ENFOLD PROACTIVE HEALTH TRUST

DEMYSTIFYING SEXUALITY HANDBOOK

–

FOR STUDENTS, TEACHERS AND PRACTITIONERS OF SOCIAL WORK



For use in conjunction with Demystifying Sexuality Reference Book
Looking at sexuality with a Rights-based, Restorative and Gender Transformative Lens

enfold

Demystifying Sexuality Handbook
– for students, teachers and practitioners of Social Work

For use in conjunction with

Demystifying Sexuality Reference Book[1]
– Looking at sexuality from a Rights-based, Restorative and Gender Transformative Lens

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Enfold Proactive Health Trust
No 42, 3rd main,
1st cross, Domlur 2nd Stage,
Bengaluru- 560071, India
www.enfoldindia.org

Demystifying Sexuality Handbook
– for students, teachers and practitioners of Social Work

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Arlene Manoharan has a Masters degree in Social Work with specialization in Family and Child Welfare from Tata Institute of Social Sciences, (TISS). She has over thirty years of experience in the field of professional social work. She authored case studies on cases on women survivors of domestic violence as a contribution to a TISS publication - 'Shades of Courage -Women and Section 498 A (IPC)', (1997) while at Special Cell for Women in Distress, Police Commissioner's Office, Mumbai (a Field Action Project of TISS). She initially worked with children in street situations in various civil society organizations over 9 years. She then worked at the Centre for Child and the Law, (CCL)-a research centre of the National Law School of India University (NLSIU) for 19 years. At CCL-NLSIU, as Research Fellow, she headed the Juvenile Justice Program and also led the Centre as Centre Coordinator for 2 years. She engaged in action- research, working at the grassroots within government run child care institutions while also undertaking research, training, teaching and advocacy to inform the formulation and reform of policy and laws relating to children as well as their effective implementation, at both local and national level. She is a national level trainer at various academic and training institutes and was a member of various statutory and other committees. She has conducted training for Child Welfare Committees, Juvenile Justice Boards, State Commissions for Protection of Child Rights (SCPCRs), government functionaries, NGOs and Law Teachers at State and National level; and also developed curriculum, authored self-

instruction material and taught modules of NLSIU's PG Diploma on Child Rights Law. She has also published extensively. She currently works as an independent child protection specialist; consulting part-time as the Head of the Restorative Practices team at Enfold.

Neeraja Sajan, PhD scholar, TISS Mumbai is a sociologist and intersex studies scholar who has been working for and researching various aspects of the rights of and issues faced by intersex persons in India since 2014. In 2021, she was awarded a Fulbright-Nehru Doctoral Research Fellowship to pursue part of her doctoral research in the US. Her research focuses on intersection of medicine, healthcare and intersex persons rights. Her work and allyship to the intersex community was formally recognised when co-founders of Intersex Human Rights India (IHRI), a support platform and group for intersex persons invited her to be a member. Her work led to her being a panelist at the first national seminar on the rights of intersex people in India organised by NIMHANS, Bengaluru and Solidarity Foundation, Bengaluru (an NGO) in 2017 and the first national LGBTI Health Symposium organised by PGIMER, Chandigarh. Among her work are the guidelines on the rights of intersex persons for law, policy, healthcare and media professionals and general public which she co-authored in collaboration with Solidarity Foundation in 2019. She also has reviewed Guidelines on the Rights of Intersex Children authored by Centre for Child and Law, National Law School of India University & Solidarity Foundation in 2019. She brought her experience and perspectives gained through her work to make this handbook a practical guide for professional social workers and students of social work in their work as to how to incorporate intersectionality, positionalities, inclusiveness and understanding in often overlooked aspects of sexuality and diverse identities.

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This Handbook is part of a project aimed at preventing gender-based violence by developing and implementing a formal curriculum for teachers and students of undergraduate and graduate studies from nursing, social work, psychology, education, special education and allied disciplines. As envisaged in the project, this curriculum is based on gender equity, personal safety and sexuality education and has been developed using rights-based, restorative and gender transformative approaches. We gratefully thank the Ford Foundation for supporting this project.

Introduction

This Handbook on Demystifying Sexuality and Social Work is meant for use by both practising professionals and students of social work, in conjunction with the Demystifying Sexuality Reference Book (henceforth referred to as the Book), published by Enfold Proactive Health Trust in June 2021. The Book focuses on topics that are often overlooked in conventional education. However, the knowledge and understanding of these topics, especially for social workers, cannot be emphasised enough. This is given the considerable lack of comprehensive human sexuality training in Social Work Education in India and its importance in understanding and supporting all people, especially those from marginalized communities with little or no access to sexuality education, to live better lives. This may be in enabling them to not just resolve problems related to sex and sexuality, but to also experience pleasure without guilt and enjoy sexual well-ness.This Handbook lays out Case scenarios based on issues and themes featured in various chapters of the Book, with reflective questions for self-reflection, and group-discussion too. Each Chapter also contains a list of suggested activities that may be undertaken. This is intended to support the users in understanding the topic in greater depth and to enable application of the same in their respective fieldwork settings.

As a Social Work Educator, you may first want to identify your own sexual script, and then assess and reflect on your own feelings, attitudes, and notions of sexuality, bodily and sexual autonomy, implicit bias, and sexual oppression; and your understanding of how the development and expression of sexuality are impacted by social norms, oppression and violence. This may serve to prevent reinforcement of bias and prejudice and exacerbate social shame and stigma about sexuality in the classroom. You may then facilitate discussion on the topics in each Chapter, by using the Case Scenarios and the accompanying questions that are suggested to facilitate self-reflection and discussion in the classroom. You will need to prepare for the session by listing core messages that would need to be either arrived at through group discussion, or relayed to the students in response to the suggested questions, as well as other questions that may come up in the classroom, by relying primarily on the content in the Book. *Some additional core messages that may be conveyed have been provided in the Annexures accompanying each chapter of the Handbook, and may be circulated to the students after the session, should you deem it fit*. These additional core messages are not comprehensive, and should not be used in isolation. During the classroom discussion, you may also consider inviting the students to identify and discuss the application of specific Social Work principles and methods in each Case. An initial list of Suggested Activities has also been included after many of the Case scenarios. These activities, (or a customized version of the activity based on their specific field setting) may also be assigned to the students, as appropriate. You may consider adding suitable activities for self-reflection as well as for research, individual assignments, group work, networking, advocacy, etc., based on what you think the students are capable of doing at their respective levels of learning.

As a Social Work student you may want to engage with the content of the Book and this Handbook in a reflective manner, placing it within the frame of your own journey of self-reflection as well as the social work theories and principles that you are learning as part of your ongoing Social Work Education.

Adopting an intersectional lens and understanding positionalities is an integral aspect of professional Social Work, and therefore needs to be applied in all aspects of Social Work practice. Social workers, Faculty and students must keep in mind their own positionality and ensure that it does not hinder them from giving their best professionally. The effectiveness of this Handbook will increase when the Case scenarios are reflected on keeping in mind the intersectional framework and positionality, as well as social work theories, principles and methods.

Chapter 1: Diversity in Sex

Here are some suggestions for activities you may consider assigning to students as a supplement to the content in the Demystifying Sexuality Book.

Activity 1

Assess yourself on the level of your comfort with talking about sex and sexuality in your personal life with family and friends, and in your professional life with your colleagues and even your clients, as appropriate. Write a few paragraphs about what you think is 'normal' in the context of sex and sexuality. What has shifted in your thoughts, feelings and attitudes after reading Chapter 1 of the Book?

Activity 2
Design and conduct a short survey to find out what people in your family, or your friends circle were told about the similarity and differences between the bodies of different sexes and genders. Collect information about their doubts, thoughts and feelings they have about people from different genders, including the trans community. Reflect on these and bring doubts or concerns you may have to the classroom discussion. Remember to maintain confidentiality by changing the identities of the people you are referring to!

Activity 3

Prepare a list of words or phrases commonly used to describe people who identify as male, female or from the trans community. Reflect on these and think about whether these are empowering or stigmatizing. Discuss this with your classmates and try to find positive language that could be used to replace disparaging or stigmatizing terms.

Activity 4
As a social work student or Faculty member, try and assess your own understanding about the human body and sexuality. Are there any gaps? Are there topics you would like to know more about? Are there topics you would like to discuss but are awkward to do so? Do you have any fears or anxieties about sex and sexuality? Reflect on how your own attitude towards human sexuality has or can influence your social work practice. Continue journaling through this course, to document the shifts in your thinking, your values and beliefs surrounding human sexuality.

Activity 5
Find someone you trust - who identifies as being someone with a gender that is different from yours. Initiate an open honest conversation about the human body and its diversity. If possible, share your doubts, fears, hopes and dreams about your own body.

Chapter 2. Structure and Function of Sexual and Reproductive Systems

Case 1: Lakshmi and Meena

You have recently joined an NGO that works on empowering women and girls as a social worker. As part of a Women's Day celebration, the NGO organized an awareness program for all the girls attending the tailoring classes that they conduct for girls aged 15- 18 years of age on 'Respect for One's Body - Celebrating Womanhood.' The speaker showed videos about women's anatomy and asked the girls if they had any queries. Lakshmi, a 16 year old girl who hails from a traditional family, and has never been to school, is confused but awkward to ask a question during the session, as no-one talks about these things with her in her family or extended family. Though she is shy, she connects well with you, as you have developed a good rapport with the girls, while conducting literacy classes and life skill education. After the session, she brings a close friend of hers - Meena, who also attends the tailoring class, along with her, to you to ask you to explain more.

Suggested Questions for Reflection and Discussion on Case of Lakshmi and Meena

1. Are you confident of having this conversation with these two young girls? How would you handle this situation if you are not fully confident?
2. What is reproductive health? How has it been defined?
3. Are you yourself comfortable using the names of the human sexual and reproductive organs while talking with your colleagues, friends, and family? Do you think it is important for social workers to familiarize themselves with these terms and use them in both one's professional capacity as well as in one's personal life and private capacity while engaging with people? Consider breaking the silence and broach the subject with someone you are comfortable with, by talking about the various parts of the sexual and reproductive systems and what you feel about them. Notice your own feelings. Reflect on what work you may

need to do on yourself to be confident to talk about sex and reproductive systems as a professional Social Worker.

4. What are the biological terms that are used to describe the various parts of the genitalia in the local language?
5. Lakshmi tells you that both their families are very traditional, and so family members would beat them if they heard they were talking about these things with others. Knowing this, would you still provide Lakshmi and Meena information about reproductive health? If so, why? If no, why not? Are there any ethical concerns you may need to take into consideration?
6. Prepare a list of common myths about the structure and function of sexual and reproductive systems. Pair up with a fellow classmate and discuss these myths in the light of the content provided in the Book.

Suggested Activities

Activity 1:

Do a mini-survey to find out whether there is age-appropriate and child-friendly resource material available in your local language that could be used for personal safety and sexuality education of people of different ages.

Activity 2:

Consider working in groups to talk about these terms and find suitable words in your own language that could be used, - words that describe these body parts accurately and are not violative of a person's dignity.

Annexure 2: Additional Core Messages for Case 1: Lakshmi and Meena

1. According to the World Health Organization (WHO), "Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so."[2]
2. See Chapter 2 of the Book for information about anatomy for the answer to question 1. However, for translation of these terms into the local language, either contact a Gynaecologist or contact an NGO working in the field of reproductive health, sex and sexuality.
3. Yes, it is important for social workers to use the terms applicable to the various parts of the human anatomy in both professional and personal life, so as to model respect for the human body, and help remove the embarrassment or shame while talking about it.
4. Sexual and reproductive health is a basic human right. All human beings should have access to age appropriate scientific information about reproductive health and be educated about their right to reproductive health. Greater awareness of reproductive health can significantly

[2] See World Health Organization, https://www.who.int/westernpacific/health-topics/reproductive-health

increase gender equality, maternal and neonatal health and enhance choice related to family planning. It can also reduce risky behaviours and prevent unwanted pregnancies or sexually transmitted diseases. Though both Lakshmi and Meena are children, in fulfilment of social work ethical principles, you would be doing the right thing by supporting them to exercise their right to self-determination, and their right to participate. You may consider explaining the concept of rights and the meaning of these rights to them, and help them to build their own sense of dignity and rights in claiming these rights, without fear, though they may have to navigate their way around possible negative reaction from their family members, if they got to know that they were learning about these aspects of life. You could assure them of your ongoing support with regard to discussing sex and sexuality in private, and also in case they face any harm, should there be an adverse reaction from family members. If Childline is operating in that District, share the Childline number with them.

Chapter 3: Diversity in Sex, Gender and Sexuality

Case 1: 'A'

A 28 year old transman 'A', comes to you and tells you he has been disowned by his family due to his gender identity. He has nowhere to go except some transgender people whom he had befriended a long time ago. They are all living together in a rented place, as all of them have also been disowned by their family members. They are ostracised and are being looked upon with disgust in their locality. The neighbours are not happy with them staying there, although the owner himself has no problem with them. They are going through a difficult time trying to gain acceptance and employment. Though they feel a sense of solidarity amongst them, they are all depressed, facing sustained rejection from their own families, neighbourhood and the wider society.

Suggested Questions for Reflection and Discussion on the Case of 'A':

1. What can a social worker do to support 'A' and his friends?
2. What does the Transgender Persons (Protection of Rights) Act, 2019 say about employment opportunities? Discuss how this Act's provisions are different from the 2014 National Legal Services Authority v. Union of India (NALSA) judgement by the Supreme Court of India?
3. Shunned and discriminated transgender people living together have been found to be HIV/AIDS high risk groups. Their rejection in society may force them to take up sex work to earn a living. What support can be extended to them in such a situation? Which kind of organizations could be roped in? What are the policies and systems in place in your State to support the LGBTQIA+ community?
4. How will you explain the development of gender identity to a person with a trans identity?

Annexure 3: Additional Core Messages Case of 'A'

1. While similar situations are a reality for thousands of trans people in India, there have been efforts in different parts of the country to bring about a change. A group of transwomen in Tamil Nadu are successfully running a dairy farm while in other places there are trans women running restaurants, etc. The dairy farm was set up with the help of the then District Collector and many organisations and social workers and activists are supporting trans people to set up their own business in dairy farming.
   Make a few suggestions on how students can help trans persons start or collaborate with such a venture.

Case 2: Anita

A child named Anita, aged two years, was brought to a hospital by her parents. Anita is an intersex child with ambiguous genitalia. The parents have been referred to you, the social worker working in the hospital, for psycho-social assistance. They report that they have decided to raise the child as a girl and want to perform a 'sex-corrective' surgery to change the appearance of the child's genitalia to one associated with the female sex.

Suggested Questions for Reflection and Discussion on the Case of Anita:

1. What are the issues in this scenario?
2. Do the parents have a right to choose the sex and gender of the child?
3. Which of the rights enshrined in the UN Convention on the Rights of the Child, 1989 (UNCRC) are being deprived/violated in this situation?

Annexure 3: Additional Core Messages for
Case of Anita

The sex and gender of any human being, even a child, cannot be decided by others. It is only the individual - the person - who can and should self-identify their gender. The surgery being proposed in the scenario is termed as intersex genital mutilation which has been condemned as torture by United Nations[3] Organisation and intersex people and activists around the world. As mentioned in the book, in April 2019, in a landmark order, the Madras High Court banned unnecessary, sex reassignment surgeries on intersex babies in Tamil Nadu. Unless there is a threat to the child's life, no medical intervention should be carried out. Instead, the family can be provided counselling as to how to raise children in a gender neutral fashion, how to answer inquisitive and insensitive questions from family and neighbours. Later counselling should also be offered to the child as the child is growing up, to enable a better understanding of the sex variation they have and to navigate the challenges they may face growing up in a society which focuses mostly on heteronormative binary identities of male/female sex and man/woman gender identities, which can be very traumatic. Any medical intervention in adulthood should only be carried out with the person's express wish and informed consent.

[3] See https://www.statewatch.org/media/documents/news/2011/nov/committee-against%20torture-germany.pdf

Case 3: Tarik

Tarik, who is 26 years of age, confronted his gay friend Amrit saying that being gay is a sin. He argued that people are not born gay, but learn behaviours after being influenced by various external factors that may cause people to take it up as a lifestyle. He also quoted verses from scripture to support his views. He goes on to say that though scientific studies have proven that it could be inborn, he firmly believes that humans are bound to make mistakes and that no scientific research undertaken by humans can be absolute.

Suggested Questions for Reflection and Discussion on Case of Tarik:

1. What key points would you bring up if you had a chance to discuss this issue with Tarik, if he were a student who had expressed such views in your class?

Suggested Activities

Activity 1:

Reflect on and arrive at ways in which people like Tarik could be sensitized about the LGBTQI+ community. Request students to undertake research to identify suitable websites and videos that provide scientific and rights based content on this issue.This could include studying the Report of the United Nations High Commissioner for Human Rights on 'Discriminatory laws and practices and acts of violence against individuals based on their sexual orientation and gender identity.'[4] This report was submitted on 17 November 2011 to the Human Rights Council pursuant to its resolution 17/19, in which the Council requested the United Nations High Commissioner for Human Rights to commission a study documenting discriminatory laws and practices and acts of violence against individuals based on their sexual orientation and gender identity, and how international human rights law can be used to end violence and related human rights violations based on sexual orientation and gender identity.

Activity 2:

Either on your own, or in a group, study the United Nations Office of the High Commissioner on Human Rights Intersex Fact Sheet.,[5] and reflect on it.

Activity 3:

Do some research and prepare a resource bank of people hailing from across any part of the spectrum of sex, gender and sexuality who have successfully navigated the challenges they faced, demonstrated resilience and are now role models for the LGBTQI+ community, both from India and abroad.

Activity 4: Reflect on and think about barriers or challenges that come in the way of you being an ally of the LGBTQI+ community? In what way can you address these challenges and overcome these barriers in order to demonstrate professional social work values and principles and effectively work with individuals from this community on this issue?

[4] Available at https://www.ohchr.org/documents/issues/discrimination/a.hrc.19.41_english.pdf

[5] Available here https://docs.google.com/viewerng/viewer?url=http://interactadvocates.org/wp-content/uploads/2016/02/United-Nations_FactSheet_Intersex.pdf

Annexure 3: Additional Core Messages on Case of Tarik

1. While everyone has a right to practice their own religion, no-one has the right to deny someone else of their right to their own identity and way of life. Religious beliefs should not be used for discrimination, excluding people, denying them their rights or to stigmatize and harm someone else. It is the duty of every social worker and every responsible citizen to sensitize and educate people about members of the LGBTQI+ community, as persons with equal dignity and rights.

Chapter 4. Development of Gender Identity and Sexual Orientation

Case 1: Jagdeesh

Jagdeesh is a 30 year old IT professional with a high paying job. His parents have been pressuring him to get married. His neighbour, Maya, has been friends with him since school. When Maya expresses romantic interest in him indirectly, Jagdeesh discourages her by telling her that he may not be good husband material, but is never able to express what he really feels and why he doesn't want to get married to her. Jagdeesh subsequently succumbs to parental pressure and gets married to Maya. A year later, Maya is frustrated, because she believes that Jagdeesh is not interested in having sex as he is impotent. She feels cheated, their relationship deteriorates and they get a divorce three years later.

Jagdeesh later meets Ameen, a 40-year-old bachelor, at his workplace. Jagdeesh felt very comfortable and happy spending time with Ameen. For the first time in his life he felt he had met a 'soulmate.' Ameen also feels the same way about Jagdeesh. They soon began to enjoy a sexual relationship. Jagdeesh is not sure how to proceed, as he is concerned about how his parents and extended family will feel about their same-sex relationship. Jagdeesh approaches you, a social worker, who lives in the same neighbourhood. He is wondering if he should attend spiritual discourses or go for counselling.

Suggested Questions for Reflection and Discussion on the Case of Jagadeesh:

1. Do you think Maya and Jagdeesh did the right thing in getting divorced? Or should they have worked at saving their marriage?
2. How would you respond to Jagadeesh's idea about attending spiritual discourses?
3. How would you respond to Jagadeesh's idea about going for counselling?
4. How would you support Jagdeesh to express himself in more assertive and respectful ways?
5. Why do you think Jagdeesh could not tell Maya why he thought he is not good husband material?
6. Discuss various options for responding to critical comments from family and colleagues that a person in Jagdeesh's situation could consider?
7. Which Case Work principles would you apply while working with Jagdeesh, if he was your client?

Annexure 4: Additional Core Messages for Case of Jagdeesh

1. In our society, many persons (cisgender men and women, persons of diverse gender and sex identities, sexual orientation) are pressured into getting married for various reasons. One common reason that is cited is that " they are at, or past the age of marriage." Often marriage is seen as a 'treatment' for homosexuality, asexuality, non-conforming gender expression, diverse gender identities, etc. Resisting such pressure can be extremely difficult for many people.
2. In this scenario, despite being an educated, 30 year old, employed cis-gender man, Jagdeesh is not able to live according to his wish. Even though he made it clear to Maya and his family that he was not interested in getting married to her, he felt compelled to listen to his parents. Being forced to live in an intimate relationship with someone is not conducive for a good, healthy relationship. However, many in our society believe that once people start living together, then they would automatically start forming a liking towards each other over time and form a relationship. In this scenario maybe Maya also believed the same. But when it did not materialize she felt cheated. Was it Jagdeesh's fault as he had already told her he was not interested in marrying her? Still Maya also suffered the consequences. Unfortunately, many in our society go through the fate of Jagdeesh and Maya.
3. Did you think Jagdeesh and Ameen were gay? Remember that we cannot assume a person's identity. Jagdeesh and Ameen may also be asexual or bisexual. Just because a person does feel attracted to women, does not mean they will be attracted to every woman. Jagdeesh might have been attracted to women but might not have been attracted to a Maya as a person and being forced to marry her might have caused him to resent her. As social workers we need to keep our minds open to all possibilities and remember to not get mired in stereotyping.

Case 2 : Bantei

The following is a story shared by a 21 year old Khasi named Bantei, living in Guwahati, who identifies himself as gay and a member of the LGBTQIA+ community. At home, he would apply makeup. His relatives would ridicule him and call him 'hijra.' They felt that he had let his clan title down. They accused him of being a sex worker and once beat him in public at a taxi stand. He felt ashamed and humiliated as he had been made a laughing stock in his community. He started recording the verbal abuse that he faced from his family members and kept it as evidence. He shared that he did not feel safe at home, or outside the home, as he did not feel safe to walk on the road on his own, for fear of being judged or beaten. He has started avoiding gatherings and even stopped going to church.

A month earlier, Bantei had attempted suicide and was admitted in the Intensive Care Unit of a hospital. He reported that he also had suicidal ideation when he was in his teens and attempted to jump off a building. He narrated that when he sits in his room alone, all the memories of him being shamed by his family members in public, comes flooding into his mind and makes him feel depressed. Having benefited immensely from counseling and sexuality education, he now feels that awareness about gender fluidity should take place at all levels such as educational institutions, religious institutions and within the wider general community too.

Suggested Questions for Reflection and Discussion on the Case of Bantei

1. Do you think Bantei's suicide attempt during adolescence could have been linked to society's response to his sexual orientation?
2. Could his suicide ideation/attempt been prevented? If yes, how?
3. Is homosexuality a crime in India?
4. What are the religious beliefs around sexual orientation in your own community? What are your own thoughts and feelings about this as a social worker? How would you engage with ethical dilemmas you may face when your own religious beliefs conflict with professional social work principles and practice, particularly in the area of sexual orientation?

Suggested Activities

Activity 1:

Work in groups and prepare a draft curriculum for an awareness programs on diverse identities of sexual orientation, gender and gender expression (including core messages, video resources, names of resource persons who could come in person or online, etc), for

a) School students of different age groups;
b) Teachers;
c) A religious group from your own religious community.

Activity 2:

Request students to access the website of the Social Psychology Network and spend some time to read and do the activity on Understanding Prejudice - The complexity of sexual orientation, available at https://secure.understandingprejudice.org/teach/activity/orient.htm

Annexure 4: Additional Core messages for Case 2: Bantei

1. This case points to the intersectionality of different identities. Bantei is a tribal who is gay, has non-conforming gender expression and has a practicing religious identity as well. Use this opportunity to discuss on topics such as intersectionality, religious beliefs on sexual orientation in various religious communities, discrimination towards people of diverse identities, lack of discourse on tribal people of diverse identities, etc.
2. Discuss the importance of ethical and professional social work, including the need for oversight and supervision from seniors/experts when faced with ethical dilemmas. If systems for supervision are not in place, discuss how these may be created, and emphasize how even practitioners who have been in the field for some time, should be humble enough to recognize the need for peer-support, meeting regularly to discuss their work and to also seek guidance from experts.
3. Discuss how Social Welfare Administration could be enhanced by ensuring peer-discussion, oversight and supervision are embedded in job descriptions and in performance appraisals too.

Chapter 5: Gender Bias

Case 1: Keerthi

Keerthi, 25 years of age, is married with two young children aged five and three years, respectively. Keerthi has registered for employment under the Mahatma Gandhi National Rural Employment Guarantee Scheme, (NREGA), whereby one can get employment for 100 days. One of the guidelines of the scheme is equal pay for both men and women. However, Keerthi was not being paid on par with the men. You are a social worker, working in an NGO that deals with labour issues in that community. When speaking with Keerthi, you ask her what she felt about this. In response Keerthi says "We are women so we are okay with not being paid equally with men as we cannot work like men. If we are being paid equally, then men will not want to register, as they will feel inferior. Then they will stay at home and not go to work."

Suggested Questions for Reflection and Discussion on Case of Keerthi

1. What points would you bring up in order to enable Keerthi to understand the concept of gender equity?
2. Is there something you could do to sensitize the men folk?

Annexure 5: Additional Core Messages for Case of Keerthi

Discuss how the social conditioning of women contributes to the furtherance of discrimination against women - How, with hundreds of years of patriarchal socialization, women have been turned into vehicles and enforcers of patriarchy.

Case 2: Raja

Raja is a 16 year -old boy, studying in the 9th grade. He has three older sisters. Their parents don't want the girls to go out and work, as they expect them to get married and be home makers, like most of the women in the village. They also expect Raja to work and to support the family along with his father, and to contribute to the dowry that will have to be paid for the wedding of his sisters. However, Raja wants to study further. He is beaten repeatedly by his parents and forced to take up small jobs, which he does not wish to do. Soon he gets into drug addiction and becomes detached from his family. His childhood friend brings him to you for help and advice.

Suggested Questions for Reflection and Discussion on Case of Raja

1. In your opinion, what life skills do you think Raja could learn to help him navigate through his current situation and move forward?
2. If Raja's parents and sisters are willing to come to you to resolve these problems, what are the points you would bring up and help them to think about?
3. How can Raja overcome his drug addiction? How can you support him in this?

Suggested Activities

Activity 1

Plan a workshop or program to address domestic violence by parents against their children.

Activity 2:

Do a mini research to identify de-addiction services in your District, and submit this to the District Child Protection Unit, which is responsible for maintaining such a database, as required under the JJ Act, 2015.

Activity 3:

Do a mini research to identify videos, games and activities that could be used to sensitize families about gender and translate these into the local language.

Activity 4:
Do a mini research and compile a list of Youtube videos that help to break taboos about menstruation and organizations spreading awareness about periods in India and abroad.

Annexure 5: Additional Core Messages for Case of Raja

1. Conventionally when we speak of gender discrimination, only oppression or discrimination of women is highlighted. Discrimination against transgender people might also be spoken about. But discussion on bias against people of other diverse gender identities or even awareness about other identities is very less. Another very often overlooked aspect of gender discrimination is the discrimination faced by cisgender men because of their gender. In this scenario, Raja has to give up his dream of higher education and start working despite being the youngest child because he is the boy. There are many other everyday matters that can show us how they are also discriminated against. For example, in most heterosexual marriages, it is taken for granted that the man should be taller than the girl. Many doctors have advised parents of intersex children with a particular endocrinological intersex variation, to bring the child up as a girl, since people with that variation will have somewhat limited vertical growth and a short man will not be able to marry! This is how deeply gender stereotyping and discrimination works in our society. However, in patriarchal societies, the extent and the nature of gender discrimination faced by cisgender men is much less in comparison with any other gender. Thus equating a particular gender's discrimination to the

discrimination against cisgender men is not appropriate. While discrimination against cisgender men should not be dismissed it is not, in most cases, comparable.

Chapter 6: Body image and Self-esteem - their influence on sexuality and well-being

Case 1: Iba and Rumi

Iba is 20 years old, and has a poor self-image. She has not fared well in academics or extracurricular activities in school and college. Her classmates used to tease her about being overweight, and this only pushed her further into stress eating. She is in a romantic relationship, and they have been seeing each other for about a year. Iba thinks Rumi is a nice person and is also considering marrying him. There are, however, some red flags that concern her. A couple of times, Rumi got very upset with her when she spoke to two of her male college mates. He became suspicious and got into an argument with her and slapped her. The next day he was apologetic and asked her to forgive him. He said that he loved her and wanted to take care of her and assured her that he would never do it again, ever! However, the same thing happened again just after a week, and this time he said that he did it because he loved her and did not want her to get into the wrong company, or for anything bad to happen to her. Iba was desperate to hold onto the relationship, as she was very lonely and didn't think that anyone else would show any interest in her. So though she was extremely upset with his behaviour, she remained silent. The very next day, Rumi again proclaimed his undying love for her and even asked her to marry him.

Suggested Questions for Reflection and Discussion on the Case of Iba

1. If Iba discusses the situation with you, what are the issues you could bring up with her, to help her better understand her situation and help herself?

Suggested Activities:

Activity 1

Divide the class into three groups. Tell them to prepare a script and enact role plays involving a conversation between Iba and Rumi in the following scenarios. The scenes should involve, but not necessarily be limited to the following:

i) A social worker works with Iba and supports her in developing self-esteem and assertive behaviour, finally resulting in her being empowered to challenge Rumi and demand respect from him as her partner.

ii) scenarios where Rumi dismisses Iba's concern and Iba's assertive reaction towards it as being 'over-sensitive' and alarmist - after all he had 'only' slapped her - and promises never to do it again.

iii) scenarios where despite Iba's assertiveness Rumi justifies his actions as the norm and Iba's reaction as ultra-feminist and tells her to 'get real' as no-one would marry her because of her obseity, and how Iba responds to this.

Facilitate a discussion on Self-esteem and body image based on the role plays.

Activity 2

As a social worker, how would you help Iba build her sense of self-worth, and empower her to make a good decision in terms of her relationship with Rumi and the future that lies ahead of her?

Annexure 6: Additional Core Messages for Case of Iba and Rumi

Iba is in a relationship that is beginning to be abusive. From the given information, Rumi seems to be over possessive and suspicious of Iba's friendship with other men. Unlike many people in her position, she has already identified cause for concern and doesn't seem to be making excuses for the abusive behaviour of her partner. But she still likes the person and desperately wants their relationship to work, because of her poor body image and low self-esteem.

Many times people feel that their partner's behaviour will change after marriage! Moreover, Iba has a belief that her body and mind both do not meet the social norms of beauty and intelligence. Her low self-esteem, and erroneous notion that marriage would help her feel more secure, is pushing her into making life decisions that may be putting her at risk. Counseling and therapies such as Neurolinguistic Programming could be considered to enable her to alter limiting beliefs she is harbouring about herself. She then needs to learn assertive behaviour and decision making skills too.

The most important point to be addressed here would be for Iba to recognize that she is worth it and that no-one has a right to abuse her. She needs to be supported to hold Rumi accountable for his abusive behaviour and see if Rumi takes corrective action before contemplating the future of their relationship. The idea is not to get personal assurance or promises of change but to see if the person takes concrete steps towards a change in behaviour - for example joining Life Skills programs on how to express one's emotions appropriately, how to express anger in nonviolent ways, how to discuss one's apprehensions respectfully.

Chapter 7. Attitude towards Sexual Health and issues with Reproductive Health

Case 1: Anjali, Arun and Ashwini

Anjali is a lecturer, aged around 52 years of age. Her husband Arun, aged 55, who had a good corporate job, has been laid off due to COVID-19 and this has made him lose confidence in himself. Since he is diabetic and obese with other underlying health conditions, he took extra precautions and diligently followed the COVID-19 protocols, not going out of the house at all. He used this as an excuse and politely refused to even go and meet his friends. Though Anjali was permitted to take lectures online due to the pandemic, recently she had to go to work in person, commuting to work at least one hour each way. They had decided not to permit their domestic help to come and work inside the home, for fear of her carrying the virus. Anjali and Arun's sex life had deteriorated significantly over the past year, and this is leading to conflict between them too. They had a little girl, Ashwini. Though they had built a loving relationship over the years, they were

now confused and irritable with each other, and their daughter, who often felt lonely and sad. One day Arun lost his temper and started yelling at Anjali, telling her that she was useless, as she couldn't cook properly, and was neither a good wife to him, or a caring mother to their daughter.

Suggested Questions for Reflection and Discussion on Case of Anjali

1. From your analysis, what are the various challenges that this family is facing?
2. What is menopause? Do you think women can have a fulfilling sexual life during this time?
3. What is androgen deficiency? How could Arun be supported to enhance his sense of well-being?
4. What is family strengthening? What are the ways in which you could extend support to enable Anjali, Arun and Ashwini to strengthen their family?

Annexure 7: Additional Core Messages for the Case of Anjali, Arun and Ashwini

Refer to the sections on Menopause and Androgen decline in Chapter 7 of the Book. In addition, discuss family strengthening as a deliberate process of giving parents the necessary opportunities, relationships, networks, and support to raise their children successfully; enabling family members to strengthen communication and relationship skills, etc.

Suggested Activities

Activity 1:

Spend some time alone and map out your own assumptions, thoughts and beliefs about sex during one's senior years.

Activity 2:

Whatever your age or gender identity, based on your comfort level, identify a few men/women /trans persons in your own family and circle of friends who are in the age group 46 - 52 years of age, with whom you share a close connection. Ask them about their experience of menopause to better understand this phase of the life cycle. For those who are comfortable, ask them about their sex life during this time.

Activity 3:

Design a short survey tool (using google survey tools if accessible), and find out more about the sexual life of people going through menopause and androgen decline.

Activity 4:

Design an awareness campaign to promote awareness of how one can take care of one's physical and mental health and also enjoy sexual fulfillment during menopause and androgen decline.

Case 2: Aarthi

A 22 year old single girl, Aarthi, found that she was suffering from a vaginal infection and approached her college residential doctor for medical assistance to address the same. The doctor asked her whether she had sex recently, or if she uses sex toys. The manner in which the doctor spoke to her made her very uncomfortable. She replied that she had not, and left the clinic feeling judged, without waiting for any prescription. Her friend suggests she meet you, a social worker attached to an NGO.

Questions for Reflection and Discussion on Case of Aarthi

1. What will you say to Aarthi? Do you have a list of sensitive medical professionals or para-professionals to whom you could refer people like Aarthi for appropriate medical advice?
2. How can doctors' judgemental attitudes on premarital sexual relationships be addressed?
3. What can social workers working in hospital settings do to make a difference in such situations?
4. Discuss how a network of sensitive medical practitioners, law enforcement personnel, government officials, NGO workers, counsellors and teachers can support people who feel judged or discriminated against, based on their sexual practices and preferences.

Case 3: Maria

Mary is a psychiatric social worker working in a hospital. She does not believe in abortion. The management of the hospital is also pro-life, and therefore does not advise or permit abortions. Sunita is a 20 year old woman who approaches Mary, with suicidal symptoms, seeking support for an abortion as she has just found out that she is 14 weeks pregnant.

Questions for Reflection and Discussion on the Case of Maria

1. Does Sunita have a right to terminate her pregnancy?
2. If you were in Mary's position, how would you respond to Sunita? How will you navigate the conflict between your personal beliefs, the policy of the hospital and your duty as a social worker to respect the human rights of Maria?

Annexure 7 Additional Core Messages for the Case of Maria

- The law in India permits abortion upto the age of 20 weeks, and so yes, Sunita does have a right to terminate her pregnancy. Abortion may also be permitted beyond 20 weeks in certain situations. Refer to the section on Law and Medical Termination of Pregnancy in the Book for accurate information on this.

- As a professional social worker, the code of ethics requires respect for human rights. Further, the principles of right to self-determination and the non-judgemental approach requires that Mary should respect Sunita's decision and support her to access the services she is entitled to under the law. Since Mary's organization has a policy that is pro-life, she may respectfully inform Sunita that she will not be able to advise or support her with regard to the termination of her pregnancy because of the organizational policy that she is committed to adhere to. She must however provide her with the immediate mental health care support that Sunita needs given her suicidal ideation, and ensure she gets timely care. Mary must then make a sincere effort to connect Sunita to another hospital or NGO who can provide her the assistance she needs. In situations like this, where there is a conflict between professional and personal values (and in this case, organizational values too), this becomes an ethical issue and a matter of conscience. Social workers must consult with senior social workers and with experts in ethics if necessary. They must act in accordance with their professional training rather than allow their personal beliefs or organizational policies to come in the way of clients being able to enjoy their human rights. If the organization itself does not permit such referrals, Mary would have to make a choice as to whether she should continue working in the organization in order to ensure she adheres to the obligations arising from her professional training.

Chapter 8. Sexual Development in Children and Adolescence

Case 1: Johnny

In a co-educational school in the outskirts of the city, a teacher put up a poster on anatomy. A little boy named Johnny, who is studying in the 1st standard, is observed touching the genital area of that picture every day, before and after school. The class teacher noticed this on several occasions and scolded the boy, telling him that what he is doing is wrong and that he should be ashamed of himself. She then contacted his parents, who also did not like what they heard. They told the teacher that they "never talk about such things at home." They went on to explain that whenever they watch programmes on television, they always make it a point to change their channel when there are sex scenes, and so they were wondering as to where their child learnt "such things." The teacher informs them that the school does not encourage teachers to talk about "such things" with the students either.

The teacher spoke to the boy separately and he said that he used to touch his 'pee pee' every now and then and that it "feels good." He said that his parents have found him doing so many times and they never scold him or tell him it is right or wrong, -they just go about their way, ignoring him every time he touches himself. So he thought that touching the private part in the picture which has the same 'pee pee' as him would also make the person in the picture also feel good!
The teacher then calls you, the school counsellor (a trained social worker), to handle the situation. When you speak to the parents in detail, you learn that they have found the child touching himself many times, but both of them have ignored it. They said that talking about one's private parts is not a part of the family's conversation and thought that the child would learn such things by himself, as time passed, just like they did during their growing years. They explained that they do not know how to teach a child about such things. They also said that there are no specific names for private parts in the local language and even if they have to talk about such things, they will not know how to.

Suggested Questions for Reflection and Discussion on Case of Johnny

1. As a social worker, what do you yourself think about Johnny's behaviour?
2. Who should talk to the child to explore the situation further, and to rule out the possibility of the child being sexually abused?
3. What would you like the child to understand about this behaviour? How would you support the child in learning about sexual development in an age appropriate manner?
4. How will you sensitize and educate the parents about this topic?

Suggested Activities

Activity 1

Reflect on your own childhood and adolescence and identify experiences you had related to conversations about sex and sexuality. As a trained social worker who is an adult, how comfortable are you talking about these aspects of human life with other people? If you are comfortable, share these in the class and discuss the reasons why most people do not talk about sex and sexuality openly.

Activity 2:

Reflect on what aspects of reproductive health that you yourself need to grow in - (knowledge, attitudes and skills), in order to become more self-aware and to also provide more effective social services to individuals, families and communities you may be working with.

Activity 3:

Work in groups and discuss and plan a session on sex and sexuality for children of different developmental ages and different genders.
Similarly, develop a plan on personal safety and sexuality for adults of different genders.

Annexure 8: Additional Core Messages for Case of Johnny

1. The hesitance to name or talk about genitals or to discuss sexuality with children is seen throughout India. A majority of parents' and teachers' react to children's curiosity or exploration of sexuality, by communicating messages to children that it is wrong. As in this scenario above, most parents simply ignore it. Telling children that sexuality or curiosity about their bodies or others' bodies is 'wrong' or 'dirty' or 'shameful' can possibly cause a lot of emotional and psychological harm. Sexual predators are known to avoid grooming children who know the names of their private parts, as it indicates that the child is aware of body parts and is likely to report any unsafe touch or behaviour to trusted adults.
2. Encouraging everyone, including children, the families, teachers and others to talk openly and respectfully about all parts of the body, including the genitalia parts, as well as about safe and unsafe touch, will enable them to respect all parts of the human body and shed the sense of awkwardness or shame that most people experience when talking about genitalia.

3. Please consider referring to the video on 'How to talk with a child when there is suspicion of sexual abuse' by Dr Shaibya Saldanha in Enfold's video series that accompanies this learning package. This resource is helpful in enabling children and adults to talk about and also report any unsafe or harmful sexual behaviour they encounter.

Case 2: Sajida and Salim

Roy, a young male social worker, is staying as a guest with a family in a village, while doing a field survey for his research. The owner of the house is Ahmed, who is a close childhood friend of Roy's uncle in the nearby city. Ahmed's daughter Sajida -a single parent who has completed her graduation, lives in the house along with her three children, the oldest being a 10 year old boy Salim. Sajida also works as an accountant in the NGO that has accepted Roy as an intern. On many occasions Roy noticed Salim touching his genitals, sometimes even in front of guests. The mother had also noticed this and had scolded her son on several occasions, telling him to stop doing this.

Over a period of time, Roy built a good rapport with Sajida. He casually picked up a conversation about this with Sajida, and though initially she was awkward to talk about this topic, she explained to him that she cannot supervise all her children all the time, since her father is aged and ailing, and she is the only breadwinner for the family. She shared that she did not know what to make of her child's behaviour, and so she thinks that the best thing is to scold and beat the child. None of her close relatives live nearby, so she is not able to discuss these awkward things with anyone in person, even when she is free.

Suggested Questions for Reflection and Discussion on the Case of Sajida and Salima

1. Is it developmentally appropriate for a ten year old child to be touching her genitals in public?
2. If you were Roy, would you pick up a conversation about sexuality with the mother? If so why, if not why not? What else could you do to enable the mother to gain the understanding and skills she needs to resolve this?
3. If you were Roy and you are female, how would you discuss sexual development of children with the mother? How will you empower the mother to help the child comprehend the difference between public and private behaviours and support the child in understanding that touching one's genitals is not wrong but is best done in private?
4. Which Case Work principles would you apply while working with the mother, if she was your client? Explain
5. What would it mean to engage in Child-Centred Social Work with the ten year old son, if he was your client?

Annexure 8: Additional Core Messages on the Case of Sajida and Salima
Please refer to the sections on **Sexual development from 9 - 12 years in the Book for core messages.** In addition, the following points need to be borne in mind.

As a social worker, one must be conscious of cultural and social etiquette, particularly with regard to engaging in conversations that may be perceived erroneously and cause harm to the people one is working with. In this case scenario, one may have to tread carefully while initiating conversations around sex and sexuality, bearing in mind the urban-rural differences, cultural differences, gender differences, differences in religious beliefs and customs, and even the marital status of Sajida and Roy. Moreover, Roy is staying as a guest - he is not in a professional relationship with Sajida. It may therefore be preferable for Roy to consider encouraging Sajida to speak about this with another worker in the NGO that they are both working in, someone who Sajida is comfortable with.

Chapter 9: Attitude towards Sexuality

Case 1: Ibrahim (i)

Ibrahim has been invited by his friends to go on a drive. After driving around for a while, some of his friends say, " Let's show Ibrahim some interesting sites every young man should know." Ibrahim realises that they intend to take him to an area known as the hub for commercial sex workers. He is uncomfortable and does not want to go. Some of his companions say, "Come on, be a man!" and "Don't be a baby!" The teasing and bullying continues over months.

Suggested Questions for Reflection and Discussion on the Case of Ibrahim (i):

1. If Ibrahim had come to your NGO requesting for assistance to help him deal with his anxiety related to this particular event, what social work interventions would you consider?

Annexure 9: Additional Core Messages on the Case of Ibrahim (i)
In this scenario, Ibrahim will have to make a decision and take a stance on his own rather than succumbing to peer pressure. It means he should be aware of how to stand up to peer pressure and be assertive. People like Ibrahim could be supported to make independent decisions based on their own beliefs and value systems, and taught to gain affirmation from within rather than depending on it from peers or the wider society even at the cost of one's mental peace.

Suggested Activities

Activity 1

Request students to work in groups and do a role play to demonstrate assertive behaviour using this case scenario.

Activity 2:

Plan a workshop for children or young people of different ages and genders on assertive behaviour, preferably using similar case scenarios that also help generate deeper awareness and ability in dealing with situations relating to sex and sexuality.

Activity 3:

Request students to do internet searches to identify academic articles or videos prepared by organizations working to promote healthy attitudes towards sexuality, that help build a better understanding of the way adults with disability, older adults, sexual minorities, or sex workers experience their sexuality. Request the students to critique these articles/videos and facilitate class-room discussion on the same. Create safe spaces using Restorative Circle elements to enable sharing of the shift in perspectives and attitudes on these topics.

Case 2: Ibrahim (ii)

In another version of the above scenario, Ibrahim visits a sex worker but later feels guilty about it and comes to you, for advice. He is also upset with his friends for having forced him to accompany them.

Suggested Questions for Reflection and Discussion on the Case of Ibrahim (ii)

1. What would you discuss with Ibrahim to support him to resolve this challenge he is facing ?

Annexure 9: Additional Core Messages for the Case of Ibrahim (ii)

Consider assisting Ibrahim to reflect on his personal values and religious beliefs while also explaining the law relating to sex work in India, drawing from the sections on Law on Sex Work, and Sex for Money in Chapter 9 of the Book. Enable Ibrahim to gain clarity on how he chooses to lead his life, and to gain the confidence he needs to stand by his own beliefs and choices, whatever they may be, as long as he is not violating the rights of other people.

Case 3: Ibrahim (iii)

In the above scenario, Ibrahim comes to you to discuss his urge to visit a sex worker.

Suggested Question for Reflection and Discussion on the Case of Ibrahim (iii)

1. What would you discuss with Ibrahim?

Annexure 9: Additional Core Messages for the Case of Ibrahim (iii)
Consider assisting Ibrahim to reflect on his personal values and religious beliefs while also explaining the law relating to sex work in India, drawing from the sections on Law on Sex Work, and Sex for Money in Chapter 9 of the Book. Enable Ibrahim to gain a better understanding of sex and sexuality and how he may choose to respond to these sexual urges. Help him gain the confidence he needs to stand by his own beliefs and choices, whatever they may be, as long as he is not violating the rights of other people.

Case 4: Adhila and Aaditi

Adhila and Aaditi, both just over 18 years of age, are talking to some of their close friends. Most of them have had sex and are therefore teasing Adhila and Aaditri about them waiting for the 'right' time. A few of them make remarks like "you are both so goody goody!" One friend taunts the girl saying - "I'm sure you are frigid!"

Suggested Questions for Reflection and Discussion on the Case of Adhila and Aaditi:

1. If Adhila and Aaditi came to your agency for help in handling this situation, what would you do to assist them?
2. What is the influence of media on young people, - especially given the absence of open discussion on sexuality with adolescents in most cultures in India?

Annexure 9: Additional Core Messages on Case of Aadhila and Aaditi

1. Engaging in sexual activities should always be one's personal choice, and undertaken with both partners articulating their wish and informed consent. Yet many young adults feel pressured to enter into sexual relationships. Phrases such as "you are just afraid," "why not, everyone is doing it," "Do it, or goodbye," etc., are some ways in which this peer pressure manifests. It is important to impart the understanding that one should build one's self-esteem and practice assertive behaviour to counter such pressure.
2. Sometimes this pressure is replaced by threats of violence such as "I can hurt you and post pictures of you naked online, if you don't", "You owe me because I helped you when you were in trouble" etc. Creating awareness of how to protect oneself against such violence or threats of violence, and how to take action against people who try to force themselves on someone is crucial.

Case 5: Shweta

Shweta was brought up in a family where sex is not a topic of discussion. However, over time, she received comprehensive sexuality education while studying in a college where such workshops were organised. She is grateful for such workshops and wishes such topics had been introduced earlier during her school days. At one such workshop the participants were asked to go to a pharmacy and purchase a packet of condoms. She was a little awkward about it but at the same time she was also curious to see what would happen in the shop.

She went to a well-known pharmacy and asked for a condom in a very matter of fact tone of voice. The people around her started staring at her. The pharmacist on the other hand did not say a word, and did not look at her, pretending to be busy. What the pharmacist did was a surprise. He brought a roll of cotton instead and gave it to her. Shweta corrected him on what she wanted, but he suddenly declared that the pharmacy did not have any more condoms, even though she could see them on the upper shelf. She was surprised at the reaction and left without saying anything more.

Suggested Questions for Reflection and Discussion on Case of Shweta

1. Was it right on the pharmacist's part to refuse to sell her a condom? Would the pharmacist have behaved in the same way if the buyer was a male of the same age?

Suggested Activities

Activity 1

Design a poster or an advertisement on access to reproductive health, which could be pasted on the walls of pharmacies.

Activity 2

Do a mini-research to identify organizations (Government and Non-Government organizations that conduct comprehensive sexuality education in India, and share this with your co-workers, NGO networks and the District Child Protection Unit, requesting them to publicize this information. Consider co-organizing workshops for women and girls in partnership with them.

Activity 3

Do a mini research to understand the policy and legal framework pertaining to reproductive health for women and girls in India.

Case 6: Piya

Piya is a 30-year-old sex worker who had run away from a violent husband, who hailed from another community. Her family had disowned her. She chose to migrate to Kolkatta, and over time, decided to engage in sex work in order to survive. She has two children. You are a social worker from an NGO that works with sex-workers. She shared "I am regularly beaten up by the pimp who runs the brothel. I have lost contact with my relatives as they always judge me for the work I do. They don't realize that without any education or other skills, I have no choice but to do this work. I am poor and I have to support my children. Society also looks down on women working in this profession - they don't realize that it is women like us who are the first-responders against child-trafficking and human trafficking."

Suggested Questions for Reflection and Discussion on Case of Piya

1. What are your own thoughts, beliefs and attitudes towards sex work? Do you think it is a dignified profession?

2. How would you deal with challenges that you may face, if your personal beliefs contradict professional social work values and principles, and the human rights approach, when working as a social worker in an NGO for women, and a sex worker approached you for help?
3. Do you think that there is a violation of women's rights in this case? If yes, how can you intervene?
4. What suggestions would you give to Piya?
5. How do you think this attitude will affect Piya and her children in the long run? How can you equip her to manage this?
6. What are the structural root causes that may drive women into situations of vulnerability, wherein they may choose to become sex workers?
7. What would be your beliefs and attitudes is a woman chose sex work, not from a position of vulnerability, but as a profession without any other compulsions?
8. What has been the effect of the COVID-19 pandemic on vulnerable groups of women like Piya.

Suggested Activities

Activity 1 :
Do a mini research on the National Network of Sex Workers (NNSW) in India to better understand the situation of women sex workers and the activities that the network is undertaking to promote awareness and responsiveness to their needs and rights - see http://nnswindia.org/

Activity 2 :

Study the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children, supplementing the United Nations Convention \against Transnational Organized Crime, that has been adopted and opened for signature, ratification and accession by General Assembly resolution 55/25 of 15 November 2000.[6]

Annexure 9: Additional Core Messages on Case of Piya
Sex work is legal in India. Some associated activities such as solicitation in public places, running a brothel, an adult profiting off another adult' sex work, etc., is illegal. However, sex work is predominantly considered a sin or shameful profession in India. Interestingly, it is usually only sex workers with whom this tag is associated with and not their clients who are predominantly cisgender men. Moreover, it is not recognised as a profession, despite it being the sole source of income for lakhs of people in India. As social workers, we need to reflect on our own beliefs, values and attitudes and work on our ability to apply the principle of Non-judgement, with all our clients. We also need to proactively seek supervision and guidance when faced with challenging situations such as when we are unable to work with a client who holds beliefs that may be very different from the ones we hold.
"The 7th Report of the Panel on Sex Work, constituted by the Supreme Court in the Budhadev Karmaskar v. State of West Bengal, Criminal Appeal No. 135 of 2010

[6] https://www.ohchr.org/EN/ProfessionalInterest/Pages/ProtocolTraffickingInPersons.aspx

included recommendations such as adopting community-based rehabilitation, i.e. alternatives that are not contingent on trafficked women staying in state-run 'homes' and also revising laws like the ITPA so as to distinguish between those coerced into sex work and those who engage in it voluntarily, so that interventions are tailored to those who need them."[7] Despite not being illegal, people engaged in sex work have no specific schemes that provide them with additional protection or welfare.

As per the National Network of Sex Workers, in India, "Anti-trafficking laws and policies must be under-girded by an understanding of structural issues like poverty, lack of equal opportunities and skewed development policies. The aspiration to move and access better living conditions forces persons to move in an unsafe manner and accept work in a criminalised environment for instance in sex work…"[8]

Based on this and any additional information on sex work and sex workers is India, discuss this topic and issues face by sex workers and their children further.

Chapter 10: Sexuality and Disability

Case 1: Susheela

While conducting a survey in a rural community, one of your respondents tells you that one of her neighbours, Susheela, a 30 year old woman with intellectual disability, lives with her aged father who suffers from paralysis of the left arm and who runs a petty shop. Susheela is a sweeper in the local Government school and is pregnant with her second child. She is in the first trimester. The first child also has an intellectual disability. Nobody in the neighbourhood knows who the father of the first child or the second baby is. Concerned about her well-being, you send a message requesting Susheela to drop in at your office, and she willingly comes to meet you.

Suggested Questions for Reflection and Discussion on Case of Susheela

1. What are the issues that you would need to explore while speaking with Susheela?
2. Are there any legal provisions that are applicable in this case?

Suggested Activities

Activity 1

Reflect on your own thoughts, feelings, and challenges related to the sexuality of persons with disabilities. Do you feel the need to work on yourself and build the skills to work with clients on this topic? If so, contact organizations such as Tarshi, based in New Delhi who have brought out useful resources on the same[9] and would be able to support you in this endeavour.

Activity 2

[7] Sex Work is Dignified Work, National Network of Sex Workers, available here http://nnswindia.org/upload/Sex-Workers-Against-Traffickers.pdf

[8] Ibid.

[9] See https://www.tarshi.net/downloads/Sexuality_and_Disability_in_the_Indian_Context.pdf

Do a mini research and identify short videos, film clips, stories and case studies that could be used for promoting awareness about the rights of persons with disability including aspects relating to sexuality, including in the vernacular.

Annexure10: Additional Core Messages - Case 1: Susheela
At the outset, we need to remember that having a mild mental impairment does not inherently mean a person is fully incapacitated. Thus, many persons with mental impairment are able to lead a fulfilling life. On the same note, being intellectually dsiabled does not sever a person's sexuality from them - they have every right to a fulfilling sexual life.
In this scenario, the woman in question may or may not have been abused, just as any other woman may have been. On the other hand, she may be having a fulfilling consensual sexual relationship with another person. However, if you are able to discern that Susheela has indeed been exploited due to her intellectual disability and sexually abused, you may need to offer her support to access legal assistance. You may also need to offer her advice about her pregnancy and that she has a choice whether to continue with it or not. You may also need to familiarize yourself with the provisions of the RPD Act, 2017, and help her to access medical assistance to determine whether there are any genetic issues that she may need to get assessed for, to inform the choices that she could make about her pregnancy. Additionally, you may want to also think about how you would like to support Susheela through family strengthening. This could include accessing government or private schemes for persons with disability available in your State which her father could access, as he is likely to fulfill the legal norms to avail of such schemes. You could also explore the possibility of Susheela's first child availing of special education through some local agency.

Chapter 11: Sexual Relationships

Case 1: Kongdeng and Bahduh

Kongdeng, a 21 years old woman, has been in a relationship with Bahduh, a 23 years old man for two years. Both of them are still pursuing their higher studies. Kongdeng is very determined to complete her studies so that she can be financially independent and also support her family. Kongdeng and Bahduh are deeply in love. They even refer to each other as 'happiness.' One day Bahduh asked Kongdeng if they could get intimate with each other. Kongdeng is taken aback by the question, as she believes in having sex only after marriage. She loves Bahduh, but the thought of having sex with him before marriage is against her values.

Suggested Questions for Reflection and Discussion on the Case of Kongdeng and Bahduh

1. If Kongdeng came to you for help, how would you support her in responding to Bahduh's request for sexual intimacy?
2. Do you think Bahduh was being indecent when he asked Kongdeng if he could have sex with her? If yes, why, and if no, why not?

Suggested Activities

Activity 1:

Plan an activity with adolescents and youth from the community in which you work to help them to navigate similar instances in their romantic relationships? What information would you need to give them about the POCSO Act, 2012?

Annexure 11 - Additional Core Messages on Case of Kongdeng and Bahduh

Human beings are social animals and hence forming social relationships is inevitable. Romantic and sexual relationships are also commonplace. Consent is an important and essential aspect of healthy sexual relationships. It is advisable that one is well informed about Sexually Transmitted Infections (STIs), contraception, etc., before participating in sexual activities with another person. It is also important to understand the law in our country regarding what is legally considered consent and age of consent for sexual activity in India. The POCSO Act, 2012 puts down the age of consent as 18 years. This means that even if two people under the age of 18 years engage in consensual sex it will be considered as statutory rape of both minors. Similarly, in a consensual relationship, if one partner is above 18 years, and the other is below 18 years, then also it is considered statutory rape.

Case 2: Sunil

Sunil, a 26 year old man is brought to your agency for psycho-social support as he is suffering from depression. He shares that he was in love with a girl as a teenager, and unexpectedly became a father while he was still in his teens. He was unable to financially support the girl, (now 25 years of age), or his child. The girl's parents despised him and ordered her to never see him again. The girl is from a well-to-do family. Though he has managed to acquire a small job and hopes to see his son again, the girl's family are reluctant to permit him to meet them. The girl, who is still fond of him, secretly contacts him occasionally out of sympathy and takes out her son to meet his father for a few hours, far away from where she stays. It has come to his knowledge recently that she will soon be engaged to another man, and will move cities to live with her husband. He begins to lose hope of ever seeing his son again.

Suggested Questions for Reflection and Discussion on the Case of Sunil

1. What are the possible areas of social work intervention in this case?What is mandatory reporting under the POCSO Act, 2012? Is there a limitation period for mandatory reporting and will I be obliged to report to the police in this case?

Case 3: Aamina and Aadil

Aamina's parents are at work. She invited a close friend Aadil over to discuss a college project. After the work is completed, Aadil comes closer to Aamina and asks her, "you didn't call me over just to do the project with you, did you?"

Suggested Questions for Reflection and Discussion on the Case of Aamina and Aadil:

1. In your opinion are scenarios such as this common or uncommon? Explain.
2. What are the different ways that Aamina could handle the situation?
3. If Aamina approaches you to discuss whether she should start a sexual relationship with Aadil, how would you respond?

Annexure 11: Additional Core Messages - Case 4 – Aamina and Aadil

- Aadil's action, (of moving closer towards Aamina) and his words, both seem indicative of desire or intention for a sexual relationship or activity. There are different ways the rest of the conversation can go. One possibility is that Aamina might be interested in having a sexual relationship with Aadil. Another possibility can be that Aamina wants to have a sexual relationship with Aadil but she might not be ready yet. Or Aamina might have not thought of anything other than studying when she invited Aadil home. Each of these scenarios have different implications and require different approaches.
- In the first scenario, it seems to be the beginning of a sexual relationship. It is important that they both know or understand safe sex practices. However, it is not just the starting of the relationship that they should focus on. Sometimes, after young adults become sexually active they might go through emotional upheavals, regret, fear, doubts, etc. Unwanted pregnancy is yet another problem that might arise. Therefore it is important that they understand these aspects also before embarking on a sexual relationship. In this scenario social workers can play a pivotal role by providing comprehensive sexuality education.
- Along with spreading awareness about these topics, you could also spread information aboutwhom or which organisation people can approach if they need assistance, guidance or more information. You can plan workshops or programs to disseminate information and awareness.
- In the second scenario, Aamina does want a sexual relationship with Aadil but she is not ready. Everything from the first scenario is applicable to the case as well. Additionally, Aamina also has to be assertive and let Aadil know she is not ready for it at that time.
- In the third scenario, Aamina and Aadil have a completely different understanding of the situation. Aamina had only thought about studying and Aadil had misread the situation. Factors like differences in socialisation, cultural changes, positionality of each person in the society, etc., change how different people understand a particular situation. It is important that people realise that their actions might not be understood as it was meant to. On the other hand, their interpretation of others' actions might not always be right. As a social worker, you could assist people in such situations to communicate respectfully and clear any misunderstanding between them, and to also ensure that such a situation or misreading of situations does not arise.

Chapter 12: Sexual Preferences and Practices

Case 1: Hisha

Hisha is a 25 year old working woman who is staying in a working women's hostel. She has a roommate who confided in her that she has been sexually active since she was 19 years old. Hisha tells her that she was in serious relationship until a few months ago and has been celibate since then. Hisha also says that while she does want to be in a relationship she is also thinking of engaging in causal sex with someone she knows at her office.

Suggested Questions for Reflection on the Case of Hisha.

1. What are your own views relating to sex, live in relationships, casual sex and marriage? If either of these young women came to you seeking support for some personal issue, would this aspect of their life come in the way of you giving your best as a professional social worker?

Case 2: Manjeet and Heer

Manjeet, a 28 year-old man, and Heer, a 22 year-old woman, are planning on getting married. Manjeet says they should be very open with each other and discuss their sexual preferences openly. Heer does not give it much importance, saying like other married couples they will find their preferences together. However, Manjeet was hoping to discuss BDSM and his interest in it with Heer. Now, he does not know how to bring it up with her or how she will react to it.

Suggested Questions for Reflection and Discussion on Case of Manjeet and Heer

1. What do you think Manjeet could do in order to navigate and strengthen her intimate relationship with Heer?
2. Is it required or beneficial for couples who intend to live together as partners, to discuss the details of their sexual preferences and practices with each other and share all the details too?

Chapter 13: Pedophilia

Case 1: 'X'

A final year engineering student 'X' aged 21 years, goes to the college appointed counselor, and tells him that he needs to talk to someone or else he is afraid he will do something terrible. He goes on to say that he would "rather die than do that". The college counselor manages to calm him down and create a situation where he is able to speak freely. He starts by saying that he has always been a popular guy and that after puberty he had no dearth of female admirers from his age group. In school, he gradually realised that he is always attracted to younger girls than to his classmates or

peers. At first it didn't bother him much, as they were all in school. But after joining college he was confused when he realised that he was still sexually attracted to younger girls, especially those around 10 years of age. Recently, he had gone to his hometown to attend a festival and there he met his older cousin's daughter, a nine year old girl. To his dismay, he started having intense emotions for this girl and found himself sexually aroused whenever he thought of her. He was horrified with what he was thinking and feeling and hurriedly left his hometown and came back to his college hostel. He tried to engage in a sexual relationship with a girl from his college who had demonstrated some affection for him, but he could not get that young girl out of his mind. He tells the school counselor that he is thoroughly ashamed and afraid that he would hurt the girl. He also reveals that he has started having thoughts about wanting to kill himself.

Suggested Questions for Reflection and Discussion on Case of 'X'

1. Is Pedophilia a mental disorder?
2. If you were the college counselor or person who was approached by this person 'X', how would you handle the situation?

Chapter 14. Intersectionality

Case 1

Two girls Anjana and Bindu are school classmates. Their school is located in a city. Anjana is from a small village far from the city (lacking even in basic facilities) and therefore stays in the school hostel. Anjana's family is economically backward, her father is a daily wage labourer and the sole breadwinner of the family. Her studies and hostel are covered by a government scholarship for girl students. Bindu is from a well-to-do family and lives near the school. Due to the COVID-19 pandemic, all hostellers were sent home and online classes were started.

Questions for Reflection and Discussion on the Case of Anjana and Bindu

1. From the perspective of intersectionality and positionality, discuss how the situation of online classes, lockdown and the pandemic could have been experienced differently by Anjana and Bindu.

Case 2

Heera is a transwoman with disability who is a wheelchair user from an economically backward family in a tribal community.

Questions for Reflection and Discussion on the Case of Heera

1. Through an intersectional framework discuss how Heera's experiences might be different from a transwoman from upper class, upper caste, and a non-tribal background.

Suggested Activities

Activity 1:

Request students to think of any one person with whom they have engaged with as part of their Case Work, and request them to write a short note on how they initially perceived this person. Then request them to reflect on the person from the lens of intersectionality and share how this exercise helped them to become more sensitive and empathetic towards them, given the challenges that the client is working through as part of the Case Work.

Activity 2:

Request the students to analyse the institution/school/hospital/community or other setting in which they have been placed for field work from the angle of intersectionality. Request a few students to share what they have learnt from this exercise and what they could do in terms of social work interventions to change the way people engage with each other in that setting.

Chapter 15. Sexual Violence against Adults

Vocabulary about sex and sexuality

India is a country with more than 200 languages and even more dialects. Many languages do not have words that could be used to describe or talk about sexuality. Even if there are words, people are not very aware of them. Further, even if people are aware of the words, they may not be comfortable using them given the socio-cultural norm that sex and related matters are not to be discussed in public. Patricia Mukhim in her article "Create a Language to Portray the Trauma," (The Statesman, March 25 2012), suggests that the lack of a proper word for rape in the Khasi tribal language somehow fails to convey the horror of the crime. This silence around sexuality potentially contributes to the persistence of myths and misconceptions among youth and adults too into adult life. People, especially children and youth, receive very little age-appropriate information on sexuality and sexual health, be it from parents, school, religious institutions, peers or the media. T and the little information they do receive seems steeped in notions of morality. Ignorance about reproductive health, blaming rape victims, intolerance to people with different sexual orientations, addiction to pornography and the practice of unsafe sex are some of the potential consequences of the prevailing silence in the society.

Suggested Questions for Reflection and Discussion

1. Is there silence around sex and sexuality in your community? Share examples of words that are used in your language pertaining to sex and sexuality. In a group discussion with peers who speak the same language, make a list of anatomical and physiological terms for the

genitalia and sexual functions and acts. Include terms for acts of sexual violence such as rape.

2. Share ways through which you can bring this awareness in society about personal safety and sexuality in your professional capacity, as well as in your personal life - among your family and friends?

Case 1: Rita and Jai (1)

Rita, an 18-year-old student, has recently lost her mother to cancer, leaving her 9 year-old brother in her care. Her father is addicted to alcohol and is unavailable to the children. Her 75 year-old grandmother is the only person she can turn to. She dreams of doing well in her studies so that she can get a good job as a nurse in the future.

Her 19-year-old neighbour, Jai, was very helpful during this stressful time. She increasingly relied on him not only for household chores but to also discuss her problems. One day, while she was alone with Jai, one thing led to another and they had sex. The next day Rita felt very confused. Jai apologised and said it would never happen again.

A month later, Rita missed her period and felt a little scared. She finally managed to tell her grandmother about it. They did a pregnancy test which turned out to be positive. Rita was shattered! She felt that this was the end of the world for her. Having the baby would mean giving up her studies and many of her dreams for her own life and that of her brother. Her grandmother said she was too old to help her look after her baby anyway. Rita recognized that she could barely manage her brother's and her needs with the little money that her mother had left her. She was so disturbed that she could not even bear to look at Jai. They stopped meeting each other after this, as they both felt uncomfortable about what had happened between them.

Suggested Questions for Reflection and Discussion on the Case of Rita and Jai (1):

1. What social work support can you provide to Rita to enable her to make a decision related to her baby?
2. What social work interventions could be considered to support Rita with her relationship with Jai?

Annexure 14: Additional Core Messages on the Case of Rita and Jai (1)

1. Support may be provided to Rita to help her reflect on and consider her options related to her decision about her baby. The options could include having the baby and looking after it, having the baby and giving it up for adoption, going to a doctor and getting an abortion, etc.
2. Rita may be encouraged to consider bringing Jai to the agency, so that they could discuss their relationship, and whether they would like to take it forward, and accordingly decide about the baby. She could be provided legal literacy about the MTP Act, and its provisions. Rita could also be provided support for how she could navigate her life choices, whether or not she decides to continue her relationship with Jai. Referrals may also be made to legal

services, so that she could understand the legal implications of having a baby outside marriage, if she chooses to keep the baby but not marry Jai.

Case 3: Rita and Jai (2)

In another scenario involving Jai and Rita, Jai had actually forced himself on Rita and threatened to harm her and her brother if she resisted, or told anyone about it. Rita felt ashamed, depressed and kept quiet about it. She was very adamant that no-one should know about how Jai had treated her. When she missed her period, she thought it was because of all the stress that she had been through. But some weeks later she was really scared and did all kinds of things that she thought would help to make her periods come, such as eating raw papayas, etc. Finally, she told her classmate Jenny who suggested she do a pregnancy test. The test was positive. Rita comes to you, a social worker, in the hopes that you will be able to help her deal with this crisis, as she did not want the baby.

Suggested Questions for Reflection and Discussion on the Case of Rita and Jai (2):

1. What according to you are the various options that Rita could consider as regards the pregnancy?
2. Should Rita confront Jai about what happened? Should she report him to the police? Should she force him to marry her? Are there any other courses of action?
3. What would you consider your responsibility as a social worker in cases of unwanted pregnancy?
4. What would you consider as your professional responsibility as a social worker in cases of domestic violence? Would you report the domestic violence against Rita, if Rita is not willing to consider this option? If yes, why? If you would not, why?
5. If in this scenario, Rita is 16 years of age, how would the situation change? Discuss what is the possible course of action in this scenario while keeping in mind the POCSO Act, 2012.

Annexure 14: Additional Core Messages on the Case of Rita and Jai (2)

1. A social worker's approach to the two scenarios would have to be different. In the first scenario, Rita is worried about her brother's and her own future. She is also worried about how her father would react, what people will say, and the financially precarious situation she is in. She might have turned to you - a social worker to discuss her options or might be looking for a supportive environment to vent her fears.
2. In the second scenario Rita was sexually assaulted, resulting in a physical, emotional and psychological trauma that has various implications that would have to be understood and dealt with at several levels - in terms of Rita's health needs (including mental health), her unwanted pregnancy and related legal issues, family issues, etc. There are no easy answers in these kinds of situations, particularly because Rita is currently depressed. You would have to work with her at her pace, and enable her to make informed choices. You must also consider taking up this for discussion with your supervisor, given the ethical dilemma you may be facing as a social worker - feeling compelled to report to the police because you may be more focussed on justice and accountability of the perpetrator on the one hand, while also feeling obligated to meet the needs, wishes and rights of the victim. Yes, you will need to be

victim centred and keep Rita's wishes in focus so that all interventions are planned in a manner that she feels supported and all her rights are protected. Social workers need to adhere to social work principles and ethics, and so you must respect Rita's privacy and not disclose information to outsiders unless there is clear and immediate danger to her. You must respect Rita's right to self-determination and avoid imposing your own beliefs and compulsions on your clients. Though you may be feeling that the principle of beneficence or doing good takes priority, and therefore by reporting you would prevent other women from becoming Jai's victims. However, Rita may view your violation of confidentiality as harm, and may therefore lose trust in you and terminate your services, at a time when she needs mental health services and other support. You may feel uncomfortable as you think your silence means you are condoning rape. However, respect for Rita's rights and needs, and prioritizing her emotional and physical safety - must also be viewed as aspects of justice. Over time, once Rita has gained some emotional strength, she may be supported with additional information about the legal procedures, the support systems available, etc., to enable her to consider other options.

3. If Rita was a child, the mandatory reporting obligation under the POCSO Act, 2012 will apply. For more about this, inform the students that this topic will be dealt with in the next Chapter.

Chapter 16: Sexual violence against Children

Case 1: Mona and Rati

Mona is an 18-year-old university student. One day, her neighbours' 14 year-old daughter, Rati, who was very close to her, came crying to her and said her stepfather had been 'bad' to her. On talking a bit more to the child, Mona quickly realises that she has been repeatedly sexually abused by her stepfather. Mona is shocked and disturbed. The child says when she tried telling her mother, her mother hit her saying "don't say stupid things." Mona builds up courage and tries talking to the girls' mother, only to be rebuffed and told not to interfere and ruin her family.

Suggested Questions for Reflection and Discussion on the Case of Mona and Rati

1. Can Mona do anything more? Should she do anything more? If Mona approaches you in your professional capacity as a social worker, what can you do? What are her options? What do you think is her best option?
2. In the above case, when Mona talked further with Rati, she said that sometimes she actually felt nice when her step-father did those 'bad' things, and so she was very confused. What are the thoughts and feelings that emerge for you when you hear this? Do you think Rati did anything wrong? Did Rati entice him in any way?

Annexure 16: Additional Core Messages - Case 1 - Mona and Rati

1. If Mona came to you for assistance, you need to help her to understand the provisions related to mandatory reporting under the POCSO Act, 2012. Though she has an obligation to either report the abuse to the police, or call the Child Help Line (1098), she may seek the support of her parents to do so. If Mona expresses fear about reporting, given that she is just 18 years old, and is also a neighbour, it then becomes your obligation to report. Keeping quiet about the abuser puts all children in the extended family and neighbourhood and at the place of work of the abuser (if any), at risk. There are government and non-government organizations where one can seek shelter and protection. You could explain to her that there are ways to also hold the perpetrator accountable and responsible and take appropriate steps to prevent reoffending. You must advise Mona to be prudent about how she handles this information and support her in ensuring she protects herself from reprisal, since she is a young woman and resides next door.
2. Though Rati may have experienced pleasure during the sexual act, she cannot and must not be accused of enticing her step-father. There is a clear power differential, wide age gap and relationship of trust that has been violated, which makes this an aggravated crime.

Case 2: Thei

Thei was 10 years old when she was sexually abused by her maternal uncle. She could not share what happened with her mother, father or any family members, as she was too scared that she would be blamed for what happened. She just ignored her maternal uncle whenever he visited her home, and sometimes even hid in her room without coming for the family meal with him. Thei grows up to be a young woman and starts having romantic and sexual relationships, but, her relationships never last more than 6 months. This continues for years. Eventually, a close friend of Thei, who is a trained counselor, suspects that Thei, now 30 years old, has faced some adverse childhood experiences. She encourages Thei to approach you, a social worker working in an agency dealing with Personal Safety and Sexuality in the neighbourhood.

Suggested Questions for Reflection and Discussion on Case of Thei

1. Do you think Thei's relationship troubles has anything to do with the abuse she faced as a child?
2. How would you help Thei to help herself?
3. Do you have a legal obligation to report the maternal uncle under the POCSO Act 2012?
4. What are the different strategies that you can use as a social worker working in various settings to prevent child sexual abuse?

Annexure 16: Additional Core Messages on Case of Thei

1. Sexual abuse can affect and torment survivors for the rest of their lives. Child sexual abuse (CSA) is a hard reality and is being perpetrated in homes and other places, most often by people known to and trusted by children. There are various strategies that could be used

to promote personal safety and sexuality. Discussions in homes, in the community, in classrooms, in the media and other fora, about holding the perpetrators responsible and accountable for their abusive behaviour would help create safe spaces for children and adults alike; as would discussions with children on respect and care for one's entire body, personal safety rules and personal safety guide.
In this scenario, Thei - the young child was worried that she would be blamed for her abuser's actions. She might have formed this fear having picked up negative reactions to any talk of sex, sexuality, genitalia, etc., from elders in the family or the media. It is important to teach children that there is no shame in any part of one's body, and that we are not responsible for other people's actions - we are responsible and accountable only for our own behaviour. Most importantly, every person, child or adult, has the right to safety, protection from sexual or any other form of abuse, and needs to be treated with dignity. It is unacceptable if anyone acts in ways that deny people their rights.

Note: There is no legal obligation to report child sexual abuse that happened before POCSO Act 2012 came into effect. If the person who faced sexual abuse as a child wants to report an offence that occurred before POCSO came into effect, it can be done under the Indian Penal Code.

Suggested Activities

Activity 1:

Reflect on your own lifespan, particularly your childhood and adolescence, to understand whether there is any underlying trauma that is unresolved or untreated. Proactively seek the therapy and support you may need to process such trauma, so that as a professional social worker, you are then able to provide more professional services to victims of abuse yourself.

Activity 2

If there is no module on Trauma Informed Practice (TIP) in your curriculum, identify experts who are competent and invite them to conduct an orientation on TIP, so that you will better understand its importance. You may then consider doing a full course on this, to help you to prevent burnout and vicarious trauma, while working with challenging populations or cases involving abuse or any form of violence.

Activity 3:

Do a mini research to find out the organizations that work on issues related to personal safety and sexuality, competent to provide quality social services to women and children like Thei in your State.

Case 3: 'B'

In a rural community, a child 'B', aged 4 years of age, has been sexually abused by her step father, who is a teacher in the village school. An ASHA worker comes to know about this and informs a member of the Panchayat in the village. However, the family of the child and the village Panchayat want to settle it quietly. They threaten the ASHA worker, and tell her not to reveal this to anyone.

Suggested Questions for Reflection and Discussion on Case of 'B':

1. The ASHA worker picks up courage and discusses the situation with you, a trained social worker, also working in that village. What will you do?
2. How would you handle this situation and the concerns of the family and the Panchayat?
3. How will you sensitise the community about the need to prioritise the needs and rights of the child over everything else, including the family's honor?

Annexure 16: Additional Core Messages on Case of 'B'

1. According to the POCSO Act, 2012, it is the legal duty of any person with knowledge of any sexual offence against a child to report it to the nearest police station, mandatorily. Moreover, aside from 'B', many other children may also be at risk, given that the stepfather is a teacher, who is well respected in the village - and so this is therefore considered as an aggravated offence with a higher penalty. As a social worker you have an obligation to report it. At the same time you must cater to the immediate needs and well-being of the child as well as follow-up with the procedures after an FIR has been filed. You also have the additional task of protecting the identity of the ASHA worker who lives and works in the same community, as she approached you even after the village Panchayat instructed her not to tell anyone.
2. If you do not have the skills and training to handle such a case, you must bring this to the notice of your supervisor and refer the case to someone who does have the expertise to do so.

Case 4: Findings of an Empirical Study on Rape

In a study on human sexuality among university students in Shillong, cited in the Shillong Times[10], it was found that the victim is often blamed in rape cases. More Khasi women (41%) than men (25%) blamed the woman in a rape of a woman. The reasons they cited were that these women had loose morals and that women wearing a provocative dress 'are asking to be raped.

[10] Seehttps://theshillongtimes.com/2013/07/24/sexuality-and-silence-among-khasi-youth-of-meghalaya/

Suggested Questions for Reflection and Discussion on the above extract from the empirical study:

1. What are your thoughts about rape of women who do not dress in traditional attire? Do you agree with the opinions of the respondents who were of the opinion that these women were 'asking to be raped"?

Case 5: 'P'

Ms. P who is 22 years old, comes to you with emotional disturbances. She tells you that she was sexually abused when she was 10 years old, by none other than her trusted neighbour who is also a close friend of her father. She also tells you that this event during her childhood is taking a toll on her relationship with her partner now.

Suggested Questions for Reflection and Discussion on Case of 'P'

1. How would you help Ms. P to help herself?
2. What are the various kinds of challenges that Ms P faces? What social services and allied services could be made available to her?

Case 6: Shembor and Jargit

Shembor, aged 14 years, goes to tuition early morning around 5 a.m. thrice a week, not far from his home. The streets are always quite deserted at this time. One morning he came across Bantu, aged 40 years of age, a local fish seller who is acquainted with his father. Shembor greeted him. Bantu realising that no one was around, came close to him and offered him a cup of tea, sitting very close to him. Soon, he started feeling Shembor's genitalia, telling him that he had grown so handsome as a young man. Shembor was shocked and speechless and ran away as fast as possible. At school, unable to hold himself together, and still shocked by what had happened, he shared this incident with his friend and classmate Jargit. Jargit burst out laughing, and when the other students asked what was going on, Jargit made fun of him in front of them about what had happened. Soon the whole class got to know about it. During the lunch break, Shembor picked up courage and attacked Jargit for humiliating him in front of the class, and soon the other classmates too started taunting Shembor that he looked like a girl, that is why this had happened to him.

Suggested Questions for Reflection and Discussion on Case of Shembor and Jargit

1. If you were the school social worker, and Jargit and Shembor were referred to you, what would you do to help them and the rest of the class to understand sexual abuse of boys?

2. What steps could you take to ensure Bantu is held accountable for his actions?

Annexure 16: Additional Core Messages on Case of Shembor and Jargit
Sexual abuse of boys is common in India. Though many feel traumatized, most keep quiet and never tell anyone, due to fear of being mocked or because the matter may be trivialized. Many boys do not realise that they can also be targets of sexual abuse as sexual abuse is mostly talked about in relation to girls.

Suggested Activities

Activity 1:

Prepare an awareness campaign, about sexual abuse of boys, including core messages and data from the Study on Child Abuse conducted by the Ministry of Women and Child Development, Government of India, 2007, for school students aged 13-18 years of age. As part of this campaign, design a poster that could help boys report sexual abuse.

Case 7: Nancy

Nancy, aged 14 years of age, attends Sunday school classes every Sunday from 5-7 pm, at a church located about half an hour's walking distance from her home in a rural area. The route to the school is a quiet lane with very few houses, especially on a Sunday. One day, while passing one of the houses, Avery, a man aged around 30-35 years, who is a stranger to Nancy, was standing on the pavement, masturbating himself. He saw Nancy walking alone, and started passing lewd comments, whistling, and flashed his penis at her, inviting her to come with him. She ran past the house towards the church where the classes are conducted. On returning home she burst out crying and related the incident to her mother. She is terrified, and says she never wants to go to Sunday school again.

Suggested Questions for Reflection and Discussion on the case of Nancy

1. Should Nancy's mother approach you as a social worker working in the local NGO that deals with women's issues in the village, what would you do to support Nancy and her mother ?
2. What is 'flashing'? How would you explain this to Nancy and her mother?
3. Do you think this man should be arrested, or be approached and spoken to?
4. Can you raise awareness about what to do in such cases among students and in the community?
5. What steps can the community take to create safer public places? How could you facilitate this?

Annexure 16: Additional Core Messages on case of Nancy

1. **Exhibitionism is a crime under the POCSO Act, 2012**, and since Nancy is a child, this needs to be reported to the police. However, Nancy and her mother need to be first provided the psycho- social support they may need to recover from the trauma of this event, and so

the reporting need not be undertaken immediately. Reporting is a process that needs to be undertaken preferably with the active involvement and consent of the family, as this would also result in a greater chance of gaining a conviction in court. However, given the reality that children are often not believed, and there is no physical evidence related to this crime, the mother may need to be supported in bringing up this matter to trusted village elders, who may then become more vigilant about Avery's behaviour, by perhaps initiating a neighbourhood watch, and nabbing him red-handed. Elders in the village who are sensitive and have appropriate understanding of sexuality, could be approached and requested to initiate a conversation with Avery about his behaviour, how he can manage his sexual needs and desires while being respectful of others, and how he could acknowledge and repair the harm done to Nancy..

Suggested Activities

Activity 1:

Research and discuss some community initiatives undertaken in different parts of the country/ world to promote awareness about child sexual abuse, and how to help build safer communities for children.

Chapter 17: Restorative Practices

The philosophy and principles of Restorative Practices resonates very closely with that of professional social work. In particular, Restorative Circles provide an opportunity for social workers to co-create safe spaces and co-equalize power with others so as to enable authentic conversations drawn from one's own life experience and wisdom, engaging with the professional use of self and applying all the social work principles, especially the purposeful expression of feelings and non-judgemental attitude.

Rather than Case scenarios, here are a few samples of a Restorative Circles that you may consider facilitating, either among yourselves as Faculty of Social Work, or with the students in the classroom, who may also facilitate Circles on their own, with a little guidance. You may consider customizing Circles bearing in mind the need for sensitivity to age and culture, and following up the Circle process by having a discussion on how the values and principles in Restorative Practice are similar to those of professional social work, taking into account the specific conversations/processes emerging in the Circles or in other case scenarios. Aside from the content in the Book on Demystifying Sexuality, for more information about Restorative Circles please see the following additional resource - Life Skills through Restorative Circles in a school setting - http://enfoldindia.org/wp-content/uploads/2020/11/Life-Skills-Through-Restorative-Circles.pdf

Sample Restorative Circle 1: Body Image and Reproductive Health

(Level 1) for girls aged 15 - 18 years of age)
Life skill: Self Esteem
Purpose: Growing up, Body Image, Respect for Body and introduction to Reproductive System
Centre: Create a simple centre, placing elements from nature, and Talking Pieces that have some symbolic or personal value to one or all of the participants.

Opening: Facilitate a mindfulness moment of approximately two minutes, while playing some meditative, culturally appropriate, secular music.
Check-in: How are you feeling today?
Guidelines: Read out the Guidelines (Speak from the Heart, Listen from the Heart, Without feeling rushed - say just enough, and No need to rehearse - trust you will know what to say). Encourage participants to adhere to them.
Values: Explain the purpose of values in a Restorative Circle, explaining how they serve as a foundation for creating a safe respectful space that enables authentic deeper conversations. Facilitate a process of participants identifying values by asking them "What do you need to be practiced in this Circle, that would enable you to feel safe to share authentically from the heart." Pass the Talking Piece around and provide every participant an opportunity to share a value. Now facilitate a process of gaining consensus on the values, writing each one down on an A4 size paper/ paper plate so that it is visible to every participant, and place them around the Centre. In subsequent Circles with the same participants, ask participants if they would like to add any new values. If there are any new values that are offered, follow the process of gaining understanding, consensus, and commitment. Then write it on a similar paper/paper plate and place it around the Centre.

In today's session we might come across words such as body, growing up, gender, Sex, menstruation, periods, reproductive functions, reproductive system and reproductive organs and a few more that seems like a taboo and not allowed to use in our normal day to conversations. We wish to take you through a safe, scientific, respectful way (respect for our bodies as well as others) to know about our bodies. We have many organs in our body and each organ plays a very important role and has a function to perform in the body. For example, from the time we start eating the digestion starts from the mouth, then to the stomach, to the large and small intestine and then finally wastage in the body is thrown out in the form of stools. We can't think of not having a digestive system, similarly nervous system, circulatory system, etc.

Round 1: How comfortable are you on a scale of 1 to 10 (1 being not comfortable at all, 10 being very comfortable) about learning about Reproductive Systems sitting together here today?
Round 2: What are the changes that you are experiencing growing up?
Round 3: How do you feel about your body? Are there parts of your body you strongly like/dislike?
Round 4: What are the comments or messages you may have received about your body from people around you?

Content for Popcorn input session by Facilitator
You may have studied in 9th or 10th grade science about Reproduction of organisms from amoeba to human reproduction. Here is a definition of Human Reproductive System from Wikipedia
"A reproductive system is the part of an organism that makes them able to sexually reproduce. Humans and other animals use their reproductive systems to have sexual intercourse as well as reproduce."
Let's also understand what is human sexuality, and how people experience and express themselves as sexual beings.
That is, how they experience and express their sexual desires, sexual orientation and gender identity personally, socially, culturally and in intimate relationships.

[According to WHO], "Sex" refers to the biological and physiological characteristics that define men and women. "Gender" refers to the socially constructed roles, behaviours, activities, and attributes that a given society considers appropriate for men and women. To put it another way: "Male" and "female" are sex categories, while "masculine" and "feminine", are gender categories.

Gender Identity is an inner sense of being of a particular gender or agender. It is one's self-identification as male or female or any other. Although the dominant approach in psychology for many years has been to regard gender identity as residing in individuals, the important influence of societal structures, cultural expectations, and personal interactions in its development is now recognized as well. Significant evidence now exists to support the conceptualization of gender identity as influenced by both environmental and biological factors. (American Psychological Association. (2015).

Apart from 'girl' and 'boy', is there any other gender? While responding to this question you need to convey that there is a wider and more flexible range of gender expressions, with a range of interests and behaviors. Gender is not a binary, but a continuum; and that many children and adults express their gender in multiple ways. We express our gender through our clothes, hairstyle, mannerisms, speech patterns, body language, social interactions, or choice of activities.
Sexuality is diverse. Gender identity and sexual orientation (a person towards whom one feels sexually attracted) is largely inborn (due to genetic and epigenetic factors).
Transgender: At times, gender identity does not match the anatomical sex of the person. Gender of such people is referred to as transgender.
Every person is equally human. LGBTQIA+ and Queer {Lesbian (female with same sex attraction), Gay (male with same sex attraction), Bisexual (sexual attraction not exclusively to people of one particular gender), Transgender, Queer (an umbrella term for sexual and gender minorities), Intersex (people are born with physical or biological sex characteristics that do not fit the typical definitions for male or female bodies) Asexual (sexual attraction is not experienced)} community members are as intelligent as any other person. We need to look beyond the body at the personhood, the humanity of each individual. We can respect people for their intelligences, qualities, skills and behavior, and not for the way their bodies are made.
Developing human traits - qualities have no gender : All humans are born with all human traits, whether labelled masculine or feminine. Like muscles and bones and heart and liver - all of us have them, though the size and amount differs among the sexes and within the members of each sex. Similarly, all of us have all human qualities and intelligences - nurturing, cooperation, empathy, competitiveness, aggression etc. To categorize these traits as masculine or feminine is discriminatory and restrictive. It prevents people - adults or children, from exploring and developing their complete humanity.
Gendering our society was a big mistake! Each person needs to be encouraged to develop all their traits. No trait is better, superior or more desirable than the other. We need all the traits for us and the society to survive and prosper.
Check-out: How are you feeling after the session and what did you learn from today's session?
Closing: Stretching exercises, standing and sitting ones.
Alternatively, consider showing one of the videos that have been suggested in the Power Point Presentation on Diversity.

Sample Restorative Circle 2: Gender

Theme[11]: Gender - To explore what according to people around us tells us about being a Male or a Female and the pressure of those societal messages on one's own sense of self.
Life Skills: Interpersonal and Intrapersonal Relationships, Decision Making - Gender Roles

[11] This plan for a Restorative Circle was prepared by Arlene Manoharan, Co-Head, Restorative Practices Team, Enfold and Preethi Sunallini R, Facilitator, Enfold. The Restorative Circle was facilitated with children in a Child Care Institution on November 25th, 2020.

Preparation: Print out the table below, and cut it into strips and place the half-sentences in Column A in a box named A, and the half-sentences in Column B, in another box named B.
Opening : mindfulness moment instrumental music
Mindfulness music on share screen: https://www.youtube.com/watch?v=WUXEeAXywCY
Check-in: How are you feeling today?
[Facilitators must keenly observe the feelings here, if there is somebody that is not feeling ok, at the end of this round ask another question].
Talking Piece: Ask a child to share a Talking Piece and tell a story about it.
Guidelines and Values: Share the Guidelines. Facilitate a process by which children share the values they need the participants to respect, in order to enable them to share freely. Write these down and place them in the center. Request the children to show a visible sign that they will respect all the values. Instructions: Divide children into two groups - 'A' and 'B'. They are now asked to try and match the half-sentences in order to make complete sense. Each group could be invited to do a small fun body movement to say they are ready with one complete sentence.

First half of sentence (for Group A)	*Second half of sentence (for Group B)*
Men can take care of children	as well as women
Technical skills can place men and	women on an equal level
Women can work	as hard as men
It is believed that if we educate a girl	we educate a nation
Boys can play with dolls and	girls can play with cars
Pink and blue colour need not be	associated with girls and boys
Boys and men should share domestic work	with girls and women
Both man and woman should	get equal pay for equal work
A girl child	is not a burden
Don't neglect me	because I am a girl
"Boys should not	cry" is an accepted norm
It is believed that boys have to go out for work	while the girls can take care of the home
Homosexuality is often considered to be an	unspoken subject
Division of labour on the basis of	gender needs to be changed
Gender bias can lead to	violence against women

Source: Gender Sensitivity: A Training Manual for Sensitizing Education Manager, Curriculum and Material Developers and Media Professional to Gender Concerns.
http://unesdoc.unesco.org/images/0013/001376/137604eo.pdf

Round 1: Share one story from your life, when you felt compelled to do something only because of your gender? How did that make you feel?
Round 2: Share a story about something you can do, but society doesn't approve of, because of your gender? How does that make you feel?
Popcorn Round: Reflective questions, children can share or just reflect

1. Are these messages that society, media, people around give are true?
2. Other than male, and female are there any other genders?

Check-Out:

1. Share in one word how you are feeling right now, and
2. What do you wish to take away from today's Circle?

[The Facilitator should open the white board/word/ppt and share and make a list of sharing by the group as co-created core messages.]

Closing: Show these two videos -
https://www.youtube.com/watch?v=4Ct2bCfPpD8&feature=emb_logo - 2.43 seconds
https://www.youtube.com/watch?v=QCR24jyhfZk&feature=youtu.be - Gillette advertisement
Video on female barbers (Hindi) 2.23 minutes

Back cover blurb:

This Demystifying Sexuality Handbook is an accompanying document to the Demystifying Sexuality Reference Book. It has been developed by Enfold Proactive Health Trust for teachers and students of graduate, post graduate and special education courses, with the objective of reflecting on the real-life manifestations and applications of the concepts and ideas discussed in the Demystifying Sexuality program.

The handbook is a compilation of scenarios that aid the understanding of these concepts through Case Studies, discussions, role plays or reflection.

The handbook may be used as a guide by any teacher or facilitator trained in conducting the Demystifying Sexuality program, who may choose to use it as is, use parts of it or modify it to the specific needs of their learners. Students and practitioners may also use it to reflect on how they are applying these concepts in their interactions with people while in training, or in their professional capacity.