

**GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**LOK SABHA
UNSTARRED QUESTION NO. 4045
TO BE ANSWERED ON 04TH JANUARY, 2019**

IMMATURE DEATHS

4045. SHRIMATI RITI PATHAK:

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) whether more than 33 per cent diseases and 60 per cent immature deaths during adolescence are related to behavioural and other conditions originating at this age; and
- (b) if so, the steps taken by the Government to ensure proper healthcare during adolescence in rural India including the main programmes?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI ASHWINI KUMAR CHOUBEY)**

(a): The global picture of the burden of disease shows that more than 33% of the disease burden and almost 60% of premature deaths among adults can be associated with behaviour or conditions that began or occurred during adolescence

(b): Considering the magnitude of various health problems and risk factors among adolescents, which may have impact on maternal & child health outcomes and occurrence of non-communicable disease in future, Government is implementing Rashtriya Kishor Swasthya Karyakaram (RKSK), which includes the following:

- **Weekly Iron and Folic acid Supplementation (WIFS)** for prevention of iron and folic acid deficiency anaemia in both rural and urban areas, covering government, government aided and municipal schools and Anganwadi centres. It involves supervised weekly ingestion of IFA tablets by in-school boys and girls and out-of-school girls, along with biannual albendazole tablets for worm infestation. Screening of targeted adolescent population for moderate/ severe anaemia and referral of these cases to an appropriate health facility is also done.
- **“School Health Programme” under Ayushman Bharat** to strengthen health promotion and disease prevention interventions at school level. It envisages training of two teachers from each school, as “Health and Wellness Ambassadors” who will further inform the students on the various adolescent health issues in weekly sessions

- The **Scheme for Promotion of Menstrual Hygiene** among adolescent girls aged 10-19 years residing primarily in rural areas includes:
 - Increasing awareness on menstrual hygiene
 - Improving access to and use of sanitary napkins.
 - Ensuring safe disposal of sanitary napkins in an environmentally friendly manner.

- **Adolescent Friendly Health Clinics (AFHCs)** at various levels of health system act as the first level of contact of primary health care services for adolescents through trained Medical Officers, ANMs and Counsellors who provide counselling/curative services to the adolescents at these centres.

- The community based intervention of **Peer educator programme** involves selection and training of male and female peer educators (Saathiya) in villages. These peer educators will form groups in the community and conduct weekly one to two hour participatory sessions on adolescent health, facilitate organization of Adolescent Health Day and refer adolescents to Adolescent Friendly Health Clinics (AFHCs).