



Rashtriya Kishore Swasthya Karyakram in Uttar Pradesh

An Overview

Adolescent Health in Uttar Pradesh

Introduction

The Ministry of Health and Family Welfare has launched a new adolescent health program- Rashtriya Kishor Swasthya Karyakram. The program envisages strengthening the health system for effective communication, capacity building, and monitoring and evaluation. Further, RSKS underscores the need for several constituencies to converge effectively and harness their collective strength to respond to adolescent health and development needs. The different stakeholders working on issues related to adolescent health and development have a lot to gain by building on each other's work both in terms of achieving program objectives as well as in the improved indicators for adolescent health and development.

Target Groups

The new Adolescent Health (AH) strategy focuses on age groups 10-14 years and 15-19 years with universal coverage, i.e., males and females; urban and rural; in school and out of school; married and unmarried; and vulnerable and under-served.

Uttar Pradesh has an adolescent population of 487.54 lacs which is 24.40% of the total population of Uttar Pradesh, 47.31 lacs(13.5%) of the adolescent is in school, and 46.63 lacs (9.56%) of adolescents are out of school. Uttar Pradesh has 59,998 total Schools from 6th -12th class Schools, including Government, Government aided, tribal residential, and municipal corporations.

Why Adolescents?

- Poor knowledge & lack of awareness regarding reproductive and sexual health issues.
- Unwanted pregnancy.
- Sexually transmitted infections & reproductive tract infections.
- Increased risk of maternal & infant mortality.
- Rising incidents of HIV.
- Malnutrition & anemia in adolescents, especially during pregnancy.
- The above leads to increased maternal, perinatal, neonatal & infant mortality

Situation Analysis of Uttar Pradesh

Early marriages among girls (%)	15.8	Low S. Ferritin-IDA (10-19 yrs)	17.2
Teenage Pregnancies (%)	2.9	Vitamin D deficiency (%)	19.4
CPR Modern Methods (girls married 15-19 yrs) (%)	20.4	Zinc deficiency (%)	26.3
Comprehensive knowledge of HIV/AIDS Girls (15-19 yrs) (%)	9.3	Vitamin B12 deficiency (%)	42.1
Using hygienic methods during periods (%)	70.5	Pre-diabetics - 10 to 19 yrs (%)	3.2
Girls 15-19 yrs Anemic (%)	52.9	High Cholesterol in 10-19 yrs (%)	1.3
Boys 15-19 yrs Anemic (%)	28.2	Hypertensive - 10 to 19 yrs (%)	3.8(Girls)/4.7(Boys)
Girls/Boys 15-19 yrs Thin (%)	37.3/40.2	Tobacco Users (%)	23
Girls/Boys 15-19 yrs Obese (%)	3.9/3.4	Accidental Deaths Rate / 1 lakh	9.0
Emotional/Physical/ Sexual Violence (15-19 yrs girls) (%)	29.4	Suicide Rate per lakh	2.6

Kishor Swasthya Manch “KSM”

Innovation and Replicable Practices, Uttar Pradesh

Introduction

The National health mission Uttar Pradesh has launched Kishor Swasthya Manch (KSM) as an event for school-going adolescents (10-19 years) targeting their Nutrition, Reproductive & sexual health, Mental health, Gender violence & Injuries, Substance abuse, and other health-related issues. Kishor Swasthya Manch” is a one-day event organized in 2 selected schools of all blocks including urban area of all 75 districts.

In the year 2013, the Weekly Iron Folic Acid Supplementation (WIFS) program came under RKSK and in March 2018 Anaemia Mukta Bharat (AMB) program was launched with the objective to reduce anaemia prevalence amongst adolescents girls and boys. All the districts of UP were not performing equally in reducing anaemia in the state. In view of the above Anaemia free Adolescent Events were planned in FY 2018 in 25 poor WIFS coverage (<10%) districts. Events were started in 2 inter colleges of each block including urban areas of the selected districts. Later on, to strengthen the RKSK program as a whole the Anaemia free adolescent event was repackaged and renamed as Kishor Swasthya Manch (KSM) under RKSK to be organized in the entire state of UP to address Adolescents health issues. In addition, components of RKSK like SRH, Menstrual health and personal hygiene, Mental health, Gender violence & Injuries, Substance abuse and other health-related issues were included. Haemoglobin test was also added in the event for further management and referral.

Principal emphasis of the event Kishor Swasthya Manch is on adolescent participation and leadership in various thematic areas of RKSK. The Event envisions enabling all school-going adolescents in the state of Uttar Pradesh to realize their full potential by making informed and responsible decisions related to their own health and well-being.

To guide the implementation of KSM event, NHM UP is working closely with department of Education, ICDS and PRI departments in collaboration with development partners as well as adolescents’ own families and community. The state of Uttar Pradesh has developed a detailed guideline on KSM based on our past adolescent-related initiative.

Objectives of KSM Event

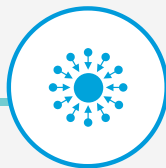
- 1 To sensitize teachers & adolescents in Inter colleges about adolescent issues.
- 2 To enhance access to awareness and services.
- 3 Strengthen interdepartmental convergence.
- 4 To improve the involvement of line departments, & the community.
- 5 To establish the referral mechanism for further management.

Strategies of the KSM event



PLANNING

District & Block level planning meetings to prepare micro plan and implement activities in Government and Govt. aided Inter colleges.



CONVERGENCE

Event initiated in confluence & consultation with the Secondary education department, ICDS, PRI, SBM, Administration & development partners, and Community-Based Organizations involving local political leaders & Influencers.



MOBILIZATION

District Information officers ensured publication about the event in local dailies for spreading news about the event, followed by coverage of the event.



REPORTING

After completion of events physical reporting was ensured by having standard reporting format.

Service Packages on KSM Day

- Mobilization by the teachers to reach out to all the adolescents and their parents to communicate the date, venue, and benefits of attending KSM.
- Awareness sessions by experts from the health department and Sports on Adolescent Health and nutrition topics include Painting, Rangoli, Menhdi, Quiz competitions, debates & other physical/board games for peer learning and Prize distribution.
- Demonstration of various food groups through stalls to encourage diet diversity by AWWs (ICDS)
- BMI, Haemoglobin testing, and referral for management
- Counseling, sensitization on nutrition, Menstrual hygiene & handwash, etc.
- RBSK team and Adolescent Health Counsellors act as advocates for adolescent and their parents.



Outcome

- Effective communication at all levels (IPC, mid-media and mass media) in all possible spaces that reach out to adolescents and their influencers is an integral part of KSM.
- 6068 Inter College has hosted this activity since its inception from 2018 to 2022.
- 29.3lakh adolescents participated in the activity.
- Hemoglobin of 7.8 Lakhs adolescent has been tested.
- More than 45k teachers, including 6k college principals, are sensitized on AH issues through KSM.
- KSM increased the footfall of Sathiya Kendra, the AH counseling centers established at DH & CHCs.
- Availability of IFA tablet & WIFS coverage of inter colleges improved a lot with proper recording and reporting mechanisms in place.
- School Health Programme was also supported by the teachers involved in KSM.

Way Forward

- Based on the impact and learnings of KSM it is being incorporated in the Population policy of UP.
- Number of KSM events to be increased in urban areas.
- To ease the access of adolescent counselling centers, Sathiya corners (Counselling centers at the school run by school teachers) are being established in Inter colleges of 18 divisional districts.

School Health and Wellness Programme under Ayushman Bharat in Uttar Pradesh

Introduction

National Health Policy (NHP) 2017 envisages the attainment of the highest possible level of health and well-being for all ages through preventive and promotive healthcare. In 2014, Government of India (GoI) launched a comprehensive program called 'Rashtriya Kishore Swasthya Karyakram (RKSK)' to respond to the health and development requirements of the adolescent in a holistic manner. Also, in 2018, the School Health Programme (SHP), a joint initiative by the Ministry of Health and Family Welfare (MoHFW) and the Ministry of Human Resource Development (MoHRD), was launched. It has been incorporated as a part of the Health and wellness component of the Ayushman Bharat program to strengthen the preventive and promotive aspects through health promotion activities. These activities will not only combine health education, health promotion, and disease prevention but also improve access to health services in an integrated, systemic manner at the school level.



Objectives

To provide age-appropriate information about health and nutrition to the children in schools.

To promote healthy behaviors among the children that they will inculcate for life to reduce NCD prevalence.

To detect and treat diseases early in children and adolescents including identification of malnourished and anemic children with appropriate referrals to PHCs and hospitals.



To promote use of safe drinking water in schools

To promote safe menstrual hygiene practices by girls

To promote yoga and meditation through Health & Wellness Ambassadors.

To encourage research on health, wellness and nutrition for children.

In Uttar Pradesh, School Health and Wellness Program have been implemented phase-wise. Till date, 14,332 principals were oriented, and 25,067 Health and Wellness Ambassadors were trained in 11 modules.

Package of Services under School Health Programme



School health promotion activities

- Age appropriate incremental learning for promotion of healthy behavior and prevention of various diseases
- Delivered through school teachers/Health and Wellness Ambassadors trained in each school



Health Screening

- The screening of children for 30 identified health conditions for early detection, free treatment and management through dedicated RBSK mobile health teams.



Provision of Services

- Provision of IFA and Albendazole tablets by teachers through WIFS and NDD programme respectively.
- Provision of sanitary napkins
- Age appropriate vaccination



Electronic Health Records

- Electronic health record for each child



Imparting Skills of Emergency Care

- Training of teachers on basic first aid

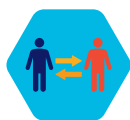
Themes of Curriculum



Growing Up
Healthy



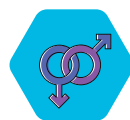
Emotional Well-being
and Mental Health



Interpersonal
Relationships



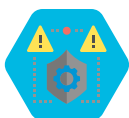
Values and Responsible
Citizenship



Gender
Equality



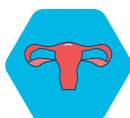
Nutrition, Health
and Sanitation



Prevention & Management
of Substance Misuse



Promotion of
Healthy Life Style



Reproductive Health
and HIV Prevention



Safety and Security Against
Violence and Injuries



Promotion of Safe Use of
Internet, Gadgets and Media

Operationalization of School Health Program

Age appropriate, skill-oriented, theme based, graded curriculum for the teachers to implement the activities at school level (Upper primary, high school and Inter college)

Two teachers in every school designated as “**Health and Wellness Ambassadors**”, will be trained to transact health promotion and disease prevention information in the form of interesting activities for one hour every week

24 hour sessions will be delivered through weekly structured interactive classroom-based activities

Adolescent Health and Wellness Days will be organized on a quarterly basis preferably at HWCs* for all adolescents on Nutrition & Wellness, NCD, Substance misuse, Mental Health, Sexual Health, etc.

These health promotion messages will also have bearing on improving health practices in the country and students will act as **Health and Wellness Messengers** in the society.

Regular reinforcement of messages/themes through IEC/BCC activities such as interactive activities/posters/class room/Assembly discussion

Peer Education Programme

Introduction

The adolescents in the community are covered through Peer Education (PE) Programme. The selected Peer Educators ensure that adolescents benefit from regular and sustained peer education covering all six themes of RSKS. It is envisaged that this approach would facilitate the coverage of out-of-school adolescents in addition to the school-going adolescents.



Process

Under the PE programme, four peer educators (two boys and two girls) are selected per village/1000 population/ASHA habitation to reach out to adolescents. Peer Educators selection is facilitated by ASHA in consultation with Village Health Sanitation and Nutrition Committee.

Each Peer educator forms a group of 15-20 boys or girls from their community and conducts weekly one to two-hour participatory sessions using PE kits. PE also maintains a diary, including a brief overview of each session and the number of participants. They will sensitize adolescents towards their health and inform them about existing adolescent friendly health services, so that all the adolescents may optimally utilize it. PE also facilitates the organization of the quarterly Adolescent Health and Wellness Days (AHWD) and participate in the Adolescent Friendly Club (AFC) meetings also.

ASHA acts as the village level PE coordinator and takes the lead in ensuring that the peer education activities are carried out smoothly at the village level. ANMs moderate the monthly AFC sessions and Medical Officer In-charge and Block Adolescent Health Coordinators provide the oversight.



Uttar Pradesh PE programme Status

Number of Districts in the States	Number of PE Districts	Current No. of selected Peer Educators in the State/ UT	Trained Peer Educators in the State/UT	Target PE to be selected for F.Y. 2022-23 till Q3	PE selected in F.Y. 2022-23 till Q3	PE Trained in F.Y. 2022-23 till Q3
75	25	90646	44514	103044	30103	2188

Adolescent Health & Wellness Days (AHWD)

The Quarterly Adolescent Health and Wellness Day (AHWD) is one of the interventions under RKSK to improve coverage with preventive and promotive interventions for adolescents and to increase awareness among adolescents, parents, families and stakeholders about issues and needs related to adolescent health. AHWDs are conducted at the village level at Anganwadi Centres or any other public place where adolescents and all stakeholders have easy accessibility. Block adolescent health coordinator is the focal person to coordinate for AHWD, ensuring the availability of commodities and services and ensuring that publicity is done beforehand. ASHAs engage with parents and families of adolescents to increase awareness about the unique needs of adolescents. As per RoP 2022-23



10,268 of AH&WDs approved out of which 4003 AH&WDs were conducted total coverage of 38.9 %

Adolescent Friendly Club Meetings

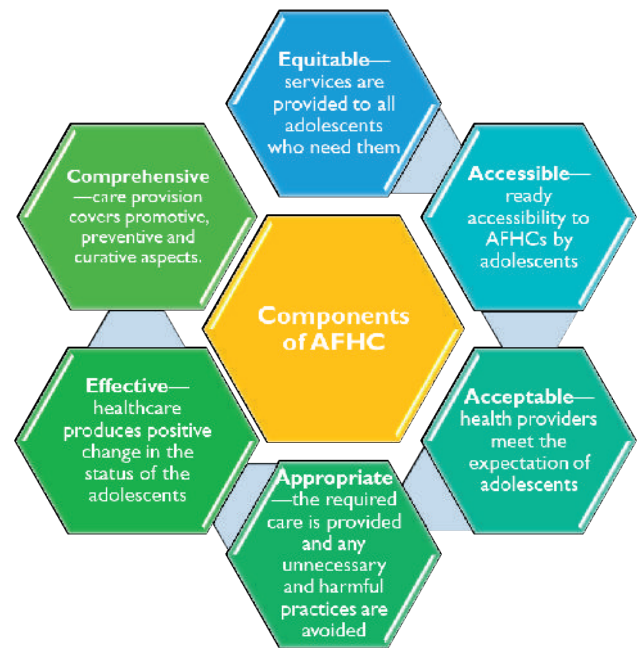


Apart from the above, Adolescent Friendly Club (AFC) meetings are also organized once a month at a sub-center level under the overall guidance of ANM. These typically cover 5 villages/5000 population composed of 10-20 peer educators each. During meetings, peer educators from different villages meet and clarify issues that they have encountered during their weekly sessions with the help of ANM. In FY 2022-23, Uttar Pradesh shows 74.69 % coverage of AFC i.e., 15339 AFCs were Conducted against 20536AFCs approved as per RoP 2022-23. common issues discussed in AFCs are Menstrual hygiene, RTI/STI and Substance abuse

Adolescent Family Health Clinic (Saathiya Kendra)

Under RSKS, AFHC entails a whole gamut of clinical and counselling services on diverse adolescent health issues ranging from Sexual and Reproductive Health (SRH) to Nutrition, Substance abuse, Injuries and Violence (including Gender-based violence, Non-Communicable Diseases and Mental Health). Adolescent Friendly Health Services are delivered through trained service providers- MO, ANM and Counsellors at AFHCs located at Community Health Centers (CHCs), District Hospitals (DHs) and Medical Colleges. These centres apart from providing the full component of services envisioned for AFHC will also act as resource centre for capacity building of health care providers and repository for Information, Education and Communication materials on Adolescent Health such as posters, banners, pamphlets, and audio-video materials; Outreach services by counsellors are carried out at schools, colleges, youth clubs and in community at least twice a week to sensitize the adolescents, caregivers and influencers on various

adolescent health issues and apprise them of various available adolescent-friendly health services. Monthly Average Client Load at AFHCs is approx. 200-210 cases per month at 57 districts in FY 2022-23



S.No	Indicators	Status
01	Total no. of health facilities (CHC , DH and MH)	435
02	Current number of ModelAFHCs (M-AFHCs)	4
03	No. of AFHS trained MOs providing services at AFHCs	437
04	No. of AFHS trained ANM/SN providing services at AFHC	5848
05	No. of dedicated AH Counsellors in-position	315
06	No. of other Counsellors providing counselling services at AFHC	233

Initiatives to Strengthen the AFHCs

- Branding of AFHCs as “Saathiya Kendra”
- Initiated Joint training of the AH & FP counsellors for capacity building and to enhance their integrated approach of counselling skills.
- Regular district review of counsellors by RSKS Nodals
- Poster on 6 thematic area of AFHC developed to increase the visibility
- Monthly theme-based calendar for out-reach activities.
- Audio & video theme-based messages developed & disseminated.



Weekly Iron Folic Acid Supplementation (WIFS)

Introduction

The high prevalence of anemia is a major public health problem in Uttar Pradesh (UP). According to the National Family Health Survey 5 (NFHS 5, 2019-21), nearly half of adolescent girls and one-third of adolescent boys are found anemic. To meet the challenges for preventing anemia in adolescent girls and boys, supervised Weekly administration of IFA Supplementation and bi-annual anti-helminthic control is ongoing in the state through National Adolescent Health Program (Rashtriya Kishor Swasth Karykram - RKSK).

Weekly IFA Supplementation (WIFS) is delivered to the 10 to 19 yrs age group adolescent boys and girls who are studying in government and government-aided schools, in addition to out-of-school girls also receiving WIFS from Anganwadi Centers. In coordination with Health, Education, and Women & Child Development (WCD) Department, every year, the state reaches 13 million adolescents for WIFS through 56000 schools (Govt and Govt Aided Schools) and 1,83,000 Anganwadi Centers (AWCs). In the year 2022-23, 54% of in-school adolescents and 43% of out-of-school adolescent girls received at least 4 IFA tablets monthly across the period of one year.



Planning, supply chain management, capacity building, behavior change interventions (BCI), and monitoring are the key component for the successful roll-out of the WIFS Program. Distribution of IFA to schools and AWCs is a major challenge. To overcome the challenges, GoUP adopted and facilitated the comprehensive distribution mechanism. For capacity building of teachers and AWWs, the state conducted cascading training in 2022-23 and oriented more than 2,00,000 teachers and AWWs.

For recording and reporting, the state has developed registers, formats, and online reporting tools. Behavior change is one of the important aspects of the WIFS Program. To promote a healthy lifestyle, diet diversity, and consumption of IFA supplementation, various BCI activities undertaken by all concerned departments like, development of a Nutrition Health Education Module, BCI materials, organization of health assemblies in schools, Health camps, Kishor Swasth Manch events, a celebration of adolescent health day, etc.

Menstrual Hygiene Scheme (MHS) Kishori Suraksha Yojna

The state of Uttar Pradesh has introduced a scheme for the promotion of menstrual hygiene among school-going adolescent girls in the age group of 10-19 years:

Objective

- To increase awareness among adolescent girls on Menstrual Hygiene
- To increase access to and use of high-quality sanitary napkins for adolescent girls in rural areas.
- To ensure safe disposal of Sanitary Napkins in an environmentally friendly manner.

Innovation in RKSK

Kishor Health Club

Rationale



The purpose of formation of health club is to empower, enable and motivate students to become agents of change in health, hygiene and nutrition behavior under the guidance and supervision of a trained team in schools



The purpose of the formation of a health club is manifold in the behavior of the students for better health, as well as a healthy environment and platform can made available for adolescent health problems and their solutions.

Objective

- Organizing all activities related to health and healthy behavior change through adolescent health clubs in schools.
- To develop cadre of trained volunteers among teachers and students, Messengers to provide counseling and referral to student-friendly health services for both physical and mental health issues.
- Creating awareness among teenagers to prevent Covid-19 and other infectious diseases. And promote healthy behavior related to health and nutrition among the students.
- To promote gender equality and a positive outlook on life skills.
- Promotion of cleanliness, personal hygiene, and community hygiene, clean drinking water.
- Early detection of diseases in children and adolescents and identification and referral of children with malnutrition and anemia.
- Promotion of management of menstrual hygiene among adolescent girls.
- Promoting physical education and wellness through yoga, meditation, and exercise-related activities.
- Ensuring necessary medicines and information for emergency and initial treatment and management of accidental health problems such as injury, bleeding, epileptic attack, unconsciousness, sunstroke, etc.

Structure of Kishor Health Club

S.No	Nominated Club Member	Post
01	Community Health Officer (CHO)/ ANMs	Chief Patron
02	Principal	Club Patron
03	Two teacher (One male and one female)	Health Brigadier
04	Two students from each class (One boy and one girl)	Health Captain
05	NSS, Neharu Yova kendra, Scout and guide, and NCC member	Health Captain

Kishor Health Club Activities

- Orientation of Kishor Health Club members
- Quiz, Games, Debate, Poster/Painting Competition, Rangoli, Mehendi, Slogan, Calligraphy etc.
- Availability of First aid box and teacher orientation.
- Organized Health Camp on timely manner
- Organize Yoga/Meditation/Exercise Camp
- Screening of short films and videos
- Hand Washing Practice Demonstration
- Individual and Community Sanitation Activities
- Herbal/Nutrition Garden
- Activities regarding safe use of mobile and internet technology.
- A "Question Box" will be established in every school to solve the queries of the students.



Saathiya Corners for Adolescents in Senior Secondary Schools Inter Colleges

Rationale

- Adolescents Friendly Health Centre's (AFHCs) located in District Hospitals and Community Health Centre's are currently providing health information and counseling to adolescents.
- However, uptake of counseling services through the AFHCs has been low due to:
 1. General perception that any service located within a hospital is an "illness"
 2. Mobility related costs and challenges, particularly for young girls, due to the distance of the facility from the community
 3. Inability of adolescents to visit AFHCs during the day due to school
 4. Heavy patient load in health facilities making it challenging for providers to give quality time and attention to adolescent

Key Objectives

To increase adolescents' access to health information and counseling on issues related to sexual and reproductive health, nutrition, mental health, substance abuse, gender based violence, cyber security, child rights etc.

To develop a pool of teacher counselors and student volunteers for wider reach of health awareness and counseling services among adolescents

To promote healthy behaviours among adolescents related to sanitation, health & nutrition

To encourage adolescents to adopt responsible sexual behavior

Functioning Mechanism

- Corners will be established under the supervision of the school principal
- The principal will allocate at least two adjoining rooms in the school premises to be converted into the Sathiya Corner
- Two teachers per college will be selected on a voluntary basis by the principal and trained by RKSK as Counselors
- Two students per class (from classes 6-12) will be nominated by the principal as Health Captains and will assist in generating awareness among students regarding the Counseling Center
- Corners will operate in schools only during school hours
- The confidentiality of students seeking counseling will be ensured.
- Girls will be counseled only by a female teacher. Likewise, boys will receive counseling only by a male teacher counselor. If required, parents will also be called for counseling.
- Corners will be equipped with a computer and internet connection, and students will be able to access online BCC resource materials on AH.
- In cases where required, students will be referred to appropriate health facilities for treatment or to concerned government body for assistance (eg, Child Protection Cell)
- Additionally, a question box will be kept in the college in which students can drop their questions anonymously. These questions will be addressed by teacher counselors in group sessions with students

Resources to be provided by the Health Department

- Register for record keeping
- Referral Cards
- Signage and notice board for Counseling Corner with branding
- Question Box
- Digital resources on adolescent health
- Digital weighing machines
- Snellen box with mirror
- Hanging spring measuring tape to measure height
- BMI chart
- Almira with lock and display racks
- 6 printed posters by RKSK
- Curtains in branding colour
- Painting of counseling room in branding colour

Resources to be provided by the Schools/Education Department

- Physical space (2 adjoining rooms) for the Corner
- Tables and Chairs
- Tube lights, fans, and switch points/electricity connection in the Counseling Corner
- Computer and Internet connection

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