comes from Anandamaya Kosha.

- Any Art / Expression / Dialogue / Physical Skills / Life Mission could be Anandamaya Kosha.
- e.g. Pt. Bhimsen Joshi:singing, Sandeep Khare:poetry and music, Krishna Patil:mountenaring Everest climbing, Dr. Mashelkar: passion for science.

Sample Session II

Aim of the session -

- To make the children understand the nature and impact of sex determination.
- To help them understand the concept of contraception.
- To make them aware of the use & ill effects of misuses of contraceptive methods.

Major points to be covered:

- Sex determination.
- Abortion
- Contraceptive methods
- Medical Intervention.

Contraceptives (Only for senior group)

Aim

- To avoid fertilization
- Not to allow implantations, means to changing endometrical chemistry or characters.

Types

- Temporary : Mechanical, Chemical
- Permanent : Tebectomy, Vasectomy, Hysterectomy.

Female Contraceptives

- Copper T
- Vaginal condoms
- Pills
- Gel

Copper T

- Aims : Interfere with implantation and changes endometrium.
- Disadvantage : "Pain / Heavy bleeding, need to test tags, needs to change every 1-2 yrs.
- Advantages: No need to have daily botherations.
Not to wear anything at every intercourse.
Failure rate is less.

Vaginal Condoms/Diaphragm

- Advantages : Safe
No need of hospitalization.
Insertion and removal Simple
No side effects.
- Disadvantages : Must be used properly
Size should be checked
Should be worn at every time of sexual intercourse
Failure rate is high (85 to 95%).
Expensive in India.

Chemical Harmonal :

Tablets / O. C. Pills

- Advantages : Results 100% and more
Easy to administer
No anxiety
Reversible.
- Disadvantages : Should not miss the frequency
Endometrial changes may not revert back in some cases
Need contineous medical checkups
Elderly woman may have hypertension, heart trouble, liver damage,
Pre malignant stimulation may take place.

Safe Period :

- Advantages : No Medical checkup is necessary
No daily drug taking required
No cost is involved
- Disadvantages : Co-operation of both partners is required
Careful record keeping essential
Must be learnt
Varies with every cycle
Failure rate is 20%
If combined with mechanical devices failure rate is low.

'I' Pill : (High dose of Projesteron)

- Advantages : Interferes with fertilization
Less side effects if taken properly.

Disadvantages: Gastritis / other side effects possible
It repeatedly taken may interfere with hormonal cycle.

Tubectomy :

Advantages : Permanent Method
Reversibility is less.

Disadvantages: Needs surgery.
Hospitalization (One / two days)
Less reversible in case of misshapes (ex. loss of only child)

Male Contraceptives

Condoms

- With or without gel.
- This is a latex material, very thin / non allergic. To be worn on erected penis at the time of intercourse.

Vasectomy :

Advantages : External use
Comparitively Safe
No need of Hospitalization

Disadvantages: Need Literacy
Few months after vasectomy surgery some other contraceptive method is also required for safly

Stigmas: Myths about all these methods

1. Affects ‘Manliness’ /‘Feminity’
2. Tiredness/Exhaustion after surgery/loss of physical ‘srength’
3. Leads to infertility
4. Leads to cancer
5. IUD perforates into stomach
6. It's a life long trouble.

Abortion (medical termination of pregnancy - MTP)

Aim

- * To avoid birth of the baby though it is conceived.

Advantages:

Unwanted pregnancy is cancelled.
Future social / psychological complications are avoided

Disadvantages:

May affect the internal flora of uterus
It's a psychological trauma
Repeated abortions may cause serious physiological damage,

Chapter 5.1

Effect of training on the total group

To see the effect of training on the total group under study the data for all the three levels JF9, JF11 and SF was compiled for 't' test. The comparison between experimental group and control group at pre-test indicated no significant difference on all the three tools.

The means of total experimental group and control group post-test scores the results mentioned below complicated numbers and wastage of space, statistical tables of results are not included in the report. However they are available with the researcher if one wishes to refer showed a significant difference on all three tools indicating the effectiveness of the treatment plan.

Impact on the group as a whole : The results clearly indicate a significant positive impact of the training (in sexuality education and gender sensitization) on the experimental group as a whole. This supports the hypotheses formed earlier. All the tables showing comparison of experimental and control group comparison indicate that the knowledge, attitude and gender concepts with respect to sexuality can be shaped on positive lines through a well structured, comprehensive input using subject friendly technology and methods.

The experimental group seems to have benefited not only on the total means, but the descriptive statistics shows that the minimum obtained scores also are at a sharp rise on knowledge test and attitude test for all the age groups. This shows that ALL students were benefited due to the training. This answers the suspicion of many regarding the impact of such training. The very fact that scores on all tests show rise is indicative of how these three aspects of sexuality work hand in hand. The impact of training is highlighted against the results of the control group. The scores of the control group do not show rise, rather on SYAT a significant decline is seen for the 9th class control group. It may be due to unfiltered exposure to media along with the other environmental influences which the experimental group could restrict as a result of the training.

Apart from the training provided, children in this age are curious about the changes happening within their body and may receive information from other sources as well. It can sometimes mislead them or sometimes help them in knowing the scientific facts. The scores of 11th class control group show slight positive change on knowledge test which can be explained on this basis. However the impact of training has shown a sharp positive rise in the experimental group on post test than the control group's marginally raised scores. Similar results have been obtained in life skills training program for psycho-social competence in the youth in different studies .(Verma Suman, 2003)

Challenge of shaping gender concepts: For the senior group as a whole, it is observed that their knowledge and attitude have been shaped significantly in the desirable direction. However, the scores on gender concepts show little rise in post test. The impact is positive but not significant. One needs to accept the fact that gender concepts are a product of a long interaction with the social environment and need prolonged persuasive efforts for introducing changes in them. It has been indicated in research that as one grows older one needs to struggle with oneself as well as with the significant others consistently and rationally for reverting gender stereotypes

(Wood, J., 2005). The present training seems to have stimulated the adolescents to question the traditional stereotypes but was not strong and consistent enough to bring about a significant change in their gender concept specially for the senior group. This is also supported by the fact that the younger experimental group (9th,) which received a prolonged training for three months, has shown significantly positive changes in gender concepts. The 11th standard group as a whole has shown significant positive change gender concepts. Here, the group which received the condensed training belonged to the semi urban background. The novelty and content of the training also might have contributed resulting in the above mentioned outcome.



Feedback from Institution/college authorities

<p>पुणे जिल्हा शिक्षण मंडळाचे</p> <p>प्रा. रामकृष्ण मोरे कला, वाणिज्य व विज्ञान महाविद्यालय</p>		<p>स्थापना : जून १९९२</p>
<p>बहुजन हिताय, बहुजन सुखाय।</p> <p>PDEA Pure District Educator Association</p>		<p>से.नं. २८, गंगानगर, प्राधिकरण, आकुर्डी, पुणे - ४११ ०४४. फोन : ०२० - २७६५०२७६</p>
<p>फॅक्स : ०२० - २७६५१७४० ई-मेल : rmacscollege@yahoo.co.in वेबसाईट : www.pdearmacs.co.in</p>		<p>पुणे विद्यापीठाशी संलग्न (आयडी नं. पीयू / पीएन / एससी / ०१० / १९९२)</p>
<p>जावक क्र. : आरएमसी/अ १३६२/२०१२-१३</p>		<p>दिनांक : १६/१/२०१३</p>
<p>मा. प्रिंसिपल केळकर संवादिनी, ज्ञानप्रबोधिनी</p>		
<p>महोदय, पुणे विद्यापीठ प्रौढ, निरंतर ज्ञानविस्तार विभाग आणि आमचे महाविद्यालय यांच्या संयुक्त विद्यमाने दि.१६.२.२०१३ रोजी आयोजित केलेल्या एकदिवसीय महिला सबलीकरण या कार्यशाळेत आपण 'विवाहपूर्व समुपदेशन' या विषयावर आमच्या विद्यार्थिनींना बहुमोल मार्गदर्शन केलेत त्याबद्दल आम्ही आपले आभारी आहोत. लोभ आहेच तो वृद्धिंगत व्हावा.</p>		
<p>अपर्णा साबणे डॉ. अपर्णा साबणे (कार्यक्रम समन्वयक)</p>		<p>डॉ. नितीन घोरपडे प्राचार्य</p>

Chapter 5.2

Effect of training across age, gender and treatment type

The experimental group was analyzed on three parameters namely age, gender and treatment type. This analysis helps us to see the different needs of the subgroups across these dimensions.

Age-wise analysis :

9th standard (14-15) : Results indicate a statistically significant positive gain in post-test scores on knowledge test and attitude test. A positive but insignificant change for gender stereotypes is observed in the experimental group's performance. No significant change is observed for control group.

11th standard (15-17): Group shows highly significant rise in the post-test score as compared to pre-test score on all the three aspects of sexuality.

Senior group (17-19): Results indicate a statistically significant positive gain in post-test scores on knowledge test and attitude test. A positive but insignificant change for gender stereotypes is seen in the experimental group's performance. No significant change is observed for control group.

Standard-wise and Treatment-wise analyses

While comparing the results of the spread out experimental group (9th), with the control group, it is observed that there is significant difference between means of these groups at the pre-test level for knowledge test marginally favouring the experimental group but no such difference is seen for gender concepts and attitude test. However, post test mean scores indicate a significant difference for all the three tests clearly indicating the impact of intervention. The same is true for the 'condensed treatment' group. Both experimental groups show significant gains as compared to their own pre-test scores but the results favour the 'spread out' group. For 11th std 'spread out' group, gains are seen on all tools but in case of 11th 'condensed training' group post-test means show the significant difference on gender concepts and knowledge but not on attitude as compared to control group. This shows that there is a positive influence on knowledge about sexuality and gender concepts but certain limitations with respect to the attitude of the group towards sexuality for this group. It seems that 'spread out training' has created better effect for SYKT and SYAT and 'Condensed Training' has created better effect for SYGC. This statement needs to be supported by applying further statistical procedures.

The senior group (spread out training) reflects a significant effect of treatment on knowledge, and gender concepts, but the treatment shows some limitations regarding creation of positive attitude towards sexuality.

The senior group (condensed training) reflects a significant effect of treatment on knowledge about sexuality and attitude towards sexuality, but not so on gender concepts.

This means that both treatments improved knowledge about sexuality. In case of SYGC, 'spread out training' seems to be better than 'condensed training' to inculcate egalitarian gender concepts in case of senior group.

The girls (experimental 9th) show significant improvement than male students in all the three tests namely SYKT, SYAT and SYGC indicating an upper hand .

In case of 11th(experimental) there is a significant difference between means of male and female group on pre-test scores of SYGC, which has eventually reduced at post-test as a result of the training suggesting facilitation of egalitarian attitudes.

Senior group (experimental) shows no significant gender difference on the tests except

SYGC in which girls show better scores at post test.

MANOVA Analysis :

Multivariate Analysis of Variance (MANOVA) examines the group differences across multiple dependent variables simultaneously. In the present research there are three dependent variables, namely, knowledge about sexuality, attitude towards sexuality, and gender concepts and three independent variables namely treatment, standard and sex. The multivariate analysis also supports the findings of 't' test analysis. The main findings indicate the superiority of 'spread out' program over rest two, and the overall treatment is seen to be effective irrespective of gender of the students.

The replication study : Results of the replication study also support the positive impact of training in the main study. The students show significant rise on SYKT. The rise on factors like attitude towards one's own sex (A1), attitude towards one's own sexual needs (A2) and attitude towards media (A6) in SYAT is statistically significant though rise in total mean score shows a positive but insignificant change. These three factors are the core factors of attitude towards sexuality. The training seems to be significant to teach students the proper attitude towards self which may help students to adjust with their sexuality related changes and the proper attitude towards media will help them to choose the right messages and avoid bad effects of media.

In descriptive statistics of the replication sample, it can be seen that the minimum obtained score on post test has declined. It shows that there are some students who have lower post test scores than pre-test in SYAT and that is the reason why there is no significant difference in mean of pre and post-test of SYAT. Both the schools chosen for this study were from semi urban sector and there was influence of traditional culture as compared to the earlier sample. It might have influenced the process of attitude change towards sexuality. Thus mean has increased in post-test and the skewness has shifted towards negative side. Thus it can be said that here in this replication study, training has started initiating positive attitude change in the students but it needs some more time for consolidation.

It is seen from the above results that except for the gender concepts there has been no significant difference in the gains of the experimental groups receiving 'spread out training' or 'condensed training' for all groups except for the 11th. Here the 'spread out' treatment group has shown comparatively better gain than the 'condensed' treatment group on gender concepts. According to this, it will be too early to say about which training method ('spread out' or 'compressed') is better to create significant effect on the population. But if pre-post differences between JF11.1 and JF11.2 are compared, it seems that 'spread out' treatment has created better effect for SYKT and SYAT and 'compressed training' has created better effect for SYGC. Further statistical analysis will help to see whether this effect is progressive or no. **However it is clear that both the treatment types have been extremely useful than having no treatment at all.** Thus it is advisable to plan a spread out regular, consistent training whenever possible but in case of requirement even short term, at a stretch training inputs can also be planned for facilitating attitude change regarding sexuality issues.

The gender differences: Analyses indicated that the 9th standard girls have benefited more than the same age boys on all three aspects. This advantage is seen only on gender concepts for the 11th girls and at the senior level no such advantage for girl is observed. This can be explained on the ground of the basic differences in the maturation process of both the sexes. The onset of physical maturity for girls is earlier as compared to the boys. They are more aware of the bodily changes during the adolescent period. They also have some introduction to the basic changes as provided by elderly women at home. Receptivity of the 9th girls

towards the training might have been influenced due to this fact. It was also reflected in the quality of their participation as compared to the boys of the same age as reported by the facilitators. Thus their response to the overall training has resulted in a significantly higher gain than the boys,

However this gap seems to have bridged in the later age groups respectively. This shows that the training input has been equally beneficial for the junior and senior college students irrespective of their gender. During the training the boys were hard to control and the facilitators had tough times in managing them in the segregated sessions on anatomy, physiology but the results indicate that they did benefit from the training. This shows that in spite of their noisy behaviour they were internalizing the given inputs. This is very important to note as many teachers, trainers think that only those students who are quiet, passive and well disciplined, learn in the class.

Conclusions :

1. The training has resulted in better awareness and development of positive attitudes regarding sexuality issues in adolescents.
2. Gender differences in benefiting from the program eventually decrease and come on equal levels with increasing age.
3. Treatment effect is not clearly distinct in specific areas of sexuality; however, both the training modes prove to make significant positive change in knowledge and attitude towards sexuality.
4. Short term training has a noticeable positive impact on developing egalitarian gender concepts but not statistically significant. Thus more intensive and consistent efforts need to be introduced at different levels from home and society both.

Limitations of the Study

1. The study comprised of students from urban and semi urban localities only.
2. The study included high school students and above so this training may need changes if any part of it has to be implemented to younger classes.

Further implications of the Study

1. The tools developed in this study can help us in identifying needs regarding sexuality education and attitudes of adolescents.
2. The training programme can be replicated by providing masters / teacher's training so as to reach a wider population.
3. The manual development based on this training can serve as a standard learning material across different groups.



Chapter 6

Moving forward

There has been a lot of controversy on the issues regarding sexuality issues and rights all over the world since ages. India, being a country with huge cultural variation and one of the oldest societies, is facing challenges due to rapid flattening of socio-cultural environment on the globe. The recent hot discussions and opinion cleavages regarding the legalization of consent age for sexual relations has again proven the grave need of handling this issue by going beyond one's rigid stances about complete freedom in - or absolute restrictions over - expression of sexual urges. Though at present the government has kept the consent age at 18, in reality how many 'legally eligible' youth understand the true nature of their sexual issues? How many of them understand how to respect their own and other person's sexual identities without prejudices/ stereotypical labels? How many of them know how to handle situations where either they are victims of abuse or direct -indirect accomplice in a sexual crime? How many have received a modeling from their elders leading them to an egalitarian set of thought and action in day to day life? The answer is 'very few' or 'almost nil' ! In this regard, Indian society needs a tailor made program which is resonant with its socio cultural context and at the same time retains its rationality and scientific base.

A fair and balanced education in sexuality and gender issues provided through educational system is one concrete step in the direction of solving these problems. Jnana Prabodhini has been doing a consistent and upgrading effort in this direction since more than a decade. 'Stree Shakti Prabodhan Gat' -a volunteer group of women working under Jnana Prabodhini, has been conducting training programs for children of mainly age 13 to 19 which cover the above-mentioned issues. A two days workshop(titled ' Adjusting with the blossoming years') is conducted in schools/ colleges in Pune and nearby villages/ Tahsil places . Since 2001 - nearly thirty thousand and odd children/ youth have undergone this training. The impact of the training became evident when schools/ colleges which were originally reluctant to organize the program started calling back for a next year program. They made it their yearly venture in the school programs. The whole program runs on a voluntary basis, with the financial support of voluntary contributions of the beneficiary schools as per their capacity or with aid from some local agencies from time to time. Since last five years, group guidance for premarital issues (Stepping into marital bond) , parenting of adolescents (Nurturing the blossoms) and those who wish to work as sexuality education trainers (Trainers' training') are also organized by the group. Hundreds of persons have benefited from these programs. The group has conducted such training for varied populations such as: rural /interior girls and boys, visually impaired children, HIV positive Children, borderline intelligence children and their parents, etc. each of these experiences has added value to the original program content and method. An individual counseling cell for those who wish to take further in- depth guidance has also come up as a natural offshoot of the earlier program. Now we are planning to publish a 'Standard training manual'(guide book) which can be disseminated to trained personnel to bring uniformity and quality control.

This research project was conducted to verify the hypotheses of all the activists in the field of sexuality education that such guided exposure and thought provoking discussions on a so called 'tabooed' subject do not distract/ destroy youth , rather help them to adjust with the challenges regarding their sexual and gender identities. As an implication of this finding 'Stree Shakti Prabodhan Gat' has scaled up their work in this area and are now reaching interior

parts of the state. They are conducting more in depth training programs for the volunteer trainers , developing syllabus for varied age groups starting from the primary educational level as asked by many schools and parents so as to spread the balanced notion of sexuality education across the society.

Those who are interested in knowing more about these programs, can contact on the following e-mail or cell numbers.

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Feedback from Institution/college authorities

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<p>प्रति, सुसंवादिनी गृप, ज्ञानप्रबोधिनी, पुणे</p>	
<p>विषय :- कार्यशाळेबाबत...</p>	
<p>महाशय,</p> <p>ज्ञानप्रबोधिनीच्या "सुसंवादिनी गृप" अंतर्गत आमच्या शाळोतील इयत्ता 10 वी च्या विद्यार्थी, विद्यार्थीनींसाठी आपण जो "उमलत्या वयाशी जुळवून घेतांना" हा प्रबोधनाचा कार्यक्रम घेतला. त्याबद्दल मनापासून समाधान व्यक्त करण्यासाठी हा पत्रप्रपंच.</p> <p>नुकत्याच वयात येणाऱ्या मुला-मुलींच्या समस्या या कार्यक्रमात जाणून घेऊन त्यांना या कार्यक्रमात मार्गदर्शन केले गेले, तसेच मैत्री कशी असावी, लैंगिक शोषण म्हणजे काय, त्यावर उपाययोजना काय, शरीररचना कशी असते, पुनरुत्पादन संस्था कशी काम करते या सर्वच विषयावर खरोखर अशा उद्बोधक कार्यक्रमाची गरज होती. आपण आमच्या शाळेत हा कार्यक्रम घेऊन आमच्या विद्यार्थ्यांचे उमलत्या वयात, तारुण्यांच्या उंबरठ्यावर भेडसावणऱ्या समस्यांचे निराकरण केले, या कार्यक्रमातून केलेल्या उद्बोधनामुळे आमचे विद्यार्थी, लैंगिक अधःपतनापासून नक्कीच दुर राहतील अशी खात्री वाटते. हा कार्यक्रम आपण दरवर्षी आमच्या शाळेत घ्यावा अशी नम्र अपेक्षा व्यक्त करतो. कार्यक्रमाबद्दल पुनश्च एकदा धन्यवाद देतो.</p>	
<p>आपला विश्वासू,</p> 	

Appendix 1

Abbreviations used in the report text

1. **SYKT** : Stepping into youth : Knowledge Test
2. **SYGC** : Stepping into Youth : Gender Concepts
3. **SYAT** : Stepping into Youth : Attitude Test
4. **JF9** : Junior Form 9th Std.,
5. **JF11** : Junior Form 11th std
6. **SF** : Senior Form(senior college students)
7. **EXP.1** : Experimental Group with spread out training(JF9.1,JF11.1,SF1)
8. **EXP.2** : Experimental Group with compressed training (JF9.2,JF11.2,SF2)
9. **Control** : Control group (JF9.3,JF11.3,SF3)

Appendix 2

List of field trainers in the project

Name	Formal qualifications	Experience as trainer (in years)	Group handled
Dr. MedhaParanjape	M.D.(Gynaecology.)	10	Senior group
Dr.Anagha Lavalekar	Ph.D. (Psychology)	15	Senior group
Mrs. Vishakha Velankar	M.Sc.(Human development), B.A.	10	Senior group
Mrs. Anjali Railkar	M.Sc.(Nutrition), B.A.	10	Senior group
Mrs. Anita Gurjar	M.Sc.(Chemistry), B.A.	10	Junior 11th
Dr. Snehal Apate	B.H.M.S., B.A.	10	Junior 11th
Mrs. Aditi Akut	M.A.(Russian)	10	Junior 11th
Dr. Shubhangi Katkar M	M.D.(Gynaecology), B.A.	10	Junior 9th
Mrs. Deepali Shende	B.Sc. D.B.M., B.A.	10	Junior 9th
Mrs. Sadhana Sethiya	B.Com.,Cert.in Yoga, B.A.	10	Junior 9th
Mrs. Ketaki Pendse	D.E.E.,B.A.	9	Replication 9th
Dr. Manjusha Rohanekar	B.A.M.S., P.G. Diploma (School Psychology)	5	Replication 9th
Mrs. Shubhangi Salavi	M.A.(Psychology)	9	Replication 9th

Appendix 3

List of experts contributing to content validity of SYKT, SYGC, SYAT

Sr. No.	Name of the Rater	Field of work
1	Dr. Sanjeevani Kulkarni	Social Work / research and intervention in Reproductive Health (Sp. HIV rehabilitation)
2	Dr. Vaishali Biniwale	Gynecologist (Infertility, Adolescent Reproductive issues)
3	Dr. Sujala Watve	Psychologist (Clinical, Educational)
4	Mrs. Vrishali Dehadray	Psychologist (Educational)
5	Mrs. Ujjwala Nene	Psychologist (Clinical)

Dr. Sujala Watve is a psychologist and has experience in research for >30 years, currently heading Jnana Prabodhini's Institute of Psychology, Pune. Mrs. Vaishali Dehadray is also a psychologist and currently working as research associate in Indian Institute of Education, has a good experience in research. Dr. Vaishali Biniwale is a gynecologist and is working in the field for twenty and odd years. Ujjwala Nene is a clinical psychologist working with K.E.M. Hospital, Pune since 25 years. Dr. Sanjeevani Kulkarni is a medico-social activist and is working in a field of HIV/AIDS prevention and rehabilitation for more than fifteen years.

Appendix 4

Names of the institutes participated in Research programme:

Sr. No.	Std.	School / College	Area
JF9.1	9th	S P M English Medium School, Pune	Urban
JF9.2		Vidya Vikas Vidyalaya, Pune	Urban
JF9.3		Police Public School, Pune	Urban
JF11.1	11th	Sau. Vimalabai Garware Prashala, Pune	Urban
JF11.2		Shankarrao Butte Patil Vidyalaya, Junnar	Semi Urban
JF11.3		Nutan Marathi Vidyalaya, Junnar	Urban
SF.1	First Year	Baburao Gholap Mahavidyalaya, Sangavi	Semi Urban
SF.2		Gogate-Joglekar Mahavidyalaya, Ratnagiri	Urban
SF.3		Sau. Kashibai Pansare D.Ed. College, Pune	Urban

(JF9- Junior Form 9th Std., JF11 = Junior Form 11th std., SF - Senior Form (includes F.Y. Senior College Students), 1 =Experimental Group with Regular Training, 2 =Experimental Group with Condensed Training. 3 = Control Group for e.g. JF9.1 = 9th class Experimental Group with Regular Training.)

Appendix 5.1

Sample item of SYKT

Instructions :

In this test we have given some questions related to psycho-physiological changes occurring during adolescence. Each question is followed by some multiple answer choices. You have to read each question and its probable answers neatly and have to mark the right choice in the answer sheet provided. You have to choose only one answer from the given choices. You have to make a right under the desired column in front of the item number as the with pencil.

For e.g.:

1. Adolescence means.....
 - a: Age between nine to twelve.
 - b: Phase of rapid psychological and physiological changes.
 - c: Age Twenty one to twenty five.
 - d : None of the above.

Q. No.	A	B	C	D
1		✓		

Please answer these questions spontaneously and without any hesitation. There is no time limit to finish this test but you are expected to finish it within Fifty minutes.



Appendix 5.2

Sample item of SYAT

Instructions :

Given below are some statements. You have to read each of the statements and mention whether you agree to these statements or not, in the answer sheet. Write 'A' if you 'Completely agree', 'B', if 'Slightly Agree', 'C' if 'Slightly Disagree', 'D' if 'Completely Disagree' and if you 'Don't Know' then write 'E'.

Completely Agree	Slightly Agree	Slightly Disagree	Disagree	Completely Disagree	Don't Know
A	B	C		D	E

An e.g. is given below.

Question 1. Male and female are two faces of one nature.

Qu. No.	Answer
1	A

Don't linger on any item for long. You have around 30 minutes to solve these.



Appendix 5.3

Sample items of SYGC

Instructions:

In this test we have given some typical characteristics of a person. You have to read each and categorize them according to appropriate gender as per your opinion. There is a 'Ten point' scale given in front of each characteristic. These ten points are NOT marks given to each characteristic but point 'ONE' means obvious predominance of female characteristics and point 'TEN' means obvious predominance of male characteristic. You have to circle a number of the scale which represents your rating to the given characteristic as per the given instructions.

For e.g.: According to Ishan...

Characteristic	Scale		<input type="radio"/>
	Naturally Feminine	Naturally Masculine	
Wearing 'Pheta'	1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8 ___ 9 ___ 10		
Intelligence	1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8 <input checked="" type="radio"/> 9 ___ 10		
Mehendi Drawing	1 ___ 2 ___ 3 <input checked="" type="radio"/> 4 ___ 5 ___ 6 ___ 7 ___ 8 ___ 9 ___ 10		

According to Ishan, - only Men wear 'Pheta' so he encircled '10', 'Mehendi' drawing is done only by females so he encircled '1'. But he thinks that intelligence is a characteristic which could be possessed equally by both Men and Women, so he encircled '6'. Like wise you have to think about each characteristic separately and have to encircle the respective numbers as per your opinion. Don't linger on any item for long. You have around 15 minutes to solve these.



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