



सत्यमेव जयते
ग्रामीण विकास मंत्रालय
भारत सरकार



ADOLESCENT NUTRITION AND HEALTH

Flipbook for SHG Meetings



Deendayal Antyodaya Yojana – National Rural Livelihoods Mission (DAY-NRLM)

Ministry of Rural Development, Government of India

INSTRUCTIONS FOR THE FACILITATOR



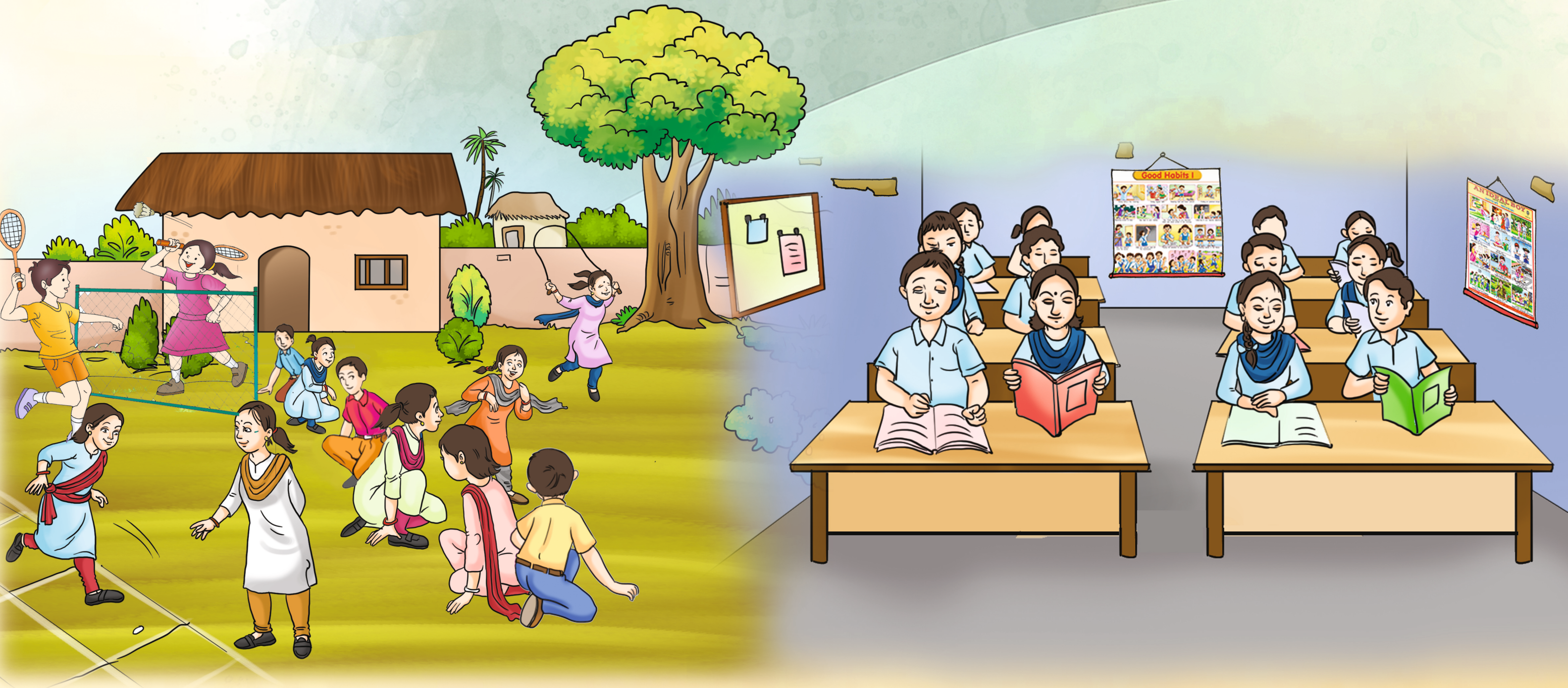
- Each Flipbook has a facilitator guide attached, please read the guide thoroughly to familiarize yourself with the contents of the session.
- The facilitator guide provides additional information on the topic so that the facilitator is equipped to address any questions, doubts raised by participants while the session is rolled out.

Start the session by greeting the participants and informing them about this session

- Each card has two sides. The front pictorial side is illustrated for the participants.
- The back with descriptive messages, is for the facilitator to read, understand and explain to the participants.
- The facilitator must display the pictorial side to the participants first and ask what they understand. The Flipbook should be passed around the group members, if the pictures are small and difficult to see from a distance.
- After that, the facilitator should explain the message related to the picture.
- In case a participant has any query, the facilitator must patiently try to listen, understand and address the query.
- After a detailed explanation of the flipbook content, the facilitator should check understanding among the participants by asking questions and re-iterating the key messages.



ENSURING PROPER HEALTH AND NUTRITION DURING ADOLESCENCE ENSURES HEALTHY LIFE THROUGHOUT



WHAT IS ADOLESCENCE?

Adolescents are people aged between 10 to 19 yrs. It is a transitional stage of physical growth and mental development from childhood to adulthood. About 23% of the total population of India are adolescents.

- Adolescence is the fastest growing stage marked by the onset of puberty.
- It is characterized by physical growth reproductive maturation cognitive, functional and metabolic transformation.
- Physical and lifestyle changes affect nutritional need and eating habits respectively.
- Adolescent girls are at greater physiological stress because of menstruation.
- Maintaining nutritional health is of utmost importance for optimum growth and for preventing future health related problems.



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HEALTH AND NUTRITION DURING ADOLESCENCE



Adolescence offers a second chance to avert negative impacts of malnutrition that may have occurred during childhood

This stage is important to –

- Meet physical and cognitive growth demands
- Nurture good lifestyle habits
- Prevent adult onset of diseases such as heart disease, diabetes, etc

Inappropriate diet and health care during adolescence may lead to

- Retarded physical growth, delayed sexual maturation
- Deficiencies and disorders such as anemia, undernutrition, obesity, eating disorders, diabetes, etc.
- Lack of concentration, poor learning and school performance



HEALTH AND NUTRITION DURING ADOLESCENCE

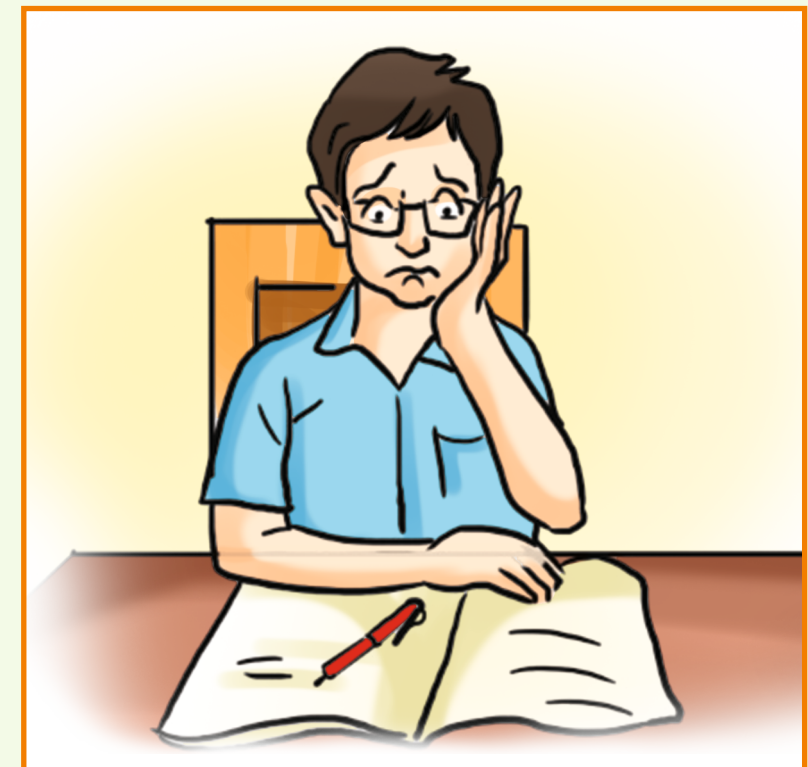


Good Nutrition and Health



Lack of which
may lead to →

Poor Nutrition and Health



SUGGESTIONS FOR IMPROVED NUTRITION



Do's

- Balanced diet is essential for optimal growth and development
- Add high protein foods – pulses, legumes, dairy, meat and eggs in your diet
- Consume plenty of green leafy vegetable and seasonal fruits
- Drink at least 6 – 8 glasses of water daily and plenty of other fluids
- Eat healthy snacks such as murmura, chana, chiwda, makhana, etc.
- Ensure sunlight exposure for adequate vitamin D to help calcium absorption
- Exercise regularly



Don'ts

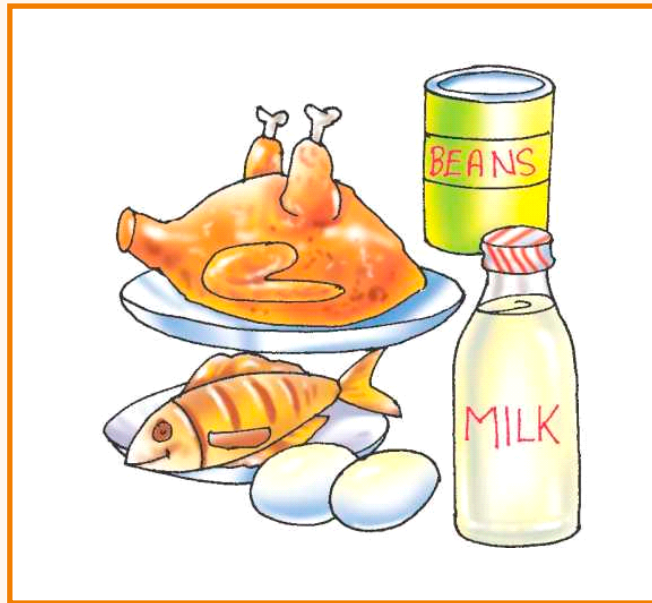
- Do not skip meals
- Avoid excessive sugar and salt intake
- Avoid or limit intake of fried, junk foods and fast foods
- Do not consume alcohol or tobacco
- Do not watch television while having meals



Play Video by
scanning this QR Code



SUGGESTIONS FOR IMPROVED NUTRITION



Consume balanced diet, healthy snacks and plenty of fluids

Avoid fried, fatty, sugary and junk foods



MALNUTRITION IN ADOLESCENTS

Underweight adolescents have poor school performance and are not able to work hard.

Underweight girls grow up as underweight women, give birth to a weak child and the malnutrition cycle continues (Refer session on malnutrition cycle)

- Increase number of meals and portion size
- Consume high energy and protein rich foods like wheat, rice, dairy, pulses, meat, nuts, dry-fruits
- Consume micronutrient rich foods like seasonal fruits and vegetables
- Ensure regular deworming



Obese/Overweight adolescents have poor school performance, lethargy, onset of long term chronic illnesses such as heart diseases, diabetes, fatty liver, ulcers, etc. (Refer session on NCDs)

- Eat frequent meals in small portions including high fiber foods like whole grains and pulses, fruits, leafy vegetables
- Choose low fat dairy and lean meats like chicken, fish and egg whites
- Use healthy, non fried snacks like sprouts, chana, poha, etc
- Exercise regularly and monitor weight regularly



Consult a doctor if no change in weight after following the above measures



MALNUTRITION IN ADOLESCENTS

Underweight

Consequences

- Malnutrition
- Weak Immune system
- Anaemia and other deficiencies
- Fragile bones
- Poor Learning Capacity



Prevention

- More number of meals
- Increase portion size
- Energy and protein rich foods
- More fruits leafy vegetables
- Regular intake of IFA
- Regular deworming

Overweight/Obese

Consequences

- Lethargic
- Heart diseases
- Diabetes
- Fatty liver
- Stomach ulcer



Prevention

- Small frequent meals
- Increase high fiber foods
- Use low fat dairy and lean meats only
- Adopt active lifestyle such as
 - Participate in sports
 - Include yoga, walk and other activities in daily routine.



ANAEMIA IN ADOLESCENTS

Anaemia is decrease in the total amount of red blood cells or hemoglobin in the blood, or a lowered ability of the blood to carry oxygen.

Anaemia leads to poor cognition and physical development, poor concentration and school performance; decreased immunity and repeated infections; fatigue, shortness of breath, irregular menstruation and sometimes even loss of consciousness.

Dietary recommendations

- Green leafy veg
- Citrus foods
- Iron Folic Acid
 - WIFS (Weekly IFA Supplementation)
- Deworming



ANAEMIA IN ADOLESCENTS



IRON RICH FOODS

EAT

VITAMIN C
RICH
FOODS



For improving absorption of iron



IFA

SUPPLEMENT

ONE blue tablet
every week



ALBENDAZOLE

DEWORM

ONE tablet
twice a year

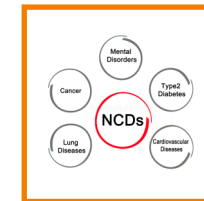


OTHER IMPORTANT CONSIDERATIONS DURING ADOLESCENCE

- **Menstrual Hygiene** – Natural biological process; pay attention to nutritious diet, proper hygiene and disposal methods (*Refer session on Menstrual Hygiene*)
- **Sexual and Reproductive Health** – consequences of early marriage and teenage pregnancies
- **Mental Health** – Stress, anxiety, depression, eating disorders, body shaming, etc. Ensure family support, encourage completing education and provide emotional support.
- **Injuries and Violence** – gender based violence, domestic violence, bullying, spirit of unhealthy competition, road injuries, etc
- **Substance Abuse** – adolescents are in exploratory stage and are more likely to fall into substance abuse
- **Address NCDs** – adolescence could be onset of NCDs due to improper nutrition, stress, other related behaviors

These issues should be addressed in discussion with ASHA / ANMs. Government has established **Adolescent Friendly Health Clinics**, contact ASHA / ANM for more information.

Contact and be part of Youth Groups / Clubs for more information



OTHER IMPORTANT CONSIDERATIONS DURING ADOLESCENCE



**Improve
nutrition**



**Sexual and
reproductive health**



**Enhance
mental health**



**Address
NCDs**



**Menstrual health
and hygiene**



Prevent injuries and violence



**Prevent
substance misuse**



ADOLESCENT FRIENDLY HEALTH CLINICS

- Adolescents hesitate in accessing health and other related services due to lack of knowledge, social and cultural deterrents, lack of privacy and sometimes non-friendliness of staff.
- Under the MoHFW, Adolescent Friendly Health Clinics (AFHC) provide clinical and counselling services on diverse adolescent health issues ranging from Sexual and Reproductive Health, Nutrition, Substance abuse, Injuries and Violence, Gender based violence, Non Communicable Diseases and Mental Health
- AFHCs, located at Primary Health Centers, Community Health Centers and District Hospitals and Medical Colleges are delivered through Medical Officers, ANM and Counselors.
- Counselors inform, educate and counsel the adolescents on health issues, refer them to health facilities, NCD clinics, de-addiction centre, etc.
- Besides this, outreach services by counselors are carried out at schools, youth clubs, and in communities to sensitize the adolescents, caregivers and influencers on available services.
- These centres also act as resource centre for capacity building of health care providers and repository for IEC materials on Adolescent Health and other related issues.



ADOLESCENT FRIENDLY HEALTH CLINICS

Contact ANM / ASHA for more information on AFHCs in your area.



Counseling support being provided to the adolescents



KEY MESSAGES AND ROLE OF SELF HELP GROUPS

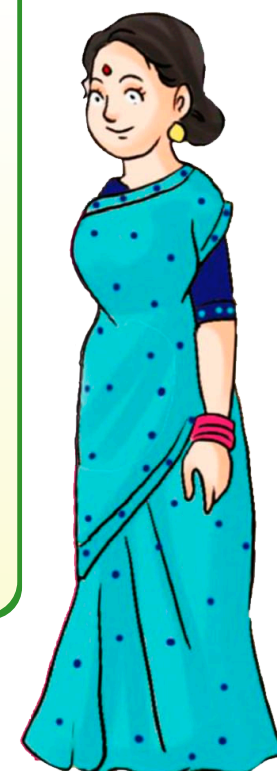
Key Messages

- Adolescents are the young people aged between 10 to 19 yrs. Adolescence is the fastest growing stage in life which marks the onset of puberty also.
- Inappropriate diet and health care during adolescence may lead to retarded physical growth, delayed sexual maturation and various deficiencies and disorders.
- Malnutrition and Anemia are also common problems during adolescence that can be taken care of through proper nutrition and health care.
- A number of other issues are faced by adolescents, which may sometimes require special counselling, MoHFW has set up AFHC's for this purpose.

Role of Self Help Groups

- Encourage community members to listen to adolescents in their families, so that adolescent girls and boys feel they have a safe, supportive space to voice their problems and anxieties.
- The group members should also ensure that all adolescents in their families are aware of other issues and getting adequate information to deal with issues if they arise.
- The SHG members should be able to connect the adolescents in their families with the Adolescent Friendly Health Clinics for any counselling or support that may be required.

The self help group should be ready to support those members who face problems or find it difficult to convey these messages and convince their families.



**Let us ensure that key messages of this session
are reflected in our daily behaviours**



The Food, Nutrition, Health and WASH (FNHW) Toolkit has been developed by the National Mission Management Unit (NMMU) with support from Technical Assistance agencies–TA– NRLM (PCI) and inputs from ROSHNI–Centre of Women Collectives led Social Action, National Institute of Rural Development (NIRD), State Institutes of Rural Development (SIRDs), National Resource Persons (NRPs), State Rural Livelihood Missions (SRLMs) of Bihar, Chhattisgarh, Jharkhand, Odisha, Uttar Pradesh, Andhra Pradesh, Telangana and Maharashtra, JEEViKA Technical Support Program–Project Concern International (JTSP–PCI) and UNICEF state teams from Odisha, Bihar and Chhattisgarh.

The standard materials of Ministry of Health and Family Welfare (MoHFW), Ministry of Women and Child Development (MoWCD), National Centre for Excellence & Advanced Research on Diets (NCEARD), Alive & Thrive, JTSP–PCI and UNICEF have been referred while finalizing the content.

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