

Empowering Adolescents for Better Health

A Multi-Component Programme in Ahmedabad's Urban Slums, India

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The Challenge

India

253M

**Adolescents in
India**

31%

**Boys with
Anaemia**

59%

**Girls with
Anaemia**

78%

**Hygienic
Practices**

Gujarat State

69% adolescent girls and
36% boys (15-19 years)

are anemic.

(National Family Health
Survey 5)

Only **66.2%** girls follow
hygienic menstrual
practices.

(National Family Health
Survey 5)



Our Goal & Objectives

Nurturing Young Leaders, Strengthening Health, Empowering Futures



Enhance Health Knowledge

Improve adolescents' understanding and status regarding health and nutrition.



Build Life Skills

Empower adolescents with essential life skills education to improve well-being.

Intervention Area

5 urban slums of Ahmedabad city, Gujarat, India

Intervention Period

December 2021 to December 2023

Reached out 1748 Adolescents (10-19 years) across 3,000 households of urban slums of Ahmedabad city.

Our Approach



Adolescent-Centred

Integrated health and life skills education tailored to young people's needs.



Family Involvement

Active engagement of families in supporting adolescent health and development.



Frontline Workers

Collaboration with ASHAs and Anganwadi workers for community-level impact.

Strategies and Activities



Mapping and Assessments

Household and baseline surveys conducted via mobile apps to tailor interventions to adolescents' specific needs.



Strengthening Health Knowledge and Behaviours

Continuous counseling on nutrition, anemia prevention, and menstrual hygiene through home visits, education sessions, and mass awareness campaigns.
Developed IEC materials



Dietary Practices

Recipe demonstrations and Mother-Daughter and Mother-Son Campaigns to promote healthy eating habits and Iron rich recipes.



Monitoring Health Progress

Health Check-Up Camps

Regular camps organised with IFA supplementation provided to adolescents.

Haemoglobin Monitoring

Continuous tracking of haemoglobin levels to assess anaemia reduction.

BMI Assessment

Regular body mass index measurements to monitor nutritional status improvements.

Strategies and Activities

Building Adolescent Leadership

Youth Champions

Identified and trained adolescent leaders to drive change in their communities.

Life Skills Training

Specialized workbook (*Reflection-Pratibimb*) developed and training provided on essential life skills.

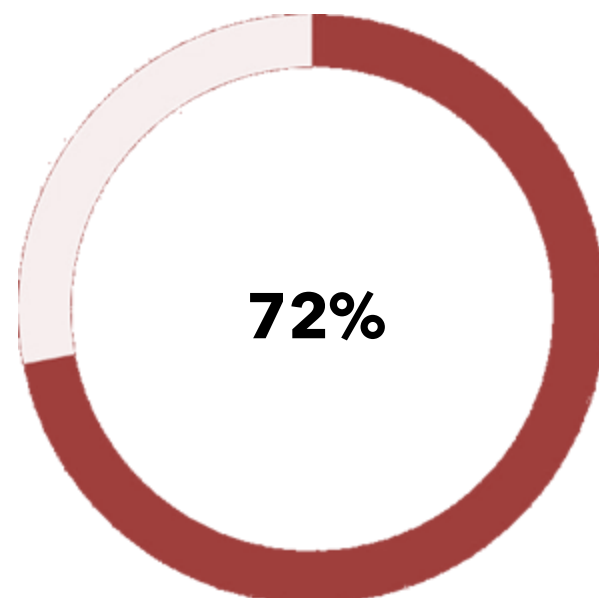
Field Deployment

Youth Champions actively engaged in community activities and peer education.



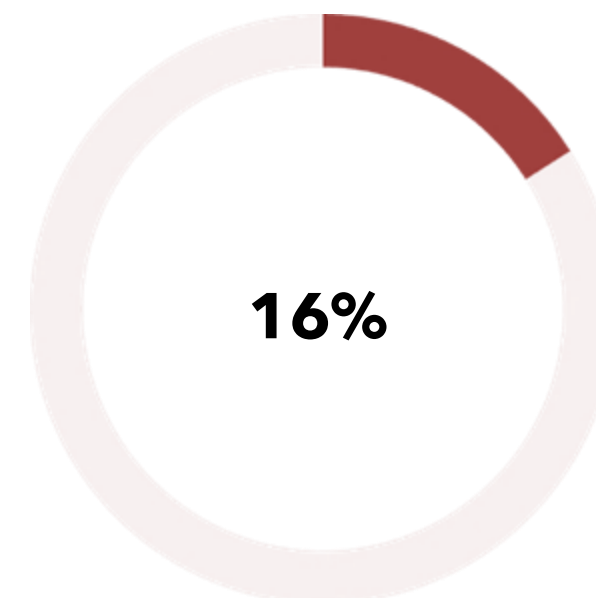
ASHAs and Anganwadi Workers enhanced their skills through training.

Key Results



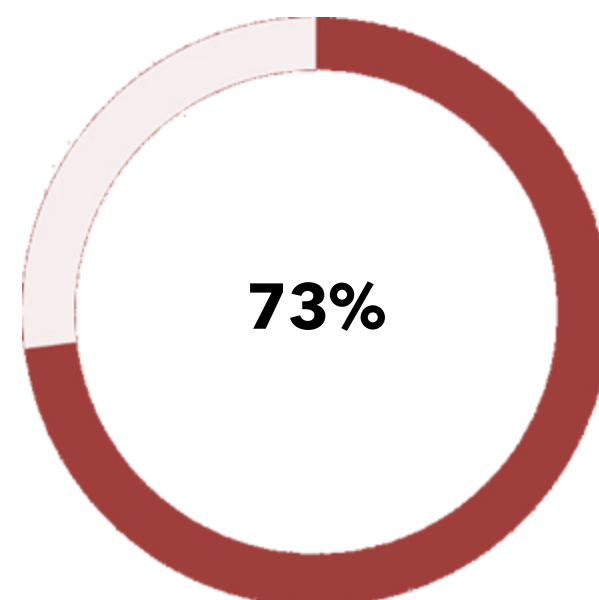
Knowledge Increase

Nutrition and health knowledge surged from **10% to 72%**.



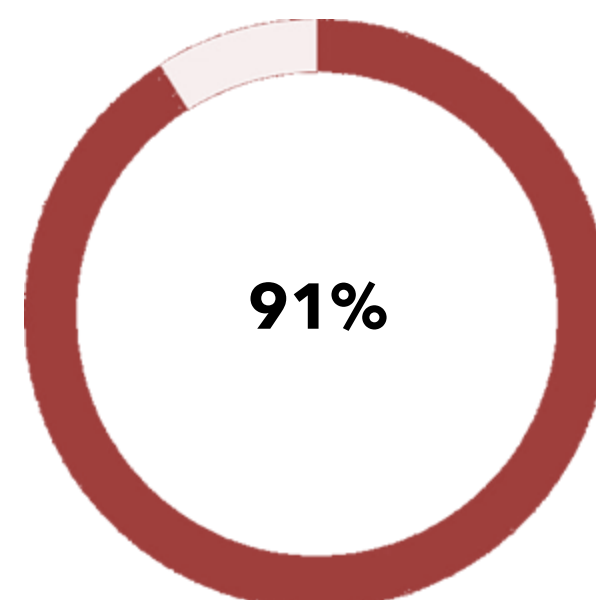
Anaemia Reduction

Prevalence of Anaemia reduced by **16 percentage points**.



Nutritional Status

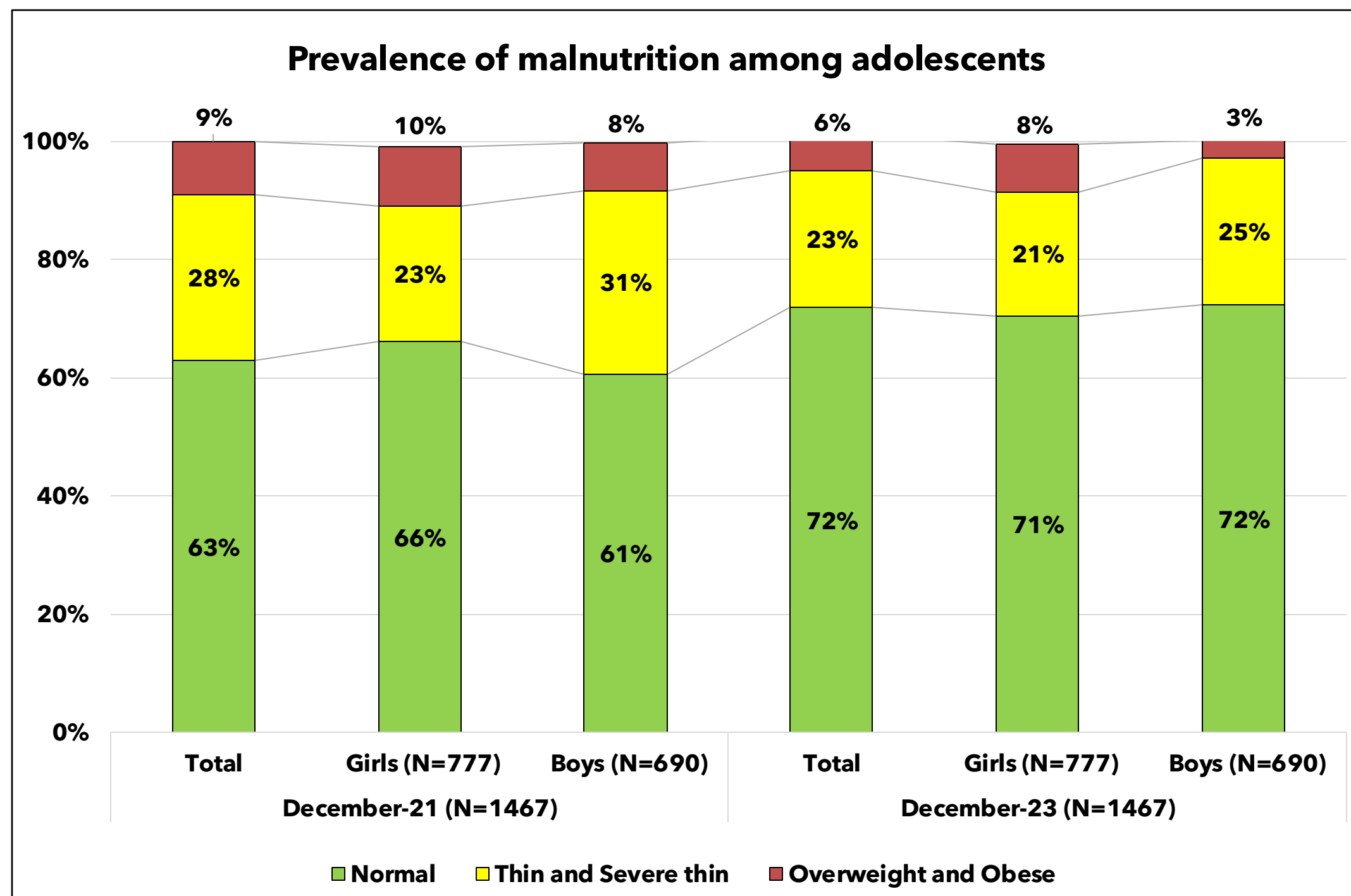
Overall nutritional status improved from **62% to 73%**.



Menstrual Hygiene

Practices improved from **65% to 91%** among adolescent girls.

Nutrition & BMI

**80%**

1,169 adolescents
showed increased
BMI

82%**Boys** (566 out of 690)

Improved BMI value.

Average increased from

17.2 Kg/m² to 18.5**Kg/m²****78%****Girls** (603 out of 777)

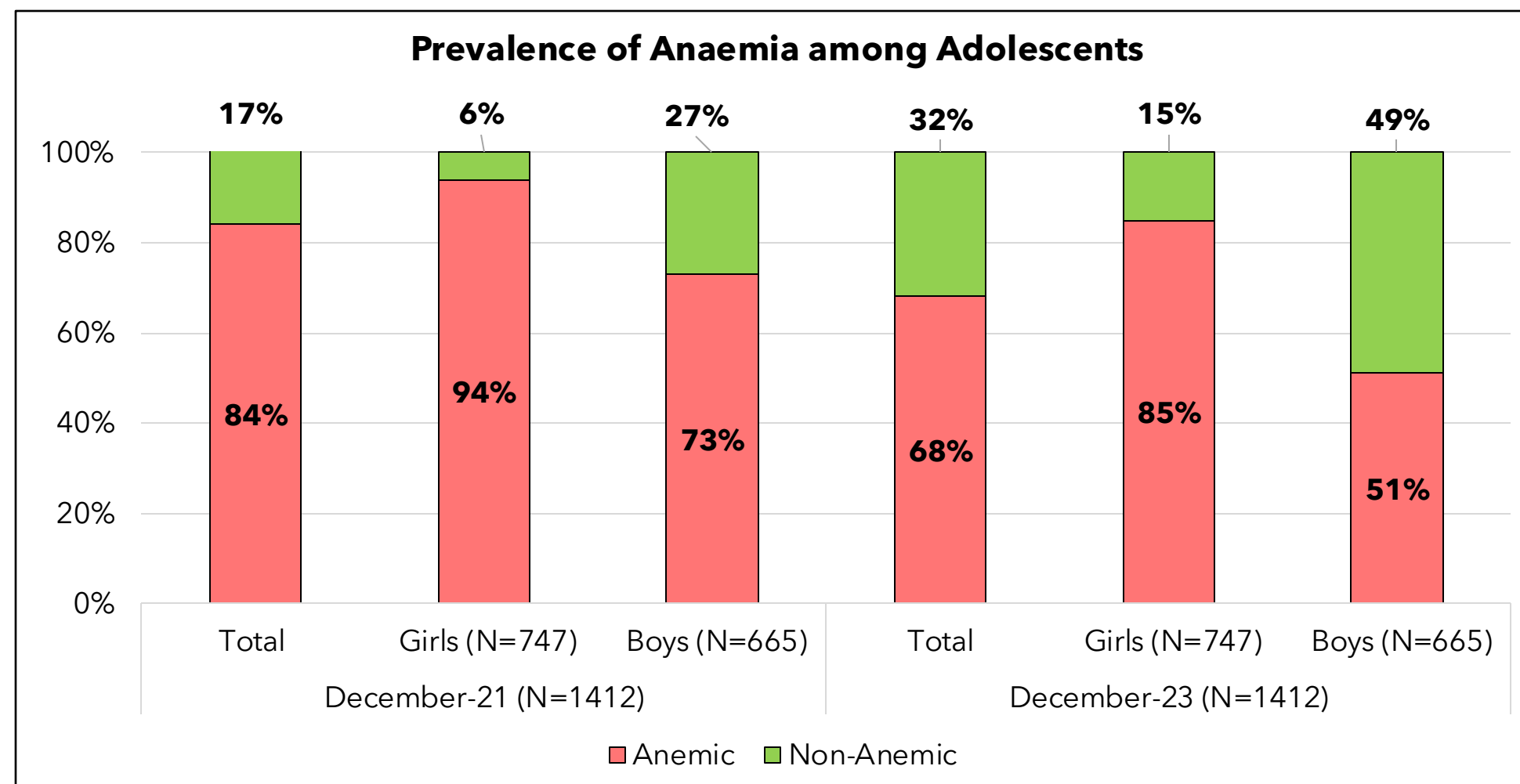
Improved BMI value.

Average increased from

18.0 Kg/m² to 19.2**Kg/m²**

BMI status assessed using WHO BMI-for-Age criteria (boys & girls).

Prevalence of Anaemia



Initial Prevalence

84% (1183/1412)



Improvement Rate

69% Adolescents increased Hb levels



Girls' Hemoglobin

Improved from **9.89 g/dl**
to **10.8 g/dl**



Boys' Hemoglobin

Increased from **10.8 g/dl**
to **12 g/dl**



Enhanced Knowledge



Balanced Diet

Up from 13% at baseline



Meaning of Anaemia

Up from 3% at baseline



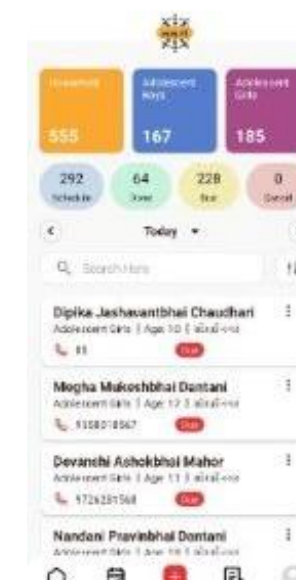
Prevention from Anaemia

Up from 1% at baseline



Menstrual Hygiene

Girls practicing proper hygiene, up from 65%



Voices from the Ground

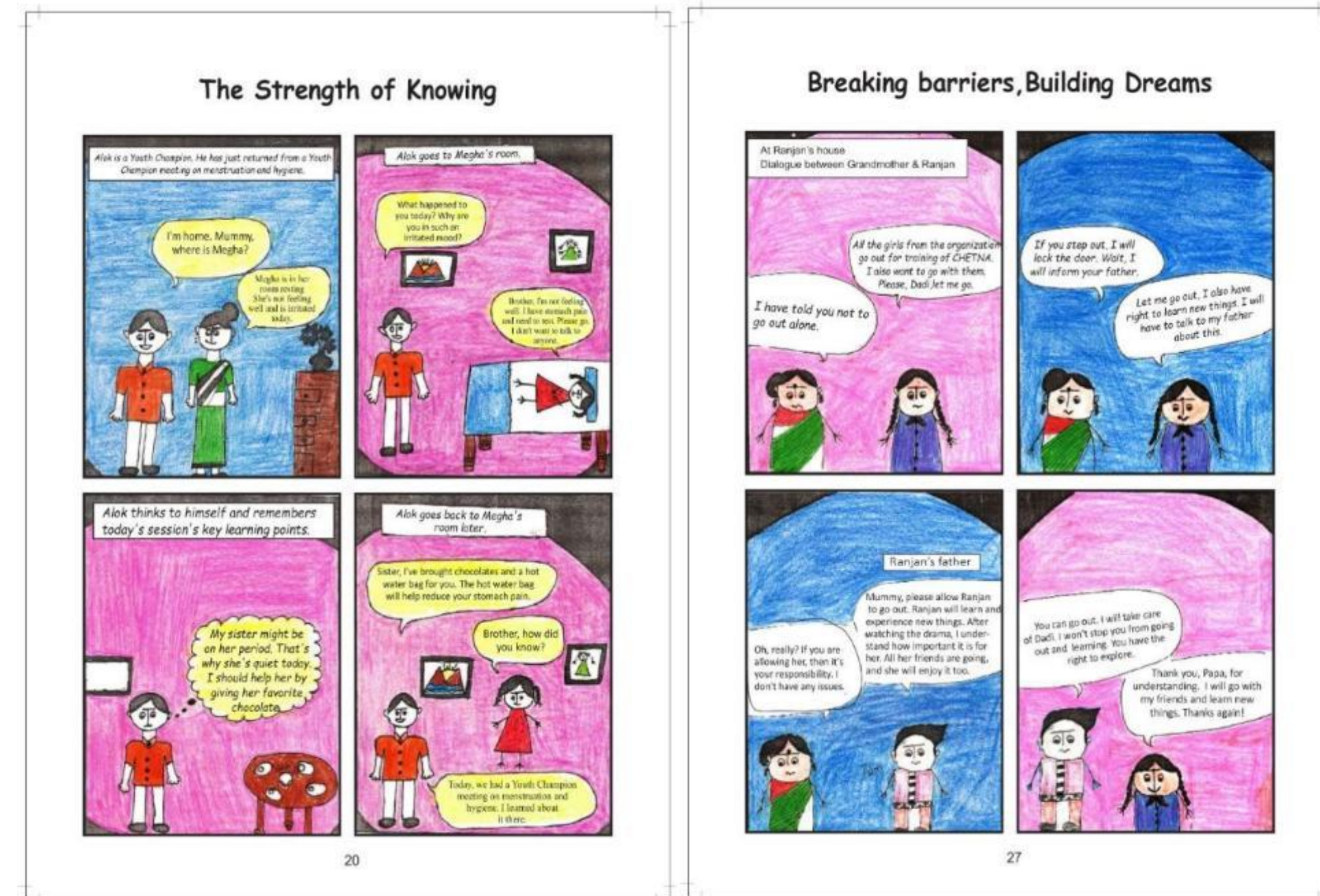
Speaking to 150 students in a Vasna school, I said confidently,
"Menstruation is natural – no fear, no shame. Let's break the
silence and end harmful taboos."

– Renu Prajapati, 19 years

"My haemoglobin was 7 g/dl, now it's 14.0 g/dl. I stopped
eating packaged foods and take iron folic acid tablets
regularly."- Rohan Dantani, 14 years

"After life skills training, I feel confident to express my views
openly and stand for what's right." – Smit Dantani, 15 years

"My haemoglobin increased from 9.0 g/dl to 11.7 g/dl after I
quit packaged snacks and learned about nutritious food."-
Urvashi, 17 years



Key Lessons Learned

- Peer-led models with Youth Champions significantly enhance participation and sustainability.
- Life skills education plays a vital role in health outcomes.
- Sustained Behaviour and nutrition changes need ongoing support. Extending the project or adding phased follow-ups is key for long-term impact.
- Multi-sectoral collaboration improves service delivery.
- Family and community engagement is essential for lasting change.
- Regular monitoring motivates adolescents to take responsibility.



Recommendations for Scale



Integrate Life Skills

Add life skills education to school curriculum to empower adolescents with knowledge and decision-making abilities.



Engage Communities

Implement gender-sensitive health programs and train healthcare providers in counselling to create supportive environments.



Ensure Coverage

Implement government programs in all schools, including private institutions, for comprehensive reach.



Promote Collaboration

Foster multisectoral partnerships across health, education, and social sectors for holistic outcomes.



Establish Data Systems

Create robust monitoring systems for adolescents aged 10-19 to enable targeted interventions.

Investing in adolescent life skills and well-being reduces inequality, helps meet national development targets, and sets up future generations for better social and economic outcomes.

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