



World Population Foundation-Pakistan

LSBE Life Skills Based Education
Nurture us with care & we'll bear better fruits tomorrow



Impact Assessment Report



Impact Assessment Report



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Foreword

Recent years have seen an escalating global realization of the importance of youth empowerment for the present and future development of our society. This is mainly due to the current situation of a large youth population that is characterized by striking paradoxes, such as, poor socio-economic conditions, social issues of conflict, violence, gender discrimination and the growing burden of fatal diseases such as HIV & AIDS etc. In countries such as Pakistan, the gravity of this vulnerable situation increases due to the presence of a large young population i.e. almost 32% of the total population of 169.3 million, surrounded by deep rooted mythical cultural norms and beliefs regarding the above mentioned issues.

Concerning this, WPF strongly believe that Life Skills Based Education is one of the prerequisites for sustainable development in the country. Hence, WPF in collaboration with its partners has undertaken major efforts in developing a ground for LSBE on a national scale in Pakistan. WPF's LSBE programme is one of the leading interventions of its kind in the country which is successfully being implemented on a very large scale, covering up to 30, 000 adolescents and 621 teachers from 300 public and private schools over a period of four years. The programme was well received by students, teachers and their respective communities. Based on the success of the programme, WPF now plans to take up its advocacy initiatives on policy level for the institutionalization of LSBE curriculum on a national level; thus ensuring sustainable youth development in Pakistan.

Together with other stakeholders in SRHR sector, WPF shared insights, exchanged and developed materials, worked for achievements and identified concerns during the LSBE programme. The document in hand serves as evidence to the success of these efforts.

Qadeer Baig
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Any feedback will be gladly received, acknowledged and built upon while LSBE programme enters its advocacy phase.

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What is Life Skills Based Education-LSBE?

Life skills have been defined by WHO as “abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life”. Life Skills Based Education (LSBE) provides young people with core skills, knowledge and attitudes to help them make lifelong informed decisions, manage their emotions, communicate effectively and practice positive, health-seeking behaviour involving teachers and parents.

What are Life Skills?

The World Health Organization (WHO) has identified a core set of life skills that adolescents need to develop:

- Self awareness and empathy
- Decision making and problem solving
- Creative and critical thinking
- Communication and interpersonal skills
- Coping with emotions and stress

LSBE in Pakistan

Background

Pakistan is the sixth most populous country of the world with a total population of 169.3 million according to the World Population Datasheet 2007, whereby 60% of the population lives below the poverty line. The projection of this dilemma lies in the large number of young people in the country, who currently make up 54.2 million aged between 10 – 24 years. Due to this youthful energy, accompanied by exposure to an advanced and unchecked international media, as well as lack of adequate information and skills, young people not only tend to involve in risky situations, such as, drug abuse, unsafe sexual practices but are also vulnerable to sexual violence, sexually transmitted infections including HIV & AIDS etc. According to World's Youth Datasheet 2006, in Pakistan the prevalence of sexual violence among young children is 32%.

Almost 50% of young girls get married before the age of 20, and only 31% of girls and 41% of boys know about body changes during adolescence. There are obstinate traditional misconceptions related to these issues which term the debate around Sexual and Reproductive Health and Right- SRHR of young people as a taboo and increase the vulnerability of this generation to an unimaginable extent. These statistics call for an enhanced agenda of youth development and empowerment to challenge these societal barriers and ensure a holistic national development.

The agenda of youth development was taken in consideration by civil society in 1994 with the advent of International Conference on Population Development where the social development concepts were revised in terms of life skills approach towards programmatic interventions like poverty reduction, eradication of HIV & AIDS and social welfare. The ICPD Programme of Action (PoA) clearly states *“Children have universal and indivisible rights, including the right to survival; to protection from harmful influences, abuse and exploitation; and to full participation in family, cultural and social life. Furthermore, children have rights to information, education and services; to the*

highest attainable standard of physical and mental health; and to formal and non-formal education about population and health issues, including sexual and reproductive health issues.”

It was then realized that the best programmatic intervention was to equip young people with LSBE, which is a combination of health education and psychosocial skills. The education provides young people capabilities they need, such as practicing basic hygiene, making healthy sexual and reproductive health choices; communicating well in relationships and thus leads towards healthy life styles. Life skills encourage individuals to live healthy social and economical lives and seek pleasure in their being.

In particular, LSBE evolved in Pakistan during the late 90s whereby the civil society realized the importance of investment in youth development for effective poverty reduction and human development strategies.

During last one decade, efforts have been made by the civil society in collaboration with international agencies to bring about genuine empowerment among young people in Pakistan. The findings show that currently around 1.3 million adolescents, 2300 teachers/trainers and around 782 schools/drop-in centers have been approached by Life Skills Programmes in Pakistan. The major donors include UNICEF, Global Funds for AIDS Tuberculosis and Malaria, European Union, Directorate General of Netherlands, Civil Society Human and Institutional Development Programme, Embassy of Finland, Global Fund for Children, Packard Foundation, National AIDS Control Programme, World Health Organization and Swiss Agency for Development and Cooperation.

With these resources at hand, the coverage and quality of Life Skills Programmes in Pakistan has been satisfactory on project level though not bringing the desired social change. Building on the learning and best practices, it is realized that there is a crucial need for institutionalization of LSBE in the national curriculum of Pakistan to reach out to the large number of young people enrolled in schools. In this regard, the civil society is now taking up advocacy initiatives to emphasize on the need of education reforms in the country and thus bringing far greater impact on poverty, health and employment status in short term and national stability in the long term. ✕

WPF's LSBE Programme

Conceptualization

World Population Foundation-WPF has been working in Pakistan since 1997 with an aim to improve the quality of life of young people and women by improving their Sexual and Reproductive Health-SRH. Keeping the population dynamics in view, WPF has been working with adolescents in Pakistan since its inception and has carried out many successful interventions in this regard. Initially, WPF addressed adolescents' reproductive health issues through its Adolescents' Development Programme-ADP which was aimed at equipping the young people with information regarding SRHR issues. Later it was realized that the provision of information alone cannot bring the desired change in behaviours and there was an utmost need of providing the young people with the appropriate skills to cope with these critical issues. With this background in mind, LSBE Programme was initiated in 2003.

Implementation Process

The project was implemented in two phases. The implementation process included needs assessment of the target group and communities resulting in production of needs based resource materials which were later used for the capacity building of partners and implementers to deliver LSBE curriculum in schools followed by the advocacy initiatives aimed at building coalitions for national curriculum reforms.

The programme coverage expanded to six main districts of Pakistan i.e. Karachi, Matiari, Peshawar, Multan, Pishin and Quetta. WPF, being a technical resource on SRHR, worked in these districts through the following partner organizations:

- All Pakistan Women Association (APWA) from Karachi
- Pakistan Village Development Programme (PVDP) from Peshawar
- Awaz Center for Development Services (Awaz CDS) from Multan

- Participatory Integrated Development Society (PIDS) from Quetta and Pishin
- Health and Nutrition Development Society (HANDS) from Matiari

Strategies

In order to ensure the long term sustainability, the support and involvement of the relevant departments of education and development is crucial. Therefore, the District Education Officers (DEOs) of each district were actively involved in the planning of the project. The partners and DEOs were trained for carrying out a qualitative needs assessment study in the local schools to identify the main issues faced by adolescents and the level of skills needed to cope with those issues. Based on this study, LSBE Manual was developed in consultation with international as well as local experts that included 17 modules on different issues surrounding basic health and hygiene, adolescents' sexuality, communicable diseases like HIV & AIDS, gender roles and communication and negotiation skills. The programme was implemented in different public and private schools over a period of four years (2003 – 2007).



Partners selected private and public schools in their respective districts whereas WPF conducted a series of trainings to build the capacity of partners to sensitize the selected teachers on SRHR issues of young people as well as the specific topics of LSBE curriculum for young people. Throughout the project implementation, subsequent trainings were given to the teachers to upgrade and strengthen their skills in overseeing and supporting the implementation of the curriculum.



Teacher's training



Whole of school activity

The “Adolescent Health Life Skills Manual”, known as the LSBE curriculum, was developed by experts from the SRHR sector, keeping in view, the global life skills description and local cultural trends. The manual was originally designed and produced in English and was later translated in Urdu for better understanding of the local people of Pakistan. The translation of the manual was an extensive and lengthy process because of the limited vocabulary on SRHR issues in the local language. The support learning material for the curriculum included a teachers’ guide and a student workbook. All the material was pre tested for its feasibility and acceptability in the local schools and communities.

The LSBE programme was formally initiated in August 2004 with formal Memoranda of Understanding (MoU) with the government in all four provinces. At that time it was implemented in eighty three (83) schools with almost 5,236 students by an enthusiastic cadre

of volunteer teachers (180) delivering the programme in normal class hours with back up support from four trained local NGO teams in each region.

In the year 2005, after the rapid expansion of the LSBE programme in various schools, GFATM joined hands with WPF through National AIDS Control Programme (NACP) and co-funded the programme for the year 2006 - 2007. This phase of the LSBE programme delivery was completed in June 2007 covering around 300 public and private schools, 621 volunteer teachers, and 30,000 students under its umbrella.

Today WPF's LSBE programme is one of the leading interventions of its kind in the country. The programme has been well received by the students, teachers and their respective communities. Based on the success of the programme, WPF now plans to take up its advocacy initiatives on policy level for the institutionalization of LSBE curriculum on a national level thus ensuring sustainable youth development in Pakistan. ✕



Students in LSBE orientation sessions.



Whole of school activity

Impact Assessment

After the successful completion of five years, WPF conducted an impact assessment study to evaluate the effectiveness of the programme in the target communities. The objectives of this study are to:

- highlight the achievements of WPF and its partners regarding the implementation of the LSBE programme;
- determine the level of behavioral change in the students who have completed the LSBE curriculum;
- assess the compatibility of the programme with the school curriculum for future sustainability;
- document the success of the programme to strengthen the advocacy initiatives regarding the institutionalization of LSBE in the national curriculum.

Design and Methodology

The methodology of the impact assessment was aimed at acquiring a cross section of perspectives regarding SRHR issues and thus a wide range of both direct and indirect beneficiaries of the programme were interviewed. The respondents included students, parents, teachers and principals. Below is a detailed description of the methods used to collect information for the impact assessment.

Assessment Methods

The LSBE impact assessment was carried out using quantitative and qualitative research design involving:

1. Pre-intervention and post-intervention tests



LSBE module delivery

2. Focus group discussions
3. In-depth interviews
4. Analysis of relevant project documents e.g. partners' progress reports and LSBE annual reports.

Assessment Tools

The tools developed for the impact assessment study included pre and post-tests questionnaires and guides for interviews and focus group discussions.

Respondents of the Assessment

The respondents of the impact assessment study included students enrolled for LSBE, trained LSBE teachers, principals of the LSBE - friendly schools and parents of the respective students from all the five districts. Other indirect respondents included WPF - LSBE donors and partners and other major stakeholders of LSBE in Pakistan who have been involved in WPF – LSBE programme over the years prior to and during the implementation of the project.

The sample size of the respondents is:

Pre – Test Respondents: The sample size for pre-test included 1693 students out of which 932 were girls and 761 were boys.

Post – Test Respondents: The post-test was taken by a total of 2271 students that included 916 girls and 1355 boys.

Respondents of FGDs: 523 stakeholders were reached through FGDs and interviews.

The difference in the number of respondents of the pre-test and post-test is due to the increased enrollment of students in the LSBE programme, thus making the similar sample percentage depict a higher number of students in the post-test. ✘

Data Collection and Analysis

The entire data of the study was collected by the staff of the WPF and LSBE partners. Prior to data collection, the staff was oriented on the purpose of the impact assessment and trained on the use of the assessment guides. Each partner collected and carefully reviewed the quantitative as well as qualitative data from their respective districts according to the guidelines outlined by WPF.

The data collected during interviews from partners and other stakeholders was organized by the WPF programme staff itself. At the conclusion of the data collection exercise, it was synchronized, collated according to themes and issues to be addressed in analyzing the impact of LSBE programme. The behavioural change in students is interpreted and documented by comparing the quantitative data of pre-tests and post-tests.

Set Targets - Indicators of Achievement	Level of Success
80% of the identified schools use LSBE manual.	Till 2007, 70 % of the identified schools used LSBE manual.
75% of the trained teachers use LSBE manual with the students and have adopted interactive teaching approaches to deliver the module.	84 % of the trained teachers used LSBE manual with the students and adopted interactive teaching approaches to deliver the module.
35% of identified young students have an understanding of their sexual and reproductive health issues like puberty changes, personal hygiene and HIV & AIDS etc and can talk about sexual health issues among their peers and families etc.	65% of students could identify at least two major puberty changes (nocturnal emission in boys and menstruation in girls). 95% of boys and 98% of girls identified bathing regularly and eating a well balanced diet as major components of health. 87% students identified at least two ways of prevention from HIV infection with 72% of boys and 64% of girls identified the use of condom as one of the effective ways.

Set Targets - Indicators of Achievement	Level of Success
35% of the identified young students have a better understanding of socio-cultural issues such as gender roles, sexual harassment, drugs, marriage and family planning.	79% of boys and 86% of girls were of the view that the household responsibility shall be shared by male and female equally 71% of boys and 72% of girls identified 'abuser' to be responsible for the act of sexual harassment. 88% of boys and 91.6% of girls could identify smoking as one of the main causes of cancer
35% of the young students have improved self-esteem and confidence to lead healthy lives.	81% of boys and 78% of girls reported that LSBE helped them develop a good self-image. Also, 71% of boys and 75% of girls thought that they were taken as good persons by other people in their interaction. 61% of boys and 69% of girls had a good self-control and had developed anger management skills.
35% of the identified young students have skills to make sound decisions about their health, family and future.	82% of students had developed good decision making skills 87% of students responded that they are now very clear about their future and had set goals for themselves.
35% of the identified young students can effectively communicate with others and build successful and healthy relationships with other people.	92% of students opted that they could now easily communicate their ideas to their friends, peers and during class room lessons. 46% of boys and 66% of girls had started sharing their problems with their parents and could share their learning from LSBE at home.
35% of the identified young students have skills to resist peer pressure and protect themselves from adopting harmful behaviours.	67% of boys and 67% of girls were able to say 'No' to negotiate their way out of tricky and risky situations. 80% of students said that they can refuse if offered/pressurized to smoke

The LSBE programme has brought about significant changes in students' knowledge regarding subjects that are crucial to adopt safe behaviors at this young age. The findings indicate that the programme has improved the young students' understanding of many issues and thus making their outlook on life more informed.

When asked to identify certain skills that they think have been developed or strengthened as a result of LSBE, self-protection skills were rated higher among others. 91% of boys and 92% of girls said that they can now confidently face situations of harassment and protect themselves in these situations. During discussions, parents appreciated LSBE for providing self-protection skills to their children especially girls that have enabled them to tackle unsafe circumstances. Some parents also shared that they were now less worried about their children having outdoor activities etc. as LSBE has well equipped their children with skills to prevent and handle risky situations.

It was repeatedly noticed during the discussions that LSBE has provided students the confidence with which they can now talk about their sexual problems to their parents/guardians and thus resolve many issues regarding their physical and emotional health.

The district wise trends of LSBE impact showed that students from Matiari, Karachi and Peshawar showed a good level of knowledge of the issues discussed during LSBE sessions and the level of acquired skills during the programme was also noticed to be higher among these students. A positive change was also noticed in the level of comfort of young people while discussing and responding to sensitive issues. However, students of some schools in few districts were still reluctant to discuss the issues like masturbation and menstruation. There could be multiple reasons behind it including level of comfort, clarity and personal blocks of teachers. This also emphasizes the importance



LSBE module delivery



of providing information and raising information in general communities as well as working on a continuous basis with young people instead of one time intervention or activity.

During statistical analysis of data it was observed that there still exist certain gaps in students' perceptions of issues such as talking about sexual health problems and rights. The concentration of such statistics was observed in the responses from districts like Pishin and Multan where people either stick to their long held social beliefs or did not respond to the questions. Like in Multan, majority of the girls (52%) thought that boys shall not cry/weep even if they are upset and similarly, majority of the boys (54%) were of the view that men shall always be served before women at meal times. The social barrier that discourages the debate around sexuality issues and prevents young people from open discussion is one of the major reasons for such responses among the students. In this vain, there is a need of educating the adults on these issues and including such information in the mainstream education instead of teaching it as an extra curricular activity, to make it commonplace among the community.

During discussions with the students it was observed that they appreciated the importance of skills to communicate, negotiate, and control their emotions, and were already using these skills to encourage people in their communities to desist from aggressive behaviors that could lead to conflict and un-peaceful communal environment. Parents also appreciated the skills their children had adopted and the values that are reinforced in them and are shown by their respect towards others and communication within family etc. thus cultivating positive relations.

Parents pointed out that they could see a pleasant difference in their children after LSBE programme. One of the fathers shared with the teachers that: "I was never hopeful enough about the change in my son's behavior that was so stubborn to listen to any advice that we would try to give him. Now, I see him as an ideal son who is so friendly and respectful. I am astonished at the wonderful change in his behavior which has improved the overall environment at our home. I highly appreciate LSBE programme for this and wish that it reaches every child of the country to raise productive citizens". ✕

Achievements of the Programme

- Ownership of school communities
- Positive change in attitudes of teachers
- Increased interest and demand from civil society organizations
- Reinforcement of the “Holistic Approach” to quality education

Rapid Expansion of the Programme

Initial Stage	Completion Stage
Four (4) districts <ul style="list-style-type: none">● Multan● Hyderabad● Pishin● Peshawar	Six (6) districts <ul style="list-style-type: none">● Multan● Matiari● Karachi● Pishin● Quetta● Peshawar
83 Schools	300 Schools
180 Teachers	621 Teachers
5,236 Students	30, 000 Students

Challenges, Learning and Recommendations

Challenges

- The LSBE programme is viewed as a donor-driven project activity and thus the LSBE curriculum was given a marginal role within the school system.
- The barriers in realization of young people's sexuality issues and hindrance to debate on these issues in our society increases the magnitude of vulnerability of the young generation.

Learning

- It is very essential to involve adults of the community such as parents, religious teachers and local leaders, etc in programme planning and implementation as without their support young people cannot benefit from this programme.
- LSBE demands adequate provision of training to teachers that would allow for personalization and internalization of skills to divert them from familiar didactic teaching approaches. The teachers need to unlearn authoritarian approaches in order to become effective LSBE providers and to build relationships of trust with their students.
- An LSBE programme that aims to promote positive behaviours will have difficulty succeeding if young people cannot access the appropriate health and social services. There is a need to develop linkages of the LSBE programme with voluntary counseling & testing services, treatment for sexually transmitted infections (STIs) and HIV prevention etc. There is a need to build on youth-friendly services to ensure an effective referral system for young people.

- Moreover; there is a need to equip the teachers of the LSBE programme with a good understanding of these services and their availability in the community for in-time referral purposes.

Recommendations

- The efficiency of a life skills education programme would probably be higher if it incorporates a youth perspective in programme planning, development, evaluation and advocacy. Empowering young people can actively influence and shape the political agenda and help advocate for inclusion of LSBE in the national curriculum.
- For this reason, there is a need to mobilize the support of policy-decision makers and engage their leadership to bring in a social acceptability of youth issues concerning their sexual health and rights. This would pave way for the inclusion of LSBE curriculum in the national education system.
- The duration of the delivery of LSBE programme should be expanded over a period of 3-4 years for adolescents, to provide age specific information. This will help in standardizing it as a part of ‘continued education’ model and approach to education in Pakistan and will also provide students time and opportunities to practice their learnings from life skills schools and communities.
- Currently, there are a number of organizations working on life skills education in Pakistan, each offering different materials and curricula for social learning and life skills, which is confusing and often duplicative. By providing a unified framework, the social sector can be driven away from the ineffective and costly single-problem focused strategies towards an integrated development approach towards LSBE, focusing policy change for sustainability. ✕



LSBE Convocation Hala - Shield being presented to a teacher



LSBE Convocation Karachi



LSBE Convocation in Quetta



Principals, Teachers and Government officials join hands for LSBE- Convocation Hala



LSBE Convocation Multan



LSBE Convocation Peshawar



Case Studies

A young student shares during an FGD

A young student shared during an FGD: “I grew up in a very conservative family and was a weak learner throughout my school life due to which I used to have a very low self esteem and had a quite reserve personality. Even physically I was an anemic and my teachers would always ask me about this but I would make an excuse of stomach disorders. Though I was well aware of pain in my breast but I was ashamed of sharing it with anyone. In 2006, LSBE programme started in my school where among other things I learnt about personal health and hygiene. Due to open discussions on different issues regarding our bodies and health, I was able to share my problem with my teacher who encouraged me to talk to my parents about it and asked me to get a check up from a doctor. I talked to my mother about it who took me to a doctor where I had a complete check up and was diagnosed for having harmful lumps in my breast that needed surgery. My parents immediately arranged for the surgery and I was treated for the problem. Afterwards, my health started improving itself and I was able to enjoy things around me. It was like a fresh new life for which I give credit to the LSBE programme”.



Jamil Arif

While teaching LSBE in the class, when I reached the chapter of “Adulthood”, the boys at first seemed very reluctant. However, after sometime they started talking openly with confidence and started asking various questions. There was a boy in this class who remained quiet all the time. I was already noticing for some time that his health was also deteriorating day by day. One day, I said to him, “Son! Do some exercise and improve your diet.” He got embarrassed and said, “Sir I want to talk to you in private”. So he came to me and shared his worries about the bodily changes taking place. And I explained to him in detail the transitions to adulthood in accordance with the information we had learnt from LSBE programme. Since that day onwards, the boy seems very happy. He often asks me, “Sir when are you starting LSBE program again?”



Salma Naheed

This incident happened to a girl whose uncle was forcing her to have sexual relationship with him. This girl had already taken the lessons of LSBE in previous class. One day the girl came to me and shared this problem in detail. I told her to avoid that man and inform her mother. When she told her mother, she started scolding her and told her, “If you tell your father, I will not let you study and will send you away”. That was a very disturbing point for the girl. After some days, she came to me again and told me the same story that her mother forced her to visit her uncle in order to keep the family ties intact. The girl was again sexually abused when she went there. Then I forced the girl to bring everything in her father’s knowledge irrespective of her mother’s reaction. When she told her father, he confronted the man and socially boycotted with him. The girl came to me and told me that she had come out of a big problem by listening to me and telling her father.



Jaam Allah Rakha Nasir

The efforts that I have made to solve the problems of students after taking LSBE course have been appreciated by many. It has increased their self confidence and courage. One of my students was very quiet by nature. He never talked to anyone at school. I told him over and over again to open up but he was always reluctant to do so. I wrote an Urdu speech for him and helped him prepare it. By practicing it again and again the student became confident to speak in front of others. He delivered that speech in the morning assembly in front of all the teachers and students. Now this student speaks in a beautiful and confident manner. He has taken position in district level competition. This means that if the hidden abilities of a child are highlighted, he can succeed for sure.



Fazal Muhammad

Ahmad was a student of class 8th. He was very poor and used to work as a salesman after school. He had befriended some bad boys and had started smoking. He wanted to quit it but could not do so. I did not ask him to quit smoking rather I told him about the demerits of smoking and asked him to try leaving it gradually like if he smoked four cigarettes a day make it three. In this way, that boy left smoking in about a month or so.



Mrs Nusrat Ara

There was a very competent female student in my class who always took prominent position in the class but lately I felt that she had started missing her classes. As her absence increased, naturally her studies got affected. I told her friends to find out about her and ask her to come to school but she remained absent. Then I asked her address from her friends and went to her home myself with my husband. I met her mother who told me that her brother and father were very strict and they were not letting her study. I called the girl and affectionately asked her the reason. She told me “Some boys troubled me while I went to school. I couldn’t tell anyone because I was embarrassed and then I started missing my classes. One day my brother found that out and I had to leave the school”. My husband and I both convinced her parents not to do so and have faith and confidence in their daughter. After having repeated meetings with her family the girl is back at school now with the same enthusiasm and abilities. I am happy that I saved her future.



Mrs. Naseem Akhtar

It was quite some time that I had started noticing something in my class. One of my students always used to be afraid. She often tried to talk to me but could not do so. The same year after training, I started teaching LSBE in my class. After attending 2 or 3 sessions, one day she came to me and started crying. On investigating she told me, “Teacher, when I go back to home from school a boy teases me by using bad language. If my parents get to know about this, they will not let me come to school”. I asked her to tell her mother about this but she refused. Then I advised her to tell any close relative whom she could trust. She took her grandmother in confidence and told her everything. When grandmother informed the family they got really annoyed and said that they would stop her from going to school but the grandmother told them not to do so. Her mother came to see me and I convinced her not to decide something emotionally and try to find a real solution for it. Finally they decided that they would pick and drop their daughter themselves and this way the girl continued with her studies.

Annexure

Content of LSBE Manual

Focus Group	Specific Topics	Corresponding Modules
The Adolescent	Self awareness Values clarification Communication Managing emotions Changes of adolescence Decision-making Goal setting	Module 1 Module 2 Module 3 Module 4 Module 5 Module 7 Module 17
The Adolescent and their Peers	Peer relationships Risk taking Drug use	Module 6 Module 8 Module 13
The Adolescent and their Family	My family Preparing for Family Life	Module 10 Module 16
The Adolescent and Society	Gender Health Nutrition Abuse HIV/AIDS	Module 9 Module 11 Module 12 Module 14 Module 15

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