CHAPTER I
1.0 Introduction: Adolescence- A Crucial and Critical Stage.

A child grows from infancy through childhood to adulthood. This transition from childhood to adulthood is called adolescence, spanning a comparatively short period in one's life. But these few years are very eventful in one's development. This second decade is one of the most multifaceted transition of life with its breathtaking pace of growth and changes second only to that of infancy.

The term ADOLESCENCE is derived from the Latin word *adolescere*, which literally means, "to grow to maturity". This is a transitional period with the journey beginning from pubescence and terminating with adulthood. Pubescence refers to biological changes that precede sexual maturity, a period of transformation from a stage of reproductive immaturity to a stage of full reproductive competence. Alongside it also encompasses a number of physical, physiological, emotional and psychological changes, which set the stage for adulthood. The incredible feature is that all these changes vary from individual to individual and are a function of factors like genetic, ethnic, geographic, socio-economic status, health as well as nutritional adequacy. Hormonal changes, consequent interpersonal problems, awakened curiosity, intense sexual interests, confusion of objectives etc characterize this most endearing hallmark of human life. It is thus a time of exclusive and theatrical changes in body, psychology and academic career.

The duration of adolescence varies greatly. While the concept of youth varies across cultures, in recent years there has been increasing global agreement that adolescence is a distinct and important period in a person's life. In a joint statement, WHO, the United Nations Children's Fund (UNICEF) and the United Nations Population Fund (UNFPA) agreed that the term "adolescent" refers to people between the ages of 10 and 19. "Youth" defined as people between 15 and 24 years of age, and "young people," who are between 10 and 24 years old make up distinct yet overlapping categories.
1.1 Historical Views On Adolescence

The psychologist who is generally credited with establishing adolescence as a period of psychological and social development deserving separate study is G. Stanley Hall. Hall depicted adolescence as a transitional period bridging the “savagery” of childhood with “civilized” adulthood. Adolescence was described as “new birth, in which higher and more completely human qualities are now born. Hall’s concept of “storm and stress” continues to be a popular conception of adolescence.

According to the Classic Psychoanalytical Theory as put forth by Sigmund Freud adolescence is dominated by a renewed struggle to control sexual impulses. At this point the Oedipal conflicts are reawakened by rapid increase of hormonal levels and increasingly the sexual drives are directed away from the parents to members of opposite sex. Another psychoanalytically oriented psychologist Erik Erikson has altered the focus from sexual conflict to social conflict. Failure to resolve the conflict adequately at one stage of development interferes with the adjustment at later stage. The primary crisis of adolescence is the need to establish a personal sense of identity. The point at which the individual adolescents goes through the clarification of this identity is called identity crisis in which they are concerned with questions like “Who am I?” or “What am I going to do with my life”.

According to Cognitive Developmental Theory put forth by Piaget, adolescence is dominated by a radical shift in one’s ability to think and solve problems. As adolescents mature cognitively their views of themselves and their relationship to and with the world change quantitatively and qualitatively. At early levels of cognitive maturity the views are rigid, concrete and egocentric. Rather than being tied to the concrete reality the adolescent’s conceptual world is expanded to include abstract reality and possibility. Theorists who use the cognitive perspective emphasize the importance of learning and the environment holding that biological drives are decisively shaped by psychological and social influence. In Havighurst’s view it is the individual readiness for learning coupled with the social demands made on youth that defines the developmental tasks of adolescence. Bandura has emphasized the importance of observational learning in which adolescents observe and imitate the behaviour of their parents, other adults and peers. According to Bandura and others a variety of cognitive variables play a vital role
in learning so that adolescent’s development is best understood in terms of mutual interaction between the internal and external influences on behaviour with relatively continuous changes in behaviour.

1.2 Distinctiveness Of Adolescence

Any phase of life tends to be characterized by an assemblage of developments, which are physical, psychological and social in origin and timing. But the period of adolescence, more than any other, is marked by an upsurge of these changes and behavioural contradictions. Adolescence is a time of tremendous growth, changes and compound development in many different areas. It should be noted that these changes are normal and universal. With its jagged and undefined paths, the fascinating journey towards adulthood can be demanding and disorienting, invigorating and exciting. It marks the beginning of a quest for identity and for a way to find meaning and a place in the world.

The following are some predictable patterns or characteristics of adolescence that make this phase of life distinct from all other phases.

1. Biological

It is during adolescence that swift physical growth and changes in the physiological processes takes place. Typical of the hormonal changes, this period is exclusively identified with the development of secondary sexual characteristics as well as increase in the physical stature. The developments reflect the reproductive maturation in individuals, which is highly co-related with the sexual development. Adolescents have to learn to acknowledge these changes and come to terms with them.

2. Psychological

Adolescence is also a period of advancement of mental, intellectual and emotional maturity. Most of the adolescents display a propensity to be independent like an adult, rather than remaining dependent on others like a child. During this stage individuals experience intense sex drive for the first time and begin to redefine their association with the opposite sex. It is alleged to be a psychologically demanding and decisive period. Early developmental theorists such as Erikson have defined the period of adolescence as
one of identity versus role confusion, in which adolescents must determine who they are, combining their self understanding and social rules into a coherent identity (Berger & Thompson, 1995). Through this long and arduous process of finding themselves, the importance of adolescent identity as being stable, consistent and mature is paramount. Having a stable, consistent and mature identity for adolescents helps to bring in adulthood and helps to connect various experiences in the adolescents past to who they wish to become in the present in terms of their goals, values and decisions in life (Erikson, 1975). As adolescents try to discover who they are, they strive towards identifying their selves as separate from their parents and as unique persons. No matter which identity status an adolescent is progressing through the quintessential question of "Who am I?" comes to the fore as an important psychological task. How well adolescent’s progress through this particular developmental stage of their lives in terms of psychosocial development will largely determine their aptitude for success and happiness as they progress towards adulthood.

3. Socio-Cultural

The interface of adolescents with the existing socio-cultural milieu results in some new developments. It initiates a process of redefining their social relationships. Society generally does not define a specifically explicit role for adolescents. Hence, they are trapped in the ambiguous overlap between the reasonable and categorically confirmed roles of childhood and adulthood. Their psychological needs are also not respected in the appropriate perspective by the society. This at times generates among them aggressive and reactionary behaviour which may be socially disapproved. Individuals during adolescence experience apprehensions or emotional stress to an unusual degree.

4. Cognitive

Cognitive development is more than an accumulation of new knowledge. It is an unfolding of new ways of thinking about one's world and role in that world. Piaget described the reasoning that characterizes adolescence as formal operational thought. Extending from the process of maturation and learned experience, it is the fourth and final stage of cognitive development. For many psychologists including Piaget, the single most distinguishing feature of adolescent thought is the capacity to think in terms of
possibility rather than only in terms of reality (Berger & Thompson, 1995). Adolescence is marked by emergence of logical reasoning, problem solving and decision making skills. There is a shift from concrete to abstract thinking. Adolescents experience qualitative differences in information processing, conceptualizing, and thinking hypothetically. This mode of thinking gives them greater latitude in adapting to their world by enabling them to draw upon abstract as well as concrete referents to solve problems. “Adolescents can, and do break free from the earthbound, traditional reasoning of school children, soaring into contrary notions and ethereal dreams quite apart from conventional wisdom” (Berger & Thompson, 1995). One of the diverse domains of adolescent cognition is the ability to engage in hypothetical thinking which is thought that involves propositions and possibilities that may or may not reflect reality (Berger & Thompson, 1995). Adolescence tends to become a time of intellectual expansion and development of academic experiences. Unlike children who seem to merely accept things as they are without explanation, adolescents will begin to question and search for answers and possibilities beyond the natural domain. At this stage adolescence have to adjust to the increasing demands of academic and intellectual requirements. They are supposed to learn new skills and concepts by gaining knowledge and experience in different areas and also to interpret their environment in the light of these experiences. The development of intellectual capacity in adolescents is also reflected through their behaviour. They become capable of conceptual thinking and understanding logic and deductive reasoning. All this results in the heightening of their self-esteem. Adolescence is a strong period of self-reflection as adolescents will think about what others think of them, what their parents expect of them, and question what tomorrow will bring. Searching introspectively is a normal function of adolescence as they try to sort out their challenges and questions.

5. Behavioural

Adolescence tends to be a time of seeking status as an individual. The adolescents try to become more independent by trying to free themselves from childish submission to parents and other authority figures. They start taking certain decisions about their vocations, interests and even economic independence to certain extent. The process of physical, psychological and social maturity initiates among adolescents a tendency to be
independent. They start distancing themselves from the adult world. They begin to shift from parents to peers and from existing to new belief systems. The adolescents atypically exhibit the following characteristics in their behavioural patterns.

a. Identity Crisis

Adolescence is a time when a distinct identity is shaped. There is a struggle to define and assert oneself. Adolescents exhibit gender role identity, body image perception, self-concept and esteem through their behaviour. They seek to discover what is exceptional and distinguishing about them. They may experiment with identities considered socially undesirable or deviant by the adult culture. Late-stage adolescents may take what Erikson calls a "psychological moratorium". This is a period of time when a youth may take time off from the upcoming responsibilities of adulthood to explore a variety of roles and possibilities often creating conflict with family members who may be anxious about the apparent loss of opportunities for future success.

b. Intimacy

During adolescence, some crucial changes occur in defining relationship, particularly in the context of heterosexual relations. A heightened and special interest for opposite sex all of a sudden makes way. Invariably they find it difficult to distinguish between infatuations and love with and/or without sexual orientation. They tend to feel urge for physical pleasure and do not generally appreciate its sublime orientation.

c. Peer-Group Kinship

Adolescence tends to be a time when peer group relations become foremost important. The adolescence becomes concerned to gain status and recognition among peers therefore he tries very intensely to conform to the peer group standards. Heterosexual interests also develop and can sometimes cause complexities and conflicts in emotions. In an effort to assert their identity and reflect their independence, adolescents tend to break away from the close emotional ties of parents and prefer the company of their friends and form gender-specific peer groups. While at home, they often prefer being alone and demonstrate their insistence and inclination for privacy. These developments promote their dependence on the peer group from which they derive approval and support for their changed behavioural pattern.
d. Self concept

The constitution and content of self-concept also changes during adolescence. Like other aspects of conceptual structure, self-concept becomes increasingly intricate and interconnected as maturity sets in. As adolescents advance towards adulthood their answers to questions about who they are become more multifaceted and include abstract as well as concrete attributes. Given the question "Who am I?" early adolescents and preadolescents respond with lists of physical features and things they like. By mid-adolescence young people increasingly include interpersonal traits and some abstract categories ("I am shy with strangers," "I am friendly," "I am nice"). By late adolescence, self-concepts are dominated by global, abstract categories ("I am a good person," "I am fair, honest, a good citizen," "I am ambitious," "I have integrity").

1.3 Developmental Tasks Of Adolescence

Robert Havinghurst has suggested that adolescence can be defined by a set of developmental tasks that must be completed in preparation for adulthood. The convergence of individual’s needs and social demands give rise to the developmental tasks of adolescence. These are appropriate attitudes, understanding and skills that adolescents need to acquire at certain times in their lives through maturation, social demands and personal growth.

The following are the developmental tasks of adolescence:

1. *The adolescent must adjust to new body image.* At no other time since birth does an individual undergo such rapid and profound physical changes as adolescence. Adolescent must reconcile this new image seen in the mirror with the self-image of a child. This radical change in the adolescent’s physical self may at times be the source of personal anxiety and a fear of being different accompanied by self-consciousness.

2. *The adolescent must adapt to increased cognitive powers.* In addition to a sudden spurt in physical growth, adolescents experience a sudden increase in their intellectual abilities. These new abilities, which include the ability to ask the question “What if” often leads adolescents to commit themselves to concepts of
utopia or idealistic political and social movements. As Piaget (1967) notes, “This idealism may lead the adolescent to be impatient with adults who are seen as unwilling, unable or unmotivated to correct social wrongs”.

3. **The adolescent must adjust to increased cognitive demands in school.** School curricula are often dominated by an assumed need to meet the academic demands that are to come irrespective of whether the students have made the transition to formal operational thought. Not all adolescents make the intellectual transition at the same rate; students who have not completed the transition may find adjusting to demands for abstract thought difficult.

4. **The adolescent must expand his or her verbal repertoire.** As adolescents mature intellectually and adjust to increased demands for academic and social competence, they must also acquire language skill for relating to more complex problems and tasks. Their limited language of childhood is no longer adequate. Often this language devolvement lags behind intellectual growth and adolescents may appear incompetent because of their inability to express themselves meaningfully but they may be far more capable than what their language suggests.

5. **The adolescent must develop a personal sense of identity.** During adolescence the individual must begin to recognize his or her own uniqueness and form personal identities. This new identity is a synthesis and reorganization of previous identifications with parent, adult and other authority figures. The individual integrates previous experiences including resolution of early developmental crisis into a personal conception of “Who am I?” and “What is my role in life? During this period peer group serves an important purpose. Adolescents no longer find their childhood identities adequate and have not yet formed their adult identities fully so they need a setting within which they can experiment and peer groups provide that setting.

6. **The adolescent must establish adult vocational goal.** A part of adolescent’s process of establishing a personal identity is that she or he must also develop some plan for achieving an adult vocational role. Adolescents need to identify at least on a preliminary basis what they plan to do as adults and how they plan to achieve their goal.
7. The adolescent must develop stable and productive peer relationships, including heterosexual relationships. Although peer interaction’s not unique to adolescence, peer interaction seems to hit a peak of importance during early and middle adolescence. The degree to which adolescent is able to make friends and have an accepting peer group is a major indicator of how well the adolescent will successfully adjust in other areas of social and psychological development.

8. The adolescent must learn to manage his or her own sexuality. With their increased physical and sexual maturity, adolescents need to incorporate into their personal identity a set attitudes about what it means to be male or female as well as a set of values about their own sexual behaviour.

9. The adolescent must adopt an effective value system. During adolescence as individuals develop increasingly complex knowledge system they also adopt an integrated set of values or moral. Eventually the set of values provided by parents and society may come into conflict with values expressed by peers and other segments of society. To reconcile such differences the adolescents restructures all those beliefs into a personal ideology.

10. The adolescent must develop increased impulse control or behavioural maturity. As the individual moves from early to late adolescence self serving behaviour is replaced by mature, socially appropriate behaviour. Gradually adolescent develops a set of self controls through which they learn which behaviour is acceptable and what is not.

1.4 Concerns in Development of Adolescents

As they move out into the world, adolescents take on additional responsibilities, experiment with new ways of doing things and push for independence. They mature sexually. They also develop the capacity to reason in more abstract ways, explore the concepts of right and wrong, develop hypotheses and think about the future. They start to question themselves and others and begin to see the complexities and nuances of life. They also begin to think about such concepts as truth and justice. The values and skills they develop over the years will benefit them immediately and over the course of their lives. During adolescence, young people establish their emotional and psychological
independence, learn to understand and manage their sexuality and consider their future
role in society. The process is gradual, emotional and sometimes unsettling. A young
person might feel disappointed, disillusioned and hurt one minute; ecstatic, optimistic and
in love the next. As they grapple with physical and emotional changes, today’s
adolescents must also cope with external forces over which they have little control.

Adolescents have rights as expressed in the 1989 Convention on the Rights of The
Child including those to information and skills; access to services, such as education,
health, recreation and justice; a safe and supportive environment; and opportunities to
participate and to have their voices heard. Countries that have ratified the Convention are
required to take all necessary measures to secure these rights. Yet time and again around
the globe, societies are faced with the symptoms of their collective failure to fulfill and
protect adolescents’ rights. Adolescents are bearing the brunt of the AIDS epidemic.
About half of the new HIV infections occur among young people 15-24 years old. In the
past, adolescents and their needs have been largely neglected in both population and
health education programmes. There are an estimated 300 million young people (aged
10–24) that is, adolescents (aged–19) and youth (aged 15–24) in India today representing
almost one-third (31 per cent) of the population.

1.5 Meeting The Needs of Adolescents through Adolescence Education

Education can be the most persuasive instrument aimed at sensitizing the society
to the importance of recognizing adolescents, as a unique group with their own needs and
concerns. It is an indicative of the urgency to make adolescents and issues related to them
to come into focus. It is in this context that the need for an educational response at the
school stage is strongly felt to provide scientific knowledge to adolescents regarding the
various aspects of growing up and help them to cope with the problems that crop up
during this transitional phase. The critical needs and concerns of adolescent development,
which is a complex process of physical, cognitive, emotional, social and moral
maturation has paved for the introduction of a special framework called as Adolescence
Education. It is an educational endeavour to provide learners with an appropriate and
adequate framework which fosters the adolescents to develop in a holistic manner
keeping in view the physical, physiological, social, intellectual and moral dimensions.
1.5.1 Background Of Adolescence Education

Adolescent’s right to health, which includes reproductive health, was first internationally recognized in *The Children's Rights Convention of 1990*. By its terms, the provisions of the Children's Rights Convention generally apply to persons under 18 years of age. *Article 24* recognizes children's right "to the enjoyment of the highest standard of health and to facilities for the treatment of illness and rehabilitation of health. It also requires State parties to take appropriate measures to develop family planning education and services. Further more, while the Children's Rights Convention requires State parties to respect the responsibilities, rights and duties of parents to provide appropriate direction and guidance in children's exercise of their rights, it clearly recognizes that in all matters, the best interests of the child take precedence and the child should be enabled to exercise his or her rights. The Children's Rights Convention was also the first international human rights treaty to explicitly recognize sexual violence and abuse, a major factor related to adolescents' reproductive and sexual health. The UN Human Rights Treaty Committees charged with overseeing such treaties' implementation have emphasized the need to recognize and respect the reproductive rights of adolescents. In particular, the *Committee on the Rights of the Child* (CRC) has consistently stressed the need for governments to ensure adolescents' reproductive rights. The CRC has expressed its concern over the limited availability of programs and services in the area of adolescent health and specifically reproductive health. It has recommended increase in efforts to promote and strengthen policies and programs on reproductive health education and counseling services for adolescents.

Although there was considerable pressure on education system for introducing sex education in the school curriculum there has been lots of variations in the conceptualization of the terms. Different concepts like Reproductive Health Education; sex education, sexuality education family life education, pubescence and puberty education etc have been used to describe the nature of education in this area. The term ‘Adolescence Education’ was used for the first time by UNESCO ,Principal regional Office for Asia and Pacific (PROAP), Bangkok as the title of a package on sex education (UNESCO, 1991). Later National Council of Educational, Research and Training (NCERT) used the same term ‘Adolescence Education’ in a seminar in 1993 for
discussing the implication of introducing sex education in school curriculum. However the NCERT used this term not only as a euphemism for sex education but also to broaden its scope to incorporate the critical concerns of adolescence reproductive health. It was recommended to introduce suitable components of Adolescence Education in the curriculum at various stages of schooling. Further the Programme of Action (POA) adopted by the International Conference on Population and Development (1994) also provided support by including the problems and needs of adolescents as an integral part of the curriculum. It defined reproductive health as a ‘a state of complete physical, mental and social well being and not merely the absence of diseases or infirmity in all matters pertaining to the reproductive system and to its function and processes’.

The definition of Adolescence Education framed by NCERT (1999) reflected broader and higher level objectives and the broad content of Adolescence Education was prepared under the three major components of:

1. **Process of Growing up**: including the critical and crucial issues of process of growth self concept, self esteem, reproductive health related subject matter, sexually transmitted diseases along with the myths and misconceptions.

2. **HIV/AIDS**: content related to causes and consequences of HIV/AIDS, preventive measures and individual and social responsibilities, sensitivity and empathy towards it.

3. **Drug Abuse**: causes and consequences of drug abuse and means of prevention.

1.5.2 **General Objectives Of Adolescence Education**

i. To provide authentic and accurate information regarding the physical, physiological, psychological and socio cultural dimensions involved with puberty.

ii. Provide training in life skills education

iii. To help adolescents understand the implication, causes and prevention of AIDS/ STD’s

iv. To inculcate a healthy attitude towards sex and a responsible sexual behaviour.
v. To make adolescents aware regarding the consequences of drug abuse and ways and means to protect themselves.

vi. To develop healthy interpersonal relationships such as valuing a healthy non-violent life.

vii. To develop gender relations and equity such as respect for opposite sex including respect for individuals from all walks of life, value the right abilities, self worth and self-esteem of each person.

viii. To broaden their career options.

1.5.3 Major Components Of Adolescence Education

NCERT (1993) organized the first national seminar to discuss the implications of introducing Adolescence Education in the school curriculum and highlighted that Adolescence Education boundaries extend much beyond education solely concerning reproductive health issues. It is concerned with the overall well being of adolescents. Following are the broad components of Adolescence Education.

1. Growing Up

Early adolescence is a period of major physical growth and change other than the infancy stage. During infancy, however the child is not burdened with the social value of physical transition. During adolescence the physical and physiological growth is accompanied by social and psychological value. Thus while the radical shift in physical appearance and physical status has an important biological function the same shift has profound influence on the young adolescent’s self-concepts. The result of adolescent’s intensified interest in their physical selves often takes its form in an increased awareness of their bodies and a preoccupation with one’s own image. Since adolescence is a period of change i.e. end of childhood and beginning of adulthood, it becomes essential to know what kind of changes occur in this period physiologically, psychologically and socially. At physiological level, adolescents show increased levels of physical and intellectual growth along with sex hormones released by various glands in the body. They show new urges and desires, become more aware of their bodies and powers and start showing interest in opposite sex. Psychologically the adolescents reach new peaks of efficiency and skills
and their thought process and reasoning ability too reach new heights as they become more efficient in dealing with theoretical, abstract, philosophical and complex concept and issues. They even become more independent of home i.e. psychological weaning. This component of Adolescence Education thus defines the critical issues associated with growing up.

2. HIV/AIDS

The last couple of years have borne the brunt of the spread of HIV/AIDS epidemic. Innumerable misinformation, taboos, prejudice and fear regarding HIV/AIDS are looming large with the young people falling in the category of the most vulnerable and exposed. Adolescents desire and seek more and more authentic information about the process of growing up, sex and sexuality. During this transitory period there is a total change of attitudes. Love and attraction for the other sex and the sexual urge generally commence at this stage. Ignorance of the facts and lack of right attitude can create unhealthy curiosity, which can sometimes lead the adolescents to resort to risky behaviors. This poses serious health risks with no factual information, no guidance about responsible sexual behaviour, and very little access to healthcare. With too little information many are victims of myths and misconceptions. The rapid spread of HIV/AIDS and the increasing evidence that younger people, including adolescents risk getting infected with HIV makes it imperative that they be educated on how to protect themselves. They are a powerful force for change in their own households, in the lives of their peers, and in the community. In the above context, Government of India has identified prevention among adolescents as an urgent and immediate priority for action and has drawn up a National Action Plan for HIV Prevention Education, of which a key element is to reach 100% of all secondary and senior secondary schools under Adolescence Education Programmes in the academic year 2005-06. Hence, the Department of Secondary & Higher Education and NACO have positioned the Adolescence Education Programme as a key intervention for preventing new HIV infections, reducing vulnerability to the infection and influencing positive behaviour development. The Programme is being implemented in most states / UTs across the country through the State / UT Departments of Education (DoE) in collaboration with the State AIDS Control Societies (SACS). This component of Adolescence Education thus
deals with content related to the causes and consequences of HIV/AIDS, preventive measures and individual and social responsibility towards persons having HIV/AIDS.

3. Drug Abuse
The incidences of substance abuse amongst adolescence are not uncommon. Feelings of invulnerability accompanied by risk taking tendency often lead to experimentation with drugs. A sensitization regarding this is primarily important so as to not only exposes them to the consequences of substance abuse but also help them identify and deal with situations wherein they can fall prey to drugs abuse and how to steer clear of such situations.

4. Life Skills
With adolescence the individuals now have to not only understand and examine their various social interactions but also show efficacy in dealing with the multitude of issues, experiences, and problems facing them. This requires certain specialized skills. Such type of skills, which contribute in developing coping strategies and adopting and adjusting to life, are called as life skills. WHO has defined skills as “the abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of every day life (WHO, 1997). These skills enable to translate knowledge, attitudes and values into actual abilities to know what to do/when to do/How to do? Life Skills also enable to behave in a healthy way and think and act with logic and sensitivity.

The different life skills are:

1. Self Awareness / Self Esteem
2. Decision Making,
3. Problem solving
4. Negotiating Skills,
5. Creative Thinking,
6. Critical Thinking,
7. Effective Communication,
8. Interpersonal Skills,
9. Empathy
All the skills described above are interlinked with one another. For example the decision-making skills is likely to involve creative and critical thinking and value analysis. The base of good interpersonal relationships is empathy and habit of good listening. Having learnt to cope up with emotions and stress also contributes to better interpersonal relationships with other.

1.5.4 Implementation of Adolescence Education in schools

The already overburdened school curriculum leaves little room for addition of Adolescence Education as a separate subject. Hence efforts will be needed to make it a part and parcel of the school content and processes of school curriculum, both by integrating it in the academic subjects and more importantly through co-curricular activities. The content of Adolescence Education owing to its sensitive nature require persuasion and preparation of the policy makers, educational administrators, teacher’s, principal’s, parents and other functionaries. Their support is very much needed or successful implementation. A credible and affirmative environment has to be build to successfully bring in the implementation aspect. The modus operandi for the inclusion of Adolescence Education in school curriculum involves the following approaches:

1. Curricular approach:

This requires an amalgamation of the objectives of Adolescence Education in the overall school curriculum and fusing the general school curriculum and Adolescence Education curriculum. The effectiveness of this approach depends on how effectively the content of Adolescence Education will be taken care of by textbook writers while writing, teachers while teaching in the classrooms and evaluators in the examination system. This stresses that there is a pressing need to prepare materials both in terms of content coverage and pedagogical aspects. Well-developed and suitably planned activity based modular training material is needed for training teachers and facilitators. Materials developed should focus on interactive and participatory approach of learning.
2. Co-curricular approach

A participatory, constructivist and practically oriented approach is basic requisite for the acquisitions of skills, which are promoted through Adolescence Education. Co-Curricular approach can be considered to be the most effectual way to commence the teaching of Adolescence Education in school without waiting for its incorporation in syllabi and textbooks. Owing to the traditional classroom setting and the much exploited age old formal method of teaching, the co curricular approach can easily break up the shackles and passes on the knowledge and information to the learner in an easily imbibed and reproducible way. It can be a more valuable option for skill building among students as both the teachers and the students are engaged in a dynamic process of learning by doing. Co curricular approaches like question box, value clarification, debates, adolescent friendly centers, role-play, case study, competitions, quiz, education corners, extra mural lectures, awareness weeks and counseling sessions can be utilized.

3. Training of Teachers

Considering the magnitude of students in school the teachers are the best alternative for implementing Adolescence Education programmes. The teachers should help the students identify their problems, try to cope up with stress and strain of adolescence period, help them appreciate their roles and responsibilities towards themselves, peers, opposite sex, elders and parents and develop the ability to say ‘no’ to the risky or undesirable situations. They have to not only provide accurate and clear information but also establish a relation of trust and confidence with the learner. The teachers first need to be equipped with the needed skills to communicate effectively with learners on Adolescence Education. The teacher should be equipped and well versed with the training package focusing on Adolescence Education topics and concerned issues.
4. Peer education

In peer education selected students with leadership qualities and communication skills are given training along with teachers or independently with the purpose of sharing information, developing positive attitudes and skills to counsel other students. The peers themselves are undergoing the same physical, emotional, social and psychological changes hence they can prove to be excellent source for Adolescence Education programmes. The thoughts and ideas could be exchanged easily and embarrassing situations that often appear when discussing with adults could be avoided.

1.6 Rationale Of The Study

Adolescence is one of life’s fascinating and perhaps most complex stages, a time when young people take on new responsibilities and experiment with independence. They search for identity, learn to apply values acquired in early childhood and develop skills that will help them become caring and responsible adults. When adolescents are supported and encouraged by caring adults, they thrive in unimaginable ways, becoming resourceful and contributing members of families and communities. There are no simple solutions, no single intervention that can respond to the multiple challenges facing adolescents today. Bursting with energy, curiosity and spirit that are not easily extinguished, they need access to information, skills and services. Society has an obligation to shepherd its young people through their adolescent years and to treat them with respect and understanding. It is in this context that the need for educational response at the school stage is strongly felt. Even before adolescents indulge in high-risk behaviours they need to be informed about the implications of the same. Adolescence is characterized by experimentation, peer group loyalty and the desire to act independent and thereby act as an adult. Today the younger generation has a lot more exposure owing to the onslaught of the information technology and the mass media. They are in a position to acquire information on any subject they want. The sources of information are many but they need not be always reliable. This situation places an adolescent in a particularly vulnerable situation. Apart from information regarding growing up, HIV/AIDS and substance abuse, the adolescents need to be instilled with certain life skills that will
enable them to handle all kinds of situations that they come across in their lives. It will enable them to assert themselves and say no when faced with negative pressures without any loss of identity and self-esteem.

The period of adolescence is also characterized by several kinds of high-risk behaviours like substance abuse, premarital sexual activity and anti social behavior. Adolescent's knowledge of sexuality, menstruation and reproduction is limited and often distorted (Planning Commission, 2001). The aim is to provide scientific knowledge to adolescents about various aspects of the process of growing up, in particular reference to the reproductive health needs, and thus enable them to cope with the problems during this transitional phase. Moreover, a number of studies lend support to the fact that adolescents desire and seek authentic knowledge on sex-related matters. But sex being a taboo in our society, like many others, there has been an absence of any authentic source of accurate knowledge on it. This creates anxieties and confusion among adolescents who fall prey to prevailing myths and misconceptions that are carried over to their adulthood, subsequently creating problems with serious implications.

There has been primarily an increase in attention towards adolescents because the current generation of adolescents makes up the 'largest cohort in history'. In India adolescents account for 21.4 percent of the population, yet their needs and concerns are largely ignored and neglected. Adolescents have been identified as a priority group by UNFPA in the Sixth Country Programmes(2003-2007). This programme will provide support to expand services to meet the reproductive health needs of adolescents as a part of ensuring a healthier, safer and more rewarding growing-up process. An educational intervention for them is strongly felt as the need of hour. This is particularly so in India because the school curriculum does not include the crucial elements associated with growing up. There are contents in biology on the reproductive system, but education in these elements cannot be complete by giving simply the biological information. There is need to focus on the physiological, emotional, socio-cultural, intellectual and moral dimensions along side. Adolescent education can be conceptualized in terms of providing authentic knowledge of the critical concerns in order to inculcate in adolescents a rational
attitude and responsible behaviour towards issues and problems of adolescence bringing about a marked influence on their attitude, behaviour and value orientation.

The consensus for introducing adolescence education as an essential component of school education stems up due to variety of reasons like:

1. Adolescents are future citizens of the country and a valuable human resource.
2. They have a right to healthy life, nutrition, education, recreation and freedom from violence and abuse.
3. They have a right to information about their bodies, diseases and their prevention, health care services counseling etc.
4. Adolescents desire and seek accurate knowledge on sexual development they experience.
5. In lieu of proper education not being imparted they resort to media and other sources, which exposes such matters in a crude manner.
6. AIDS pandemic has laid the urgency to introduce such educational intervention.
7. Substance abuse, the incidences of which are on a high rise.

Thus Adolescence Education is concerned with learning about living, family and social relationships and personal development. It is not simply contend with the transfer of values and information but aims in assisting to develop the ability to understand themselves and the society in which adolescents live to learn to think independently, to work out and clarify their own values and to evaluate and use information’s effectively in making responsible decisions about their lives. Skills based pedagogy has proved to be the best ways of prevention against HIV/AIDS.

In view of this it is thought to be extremely crucial to introduce Adolescence Education in schools and make it an integral part of the school curriculum. The main aim of Adolescence Education is to explore the possibilities of converting the school curricular content into meaningful activities that would result in skill building among adolescents. It is in this regard that the present study was conceptualized so as to attempt to design an Adolescence Education programme for Indian adolescents.
1.7 Research Questions

1) What are the most basic needs and problems of the Indian adolescents?

2) What sort of Intervention programme is needed to cater to the Adolescents?

3) To what extent is it possible to design and implement an Adolescence Education programme?

4) Are the secondary school teachers aware of the concept of Adolescence Education?

5) To what extent do the secondary school teachers impart Adolescence Education through various curricular and co-curricular activities?

6) How successfully can the elements of Adolescence Education be integrated with the subject matters within the secondary school curriculum?

7) Which are the plug in points in different subject content of the secondary school curriculum for imparting Adolescence Education?

8) What will be the effectiveness of such Adolescence Education programme with respect to long term gains in the lives of the adolescents?

1.8 Statement Of The Problem

"Development of a Training Programme on Adolescence Education for Secondary School Teachers and Students and Studying its Effectiveness."

1.9 Objectives Of The Study

1. To find out the awareness level of the secondary school teachers regarding adolescents and Adolescence Education.

2. To find out the awareness level of the students of IX th Std regarding adolescents and Adolescence Education.

3. To identify the plug in points from each subject of the secondary school curriculum which can take a center stage in Adolescence Education.

4. To develop training programme for imparting Adolescence Education

5. To implement the training programme on Adolescence Education
To study the effectiveness of the training programme in terms of the impact on the students, teachers and overall school environment.

1.10 Explanation Of The Terms

In order to bring about further clarification regarding the present study an explanation of the important terms in context of the study are presented below:

Training programme: A Module based programme focusing on Adolescents designed to meet the primary goals of Adolescence Education to be imparted to the secondary school teachers as well as the secondary school students.

Adolescence Education: It may be defined as an educational endeavour to provide learners with an appropriate and adequate framework which fosters the adolescence to develop in a holistic manner keeping in view the physical, psychological, social, intellectual and moral dimensions.

Secondary School Teachers: Those teachers teaching Std VIII to Std X.

Secondary School students: The students studying in Classes VIII to X are referred to as secondary school students

Effectiveness: It refers to gauging the extent of successful learning and practicing of the contents of the training programme in Adolescents. It is interpreted in terms of the modifications in behavioural terms alongside with attitudinal changes.

1.11 Delimitations Of The Study

For the study the secondary schools following the syllabus prescribed by Gujarat Secondary Board of Education were considered. The present study was conducted in one of the English medium secondary school of Vadodara city. The sample of the study was delimited to only the IX th class students of the selected school as the study was designed to cater to middle adolescents. Regarding the teachers comprising the sample, only those who were teaching the IX th standard were selected.