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IN OUR HANDS

workbook
for women
on fertility
and sexuality
awareness

tathapi

In Our Hands

workbook for women on fertility and sexuality awareness

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On pgs.1 & 49, from *Beti kare Savaal*
(Eklavya Prakashan, Bhopal, 1997)

On pg.48, from *New View of a Woman's Body*
(Feminist Health Press, Los Angeles, 1995)

On pg.39, from *How to stay out of a Gynecologist's office*
(Peace Press, Culver City, 1981)

On pg.47, from *Na Shariram Nadhi- My Body is Mine*
(Sabala & Kranti, Mumbai, 1995)

As women...

we face all sorts of situations regarding our bodies... our fertility and our sexuality...



My period's late... Will I get it with these tablets?

I'm having a strange kind of discharge. I'm afraid to tell anyone.



That person is looking at me and I feel something happening inside, but...

Can I really decide? Do I have to take anybody's permission?

I was trying not to get pregnant, but it didn't work...



It's often very confusing and sometimes frightening....

Many feel it's not in our hands... yet **what your own body tells you** can help you to decide. **It is** in our hands. It's our right!



We need to start asking questions like these...

I only get my periods every few months. Am I abnormal?

If I take pills to avoid another pregnancy, will it affect my milk?



I would like to understand, why I haven't had a child?

Will this help me know what happens around menopause?

... and finding answers.

Tradition says...

A WOMAN'S BODY IS JUST A FIELD FOR A MAN'S SEED.

MENSTRUATION IS A CURSE.

MENSTRUAL BLOOD IS DIRTY AND POLLUTING.



In many parts of our country, women have to sit apart or outside the house during the menstrual period. Women are thought to be unclean during these days. As any woman *might* be menstruating, in some religious places they are barred from entering at any time.

How did the menstrual taboo begin? The *Yajur Veda* (a later vedic text) gives a hint about the origin of the menstrual taboo. When Indra slayed the powerful demon Vritra, who 'held back the waters' from the gods the guilt of killing him was great. Indra persuaded women to share part of it, and their monthly bleeding is the sign of their acceptance. Interestingly, the demons are known by their mothers' names, and the gods by their fathers' names - the victory of Indra over Vritra can be seen as the triumph of patriarchy over a matrilineal social order.

In many other cultures, too, menstruation is seen as a 'curse' and there are various forms of taboo around it.

When you're having your periods, you're treated as untouchable, but it's as if you have a strange internal and unseen power.

But still... All over India, respect for menstruation is still reflected in rites of worshipping the fertile earth (equated with woman) and in the auspicious use of red *sindoor*, etc. In south India, a girl's first menstrual period is still publicly celebrated in families and communities.

Culturally, menstrual and lunar cycles are linked with the cyclical order of nature (*ritu*)... From the most ancient times, menstruation has been seen as a sign of fertility and life.

In Maharashtra, women's link with fertility of the soil is affirmed during sowing, when only women drop seeds into the *tiphani* (seed-drill).

Ancient myths,
cultural decrees...

What is right?
What is wrong?



Is menstruation really 'impure'?

If we touch a jar of pickles, or if we make papad, will it spoil?

If we water plants during periods, will they die?



If we go to a sacred place will something bad happen there?



Sakhubai was told to keep her menstrual cloths out of her husband's sight or he'd go blind.

Do you think it's possible?

All of it

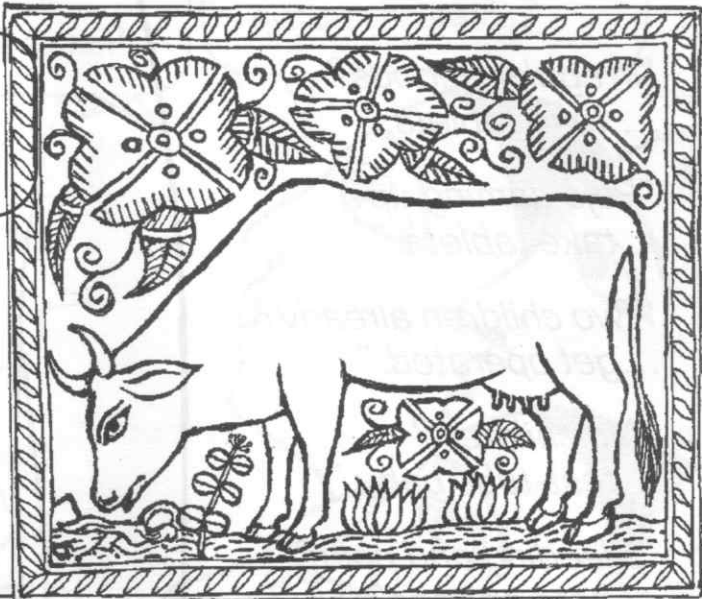
Some of it

None of it



What have you heard?

They say if a cow eats your menstrual cloth, she'll get barren.



Write here:

I heard if you cook for your man in those days he'll be born as an animal in his next life!



Your ideas about how to find out the truth:

This is your page to write on... don't be shy.

and now we hear...

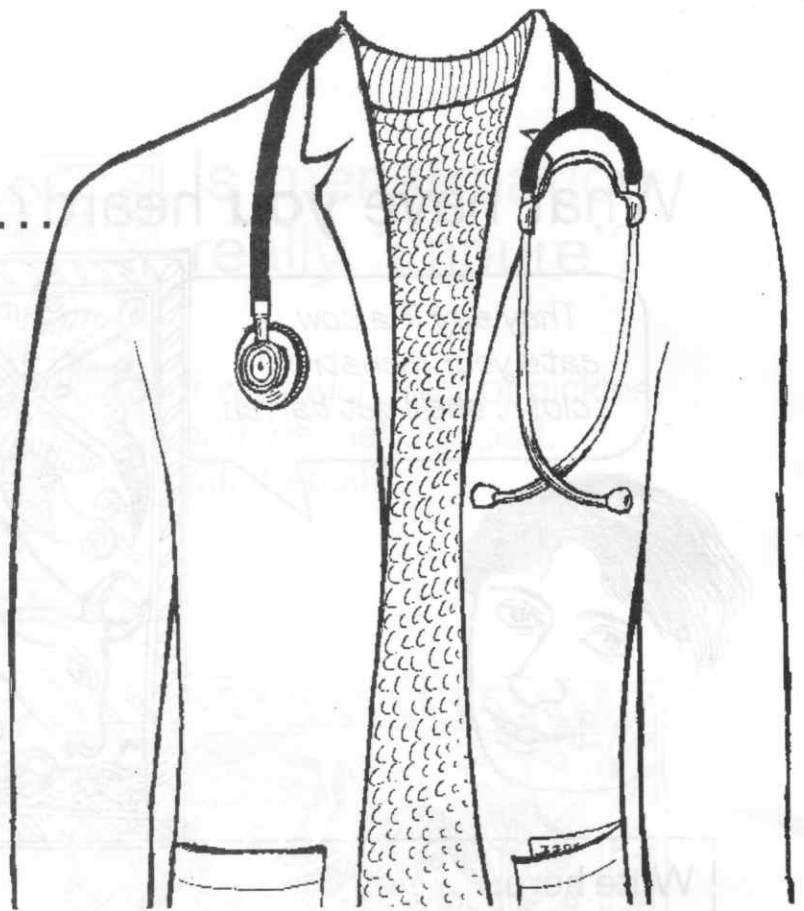
*"Irregular periods?
... take tablets."*

*"Puja coming up?
...take tablets."*

*"Two children already?
...get operated."*

*"No children?
...test-tube baby."*

*"Bleeding and pain?
or hate periods?
...remove the uterus."*



Medical words,
mechanical
attitudes...

Unnecessary or Excessive Use of Female Hormones

Hormonal contraceptives (pills, injections, implants) are used to prevent just a few days of fertility every month, the whole body has to bear the continuous effect of artificial levels of hormones. Women need to know how these drugs work, their risks, and the alternatives, before deciding to use them.

After menopause, women are told that their bodies now 'lack' female hormones and to 'stay young' and to avoid bone and heart problems, the hormones need to be 'replaced'. However, it is now known that the risk of both cancer and heart disease increases with Hormone Replacement Therapy (HRT). Regular exercise, wholesome diet and positive outlook and support can prevent health problems in older women.

*What is true?
What is false?*

How Modern Medicine Serves Patriarchal Tradition

- Ultrasonography is used during pregnancy to detect the sex of a foetus, so that females can be aborted and birth of sons allowed.
- Hormone pills are used by girls and women to avoid having their menstrual periods during religious occasions like pujas and marriages.

But... why do periods come at all?

How do I know when my next period will come?

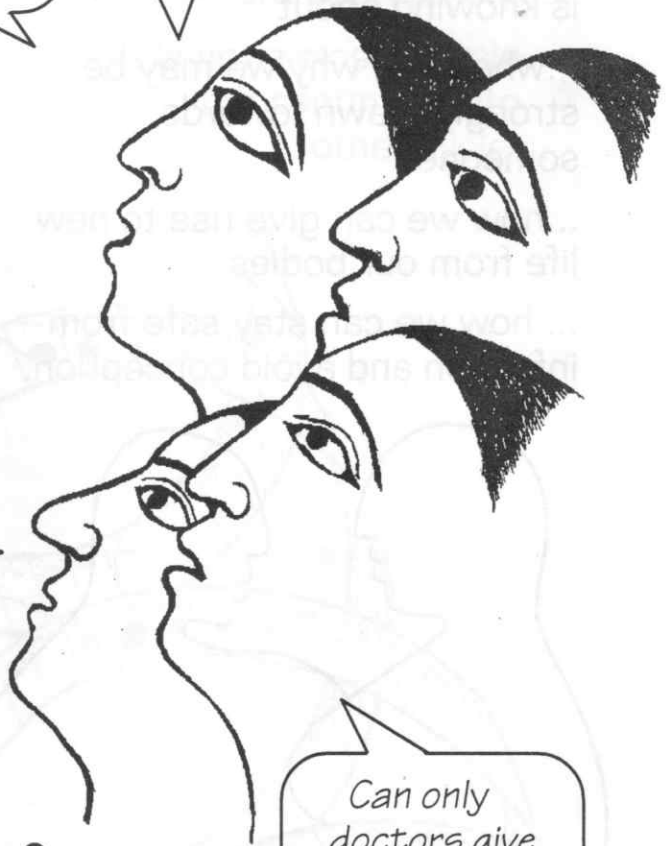
Are all of our cycles the same?

What do my feelings have to do with my menstrual cycle?

What is "fertility"?

...and "sexuality"?

What is "white discharge"?
...or is it "secretions"?



Can only doctors give answers?

How much do we know about our own bodies?
...about health and sickness?
...about sex and reproduction?

All of us notice feelings in our bodies when we are sick – feverishness, nausea, vomiting, pain and so on.

Even when we're healthy we get a stream of positive information, if only we learn to listen to it.

Can my own body tell me?

... yes, the body tells about what happens inside of us.

Becoming aware of it helps us to know and decide many things. . .

This is 'body literacy'.



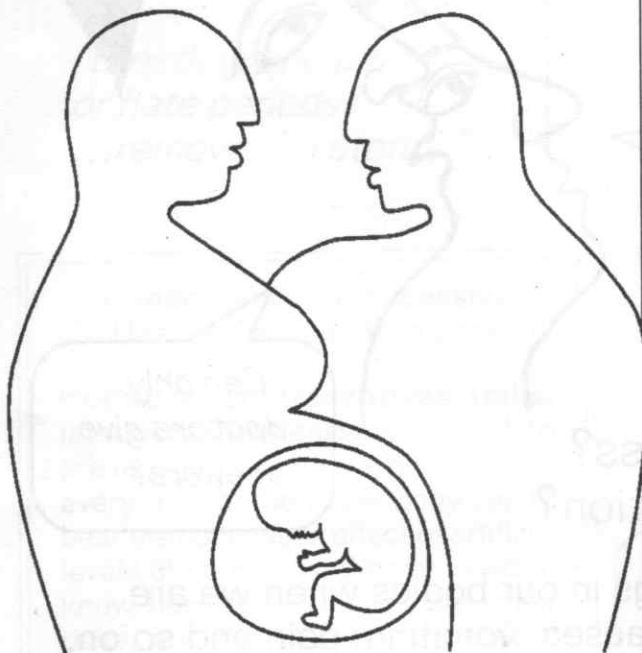
Sexuality and Fertility

Part of 'body literacy'
is knowing about

...when and why we may be
strongly drawn towards
someone.

...how we can give rise to new
life from our bodies.

... how we can stay safe from
infection and avoid conception.



Women and men are both
fertile. A child growing inside
a woman's body arises from
the combined fertility of both
man and woman...

What *is* a menstrual cycle?
Why do 'periods' come?

How does a cycle relate with
one's sexuality and fertility?

Both women and men have sexual feelings and body responses. By 'sex' most people understand 'penetration of vagina by penis'. But this narrow idea may ignore many possible forms of sensitive sexual expression. Often women find this kind of sex exclusive and traumatic . . . as if they are being used as a mindless object to satisfy a man's urges. They may even experience the sex act as rape.

Sexuality is a difficult area in most women's lives. Getting in touch with it is an important part of self-help group work. It is not easy.

As women, our sexuality depends partly on what happens with our fertility in the menstrual cycle, but it depends on other influences too - like whether your health is good, or how you feel about sex (ok, or full of fear), or - if you are 'having' sex - whether your partner is sensitive and you feel comfortable.

To the extent that sexuality is linked with fertility, it is because the sex hormones - oestrogen in women and testosterone in men - act in their bodies (and minds) to ensure that eggs and sperms will come together and unite.



*To grasp all of this,
let's begin by looking
at what happens in
a menstrual cycle.*

Menstrual cycles...

On the calendar months of March, April and May, Manasi marked her period days with smaller and larger dots...

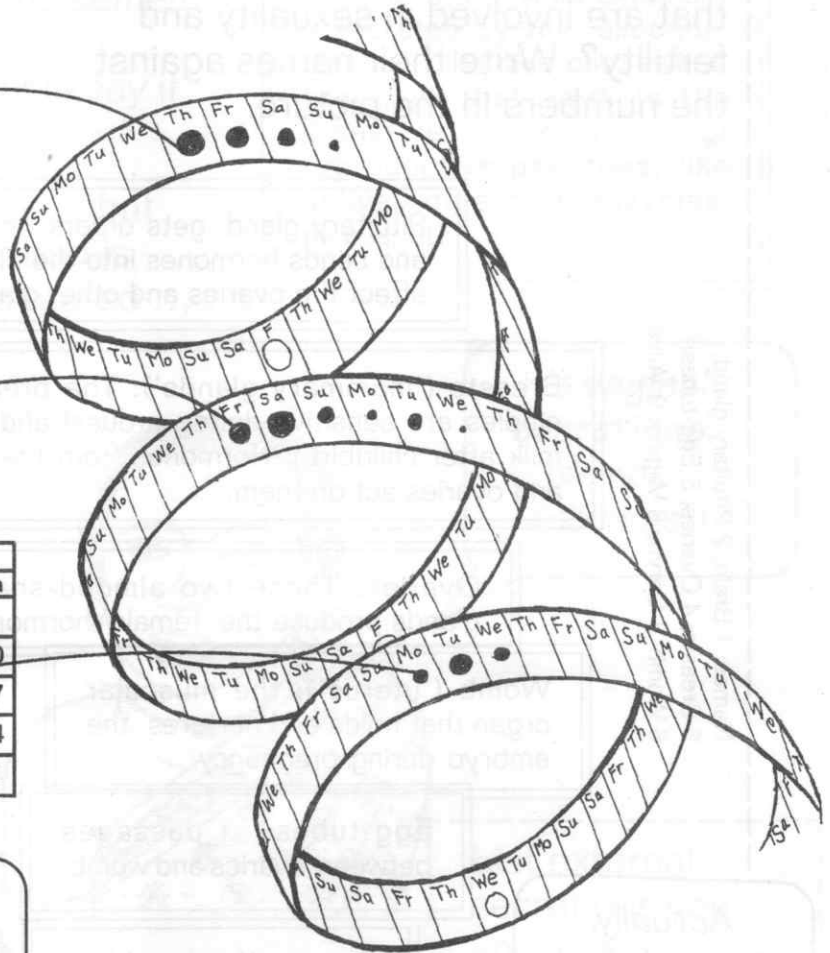
A cycle starts on the first day of a 'period' and ends on the day before the next one ...

It is not a closed circle but continues into other cycles ...

March 2003						
Su	Mo	Tu	We	Th	Fr	Sa
30	31					1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

April 2003						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

May 2003						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31



It's like a long, spiraling ribbon.

How many cycles can you see? _____

How many are complete cycles? _____

How many are incomplete cycles? _____

Inside a woman's body

...the Sexual and Reproductive System consists of all the parts and actions directly involved in the menstrual cycle, sexual relations, pregnancy, childbirth, and breast-feeding.

Can you name the parts of the body that are involved in sexuality and fertility? Write their names against the numbers in the picture.

Midbrain ('hypothalamus'): coordinates the cycle by sending messages to the pituitary gland and getting 'feedback' through the bloodstream (it also controls blood pressure, heart rate, digestion, temperature, etc.)

Pituitary gland: gets orders from the midbrain and sends hormones into the bloodstream that affect the ovaries and other glands.

Breasts ('mammary glands'): The breasts and nipples are sensitive during arousal and produce milk after childbirth. Hormones from the pituitary and ovaries act on them.

Ovaries: These two almond-shaped glands produce the 'female' hormones.

Womb ('uterus'): the muscular organ that holds and nurtures the embryo during pregnancy.

Egg-tubes: passages between ovaries and womb.

Cervix: the 'neck' or 'mouth' of the womb.

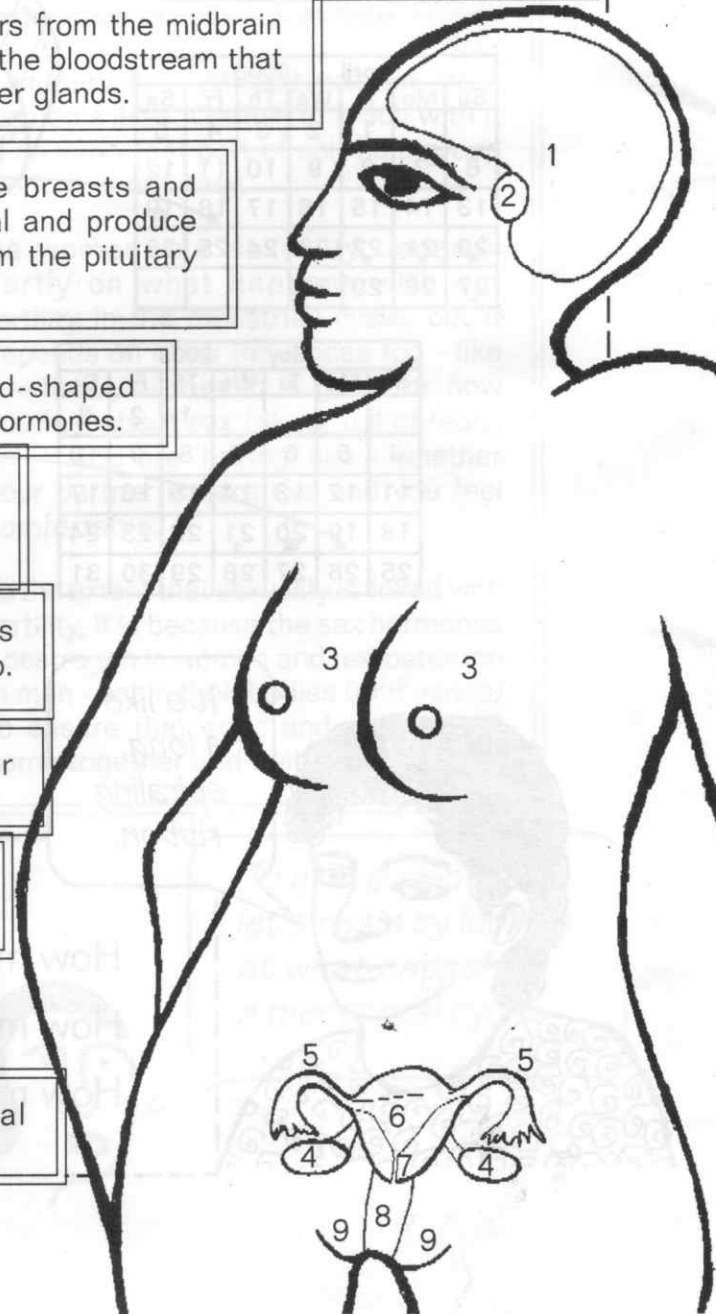
Vagina: a strong, stretchable passageway from vulva to cervix.

Vulva: The area from the pubic mound in front to the anus behind.

Clitoris: The female sexual organ... [See page 47].

Names: 1 Brain; 2 Pituitary gland;
3 Breasts; 4 Ovaries; 5 Egg-tubes;
6 Womb; 7 Cervix; 8 Vagina; 9 Vulva

Actually,
the whole body
is involved!



What are 'secretions'?

Our bodies 'secrete' (produce) various fluids for special reasons... these are the 'secretions'. Some *come out of the body*, so we can see, smell and touch them.

For men... sweat, blood and semen (*veerya*) are associated with bravery... but what do people say if men shed tears!

For women... tears are fine... but sweat is dirty, menstrual blood is taboo, 'white discharge' is feared ... arousal fluid evokes guilt...

Secretions are substances or liquids produced by specialised cells in various parts of the body. All secretions have positive functions. Secretions that work internally are called 'hormones'. They are produced by 'endocrine' glands – like pituitary, thyroid, adrenals and gonads (ovaries, testes). Other secretions that work externally – secreted by the 'exocrine' glands – like skin oils, sweat, tears, or that work in the digestive, urinary or reproductive passages, like saliva, digestive enzymes, mucus, etc.

Oh, I think I've got *white discharge*.



When secretions are just another way our bodies "talk" to us, why are such socially discriminating values fixed to them?



It's *vaginal secretions* ... it's not 'discharge'!

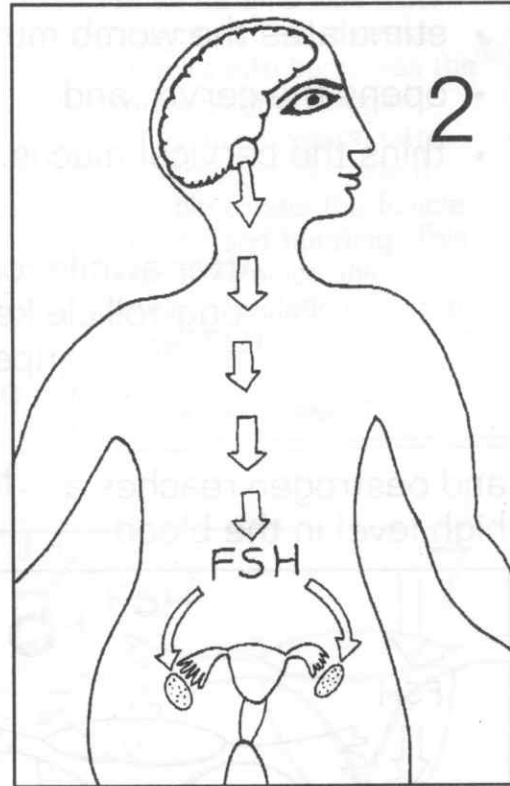
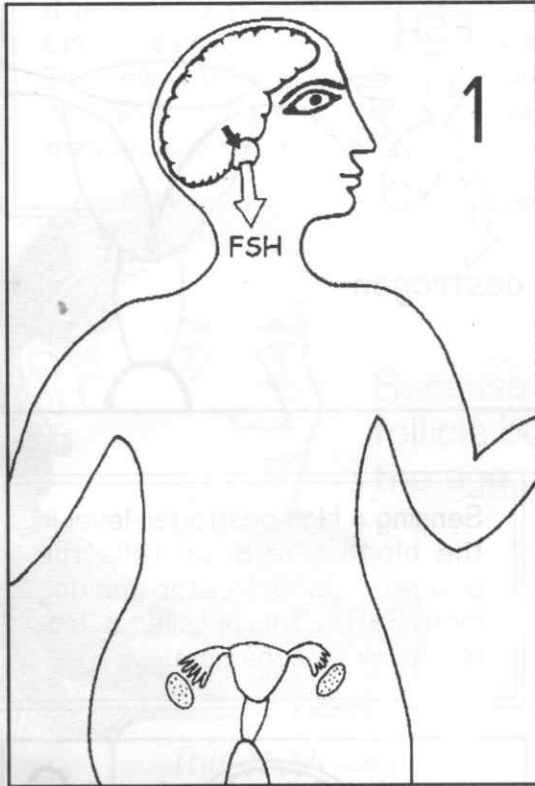
List external secretions you know of
and think about what each can tell you:

Hint: There are about ten.

FSH ... the 'start-up' hormone

The midbrain tells the pituitary to secrete 'start-up' hormone FSH.

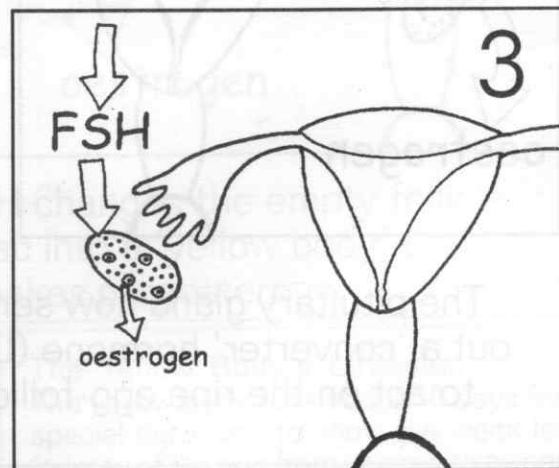
FSH travels in the blood stream from the pituitary to the ovaries.



Follicle Stimulating Hormone (FSH): is a hormone made by the pituitary gland. It stimulates unripe egg-follicles in the ovaries to ripen and to make oestrogen.

(In men 'interstitial cell stimulating hormone' or ICSH is exactly the same hormone as FSH.)

Oestrogen [meaning 'egg-generated'] is a hormone produced by egg-follicles growing in a woman's ovaries. Oestrogen makes it possible for an egg and sperm to meet and unite in the body. It helps the womb lining develop, it excites the womb muscle and makes the cervix (mouth of womb) secrete slippery mucus.

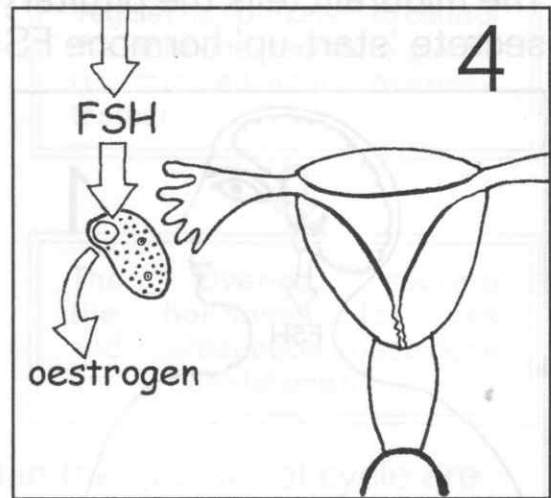


The ovaries are activated... They start to ripen egg-follicles, and they also begin making a hormone called 'oestrogen'.

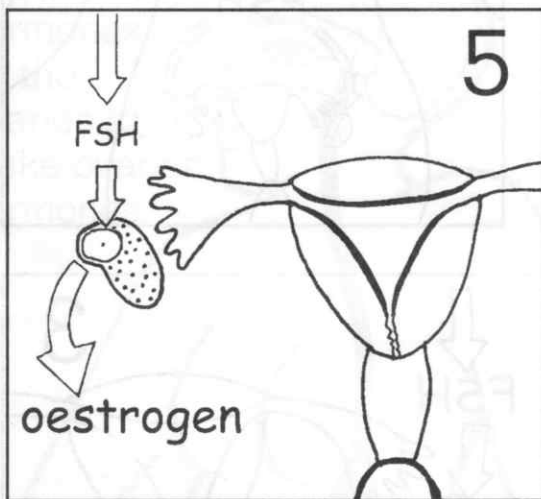
Oestrogen... from the egg-follicles

- builds up the womb lining
- stimulates the womb muscle
- opens the cervix, and
- thins the cervical mucus.

After awhile, only one egg-follicle keeps on ripening...



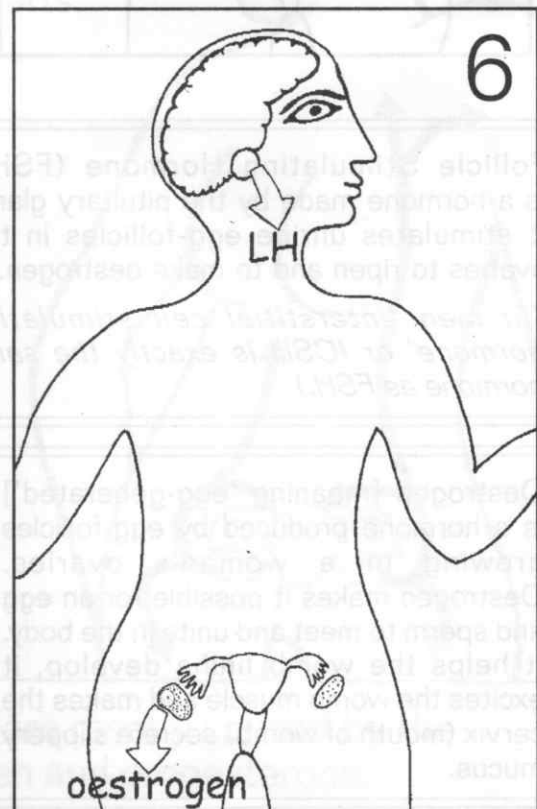
and oestrogen reaches a high level in the blood.



Sensing a high oestrogen level in the blood, the brain tells the pituitary gland to stop making more FSH... This is called a 'bio-feedback' mechanism.

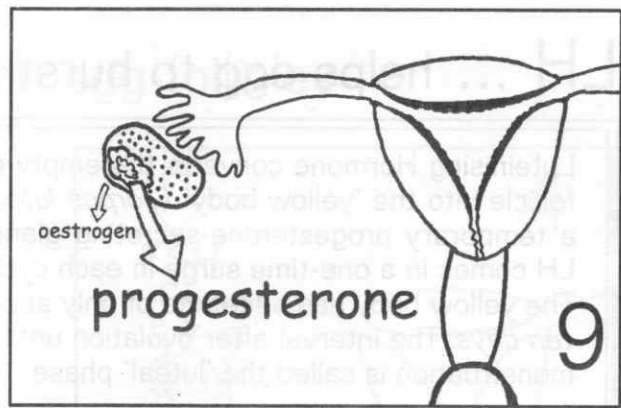
The pituitary gland now sends out a 'converter' hormone (LH) to act on the ripe egg-follicle.

Luteinising Hormone (LH) is the second hormone from the pituitary gland. It comes in a spurt and causes the ripe egg-follicle to switch from making oestrogen to making progesterone.

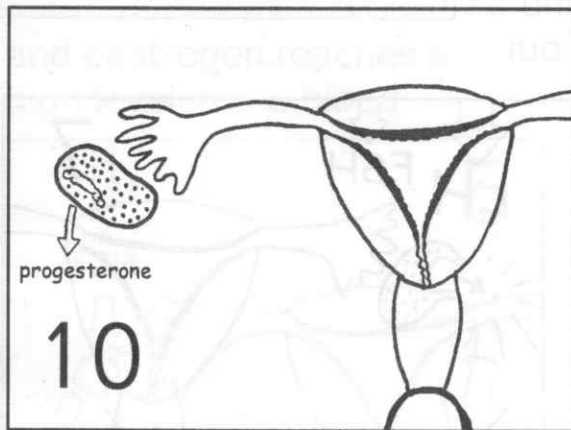


Progesterone... from the yellow body

- deepens the womb lining,
- quietens the womb muscle,
- closes the cervix, and
- thickens the cervical mucus.



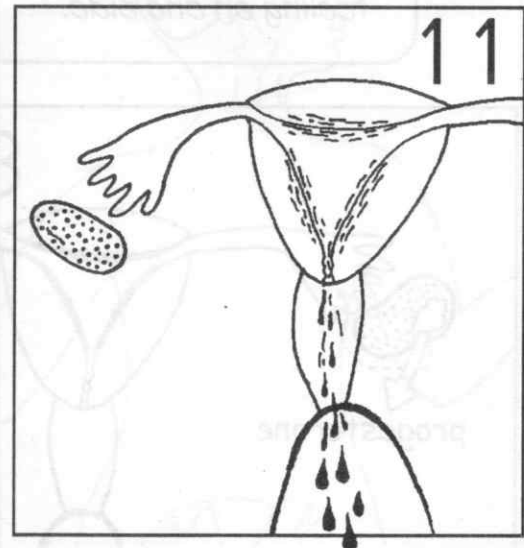
Progesterone [meaning 'for pregnancy'] is the second hormone produced by the ovaries ... it creates conditions in the womb and body so that an embryo can implant and grow inside, safe and sound.



If sperm and egg do not unite, and no embryo implants in the womb, the yellow body dies in ten days. The ovary stops secreting hormones. The womb lining, built up and sustained by oestrogen and progesterone, now begins to break down.

As the lining comes apart, it releases 'prostaglandin'. This makes the womb muscle contract and the cervix open.

Prostaglandin is a biochemical found in body fluids and tissues, including the womb lining and semen. It plays a part in many body processes like reproduction, inflammation, blood pressure, blood clotting, and hormone activity. It makes the womb muscle contract strongly. As progesterone drops before the period, prostaglandin in the womb lining increases. [See Pain during Periods, pg.46]



The lining separates, and the menstrual flow starts...

All four hormones...

during the cycle, their levels naturally rise and fall.

The first four graphs below show one woman's hormone levels in one cycle on the days before, during and after ovulation.



FSH
(IU/2)

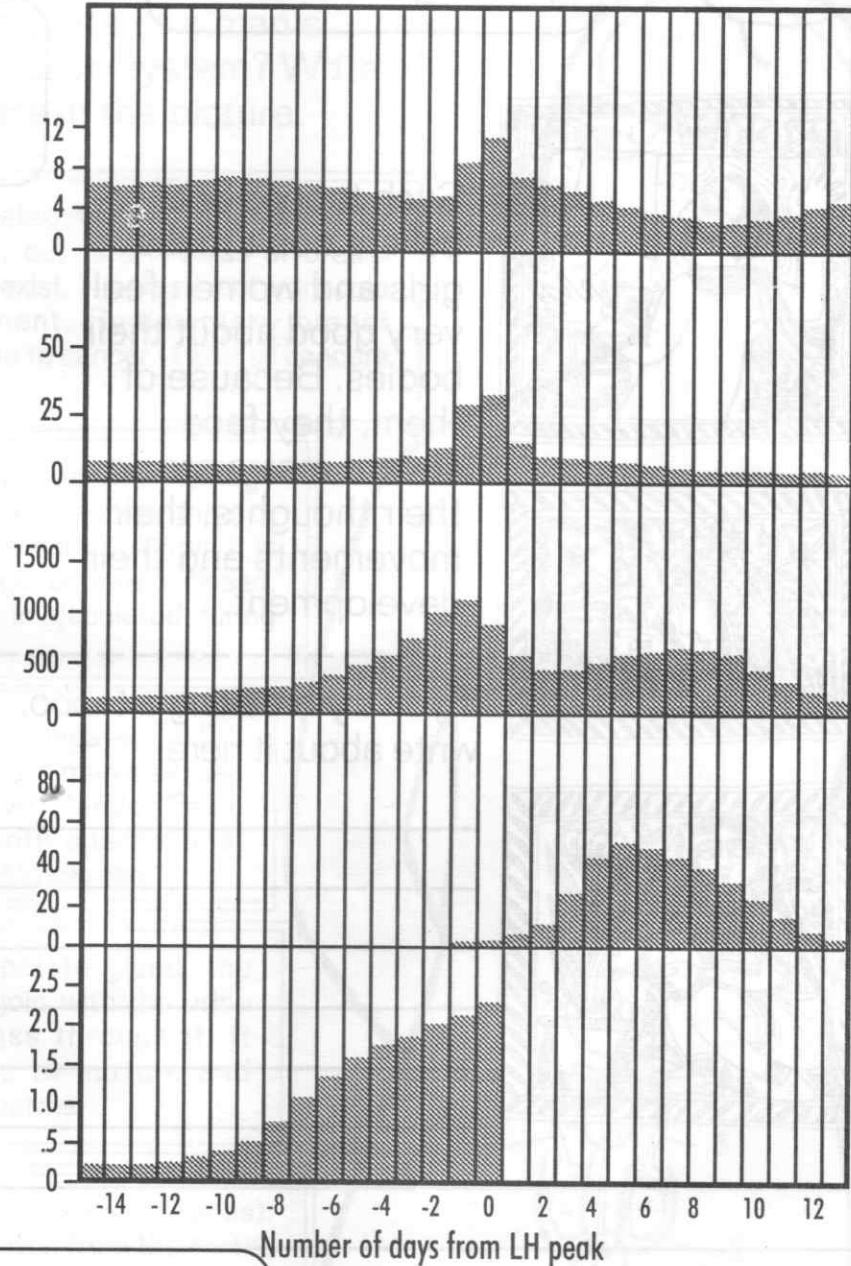
LH
(IU/2)

Oestrogen
(pmol/l)

Progesterone
(mg/l)

Follicle size
(cm)

This graph shows the size of the egg-follicle until it bursts on Day 0.



Note that 'Day 0' is the day of the LH surge (or peak).



Menstruation is natural.

The menstrual cycle is as natural as ...

- breathing...
- digesting food...
- blood circulation...



If having periods is so natural, how can it have such unnatural effects on other people and things?



Such taboos and beliefs don't make girls and women feel very good about their bodies. Because of them, they face severe restraints on their thoughts, their movements and their development.



The only way to find out is to break a taboo and see...



If you try breaking a taboo, write about it here:

In a man's body...

The sexual and reproductive system includes all the parts involved in having sexual relations, and producing sperms, semen, and the sex hormone.

The brain and the pituitary gland regulate sex and reproduction as in women. *ICSH (FSH)* and *LH* enable a man's testes to make sperms and testosterone.

Can you name the parts of a man's sexual and reproductive system? Write next to the numbers in the picture.

Breast development is suppressed by testosterone, but rare records of breast feeding men exist. Nipples erect from cold and excitement. Rudimentary breast tissue is prone to cancer (1% of all cancers in men).

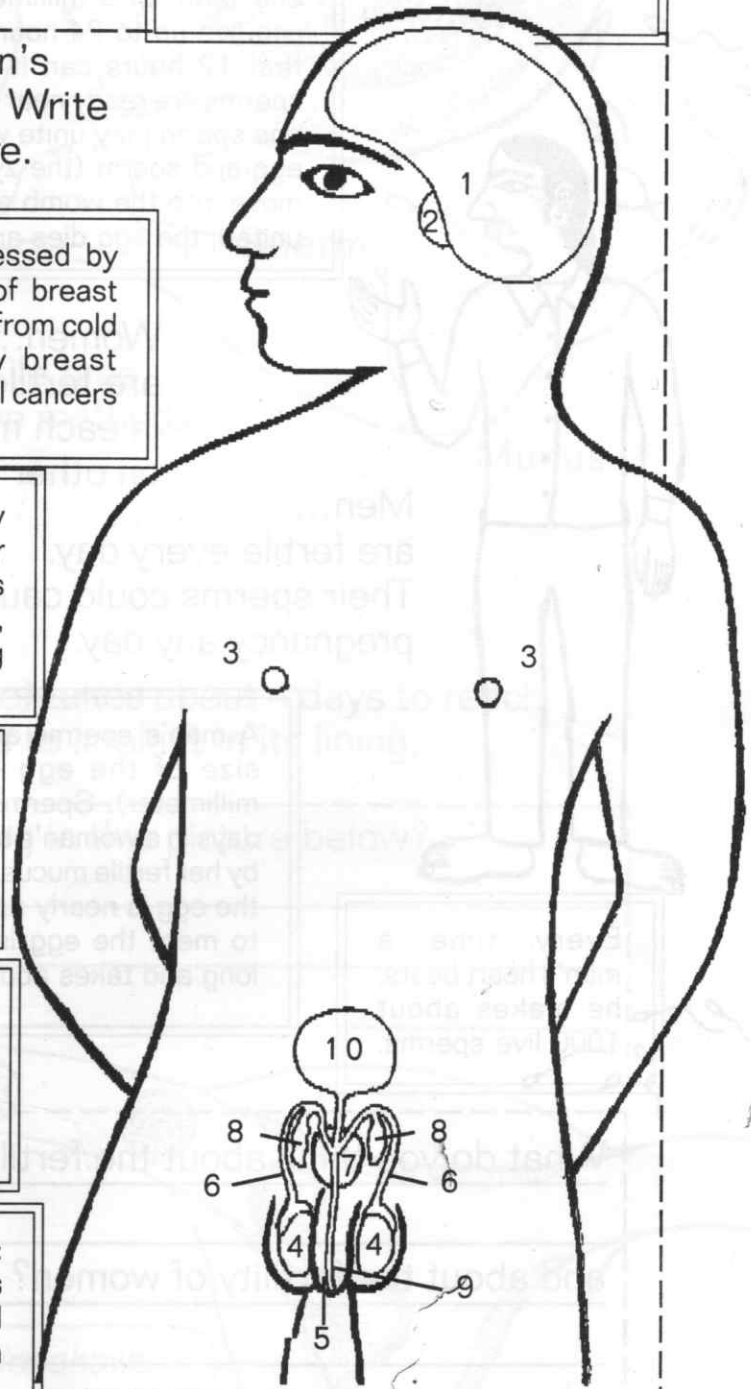
The penis is a muscular-spongy organ that conveys either urine or semen out of the body... When it is erect, the passage for urine is closed, and only semen is ejaculated during orgasm.

The testes, two elongated 'balls' in a sack of skin are man's sexual and reproductive glands. Each testis makes both sperms and the hormone testosterone.

Inside the prostate gland, the semen-tubes join with the urine tube, and pass through it. It makes mucus to nurture and protect the sperms.

Sperm-tubes (seminal tubes): convey sperms from the testes to the semen-sacs (seminal vesicles) where they mix with prostate fluid, forming semen.

Names: 1 Brain; 2 Pituitary; 3 Breasts; 4 Testes; 5 Penis; 6 Sperm-tubes; 7 Prostate gland; 8 Semen sacs; 9 Urethra (urine passage) 10 Urinary bladder.

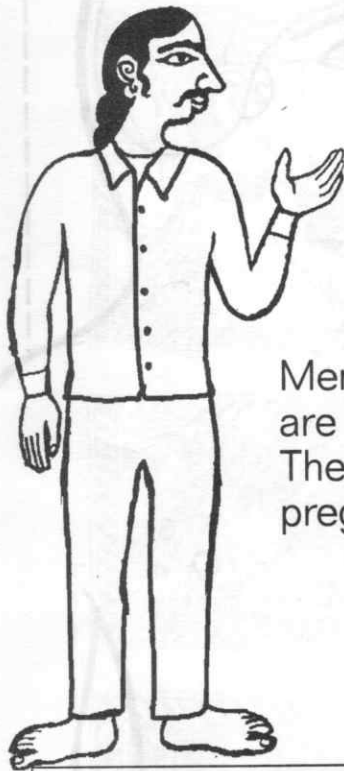


Eggs, Sperms and Fertility

Eggs and sperms are the germ cells of women and men- each provides half the "seed" that becomes an embryo.

In a woman's whole life, at most she can make about 450 ripe eggs.

A human egg is the size of a tiny dot (about one tenth of a millimetre). After ovulation it can live up to 24 hours. However, only in the first 12 hours can it unite with a sperm. If sperms are ready near the end of the egg-tube, one sperm may unite with the egg. The united egg-and-sperm (the zygote) takes a week to move into the womb and implant there. If not united, the egg dies and disappears.



Men...
are fertile every day.
Their sperms could cause a pregnancy any day.

Women...
are fertile for a few days
in each menstrual cycle and
on other days are infertile.



A man's sperms are about one tenth the size of the egg (one hundredth of a millimeter). Sperms can live up to 3 to 5 days in a woman's body, if they are nurtured by her fertile mucus, which is secreted when the egg is nearly ripe. The sperms' journey to meet the egg is about 20 centimetres long and takes about 6 hours.

Every time a man's heart beats, he makes about 1000 live sperms.

What do you think about the fertility of men?

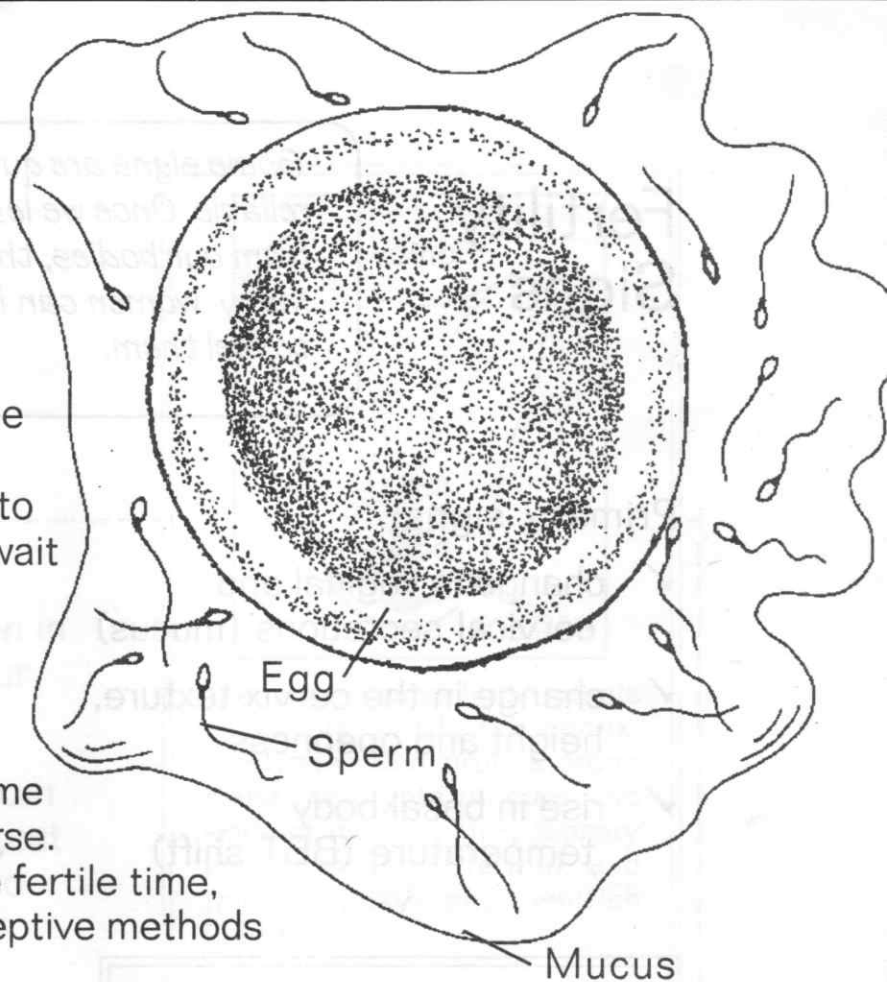
and about the fertility of women?

Union of egg and sperm...

If a woman and a man have sex during the woman's fertile days, her mucus secretion helps his sperms swim up into her womb and egg-tubes to wait for an egg to come along. . .

Then a sperm and an egg may unite...

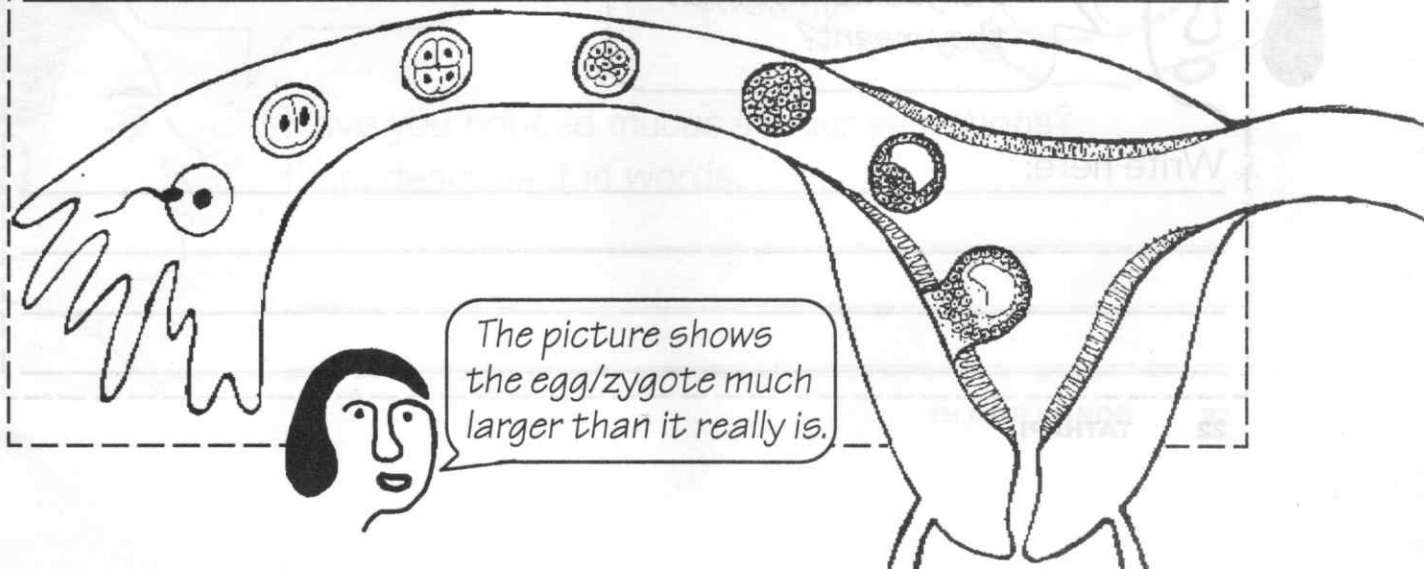
This doesn't happen every time a couple has sexual intercourse. It can happen only during the fertile time, if a condom or other contraceptive methods are not being used.



Implantation

If union does happen... the united egg-and-sperm (zygote) takes about 4 days to reach the womb and about 3 more days to implant in its lining.

Can you explain what is happening in this picture below?



The picture shows the egg/zygote much larger than it really is.

Fertility Signs

Some signs are quite reliable. Once we learn from our bodies, that is. Many women can learn to feel them.



Primary signs:

- ✓ change in vaginal and cervical secretions (mucus)
- ✓ change in the cervix texture, height and openness
- ✓ rise in basal body temperature (BBT shift)

Secondary signs:

- ✓ mid-cycle pricking or pain
- ✓ breast enlargement, pain
- ✓ skin oiliness, pimples
- ✓ lower/higher energy level and mood changes
- ✓ sexual feelings rise/fall
- ✓ ...and other changes.

The BBT or temperature shift (rise of 1°F or 0.5°C after ovulation, due to progesterone) is taken as a *proof* of ovulation. Recording and interpreting the BBT is sometimes difficult and may be impractical. We have included it in this workbook as Annexure 1 for those who are interested.

They aren't always so reliable for every woman. Yet, maybe for you they are...

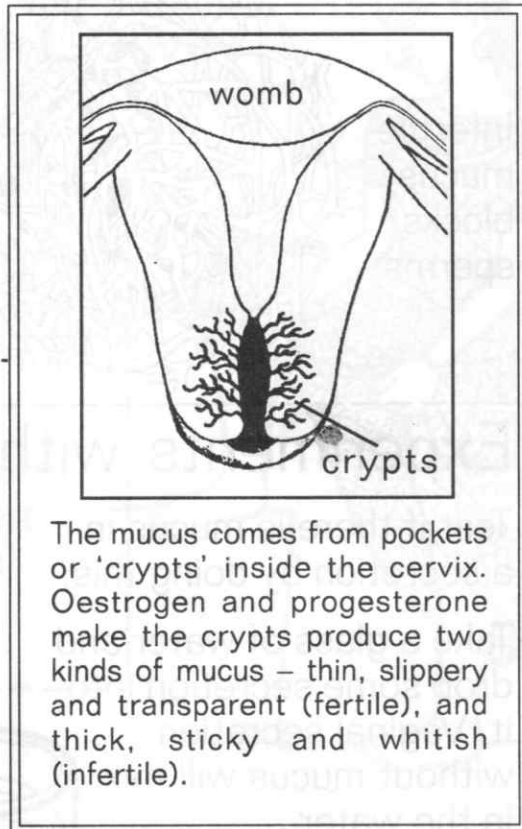


Have you ever felt any of these signs? Did you wonder what they meant?

Write here:

Cervical Mucus

As the egg-follicle grows, the mucus increases... it gets thinner, stretchier, slippery and transparent.



The mucus comes from pockets or 'crypts' inside the cervix. Oestrogen and progesterone make the crypts produce two kinds of mucus – thin, slippery and transparent (fertile), and thick, sticky and whitish (infertile).

- Close your eyes... can you feel any sensation in your vulva or between your legs?
- Collect some secretion from your vulva or vagina and test it between your thumb and forefinger.

Is it wet or dry?

What is the colour?

Is it slippery?

What is the amount?

What is the consistency?

Does it break?

Is it very stretchy?

Is there such a lot to see in secretions?!

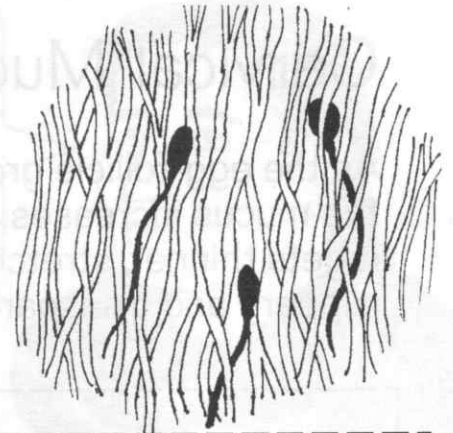
Have you noticed mucus in your secretions?
If so, describe it in words.



Infertile
mucus
blocks
sperms



Fertile
mucus
conveys
sperms



Experiments with mucus...

Test if there is mucus in a secretion by doing this:

Take a glass of water and drop some secretion into it. Vaginal secretion without mucus will mix in the water.

If it is mucus, it will fall to the bottom.

What do you see?

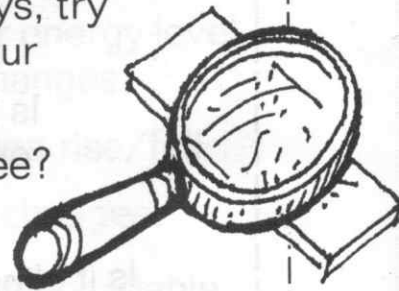


With slippery transparent mucus, try this:

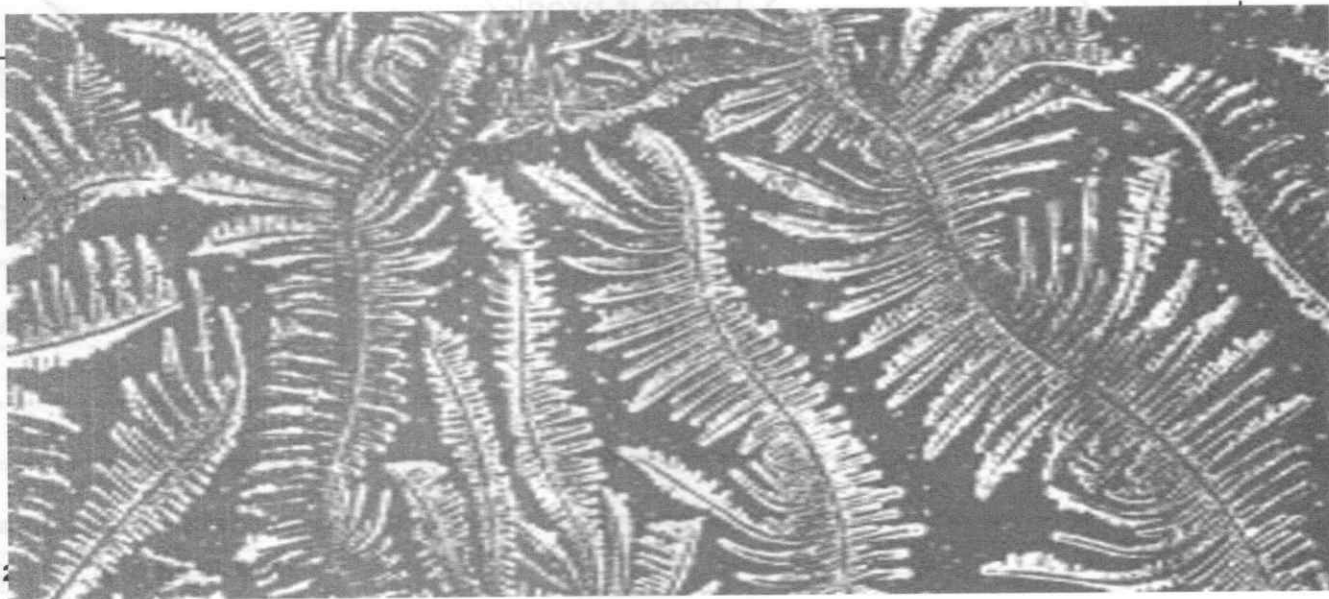
Spread some mucus on glass and dry it. Look at it through a hand lens.

In the same days, try doing it with your saliva.

What do you see?



Fertile mucus crystallizes into a 'ferning' pattern as shown here. If there's no ferning it's infertile.



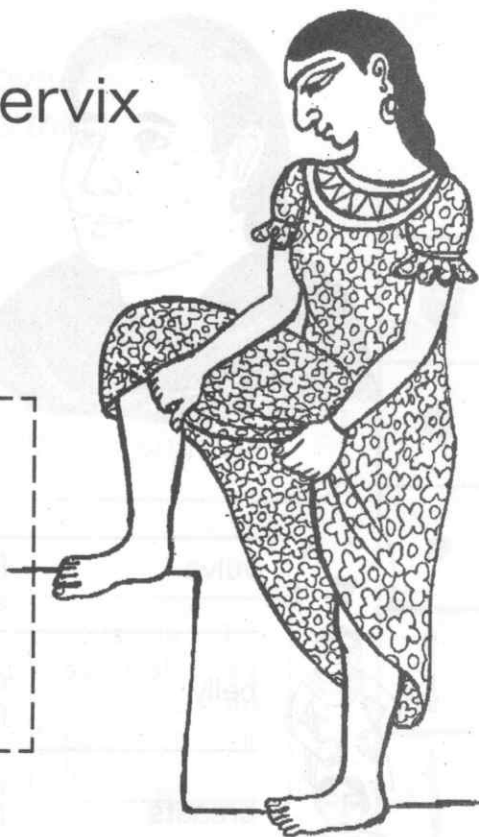
Changes in the Cervix



Some of us rely on feeling the changes in the cervix.

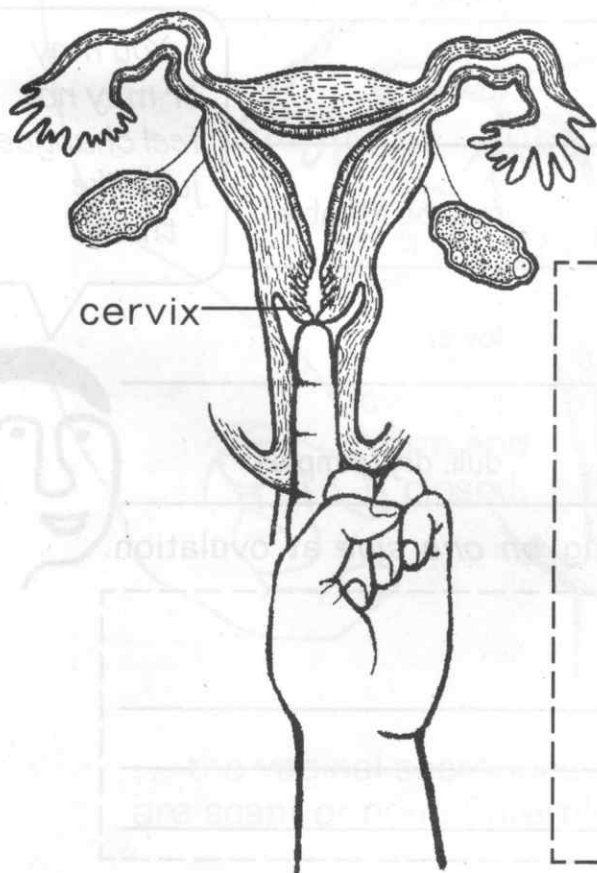
How to feel the cervix:

Either squatting or standing with one leg raised, insert your finger in the vagina and touch the cervix.



If it's hard to reach and feels soft and a little open you're in the *fertile* phase.

If it's easy to touch and feels firm and closed, then you're in the *infertile* phase.



To know what is *firm* and what is *soft*...

Touch the tip of your nose. How does it feel? Then, touch your lower lip... How does it feel?

Or, feel the rim of your ear, and then your earlobe... Which one feels firm and soft?



Now take a look inside the womb and the ovaries, and correlate the changes in the secretions that come from the cervix and vagina.

We can use symbols to briefly record the changes day-by-day.



Each box is for writing in a symbol for the secretions of that day.

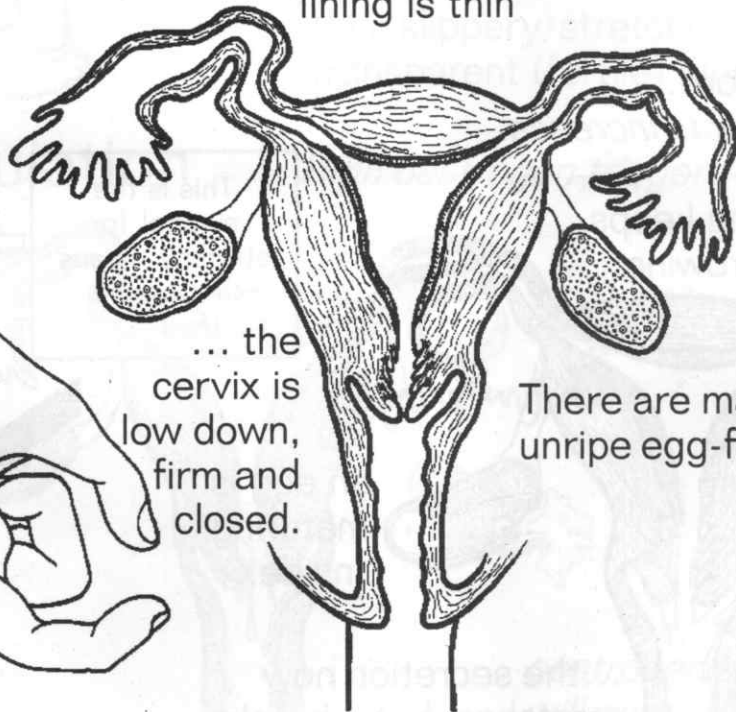
Just after periods...

the hormones aren't active, everything is quiet.

This is the symbol for dryness, no secretion (not fertile).



...the womb lining is thin



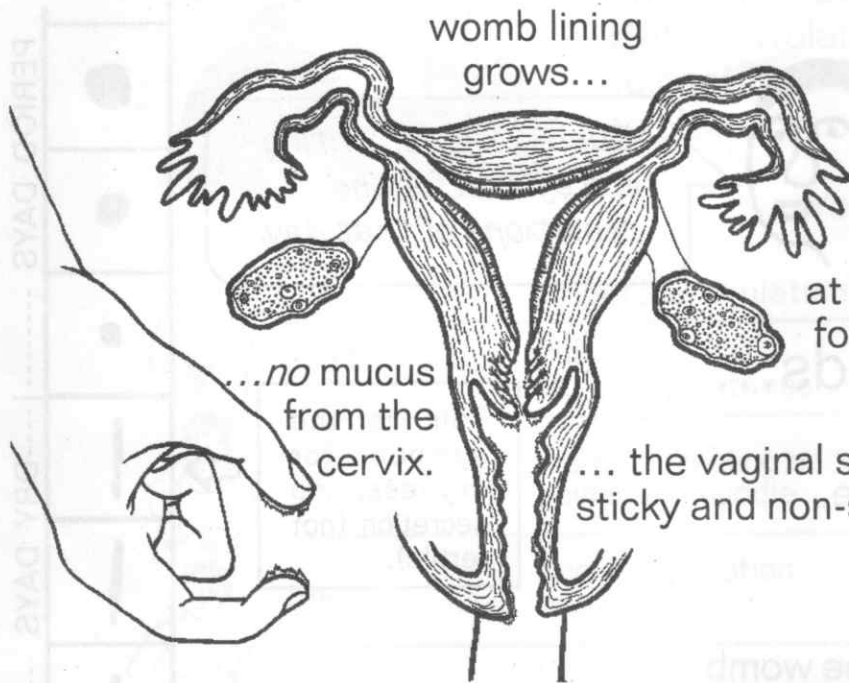
... the cervix is low down, firm and closed.

There are many unripe egg-follicles.

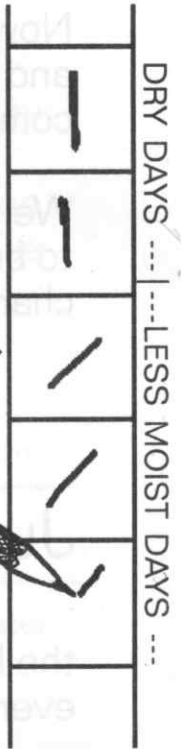
... the vaginal secretions are scant or none (infertile).

Then...

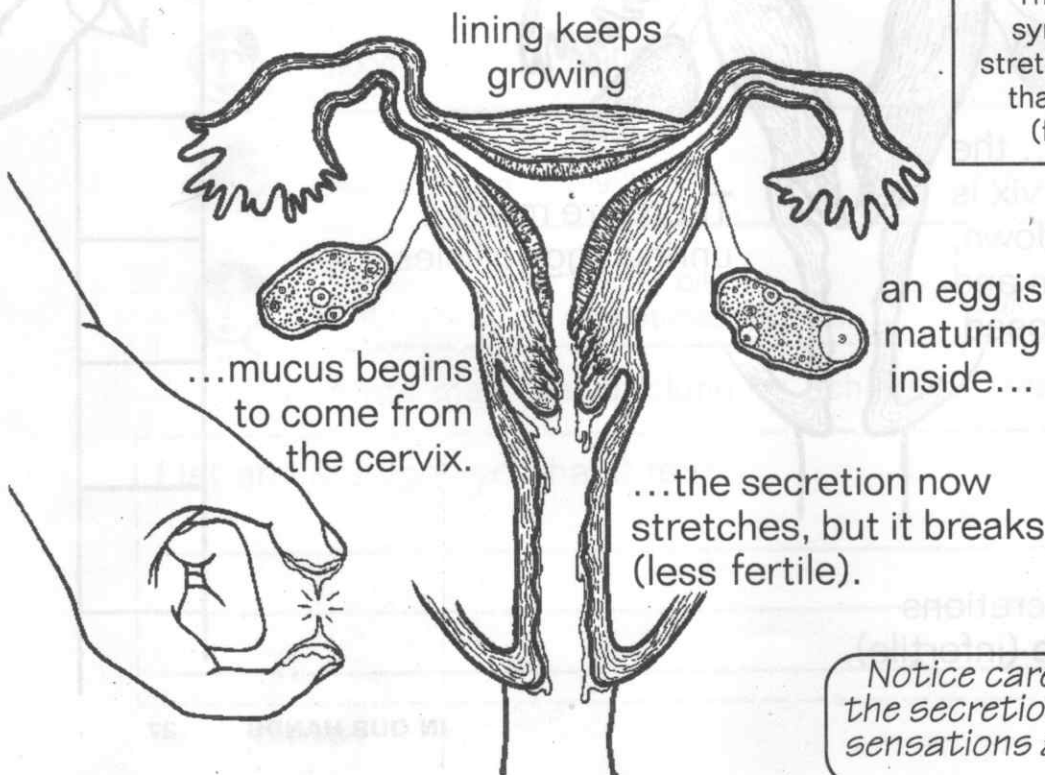
because of FSH, some egg-follicles start to ripen in the ovaries.
oestrogen effects begin...



This is the symbol for pasty or sticky secretion (not fertile).



One follicle grows more...
oestrogen effects increase



This is the symbol for stretchy mucus that breaks (fertile).

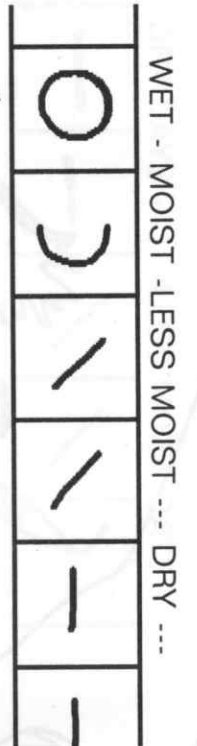
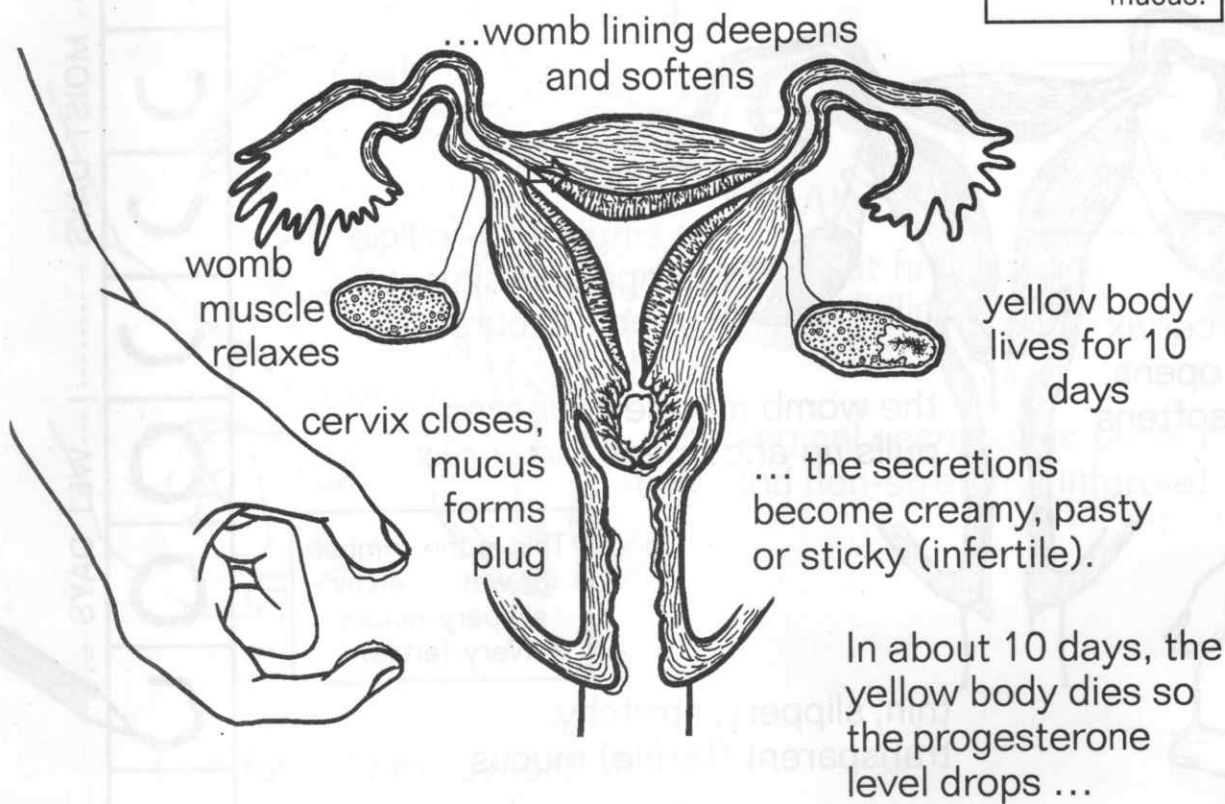


Notice carefully when the secretions and sensations are changing.



After ovulation

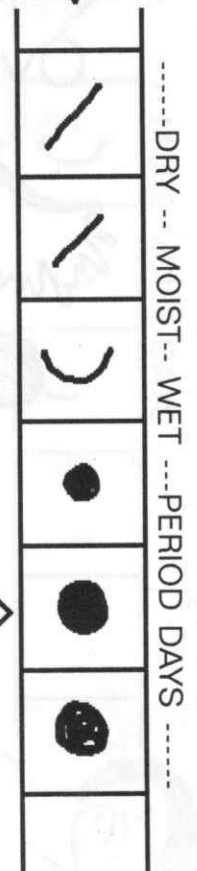
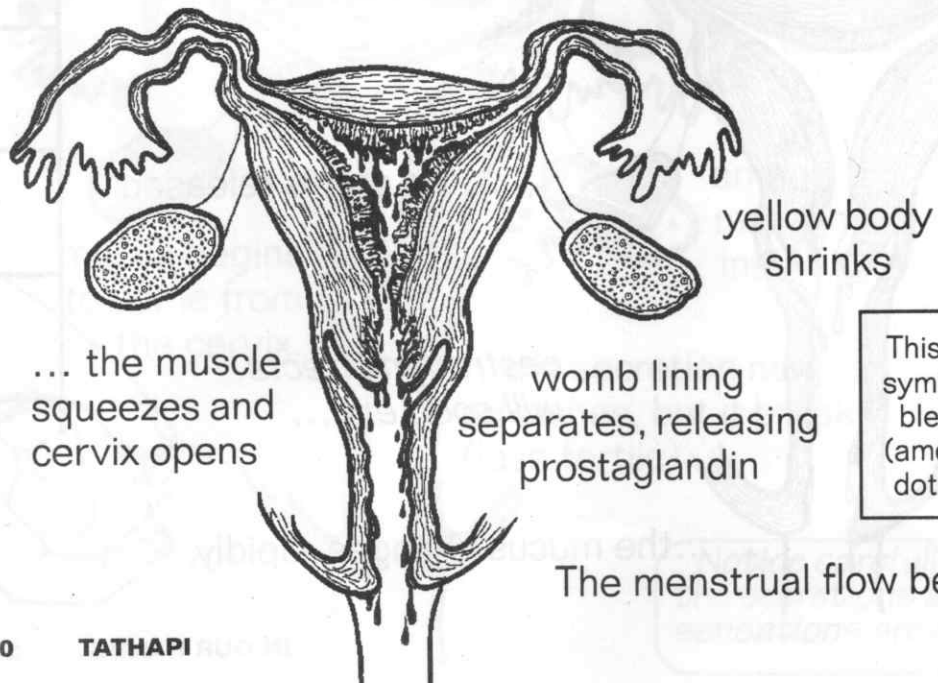
The yellow body forms and *progesterone effects begin...*



In about 10 days, the yellow body dies so the progesterone level drops ...

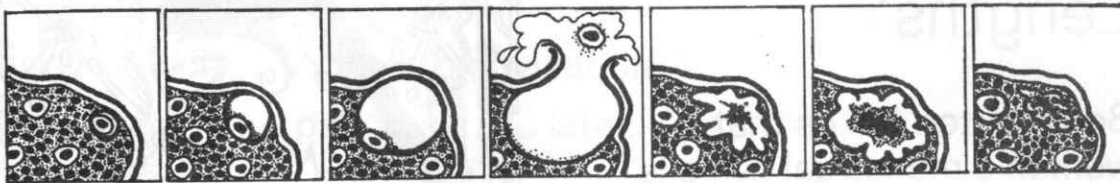
and then ... menstruation

progesterone effects end and womb muscle's natural contractions are enhanced by prostaglandin.

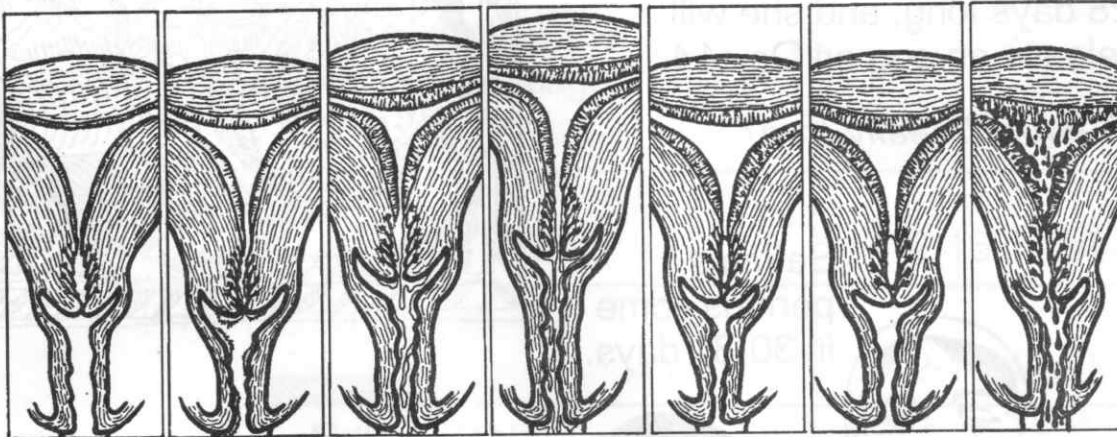


Summing up

Ovary



Womb



Quiz

1. What grows in an ovary and releases an egg?

2. What hormone does it make?

3. After giving up the egg, what structure is formed?

4. What hormone does it make?

5. Why does a period come?

6. What effects does oestrogen have?

7. What effects does progesterone have?

8. Compare the ovary and womb cycles as shown above. What do you notice in the ovary and in the womb?

Menstrual Cycle Lengths

Books often tell us that a woman's menstrual cycle is 28 days long, and she will release an egg on Day 14.

...but is it really true?



Salma's periods come in 30-31 days.



Lisa's periods often come after 40 days.



Priya's cycles vary between 27-36 days.



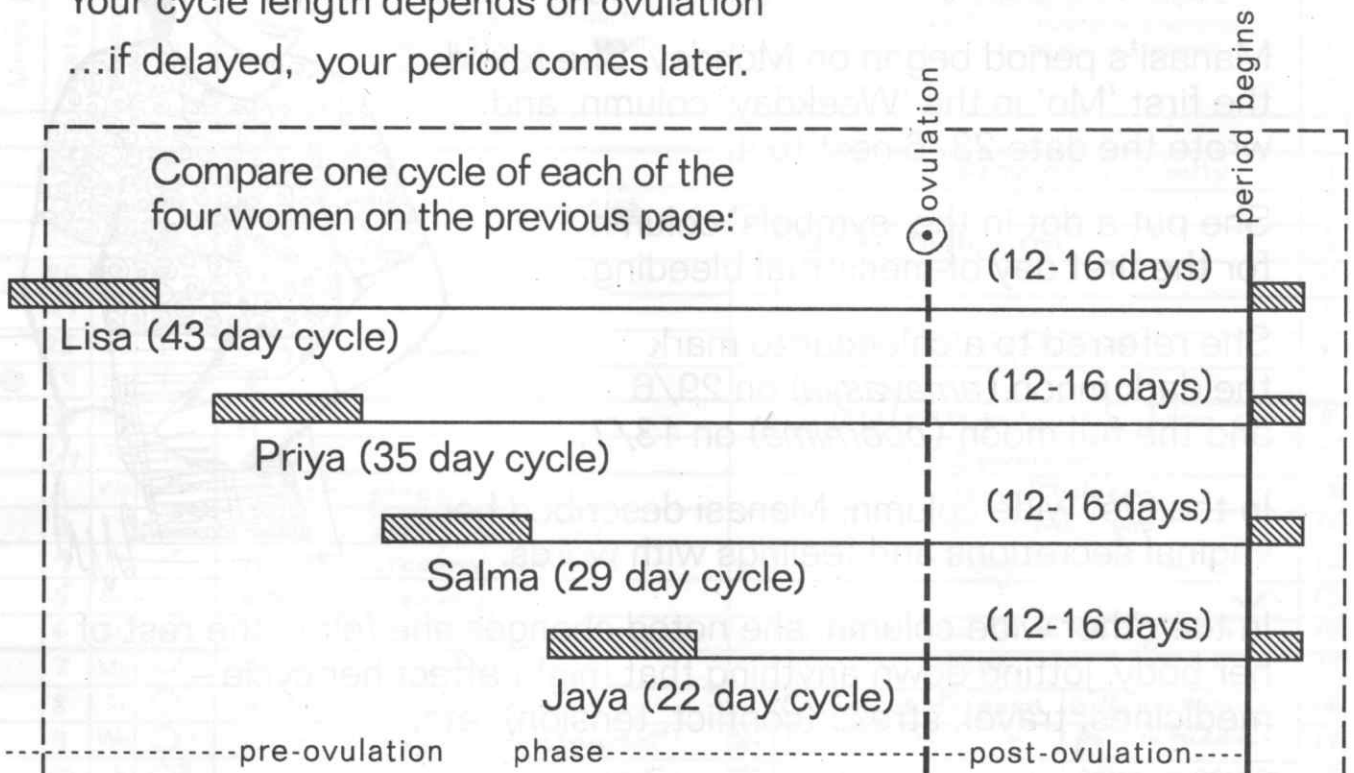
Jaya has short cycles of 20-23 days.

What is 'Normal'?
Women's experience shows there's lots of variation in the lengths of our cycles. The so-called 'normal' range is about 24 to 36 days.
It is even more important to see what is going on between our periods. Is ovulation happening? Do you feel the effects of both oestrogen and progesterone in your cycles?

What is the variation between your shortest and longest cycle?

Ovulation and Cycle Length

Your cycle length depends on ovulation
 ...if delayed, your period comes later.



What do you notice about the number of days before ovulation?

... and about the days after ovulation up to the next period?

The Pre-Ovulation Phase is quite variable and can be as short as 7 days, or as long as months or years.

The Post-Ovulation Phase is not so variable, usually within 12-16 days and less variable in individual women.

After marking for a few cycles, compare them by filling out a summary chart.



Two sample summary charts are given at the end of the book.

How to record a cycle....

This chart was filled out by Manasi, age 22 years, for her cycle in June and July 2003.

Manasi's period began on Monday. She found the first 'Mo' in the 'Weekday' column, and wrote the date 23/6 next to it.

She put a dot in the 'symbols' column for the first day of menstrual bleeding.

She referred to a calendar to mark the dark moon (*amavasya*) on 29/6 and the full moon (*poornima*) on 13/7.

In the first wide column, Manasi described her vaginal secretions and feelings with words.

In the other wide column, she noted changes she felt in the rest of her body, jotting down anything that might affect her cycle – medicines, travel, stress (conflict, tension), etc.

On some days Manasi noticed a sexual feeling. She marked it with a star in the middle column.

She kept on recording until her next period came. Only then did she fill in the 'Cycle Day' column.



What can we see in this cycle of Manasi's?



How long is Manasi's cycle? _____ days.

Probably on what cycle day did she ovulate? Day _____

Which were her more fertile days? _____

Which were her less fertile days? _____

Which were her infertile days? _____

Why do you think Manasi had stretchy mucus on Day 31?

FERTILITY CYCLE CHART

Name Manasi Age 22 Month(s) of Cycle June-July Year 2003

Moon	Date	Weekday	Symbols	Flow of Secretions <small>Wet, dry? Pasty, creamy, slippery, stretchy? White, yellow brown, red, mixed or spotting? Opaque, cloudy, transparent? Odour?</small>	Sex	Other Signs, Feelings, Notes <small>Heaviness, pricking, pain... where? (belly, breasts)?... Physical or emotional stress? Travel? Sickness, medicines?</small>	Cycle Day
		Su					
●	23	Mo	●	brown/red		mild cramping pain in belly	1
	24	Tu	●	bright red, clots+mucus	*		2
	25	We	●	red, clots		Cervix high, firm	3
	26	Th	●	red			4
	27	Fr	●	brownish			5
	28	Sa	!	dry		Breasts feel light, small	6
●	29	Su	!	dry			7
	30	Mo	!	dry		Cx low (easy to touch), firm, closed	8
	1/7	Tu	!	dry		Overnight bus travel (sleep disturbed), food irregular, outside.	9
	2	We	/	moist, sticky, thick			10
	3	Th	/	moist, pasty, whitish			11
	4	Fr	/	moist, creamy, whitish			12
	5	Sa	/	wet, " creamy, whitish			13
	6	Su	U	moist, stretchy, cloudy		Cx higher (harder to touch), firm...	14
	7	Mo	U	moist, stretchy, cloudy		" " , softer...	15
	8	Tu	○	wet, stretchy, cloudy		Cx high, soft, open Belly - cramping	16
	9	We	○	wet, slippery, transparent	*	" " " " pain in middle.	17
	10	Th	○*	wet, slippery, transparent	*	" " " " - pricking pain on side	18
	11	Fr	U	moist, stretchy, cloudy		Cx lower...	19
	12	Sa	/	moist/dry, sticky, whitish		Cx low, firm, closed	20
○	13	Su	/	dry/moist, creamy, whitish		Breasts heavy, tender	21
	14	Mo	/	moist, creamy, whitish		" "	22
	15	Tu	!	dry, crumbly, whitish		" " Belly feels bloated	23
	16	We	/	moist, pasty, whitish		" "	24
	17	Th	/	moist, creamy, whitish		" " Mood off, irritable	25
	18	Fr	!	dry, sticky		" " headache	26
	19	Sa	!	dry		" " "	27
	20	Su	!	dry		" "	28
	21	Mo	/	moist, sticky-pasty, whitish			29
	22	Tu	/	moist, creamy-sticky, whitish			30
	23	We	○	moist, stretchy, cloudy		mild cramping pain in belly	31
		Th	●				
		Fr	●				
		Sa					
		Su					
		Mo					
		Tu					
		We					
		Th					
		Fr					
		Sa					

→ to next cycle.

Variation in Cycle Patterns

After recording your fertility signs for a few months, you will see that your cycles usually are not just like the one that Manasi recorded. Even Manasi's own other cycles are not just like that one.



There is a lot of variation in different women's cycles. Even in the same woman the cycles are different!

After a cycle or two, see if there is a pattern of secretions. What can you make out?

- unclear pattern, possibly fertile
- clear fertile mucus pattern
- infertile (anovulation) pattern
- can't make out anything yet...

Take a count of the number of days:

- in this cycle _____
- from Day 1 to last day of fertile mucus _____
- from the day after the last fertile mucus to the day before your period came again _____

Try matching these numbers with your future cycles.

It takes 3 to 6 months to get a good idea of the variation and a year to see any seasonal effects.

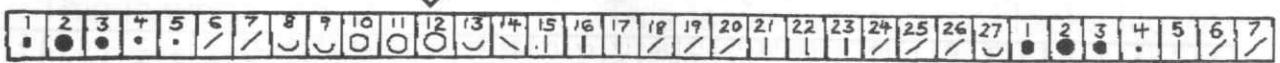


Beginning to understand...

I had wetness and stretchy mucus, then pricking on one side. Two days later, my breasts felt heavy.

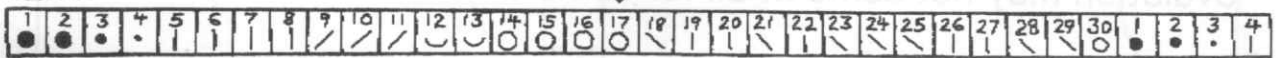


One of Priya's cycles was 27 days long with ovulation on Day 12.

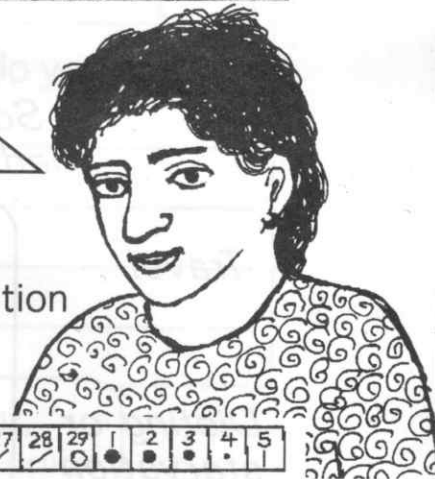


It's important for me to know this.

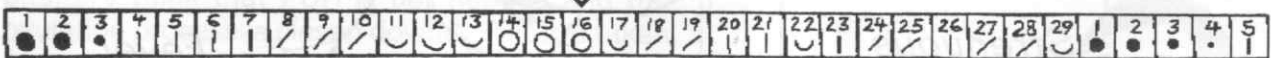
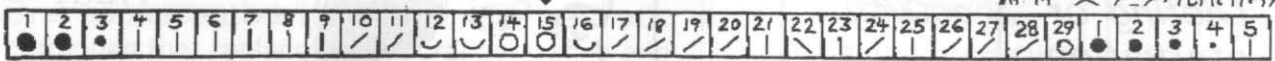
This 30-day cycle of Salma's shows ovulation on Day 17.



The signs are very clear to me now.



Two of Manasi's cycles were of 29 days. In one ovulation came on Day 15 and in the other on Day 16.



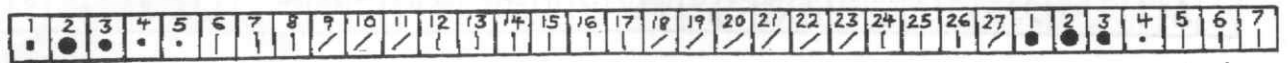
So even in two cycles of the same length, ovulation may occur on different days.

What does it mean?



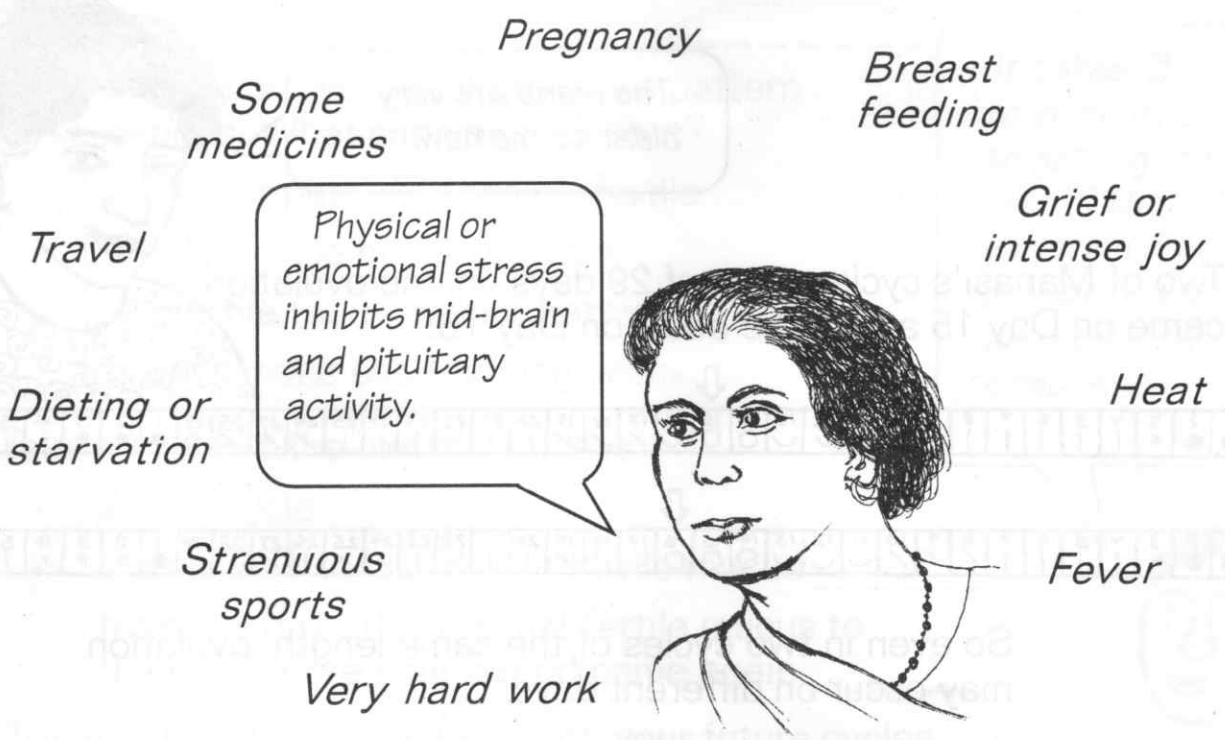
I didn't see fertile mucus... afterwards my period was light, with no pain.

This is a 27-day cycle of Jaya's from last month.



What happened, or didn't happen, in Jaya's cycle?

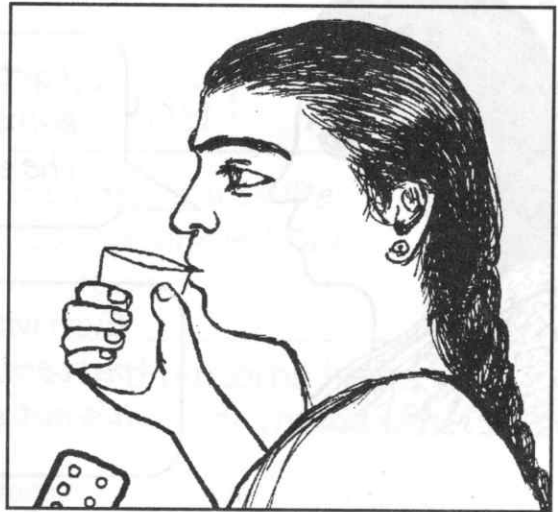
There are many conditions in which ovulation may come late, or ovulation may not come at all for some time...



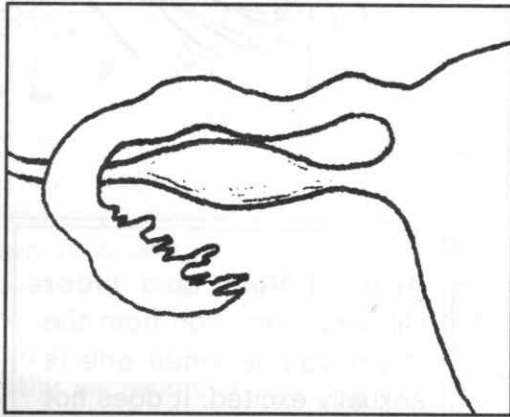
Most of those were natural causes for ovulation getting delayed, or stopping.

A common *unnatural* cause that stops ovulation is hormonal oral contraception or 'pills'.

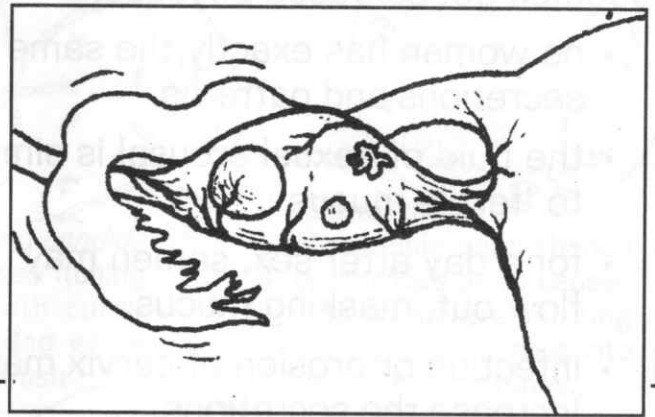
Here is a picture of a woman taking birth control pills.



This is what one of her ovaries looks like.



This is what the ovary looks like in a woman who is not taking pills.



Compare the two pictures above. What differences do you see?

How do hormonal 'pills' work? Oral contraceptive tablets contain synthetic hormones that replace the natural oestrogen and progesterone. This makes the mid-brain and pituitary think that FSH is not needed and the ovulation process is closed down.* Pills are taken from the fifth day of the cycle for three weeks (21 days). Stopping the pills brings on 'withdrawal bleeding' in 3 days. Hence these artificial cycles are always exactly 28 days long.

* Other hormonal methods (injectables, implants, etc.) also suppress ovulation.

Just think, taking medicine every day for something that's not a disease!





I get confused sometimes about the secretions.

Even with a regular pattern, at times it's not so clear.



Reasons for Doubt...

Women get confused because...

- no woman has exactly the same secretions and patterns.
- the fluid of sexual arousal is similar to 'fertile mucus'.
- for a day after sex, semen may flow out, masking mucus.
- infection or erosion of cervix may increase the secretions.

While seeing a film or reading a love story, or if you are suddenly attracted to someone, you may get a wet, slippery feeling... this is because of 'arousal fluid'.

Arousal fluid is a clear slippery secretion from the lower vagina when one is sexually excited. It does not come from the cervix. It can confuse you if you have not already checked for fertile mucus. After the sexual feeling is gone it doesn't last long.

Have you ever felt like this? Do you remember the situation? What else did you feel?

It will help when you get to know your own fertile-infertile pattern.



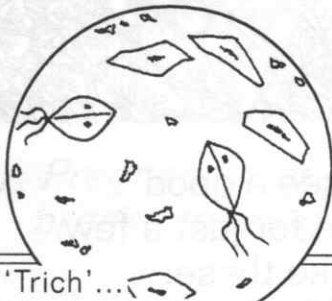


Is anything wrong?

My secretions changed. It was like pus. It itched a lot and smelled bad. I knew I had an infection.

Watching the signs and patterns helps you to know what is healthy and what is not.

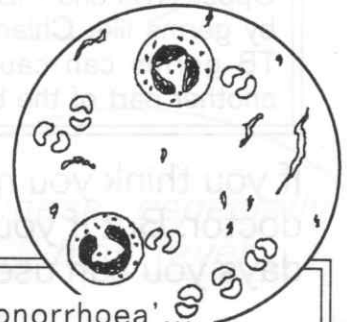
These tiny germs cause infections which may spread from vagina through the womb and egg-tubes even into the pelvic space.



'Trich'... Moving *trichomonas* germs cause itching or severe pain, redness in the vulva and vagina, with typical greenish frothy secretion.

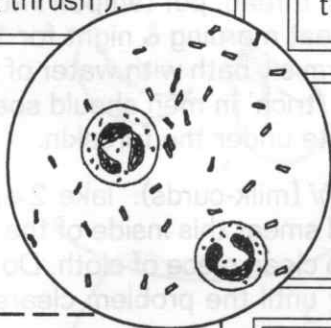


'Yeast'... The branching *candida* fungus causes itching and pain with curdy secretions and white patches ('thrush').



'Gonorrhoea'... The double bean-shaped *gonorrhoea* germ causes mild to severe burning and pus and spreads into the womb and tubes.

'Chlamydia'... In infections with tiny *chlamydia* germs, there may not be any pain, but watery secretions and a 'fishy' smell.



'Non specific'... Mixed bacteria like those from the gut may cause itching and pain with pus in the secretions.

If you ever had a vaginal infection, can you describe it?

Can you tell what is healthy and what is unhealthy? How?

How do we get Reproductive Tract infections? Having sex (with penis in vagina) is one way a woman can get an infection. Other ways are through abortion, childbirth or some birth control methods (like Copper T and 'operation'). Poor hygiene, malnutrition and low immunity also can add up.



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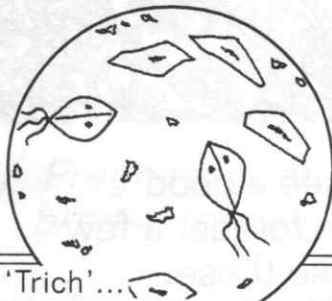


Is anything wrong?

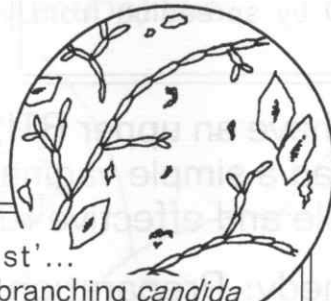
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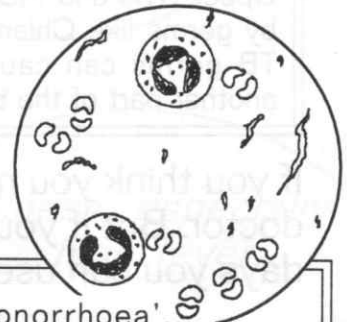
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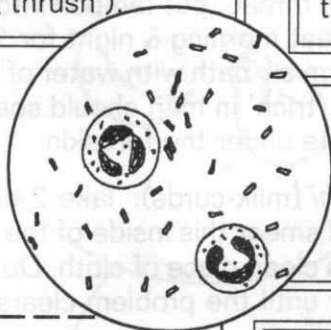


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Reproductive tract infections (RTIs)

... cause a lot of pain and suffering and they can make a woman unable to bear a child.

Infections in vulva, vagina, and cervix are 'lower RTIs', Infections in womb and egg-tubes are 'upper RTIs'.

When an infection passes through the egg-tubes and spreads in the pelvic space, it is 'PID' (pelvic inflammatory disease).

Upper RTIs and PID are usually due to infection by germs like Chlamydia and Gonorrhoea. Also, TB germs can cause PID by spreading from another part of the body.



If you think you might have an upper RTI, go and see a good doctor. But if you've had a simple vaginal infection for just a few days you can use simple and effective remedies like these:

Infection	Remedy: Preparation & Use	How it works
Yeast (candida) or Trichomonas	<i>Neem</i> : Wash 8-10 fresh leaves and grind to a paste, roll into finger-shape in clean cloth, tie with thread. put tampon into vagina upto cervix, repeat morning & night for 10 days. Also: luke-warm sit-bath with water of boiled neem leaves. For 'trich' in men should soak and spread neem paste under the foreskin.	Neem discourages germs and worms. It also purifies blood, acts as a womb tonic and is anti-diabetic.
Yeast (candida) or non-specific	<i>Dahi</i> (milk-curd): Take 2 spoons of fresh dahi and smear this inside of the vagina with a finger or a clean piece of cloth. Do this once or twice a day until the problem clears up completely.	Dahi is mildly acidic; lactobacillus challenges other germs.
Trichomonas or non-specific	<i>Garlic</i> : Peel a good-sized clove of garlic without scratching it. Insert it high up in the vagina and keep it inside overnight only, or change morning & night, for 15 days. Also, eat a clove of garlic daily (for men also).	Garlic is anti-septic (kills germs) and anti-spasmodic (may lessen pain).

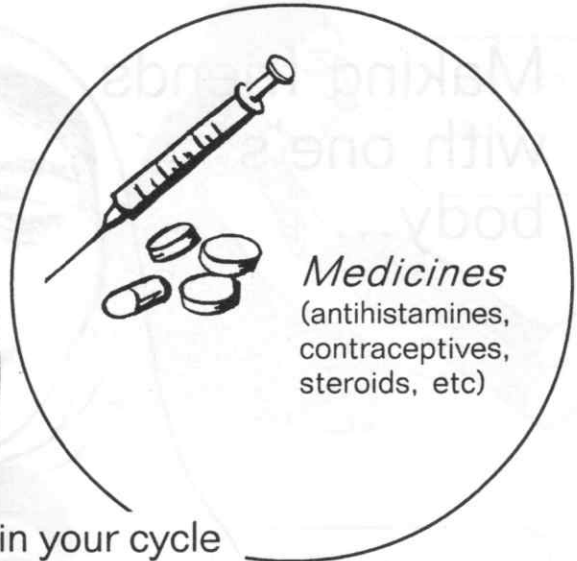
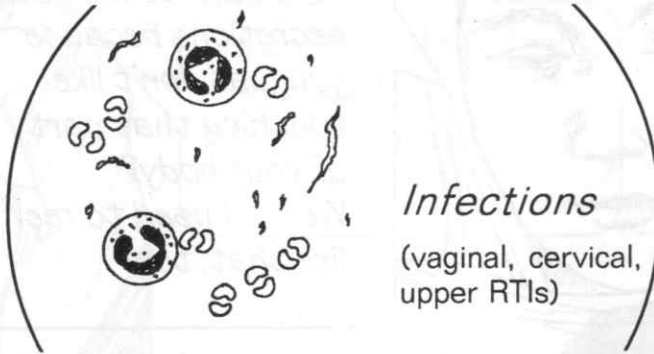
Have you tried remedies like these?
What happened? _____



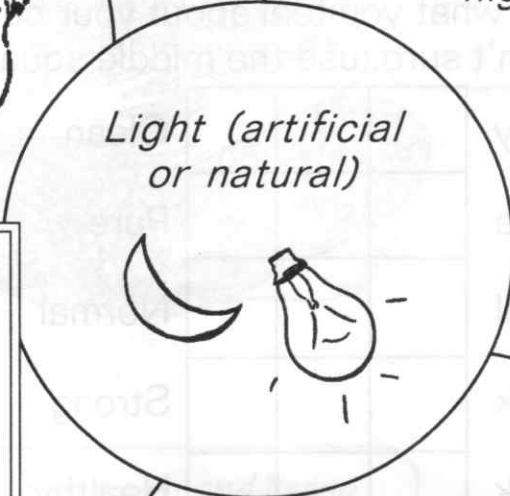
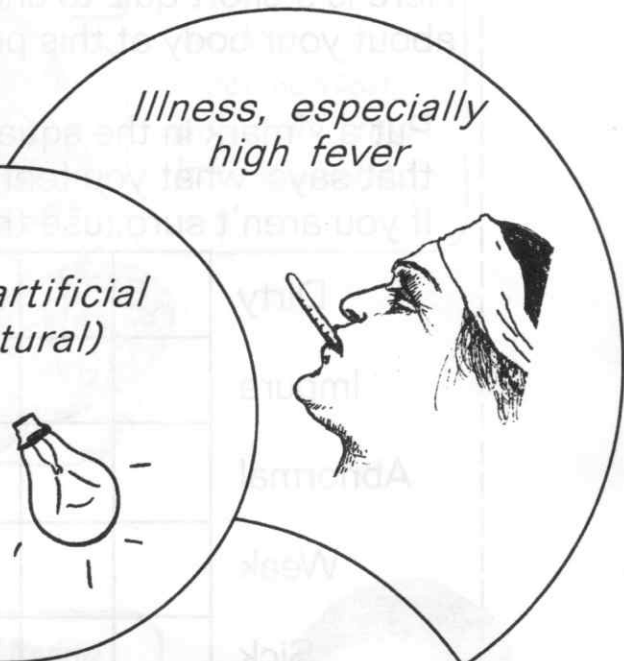
In sexually transmitted infections both partners need treatment.

Other factors...

act directly on the secretions, like...



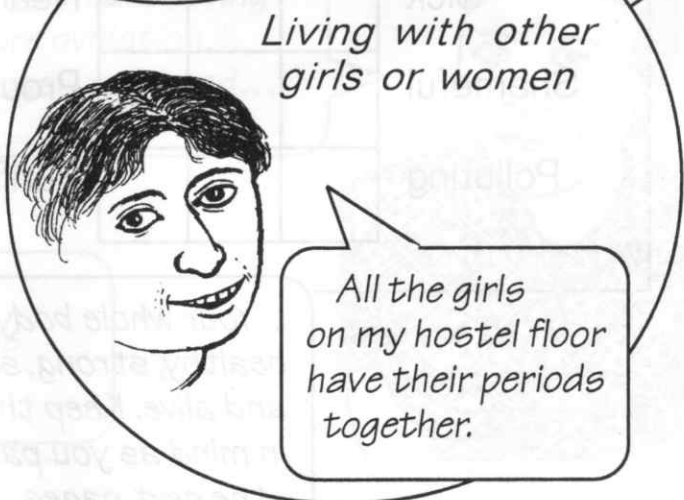
or...act on the *pattern* of secretions in your cycle (by delaying or stopping ovulation) like...



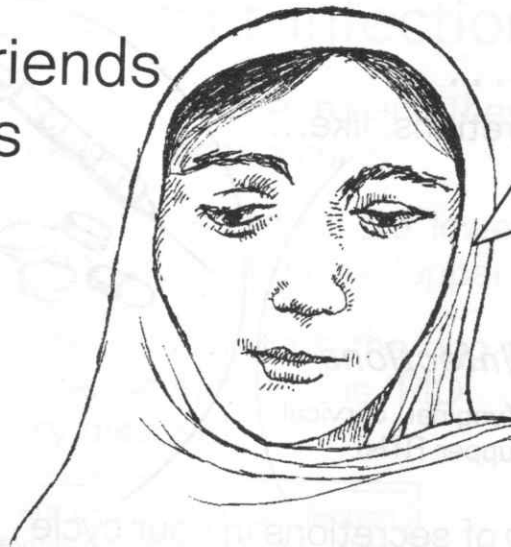
Physical or emotional factors (such as surgery or fear) after passing a point of adaptation, cause tensions in the body that disturb usual body functioning.

Such stresses may affect any or all of the body systems by involving the mid-brain and the endocrine glands – the effects are carried out through both the nervous network and the hormones in the blood.

Stress affects sexuality and fertility through the mid-brain, suppressing ordinary activity in the pituitary gland.



Making friends with one's body...



Is it hard to look at secretions because you just don't like touching that part of your body? Well... I used to feel like that, too!

Here is a short quiz to check how you feel about your body at this point in time:

Put a ✓ mark in the square near the word that says what you feel about your body. If you aren't sure, use the middle square.

Dirty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clean
Impure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pure
Abnormal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Normal
Weak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Strong
Sick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Healthy
Shameful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proud
Polluting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Purifying

Most women mark towards the negative side (on the left).

We feel this way because we've not questioned what we have heard or read.

We've not listened to our own bodies...

It's almost as if we're living outside of them, letting our bodies be controlled by others.

Your whole body is clean, healthy, strong, sensitive and alive. Keep this idea in mind as you pass through the next pages.



What do we feel?



During my period, my back hurts. I get terrible cramps... I almost faint...



My legs ache.



A few days after I ovulate, I feel bloated and dull... my breasts ache.

I don't feel any discomfort!



I feel warm and loving before ovulation... I get easily aroused...



I feel a surge of energy in the days around ovulation.





Why do some of us get bad pain with our periods?

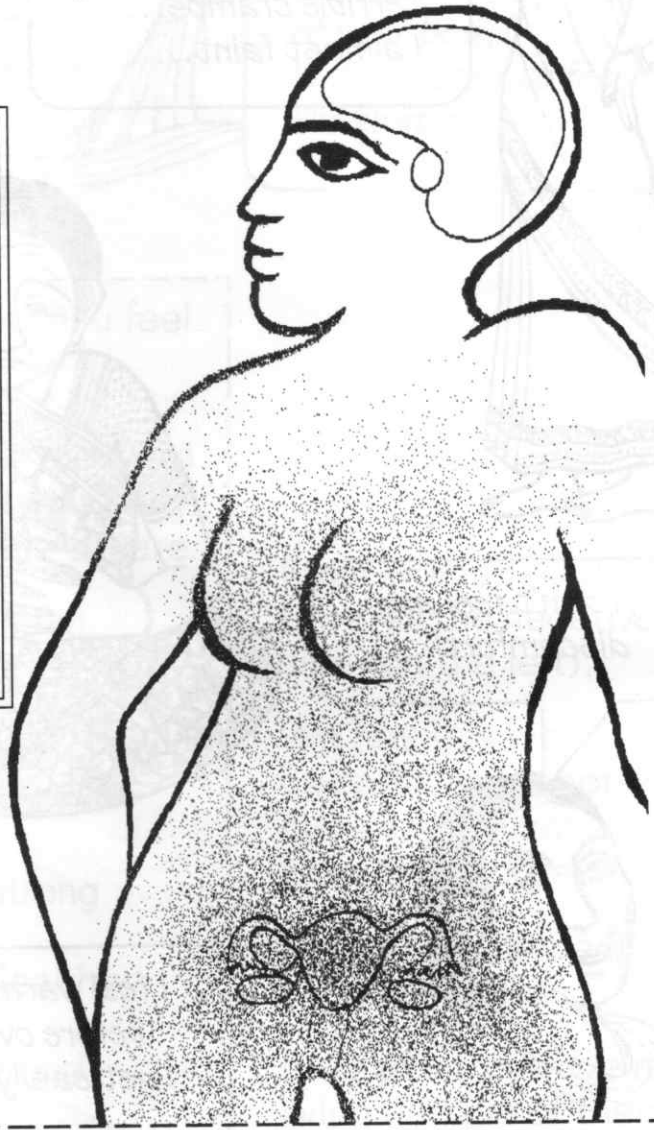
Pain during Periods

Scientists say that women with bad cramps have more *prostaglandin*... or they are more sensitive to it.

Prostaglandin can cause painful contractions of the womb muscle. This cuts off the oxygen supply in the blood, making the pain worse.

When prostaglandin escapes from the womb into the bloodstream, it causes pain in other body parts.

Anovulatory cycles (*without ovulation*) give *no pain* because progesterone is needed for prostaglandin to build up in the womb lining.



Most tablets for period pain work against prostaglandin.

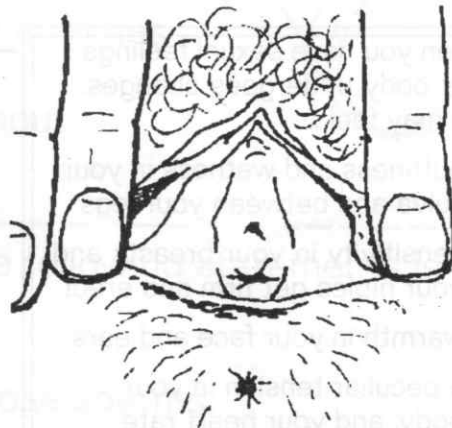
What remedies for period pain do you know of?

Sexual experience... and the clitoris

Throughout a cycle, we may feel peculiar sensations and things happening in our body... and think of them as 'sexual' feelings, as

- they start in our bodies, in the sensitive and sexual parts,
- or they may be brought on by sexual ideas – or lead to them.

The clitoris is a complex sexual organ of women. It is made up of parts within the vulva: inner lips, hood, glans, shaft and legs, bulbs, nerve and blood vessel networks, suspensory ligaments and pelvic diaphragm muscles. It encloses the lower part of the vagina and urinary passage.



The vulva contains the clitoris.

For most, it is news that women have a purely sexual organ called the clitoris. Most anatomy books show the clitoris – if at all – as only a small bump. In villages people call it names like 'daana', 'santosham button', 'teetni'... but they mean only the sensitive 'glans'. There is need to recognise the whole clitoris that extends throughout the vulva.

The clitoris can get stimulated – by gently rubbing, from pressing, or riding a bicycle, during sexual intercourse (not always) – until feeling rise to a peak and then gets released in orgasm... After that, the pulse slows down and the other changes recede.

In response to stimulation, the actions of the clitoris are erection, engorgement, contractions and relaxation. The only apparent function of the clitoris is sexual pleasure. It has no clear or direct role in reproduction.

'Orgasm' is a climax of sexual tension with sudden intense pleasure and relief – when muscle contractions force out blood from the erect and engorged genital parts. The organ of orgasm in women is the clitoris and in men, the penis.

Compare the sexual organs

What differences and similarities do you notice in woman (above) and man (below)?

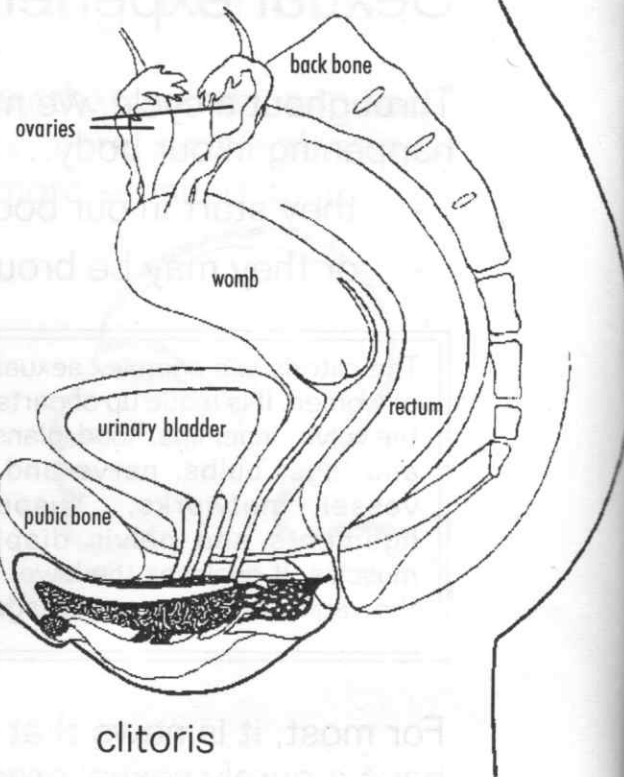
When you have sexual feelings, your body undergoes changes. You may feel ...

- ... puffiness and wetness in your vulva and between your legs
- ... sensitivity in your breasts and your nipples get firm and erect
- ... warmth in your face and ears
- ... a peculiar tension in your body, and your heart rate increasing.

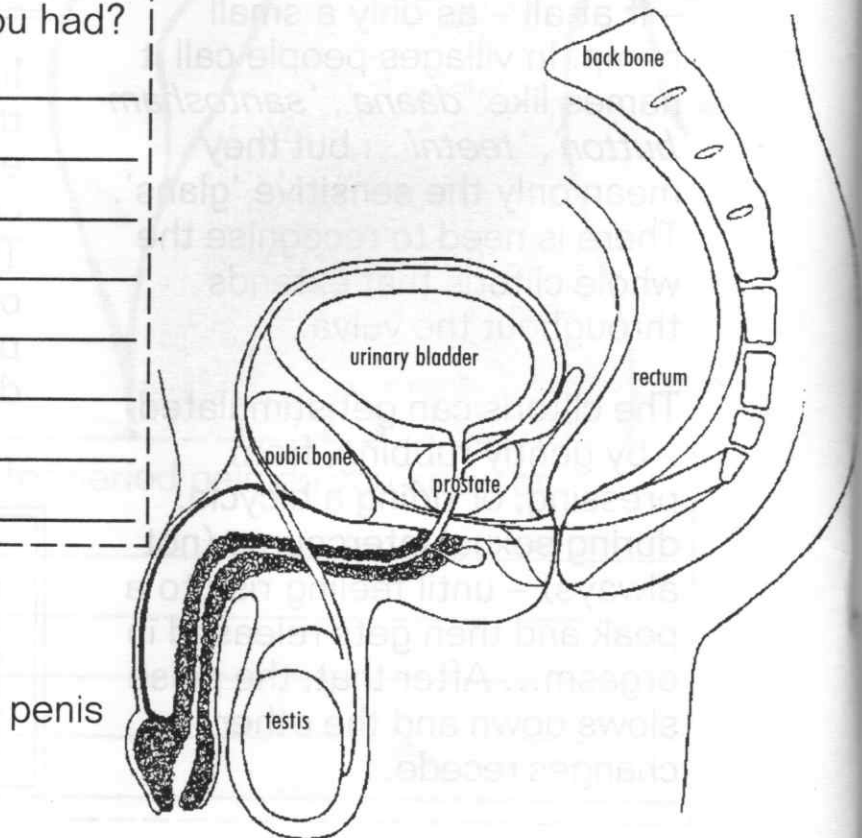
What sexual feelings have you had?



How do you feel about all this?



Note: The spongy erectile tissue is darker.



Sexuality in Women and Men...

Some people think "Men are sexual" and "Women are fertile"...

Is it true?



But as we saw earlier, men make billions of live sperms... while women make only a few hundred eggs. And furthermore, a man can impregnate a woman only if he has an orgasm... while a woman can get pregnant without having an orgasm.

Discuss whether and why each of the following statements is true or false:

- (a) Men are great for making all those sperms.
- (b) Women and men are both sexual and fertile.
- (c) The clitoris is a purely sexual organ.
- (d) In men orgasm is not linked with fertility.

'Sex' involves power and politics between persons. In our patriarchal social system, men have power over women. However, learning and practicing 'fertility and sexuality awareness' demands a commitment to equality between women and men.



Write your questions about sexuality and sexual relations.

Periods don't come forever...

Around age 45 to 50 years (between 40 to 55) a woman's menstrual cycles stop. Her ovaries simply run out of eggs. While progesterone is no longer there at all, some oestrogen is still made in the body.



Menopause is a time of transition for a woman – it is the beginning of a new phase of life.

Periods may begin to get irregular a few years before menopause. Some women get their periods more often, others less often. There may be shorter periods with lighter flow or longer periods with heavier flow and clots or 'flooding'.

At this age, if you have not had a period for six months, you probably won't menstruate again.

The 'pause' is the period of a few months to a couple of years before and after your last menstrual cycle.

Due to changing oestrogen levels, you may experience hot flashes and sweats, less vaginal moisture and elasticity.

One begins to be prone to blood pressure and heart disease and thinning of bones (osteoporosis).

Simple self-help measures usually help to bring relief or to cope with the discomfort. You can keep away thinning of bones and heart disease by regular exercise, a healthy diet and weight control.

If you want to know more about menopause, you can contact Tathapi.



The problems that women experience during the 'pause' are not only physical (headaches, flashes, tiredness) and emotional (mood swings, irritability).

Women face negative social attitudes towards menopause and aging. On one hand, they are told that they must look "young and attractive" and on the other, that their 'main function' of reproduction is over.

Unless you have severe problems, avoid Hormone Replacement Therapy (HRT). Usually it isn't needed and moreover, it may add to your risk of getting heart disease or cancer. Simple remedies exist for most problems.



Fibroid tumours of the womb are common before menopause ... they shrink after cycles stop.

If you bleed more than a year after your last period, it's not likely to be normal menstruation. See a doctor.

It is a good idea to do breast self-exam regularly to find breast cancer early. Try to reach a women's health centre for a yearly full-body check-up, including a cervical cancer test.

After menopause a woman can't get pregnant, but she can still be active sexually. Stimulating the clitoris can produce orgasm throughout life.

As for fertility... now women can be more creative, socially productive and mobile than ever before.

Think of some older women you know, about their lives, the problems they've faced. What have they done? Does it tell you anything? Does it give an idea of 'social fertility'?

Girls need us to guide and support them

New breasts, hair growth in armpit and pubic area, wider hips, fuller voice, height... periods, and new, strange feelings. . .

The main factors that affect the age of onset of puberty in girls are:

- ✓ Genes
- ✓ Nutrition
- ✓ Illness
- ✓ Emotions
- ✓ Exercise

Adolescence is the stage of physical and social growth between childhood and maturity, generally spanning the 'teen' years – a time full of emotional ups and downs.

Puberty is the process of biological growth of a girl's (or boy's) sexual and reproductive parts and functions, usually starting around 9 to 12 years in girls (11 to 14 in boys). Puberty is usually complete in girls at around age 18 (20 in boys). Thus, it starts and finishes earlier in girls and later in boys.

Menarche is the time in puberty when girls begin to have 'periods' – about 2 to 3 years after the first physical changes – turned on by mid-brain and pituitary activity. It can take a few years for girls to ovulate regularly.

'Coming of age' should be a time of fearless exploration and growth for girls. But it is more often a time when they get pulled back...

- restrained from 'tomboy' dress and games
- made to keep quiet and not to question
- curbed from movement outside of home
- married off early...

Awareness of one's own sexuality and fertility is essential for girls to attain their full potential, and to realise their human rights... along with boys.



Don't fall for these fads!

Caution for Girls:

It is harmful

- to use pills to delay periods
- to diet for getting extra thin.

As part of 'body literacy'...

Fertility and sexuality awareness makes us stronger...

*My period's not come
...oh maybe it's stress!*

*I didn't ovulate
this month.*

We can break baseless taboos.

We can overstep needless restrictions.

We can find our own answers...

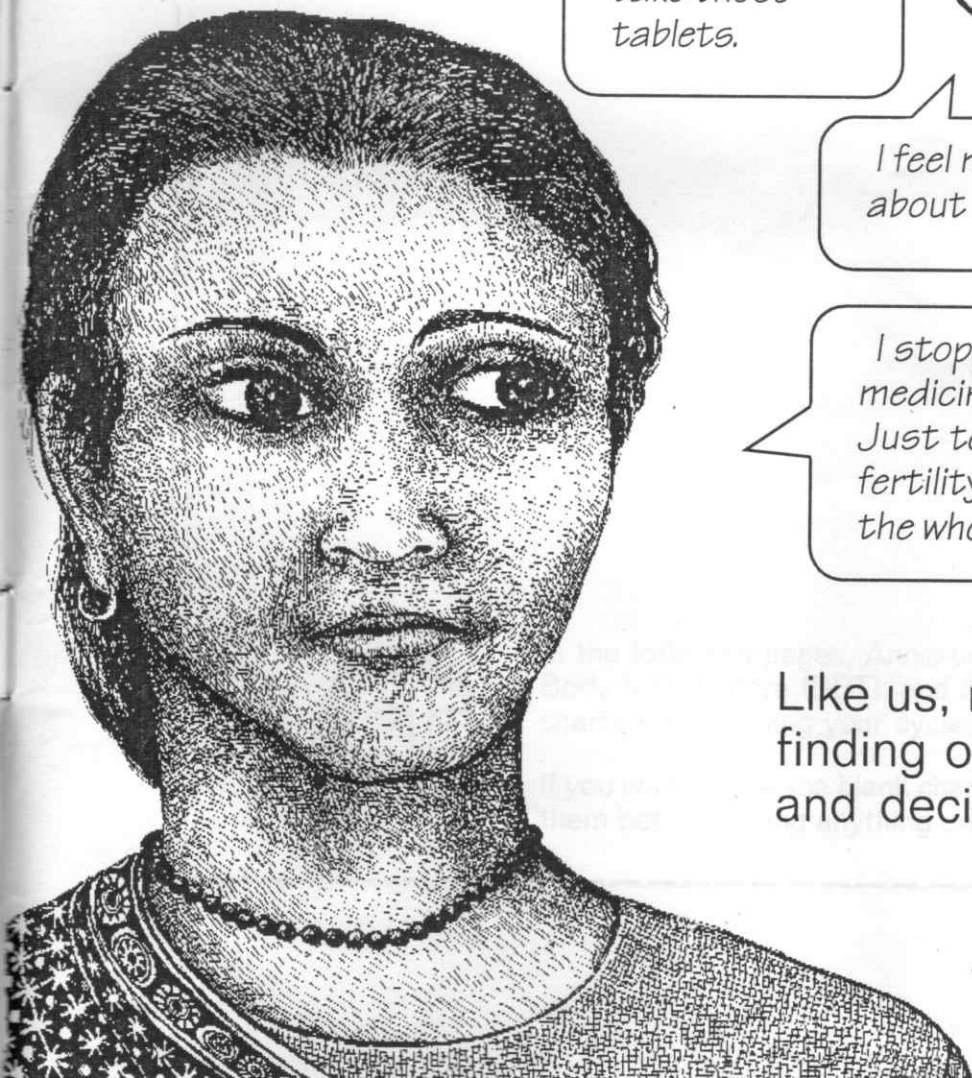
*Well, I think menstruation
is just a part of life.*

*Maybe I won't
take those
tablets.*

*I feel more sure
about my body.*

*I stopped using pills. Why take
medicine when I'm not sick?
Just to block a few days of
fertility, it affects my body for
the whole month.*

Like us, many women are
finding out for themselves
and deciding...





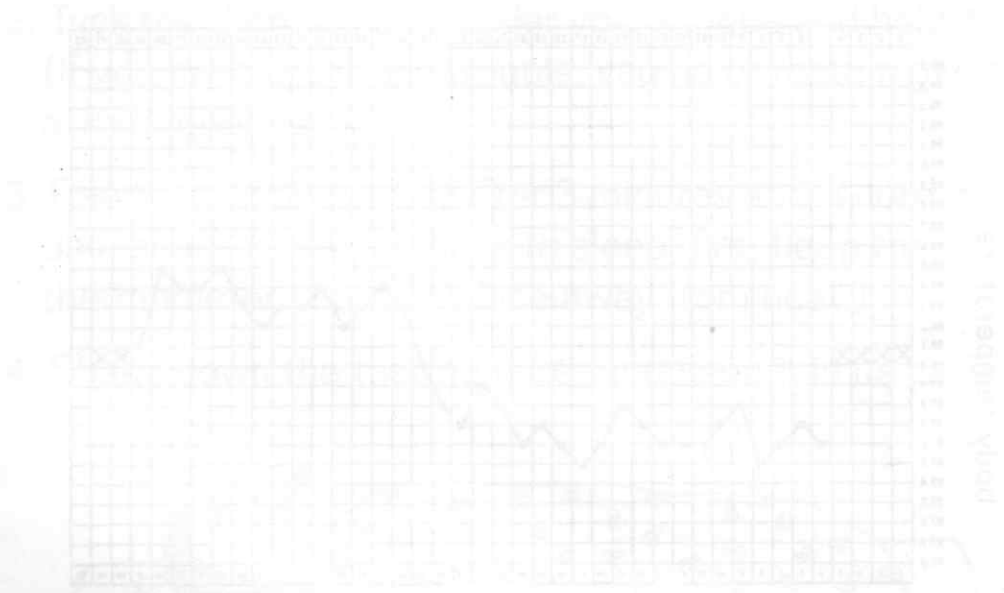
What difference do you think this could make in your life?

This is a place where you can write down your questions and experiences.

Your notes:

Charting Your Basal Body Temperature (BBT)

Your body temperature of rest rises and falls in a regular pattern in your cycle. Measure it each day and the BBT chart shows one cycle of a body temperature graph of a woman's cycle over several period days.



As menstruation ends, BBT reaches a low level - 96.5°F shifts upward about 1 degree F (or about 1.8 degree C). It remains high (around 97.5°F or 37°C) for about 2 weeks and lowers as menstrual flow starts.

In a BBT chart, the temperature of the body is recorded each day. The BBT chart shows one cycle of a body temperature graph of a woman's cycle over several period days.

As menstruation ends, BBT reaches a low level - 96.5°F shifts upward about 1 degree F (or about 1.8 degree C). It remains high (around 97.5°F or 37°C) for about 2 weeks and lowers as menstrual flow starts.



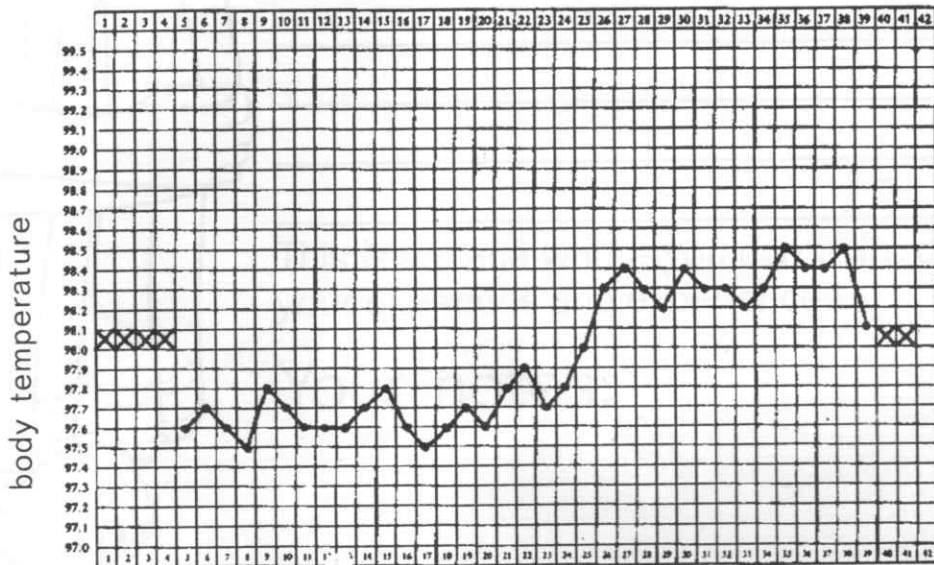
In the following pages, Annexure 1 tells about recording Basal Body Temperature (BBT), and Annexures 2 and 3 contain blank charts for recording your cycles, along with instructions.

If you want to use the blank charts again, be sure you photocopy them before writing anything on them.

Annexure 1:

Charting your Basal Body Temperature (BBT)

Your body temperature 'at rest' rises and falls in a regular pattern in your cycle. Measure it each day and see. Shown here is one cycle of a body temperature graph of one woman. The Xs mark her period days.



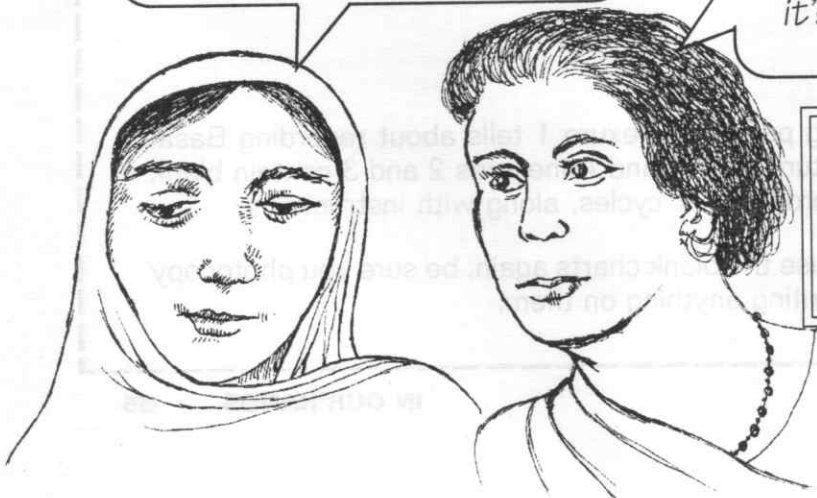
As menstruation ends, BBT reaches a low level (around 97.5°F or 37°C)

Around ovulation (due to progesterone) BBT shifts upwards about 1 degree F (or about 1/2 degree C). It remains high for about 2 weeks and lowers as menstrual flow starts.

Does the egg always burst out just when the temperature goes up?

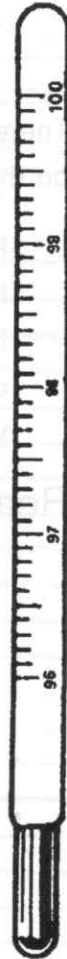
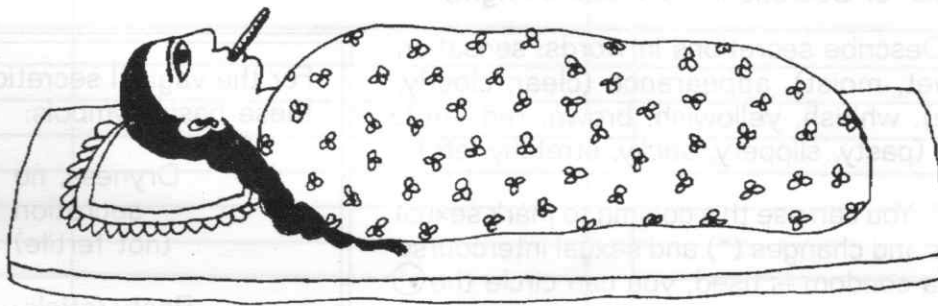
No, ovulation may happen the day after or even a few days before the BBT shift. But if BBT stays up 3 days, it's proof an egg matured.

If your BBT remains high longer than 20 days, and you had sex during the fertile days, it is a sign of pregnancy.



Want to measure your BBT? Here's how...

1. Check daily before getting out of bed, without talking, drinking tea or doing anything else first.
2. Tuck the thermometer under your tongue and hold it. (If you have breathing trouble, vagina or rectum gives a 1°F higher reading.)
3. Read the temperature after 3 minutes and record it on a chart. (If you go back to sleep, first keep the thermometer in a safe place away from heat.)
4. Shake down the thermometer and keep it in its case.



Recording BBT is not always easy. It is to be taken when one is at *total rest*... after 3 hours of undisturbed sleep. This may be impractical for women who have small children, early housework, who travel a lot, or who are under other stresses. Neither is it easy to interpret a BBT chart. If you have a fever, it can be confusing. For some women the BBT shift is gradual.

Yet... charting your BBT can deepen your understanding of your fertility patterns.

A BBT thermometer is specially marked in one-tenths of degrees, so it is easier to see the minute natural changes.

You can try using a regular 'fever' thermometer, too.



Annexure 2: Using Monthly or 'Fertility Cycle' Charts

There are two back-to-back charts following these instructions. You can write directly on the charts, or you can photo-copy and use them again and again.

Remember, the way to record is described on page 36 by Manasi's experience. Now you can try recording for yourself. The 'Fertility Cycle Chart' is designed to fit average lengths of menstrual cycles that women experience. But for one or other reason, some women sometimes have longer cycles. If that happens for you, you can continue recording straight on to the next chart on the back.

Reasons for the Columns in the Chart:

- **Moon Phases:** Many women, especially in rural areas, keep track of what day it is by the moon. One's menstrual cycle may or may not be affected by the moon, however.
- **Starting Date:** Your period begins on a day of the week, like Tuesday. Find the first 'Tu' in the Weekday column and write the date next to it.
- **Symbols for Secretions:** (see box on right)
- **Flow:** Describe secretions in words: sensation (dry, wet, moist), appearance (clear, cloudy, opaque), whitish, yellowish, brown, red, etc), texture (pasty, slippery, sticky, stretchy, etc).
- **Sex *✓:** You can use this column to mark sexual feelings and changes (*) and sexual intercourse (✓). If a condom is used, you can circle the ✓ mark.
- **Other Signs, Feelings, Notes:** Record other changes (see page 28). Also, changes in cervix (see page 25). Note stresses (illness, tension, travel, heavy exertion, lack of sleep, etc) or other possible factors (medicines, breast-feeding, etc.) Record only what you see or feel!
- **Cycle Day:** If you write in the cycle day numbers at the end of your cycle, it may help to avoid a bias towards 'rhythm' (fixed pattern) in your observations.

For BBT readings, you can record next to the cycle day column and graph them to see the BBT shift visually. Or you can write to us for a BBT chart.

For the vaginal secretions, use these basic symbols:

Dryness, no secretion
(not fertile)



Pasty/sticky
(not fertile)



Stretchy mucus
(fertile)



Wet, stretchy, slippery mucus
(very fertile)



Blood staining*
or spotting



Bleeding*
(amount ~ dot size)



* Bleeding sometimes happens at ovulation, so it could be fertile.

FERTILITY CYCLE CHART

Name _____ Age ____ Month(s) of Cycle _____ Year _____

Moon	Date	Weekday	Symbols 	Flow of Secretions Wet, dry? Pasty, creamy, slippery, stretchy? White, yellow brown, red, mixed or spotting? Opaque, cloudy, transparent? Odour?	Sex 	Other Signs, Feelings, Notes Heaviness, pricking, pain . . . where? (belly, breasts)? . . . Physical or emotional stress? Travel? Sickness, medicines?	Cycle Day
		Su					
		Mo					
		Tu					
		We					
		Th					
		Fr					
		Sa					
		Su					
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FERTILITY CYCLE CHART

Name _____ Age _____ Month(s) of Cycle _____ Year _____

Moon	Date	Weekday	Symbols	Flow of Secretions Wet, dry? Pasty, creamy, slippery, stretchy? White, yellow brown, red, mixed or spotting? Opaque, cloudy, transparent? Odour?	Sex <input checked="" type="checkbox"/>	Other Signs, Feelings, Notes Heaviness, pricking, pain . . . where? (belly, breasts)? . . . Physical or emotional stress? Travel? Sickness, medicines?	Cycle Day
		Su					
		Mo					
		Tu					
		We					
		Th					
		Fr					
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After recording a complete cycle,
see what you can find. . .

Do you see any link with the moon phase? No Maybe Yes

Which body signs and changes did you notice, and when?

1. _____
2. _____
3. _____
4. _____
5. _____

Is there a pattern in your vaginal secretions? What is it like?

_____ Confusing Clear No Pattern

Do you think ovulation happened? Yes Maybe No

. . . why do you think so?

1. _____
2. _____
3. _____

If you had discomfort or pain, when was it? What do you think caused it?

Did you experience anything curious or unexpected during the cycle?

In future cycles, what do you want to understand better?

If you need, you can use extra sheets to describe your experiences and ideas. We will be happy to receive your cycle observations and answer your questions.

Tathapi Team, Pune

Annexure 3:

Using Two Kinds of Yearly Summary Charts

After these instructions there are two different year-long charts. You can start to use these after you have finished filling in a few cycles on monthly charts. You may write directly on the charts... or you may xerox and use them. These charts are meant to help you compare and see patterns between your cycles.

Datewise Summary of Cycles throughout the Year

This chart contains a whole year's calendar from January to December. Fill in the symbols just as you recorded them near the dates in your monthly charts. This chart lets you see the general trends of your cycles.

Regularity and Cycle Length: When the chart is filled in, all the period symbols (●●●●) will stand out across the page.

- If your cycles are generally shorter than a month, there will be a dark band in the upward direction towards the right.
- If your cycles are generally longer than a month, there will be a dark band in the downward direction towards the right.
- If your cycles are sometimes longer and sometimes shorter, there will be a ragged or zig-zag pattern in the dark band.

Likely Ovulation or Anovulation: If you see mucus symbols (O) around two weeks before each period, it means you are ovulating regularly. If there is a difference in the pattern, or ovulation is delayed, then your detailed monthly chart may give a hint of a cause. You may add in the symbols for full moon and dark moon for each month, and see if there is any relation to ovulation and periods.

The blank column on the right is for noting what you see and think.

Cyclewise Summary for Comparison of Cycles in the Year

This chart lets you compare more closely the probable events in your menstrual cycles. Refer to your original monthly charts for marking the symbols. Note, there are no dates in this chart – only cycle days (numbered 1-40; if you have a longer cycle, you can go into the next column). The column on the right is for recording the summary data for each cycle.

At the bottom is some space for writing your overall impressions. You can write on an extra sheet if you need more space.

For further support do contact us at Tathapi.



MENSTRUAL CYCLES: ONE YEAR, DATEWISE

Name _____

Date	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Notes
1													
2													
3													
4													
5													
6													
7													
8													
9													
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11													
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26													
27													
28													
29													
30													
31													

COMPARISON OF MENSTRUAL CYCLES: YEAR _____

Name _____

Day	1	2	3	4	5	6	7	8	9	10	11	12	13
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
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36													
37													
38													
39													
40													
Note/Comment: _____													

↔ Serial No. of Cycle
↔ First Day of Cycle

Cycle 1 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 2 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 3 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 4 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 5 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 6 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 7 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 8 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 9 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 10 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 11 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 12 days ____ Pattern: clear/unclear '0' day (if any): ____
Cycle 13 days ____ Pattern: clear/unclear '0' day (if any): ____

About this book

This workbook is for women, singly, as well as in groups. We take a body literacy approach to sexuality and fertility. That is, through practical experience we show how one's own 'body-and-mind' tells us a lot through internal sign-language that we can learn to 'read'. We engage women in experientially understanding the menstrual cycle process and help them overcome negative myths and taboos. We guide them in 'reading' their fertility signs and patterns. We question over-dependence on medicines and the medical system.

What is 'fertility'? Basically, it is a person's bodily *potential* to contribute in creation of new human life (reproduction). It is different in women and in men. Fertility in women centres around the process of ovulation followed by menstruation.

We see fertility reaching beyond the biological zone into the area of social creativity. 'Social fertility' pertains to human survival and sustainability over generations. Perceptive and expressive sexuality, informed by core values of equality and non-injury, is inseparable from social fertility.

What is 'sexuality'? Sexuality is a part of one's personality that, to an extent, is affected by one's biological fertility. It includes a person's bodily feelings and expressions linked with the desire for relating sexually.

'Fertility and sexuality awareness' is useful for women in providing a basis to resist wrong and restricting beliefs, for understanding one's moods, for accurately predicting menstrual periods, and for avoiding pregnancy or for achieving it. It also helps in recognising health problems, in using simple effective remedies and in knowing when to seek medical help.

Through a pictorial and interactive style, this workbook leads a woman to feel and think for herself and gain basic skills in observing and understanding her fertility patterns. For further guidance to interpret confusing signs and patterns and to use the skills in various practical situations, the Tathapi team will be glad to respond. We welcome the interest of men, and count on their involvement and comments.

Acknowledgements

This book comes into being through a long process that has spanned more than two decades. Many, many women and quite a few men have contributed over the years. We regret not being able to acknowledge every one of them. Tathapi wishes to thank the following people and organisations who have directly lent a hand in the creation of this workbook:

Friends who have helped develop perspective, technical understanding and practical use of fertility awareness in our varied contexts in India, among them Anita Borkar, Anu Gupta, Chandra Karhadkar, Karen Haydock, Lakshmi Murthy, Manasi Palshikar, Medha S.S., Renu Khanna, Sabala and Kranti, C. Sathyamala, Seema Khot, Simrita Gopal Singh, Ujjwal Nene, and Vibha Gokhale.

The groups who helped in draft review and field-testing Abhivyakti/Sangati (Nashik), Alert-India (Mumbai), St Mira's College Students (Pune), FRCH (Parinche, Dt. Pune), Aalochana (Pune), KEMHRC (Pune), IHMP (Pune).

The Sir JRD Tata Trust for the financial support for this work, and especially Jasmine Pavri for her encouragement.

Dr. Mira Sadgopal wishes to acknowledge 'Ashoka Innovators for the Public' for the fellowship granted to her in 1992-95. She is also indebted to her colleagues in Kishore Bharati (Hoshangabad District, MP) and to the women of Palia Piparia village where this work began in the early 1980s.

F^①ertility and sexuality awareness is a part of 'body literacy', or learning to 'read' what our bodies say about changes within us. In today's techno-centric world, it enables us to tune into our bodies through our senses and sensations, and to decide and choose in our lives in different ways.

Some might have heard of fertility awareness as a 'natural birth control method'. More than three decades ago feminist self-help groups saw that 'fertility consciousness' among women is much more than birth control. Through it, girls and women reclaim their bodies from the shadow of myths and misconceptions and loosen the grasp of patriarchal society and the medical profession. Wide experience has shown that it can help couples' relationships become more sensitive and caring. Tathapi hopes to extend the relevance of fertility and sexuality awareness to men and boys.

Global economic policies and population control bear down hardest on women. Government and population control interests would have us believe that people do not and can not control their own fertility. Further, most believe that men will continue to dominate women, sexually and otherwise. So we see the promotion of specially developed *long-acting, provider-controlled, systemic contraceptive methods* like injectables (Depo-Provera, Net-En) and implants (Norplant). These are methods that virtually blot out fertility.

In fact, much clutter and challenge is strewn in the path towards equal sexual and social relations. We walk on that path. In the meantime, we seek to give women and girls, and men and boys, this information for their self-protection and as their right.



Tathapi began in September 1999. Based in Pune, the Tathapi team is dedicated to creating spaces for 'Women and Health' resource development, including information access and skill-building at grassroots level throughout Maharashtra. Tathapi is active in advocacy campaigns around critical health issues. A core work area is Body Literacy.

Tathapi is a registered Public Trust (No.E-2957-Pune).