



Enabling young people's access to safety, health and well-being - synergies for the *Rashtriya Kishor Swasthya Karyakram* and Integrated Child Protection Scheme

India has a comprehensive¹ policy and legal framework to address rights and protection of children. The Integrated Child Protection Scheme (ICPS) was introduced in 2010 and the *Rashtriya Kishor Swasthya Karyakram* (RKSK)² was launched in 2014 as a holistic package on health and well-being needs of young people. Together, these policies address concerns and issues of young people (6-19 years). This policy brief highlights findings on priority areas of physical, sexual and reproductive and mental health, uptake of adolescent friendly and child protection services from community-based interventions in urban Maharashtra.

deworming tabs.) **increased from 3% to 40%** after Adolescent Friendly Health Clinics were initiated **11% reduction** in parents who believe that children need to be physically punished at home

SNEHA'S PROGRAMMES (2019-23)

The Empowerment Health and Sexuality of Adolescents programme engaged 3500 young people (12-19 years) and their parents to enable healthy, gender-sensitive and responsible citizens while building an adolescent-friendly ecosystem. Mixed-methods evaluation measured the impact on adolescents' understanding and practices on nutrition, sexual and reproductive health, emotional resilience and gender attitudes, communication with parents and health-seeking behaviour. An implementation research study³ piloted the feasibility of Non-specialist Workers providing psychosocial first aid to adolescents in urban informal settlements. **The Prevention of Violence against Children** programme worked with 400 children (6-15 years) and their parents over 18 months on changes in perceptions, attitudes and practices on understanding violence, protection and safety.

KEY FINDINGS

Need for holistic programmes

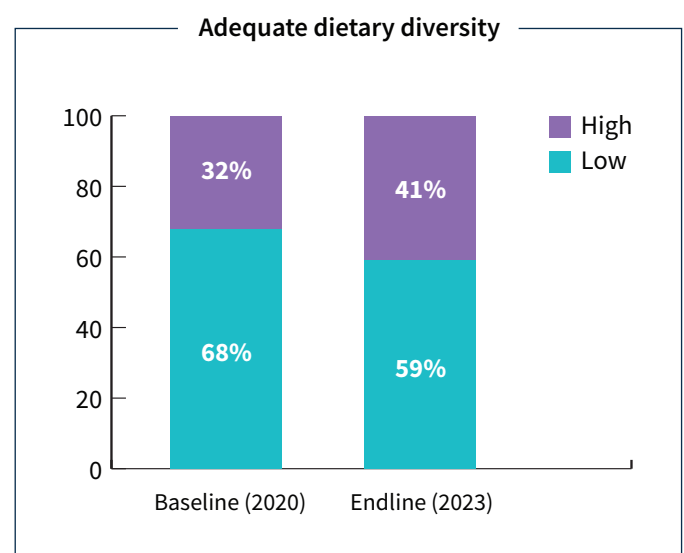
Low levels of awareness among parents about impact of violence on children's mental health and development.

Young people (6-19-year-old girls and boys) face a range of concerns – **health (physical, mental, sexual & reproductive), education, safety, social protection**. warranting convergence of services like ICPS and RKSK that are almost non-existent in urban Maharashtra.

Strength/opportunities of integrated interventions

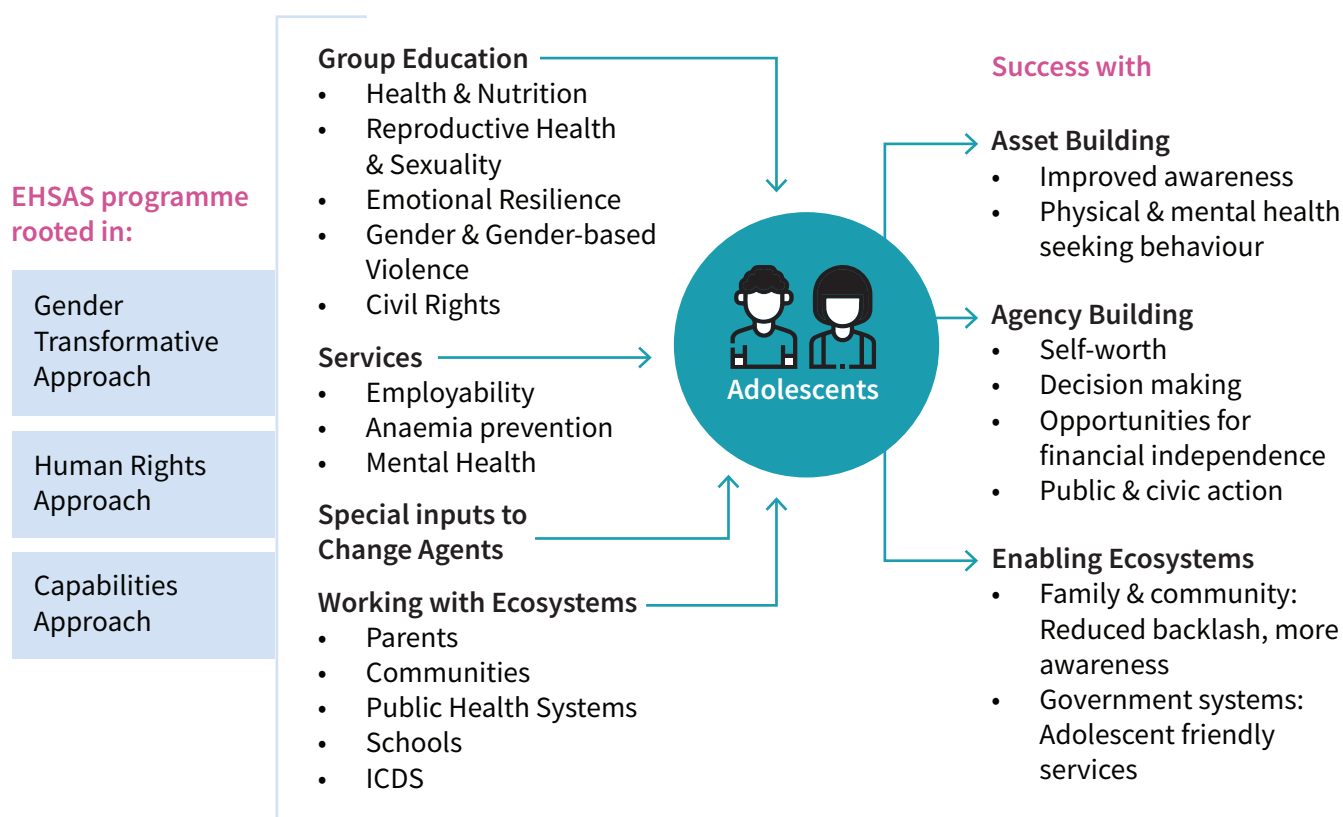
Collaboration with Public health system & **individualised diet audits/family nutrition counselling** led to **10% reduction** in proportion of anaemic adolescents.

Adolescents' knowledge scores on (i) gender equitable attitudes **increased by 10%** (ii) pubertal changes **increased by 19%**. **Uptake of health services** (IFA &



APPROACH AND INTERVENTION STRATEGIES

Adolescent health and wellbeing: integrated programmes in Dharavi, Kandivali (Mumbai) and Kalwa (Thane)



We would think that health posts provide care only to pregnant women and babies to be immunized. Now we visit them for Iron and Folic Acid tablets, gynaecological issues and health talks.

Adolescent visiting Adolescent Friendly Health Clinic in Dharavi

Earlier, we were just children in our neighbourhood. Now, as Bal Sansad members, we feel responsible... we know where to raise our concerns and get them resolved.

Young resident, Govandi, M/East ward

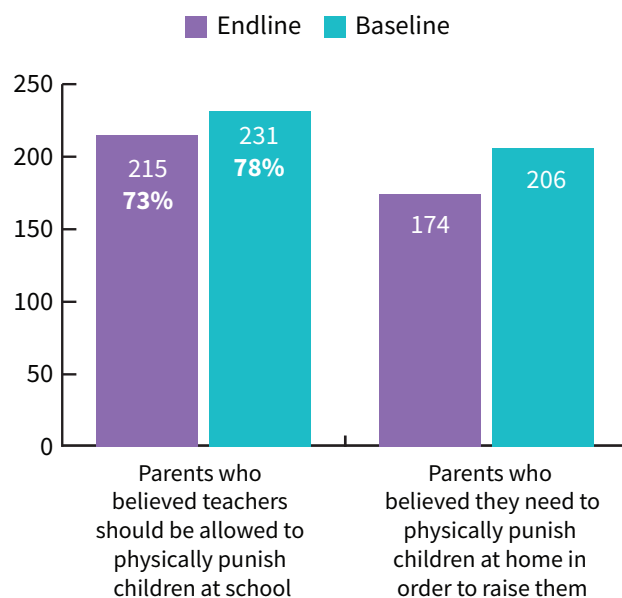
Preventing violence against children: multi-stakeholder interventions (practices) in M/East Ward

A comprehensive intervention to address and combat critical issues affecting safety and protection of children within the community.

The pilot included:

- Group education module with children & mothers
- Home visits, counselling & legal services for children and mothers undergoing violence
- Setting up ward level child protection committees
- Community-based campaigns

Improved understanding of positive disciplining practices at home and school by parents



RECOMMENDATIONS

Integrated approach to manage adolescent anaemia

A holistic approach taking into consideration the interconnectedness of aspects and agents that aid or hinder anaemia reduction⁴ can become the key to combat this problem. While regular screening for anaemia as well as protocolised treatment including provision of deworming and iron supplementation to both adolescent boys and girls should be facilitated through the public health system, continued dissemination about consequences of anaemia, personalised information about nutrition and involvement of family as a unit in efforts to introduce behaviour change is important to reduce treatment noncompliance. Socioeconomic status, gender equity and health prioritisation are significant factors to be considered in combating adolescent anaemia. Young people demonstrating behaviour change can become role models for their peers and younger adolescents.

Initiating and strengthening Mental Health services for children and adolescents

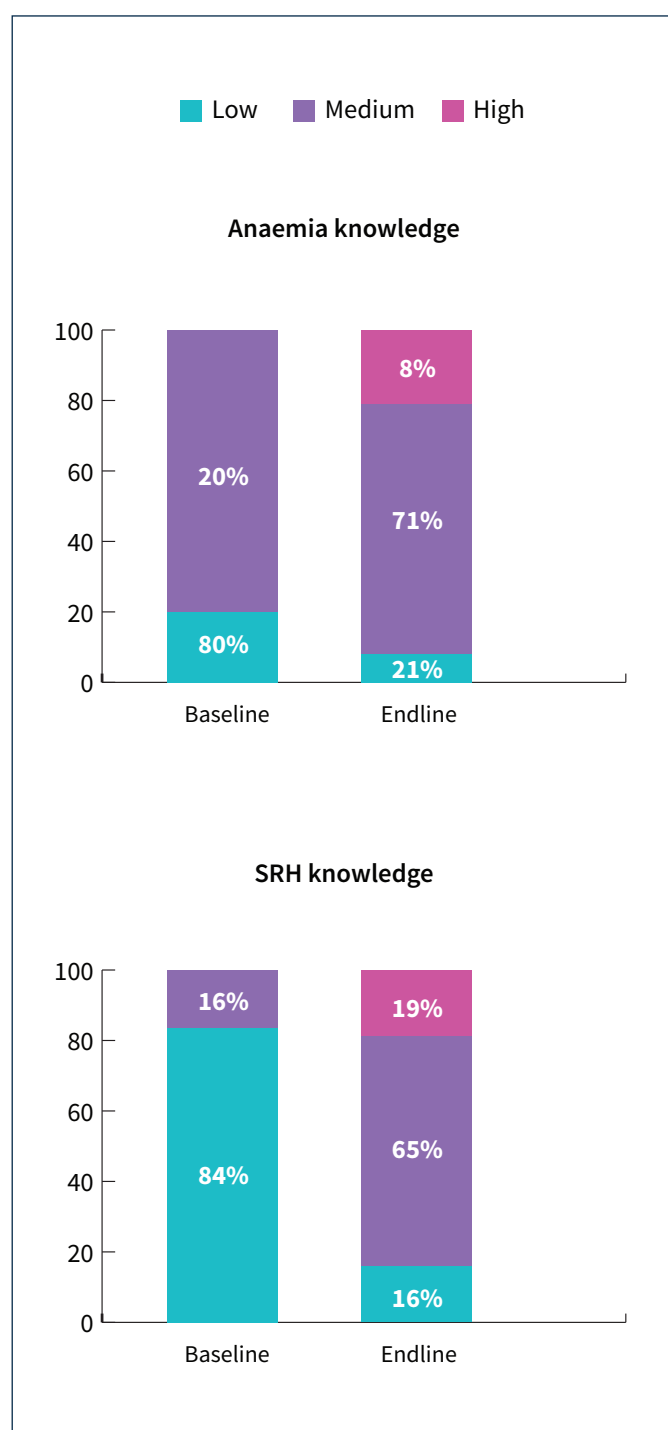
Interweaving psychoeducation and parental skills to enable parents to build positive relationships with their children/identify stressors needs to be undertaken as a significant preventive strategy. An interdisciplinary team working on convergent adolescent interventions such as gender equity, positive disciplining⁵, education, agency building and health access can effectively address mental health issues of adolescents that are influenced by various aspects of their lives. With adequate capacity building and incentivisation, non-specialist workers including parents, teachers and youth peer educators can facilitate early identification of mental health stressors and appropriate and timely referral to professionals.

Implementation of RKSK and strengthening of Adolescent Friendly Health Clinics (AFHC)

The preceding suggestions can be enabled through an effective implementation of RKSK⁶ for urban vulnerable communities and strengthening Adolescent Friendly Health Clinics with designated time, space and personnel. The RKSK, with its holistic approach not only provides access to accurate information on sexual and reproductive health and rights⁷, a crucial need of adolescents, but also includes in its ambit nutrition education, prevention of violence and promotion of gender equity and mental health. Its package of services offers preventive, promotive, curative and counselling services and routine health checkups. Stressing the involvement of the family and the community advocates for a multilayered approach.

Setting up of child protection committees under ICPS⁸

The partnership of the government and civil society organisations proposed by the ICPS needs to be promoted especially to challenge and change socially sanctioned norms perpetuating violence against children and adolescents in homes and schools. Child protection committees should be enabled at ward levels to function as watchdogs to prevent and report cases of violence against young people and mechanisms for intersectoral coordination should be established to ensure timely and appropriate responses to such cases.



REFERENCES

1. <https://www.unicef.org/india/what-we-do/child-protection>
2. Sivagurunathan C., Umadevi R., Rama R., & Gopalakrishnan S. 2015. Adolescent Health: Present Status and Its Related Programmes in India. Are We in the Right Direction? In Journal of Clinical and Diagnostic Research. Published Online 2015 March
3. Shyam R., Mitra A., Ajgaonkar V. et al 2024. "Helping myself empowered me to help young people better": A stepped care model, with Non-specialist Workers (NSWs) addressing mental health of young people in urban vulnerable communities across the Mumbai Metropolitan region in India in Cambridge Prisms: Global Mental Health (accepted for publication)
4. Ajgaonkar V., Shaikh N., Shyam R. et al. 2020. Addressing adolescent anaemia in vulnerable urban Indian communities: A qualitative exploration in Health Education Journal: 1-12. Sage Publications
5. Kingsbury M., Sucha E., Manion I. et al. 2020. Adolescent Mental Health Following Exposure to Positive and Harsh Parenting in Childhood in Can J Psychiatry: 65(6):392-400
6. Ajgaonkar V., Shyam R., Shaikh N. et al. 2022. Enabling Young People from Informal Urban Communities to Exercise Their Right to Sexual and Reproductive Health: A Practice-Based Study in Journal of Adolescent Research: 1-26. Sage Publications.
7. Ministry of Health and Family Welfare and Ministry of Human Resource Development. School health programme under Ayushman Bharat, operational guidelines, New Delhi,
8. Integrated Child Protection Scheme. 2018. https://wcd.nic.in/sites/default/files/Maharashtra123_0.pdf

ACKNOWLEDGEMENTS

We thank the senior management for their support, the programme implementation team for their dedication, and the community members for their vital participation. Our gratitude also goes to the donors for supporting our programmes continuously.

A mental health volunteer's journey...

Nutan (name changed), a 20-year-old college dropout working as a beauty home service professional, understands that people can't always see what's going on in her mind. A sole provider for her family of six, Nutan sacrificed her education to ensure that her younger sister completes her 12th grade exams. Just as she values addressing mental health issues among adolescents in her community, Nutan remains positive about her role as a Non-specialist Worker (one out of 52 NSWs). The capacity building sessions highlighted the importance of rapport building, attentive listening, and counselling skills, boosting her confidence; enhancing her personal life. Nutan has become a trusted listener and mediator, skillfully resolving interpersonal issues within her social circle. Her newfound abilities have enabled her to help others in her community, as people seek her assistance. She recently assisted a friend who felt overwhelmed by work-related issues.

SNEHA is a secular Mumbai-based Non-profit. Over the last 25 years, it has partnered with urban informal communities and the public health, nutrition and legal systems to build evidence-based models on health equity. SNEHA works across three large public health areas:

- Maternal and Child Health & Nutrition
- Health, Agency and Well-being of Adolescents
- Prevention of Violence against Women and Children