Adolescent Reproductive and Sexual Health Programme (ARSH)
MADHYA PRADESH

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Who Adolescent

Adolescent’s age – group

- Early Adolescent-10-13 years
- Mid Adolescent-14-16 years
- Late Adolescent-17-19 years
How Adolescent are important

• **225 million** adolescent comprise **22%** of India’s total population.

• Of this **12%-10-14year age group**
  10%-15-19 year age group

• Female comprise **47%** of adol.population

• About **20% of total adol.female** population are married before the age of 15 years are already mother.
• >70% girls between 10-19 year age group suffer from severe or moderate anemia.
• Mortality rate is higher in 15-19 year then 10-14 year age group.
• Unmet need of contraception is much higher in this age group.
• Over 35% of all reported HIV infection occur among 15-24 years age group.
• Indicating young people are highly vulnerable and majority of them infected by unprotected sex.
ARSH Strategy

• Influencing **health seeking behavior** of Adolescent
• Stress more on **knowledge/awareness** generation
• **Environment building** activity by NGO/WCD/Youth /Education
• Create supportive environment .
• Improving **capacity** of service provider.
• **Monitoring** service provision & utilization.
Standard for Quality

Key word is “friendly”
- At the level of User
- At the level of provider
- At the level of System

- **At the level of User**
  - Accessible
  - Acceptable

- **At the level of Provider**
  - Appropriate
  - Comprehensive
  - Effective
  - Equitable

- **System Level**
  - Registration and Retrieval are simple
Service Package

• **Promotive Service**
  - Condom Promotion
  - Focus Care during ANC period
  - Counseling and provision for emergency contraceptive pills.
  - Counseling and provision for reversible contraceptive pills.
  - Information and advice on SRH issues.
  - Sex ratio, PCPNDT act

• **Preventive Service**
  - Services for TT Immunization
  - Services for prophylaxis against nutritional anaemia.
  - Nutrition counseling
  - Safe Abortion
  - Management of post abortion complication
Service Package

• Curative
  • Treatment of RTI/STI
  • Treatment & counseling for Menstrual Disorder
  • Management of Sexual abuse among girl

• Referral Services
  • Voluntary counseling and testing center
  • Prevention of parent to child transmission
  • Antiretroviral therapy

• Outreach Services
  • Periodic health check up & community camp
  • Periodic health education
Package of service offered by adolescent clinics.

<table>
<thead>
<tr>
<th>Level of Care</th>
<th>Service Providers</th>
<th>Target Group</th>
<th>Periodically</th>
<th>Service Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHC/CHC/Civil hospital and</td>
<td>Female Health Assistant/LHV</td>
<td>Unmarried and married male and</td>
<td>Once a week at PHC/CHC/C</td>
<td>• Counseling on menstrual hygiene, management of menstrual Irregularities.</td>
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<tr>
<td>District hospital</td>
<td></td>
<td>female</td>
<td>H/DH</td>
<td>• Counseling on nutritional anemia</td>
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<td>• Tetanus toxoid for pregnant adolescent girls.</td>
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<td>• Contraceptive counseling programming.</td>
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<td>• Counseling and services for termination of unwanted pregnancy.</td>
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<td>• RTI/STI and HIV/AIDS preventing education and management.</td>
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<td>• Counseling on problems of sexual health.</td>
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Organizing effective services

• Service providers should competent, skilled, motivated & clearly aware of their role & responsibility.

• Clinical management guide line & standard operation procedure.

• IEC and resource material directed to adolescents are available.
• Location and ambiance of clinic area should be inviting and comfortable, clean & having basic amenities.
• Staff should be punctual and regular.
• Privacy and confidential policy displayed and clearly expressed.
• Arrangement of visual and audio privacy.
• Client records kept out of reach of unauthorized person.
• Clinic timings suite the needs of adolescent.
• Appropriate flax signboard reflecting the location and timing.
Outcome

• **Addressing Adolescent yield dividends in**
  • Delaying the age of marriage
  • Reduction in incidence of Teenage Pregnancy
  • Prevention and management of obstetric complication
  • Reduction of incidence of STI/HIV/AIDS
  • Meeting Unmet need of Contraception
  • Improve sex ratio
  • Reduction of Sexual abuse among girls.
• Investment upon Adolescent will ensure upliftment of health indicator in terms of decrease MMR, decrease IMR, decrease TFR and decrease HIV.