



SuPoshan – Sensitively Nurturing Adolescence phase



Nourishing Adolescents, for a Healthy Growing Nation

An initiative of Adani Wilmar & implemented by Adani Foundation





**Adolescence is
recognized as a
transition phase
between childhood
& adulthood in an
individual's life**

**It is the fastest growing
stage which marks the
onset of puberty**

Adolescent Ages				
	PUBERTY	EARLY	MIDDLE	LATE
FEMALE	8-11 years	12-14	14-17	18-21
MALE	9-11.5 years	12-14	14-17	18-21

India is home to 1/5th of 1.2 billion adolescents (10 to 19 years) globally

There are **253 million** adolescents in India

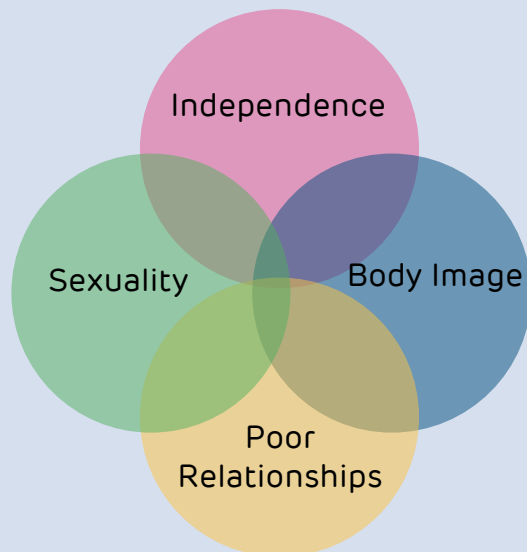
120 million



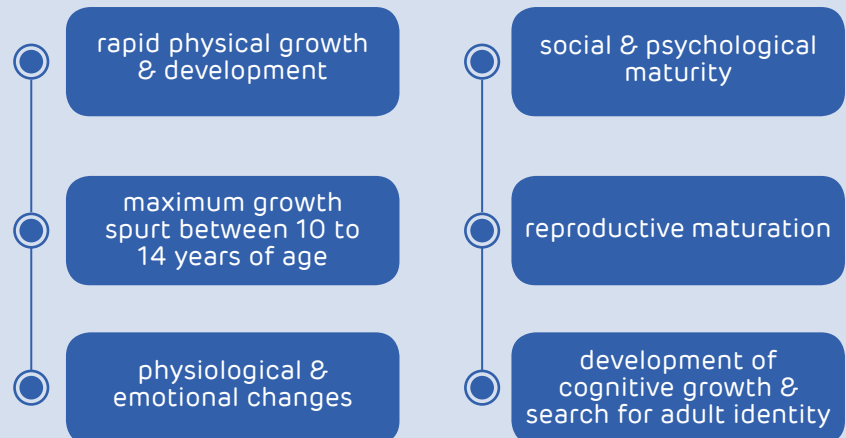
133 million



New Development in Adolescence



Adolescence is a period of marked changes as seen in the form of



AS PER CNNS (Comprehensive National Nutrition Survey) 2019 in India

50%

Over 50% of adolescents in the age group of 10 to 19 years are, short, thin, overweight or obese.

80%

Over 80% of adolescents suffer from 'hidden hunger', i.e. the deficiency of one or more micronutrients such as Vitamins A, B12, D; iron; zinc; folate.

40%

Around 40% adolescent girls are affected by Anaemia. Co-existence of Anaemia and thinness is higher among girls as compared to boys.

33%

One in 3 adolescent girls is too short for her age.

50%

One in 2 adolescent girls suffer from at least two of the six micronutrient deficiency

45%

Only 2 out of 5 adolescents (~45%) take milk in their daily diet.

20%

Only 1 out of 5 adolescents (~20%) take pulses and green leafy vegetables.

10%

Less than 1 out of 5 adolescents (<10%) consume fruits daily.

As per NFHS 4 - Girls are particularly vulnerable:

45%

45% of girls aged 15–18 have a BMI less than 18.5

27%

27% of women aged 20–24 were married before the age of 18

68%

68% of women are literate compared to 86% of men

Girls suffer more as they have multiple nutritional deprivations and little autonomy. They have little say in their own life choices around What to buy? What to eat? Whom to marry? When to marry?



WHY INVESTING ON ADOLESCENT GIRLS IS CRUCIAL?

1

Adolescent girls are more vulnerable to health implications due to their nature of experimenting and exposure to limited information regarding issues affecting their health and development.

2

Girls have added physiological stress due to the onset of menstruation and increased risk of Anaemia and micronutrient deficiencies.

3

Poor nutrition starts before birth, and generally continues into adolescence and adult life and can span generations. Chronically malnourished girls are more likely to remain undernourished during adolescence and adulthood, and when pregnant, are more likely to deliver low birth-weight babies

4

Children of malnourished adolescent mothers are more at risk to suffer growth failure during the first 1,000 days of life of a child.

5

Without correct nutrition, these children are at risk of growing up physically and cognitively stunted and are likely of carrying this burden into adolescence and adulthood which fuels the intergenerational cycle of malnutrition.

WHY ADOLESCENT GIRLS ARE UNDERWEIGHT?

Underweight means when body weight is less than average expected for one's height, age and gender. It is a combination measure, it could occur as a result of wasting, stunting or both.

Causes of Underweight



Food scarcity,
poverty



Wasting in long
standing illnesses



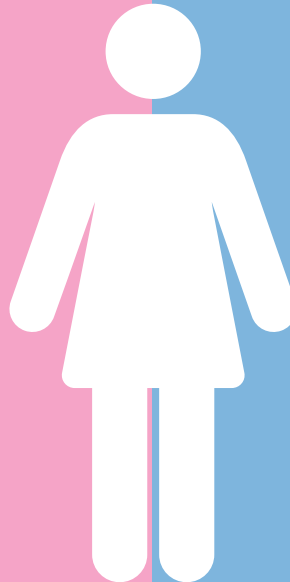
Anorexia Nervosa
(excessive diet
restrictions)



Impaired absorption and
metabolism of foods
consumed



Inadequate nutrient
intake



Consequences of Underweight

Poor growth and
development



Increases risk of
infections & Anaemia



Poor ability to learn
and work



Increased risk of poor
obstetric outcomes for
teen mothers



Jeopardizes the healthy
development of future
children



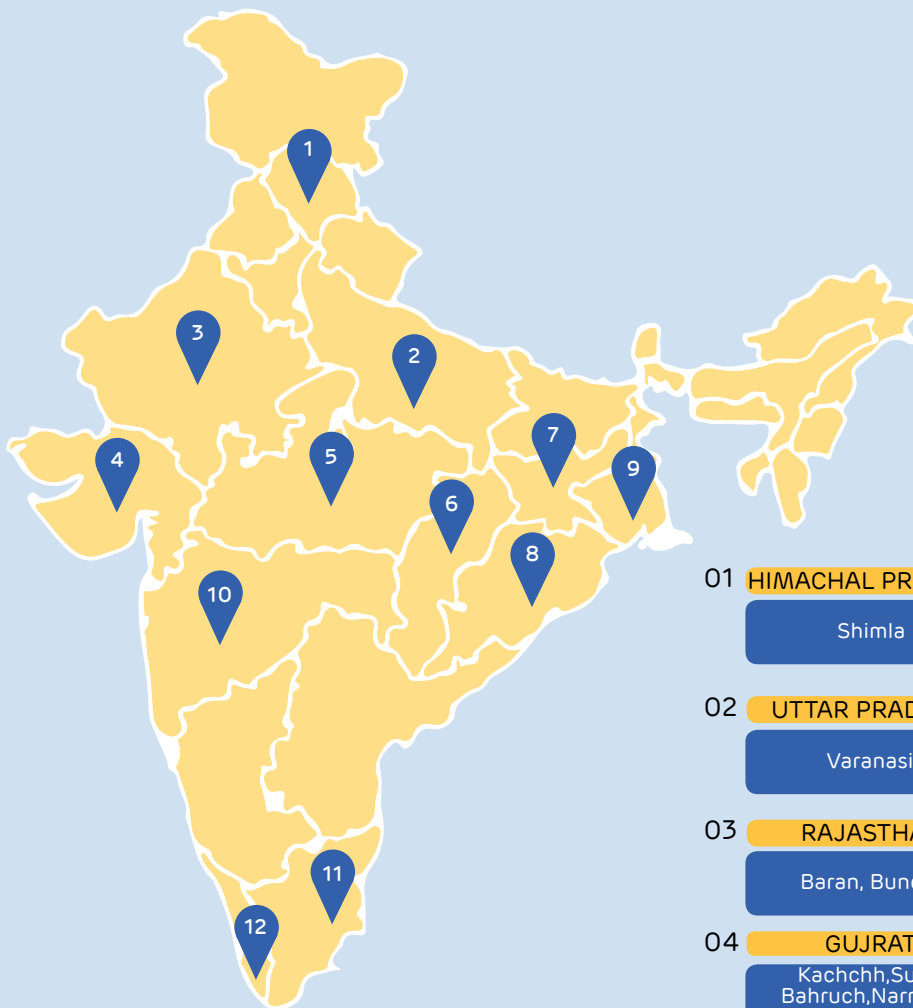
Fatigue



WITH A VIEW TO ADDRESSING THE SALIENT ISSUES RELATED TO ADOLESCENCE- MALNUTRITION & ANAEMIA

Adani Foundation Has Committed Itself Through Project Suposhan

Fortune SuPoshan reaches to over 97,000 adolescent girls through SuPoshan Sangini in more than 1200 villages in **19 districts** of **12 states**.



01	HIMACHAL PRADESH	05	MADHYA PRADESH	09	WEST BENGAL
	Shimla		Vidisha		Purva Medinipur
02	UTTAR PRADESH	06	CHHATISGARH	10	MAHARASHTRA
	Varanasi		Raipur, Sarguja		Gondiya, Nagpur
03	RAJASTHAN	07	JHARKHAND	11	TAMIL NADU
	Baran, Bundi		Godda		Ramananthapuram
04	GUJRAT	08	ORRISA	12	KERALA
	Kachchh, Surat, Bahruch, Narmada, Banakantha		Bhadrak		Thiruvananthapuram

SUPOSHAN SANGINI

Community Volunteers of Fortune SuPoshan plays a pivotal role in guiding and counselling the adolescent girls in order to make this transition phase a smooth journey through a detailed curriculum based on



SuPoshan Sangini

A TRUE COMPANION

One who is with family through thick & thin

A 'Sangini' meaning 'Companion' is our trained volunteer who empower locals with self-sustaining method and hands-on guidance

- 01 Household visits
- 02 Group discussion
- 03 Counselling
- 04 Role play, drama, rally
- 05 Cooking demonstrations
- 06 Formation of Peer leader groups

SUPOSHAN ADDRESSES THE ISSUES OF ADOLESCENCE THROUGH



Screening for malnourishment & anaemia in adolescent girls



Inculcating healthy dietary habits



Promoting Right cooking methods



Tackling reasons for school drop out



Awareness on personal & menstruation hygiene



Importance about sexual health



Understanding & acceptance of bodily changes



Encouraging life skills & channelizing their energy



Social maturity & social acceptance



Preparing for marriage & pregnancy



WHY NUTRITION IS IMPORTANT FOR ADOLESCENTS?

Nutrition being an important determinant of physical growth of adolescents, needs attention.

SuPoshan invests in nutrition programs for adolescents, as it is the need of the hour to shape the world's future.

Adequate nutrition is critical for growth spurt during adolescence. Poor nutrition is often cited as one of the reasons for delay in the onset of puberty, especially among Indian adolescent girls.

POOR NUTRITION DURING ADOLESCENCE LEADS TO



Retarded physical growth



Reduced intellectual capacity



Delayed sexual maturation



Increased risk of iron deficiency, under nutrition, stunting



Low bone density



Eating disorders



Lack of concentration, slow learning and poor scholastic performance



School dropout

SuPoshan strives to counteract these factors by laying emphasis on

increased intake of calories, protein, fats, vitamins & minerals to meet rapid physical growth

need to adopt a healthy lifestyle & follow dietary guidelines

need to prevent the onset of diseases -like diabetes, osteoporosis and cancer



WHY NUTRITIONAL ANAEMIA IMPACTS ADOLESCENTS?

The need for iron increases with rapid growth and expansion of blood volume and muscle mass. The onset of menstruation imposes additional needs for girls

In Anaemia there is the loss of oxygen carrying capacity of the blood due to deficiency of haemoglobin in the red blood cells

As a result of poor nutritional status among many adolescents, there develops a Deficiency of iron & other minerals in the body. This condition is termed as **Nutritional Anaemia**

Anaemia is a serious global public health problem that particularly affects young children, Adolescents and pregnant women

Haemoglobin levels to diagnose anaemia (g/dl)

The table shows haemoglobin levels to diagnose Anaemia.

SuPoshan uses this as a norm for screening Anaemia among adolescent girls

Age Group	No Anaemia	Mild	Moderate	Severe
Children 12-14 years of age	12	11-11.9	8-10.9	<8
Non-pregnant women (15 years of age and above)	12	11-11.9	8-10.9	<8
Men (15 years of age and above)	12	11-11.9	8-10.9	<8

ANAEMIA IS CAUSING RED ALERT IN INDIA

It is one of the most under diagnosed conditions & if left untreated can have serious implications

Causes of Anaemia

Insufficient dietary intake of iron-rich foods and "iron enhancers" (that increase iron absorption in body) like vitamin C rich Food

Increased iron requirements due to rapid growth

Excess loss of blood through an injury or during menstruation

Iron loss due to infections – Tuberculosis, malaria and intestinal worms

Poor environmental sanitation and unsafe drinking water

Poor iron and folic acid stores from infancy, childhood deficiencies and adolescent anaemia

Diet deficient in Vitamin B12 & dietary folate

Genetic abnormalities such as – sickle cell anaemia and thalassemia

Consequences of Anaemia

Impaired growth and development

Impaired motor and neural development

Reduced work capacity and output

Diminished immune response

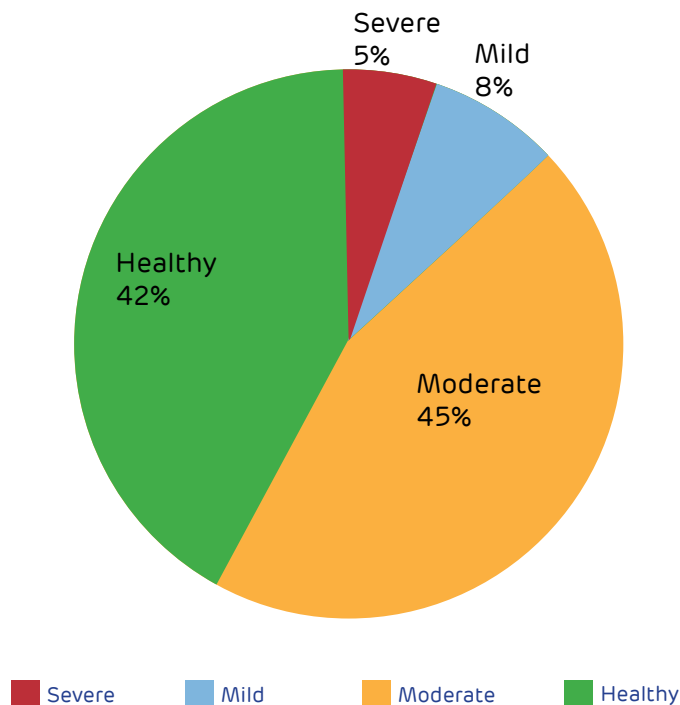
Irregular menstruation

Anaemic adolescent girl has high risk of premature birth, low birth weight and prenatal mortality after pregnancy

SUPOSHAN DATA

Anaemia Status in Adolescent Girls (%) across 14 sites

n = 12916*

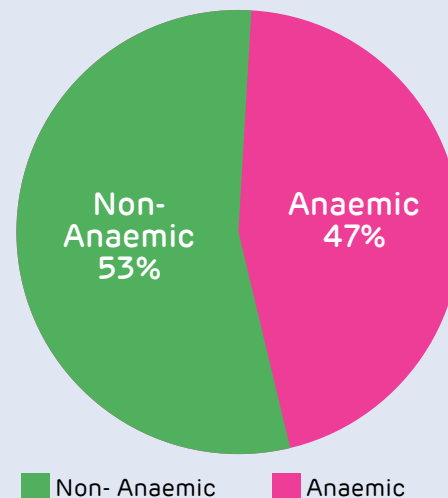


57.9% Adolescent girls (11-19 years) were found to be in some or the other form of Anaemia (i.e. Severe, Mild, Moderate)

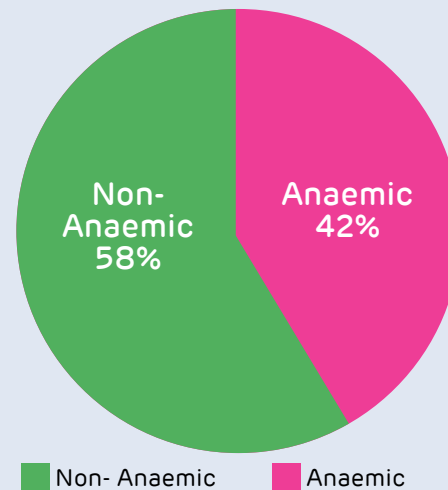
*Screened using Color based anaemia detection card

From year 2017-19, **3034** Adolescent (11-19 age) positively shifted to healthy level of Anaemia

NFHS-4 (Age 15-49)



SuPoshan (Age 11-19)



SUPOSHAN PROVIDES A WINDOW OF OPPORTUNITY FOR NUTRITION

Adolescents to eat foods, from each food group each day to have a good nutritional status & meet the recommended dietary allowance as given in the table.

Recommended Dietary Allowance of Nutrientsfor adolescents in 24 hours							
	MALE			FEMALE			
	10-12yr	13-15yr	16-18yr	10-12yr	13-15yr	16-18yr	
	ENERGY (kcal)	2200	2500	2700	2200	2100	2100
	PROTEIN (gms)	54	70	78	57	65	63
	CALCIUM (mg)	600	600	500	600	600	500
	IRON (mg)	34	41	50	19	28	30



Eat a food plate comprising of- $\frac{1}{2}$ of protective foods (vegetables, fruits), $\frac{1}{4}$ of energy giving foods, (cereals & millets), $\frac{1}{4}$ of body building foods (milk & animal foods)

Correct the nutritional problems originating in the past

Prepare for a healthy productive & reproductive life

SUPOSHAN HIGHLIGHTS THE NEED TO EFFECTIVE NUTRITION PROMOTION STRATEGIES

To encourage healthy eating by some **DO's & Don'ts**



Eat a Balanced diet for optimal growth & development. Have 4-5 meals in a day.



Include high energy and nutrient dense foods such as whole wheat, rice, bajra, jowar, ragi in your daily diet along with nuts & oilseeds.



Add high protein foods like pulses, legumes, milk & milk products, meats and egg in the daily diet



Consume plenty of seasonal fruits & vegetables to get complete dose of vitamins & minerals - guava, amla, mango, papaya, green leafy vegetables like amaranth, fenugreek, mustard leaves along with other vegetables



Drink at least six to eight glasses of water daily & plenty of other fluids such as unsweetened fruit juices, lemon water



Exposure to sunlight to maintain vitamin D levels in the body & better absorption of calcium



Exercise regularly for 30 minutes at least 5 days (brisk walking, cycling, dancing & gardening)



Use double fortified salt containing iron and iodine for daily cooking



Skip meals, especially breakfast



Eat excessive sugar and salt through consumption of cakes, ice-creams, chips, namkeens etc



Eat fast foods, ready to eat foods, deep fried and salty foods



Smoke cigarettes, hookah ; chew tobacco



Drink alcohol and cold drinks



Eat excessive butter and sugar as it may lead to other health problems



Eat packaged foods

FIELD ACTIVITIES WITH ADOLESCENT GIRLS

SuPoshan Sangini conducts group discussions



Importance of Personal Cleanliness



Physiological changes during adolescence



Good eating habits



Use of IFA

SuPoshan Sangini inculcates a good habit of hand washing



SuPoshan Sangini prepares Food Rangoli, to explain food groups



SuPoshan Sangini makes learning a joyful experience through interactive games



SUPOSHAN SANGINI ENSURES PARTICIPATION OF ADOLESCENT GIRLS IN VARIOUS EVENTS



**ANAEMIA
AWARENESS**



HAND WASHING



POSHAN RALLY

SUPOSHAN SUPPORTS COMMUNITIES IN ACCESSING NATIONAL SCHEMES FOR ADOLESCENTS

1

Adolescents are entitled to several health and nutrition services such as biannual health check-ups, biannual deworming, weekly iron folic acid supplementation (WIFS), referral for counselling and treatment for reproductive health conditions and hygiene services for girls.

2

Education is free and compulsory till age of 14 years; longer duration of schooling being critical for preventing early marriage and adolescent pregnancy.

3

School-going adolescents are also entitled to a mid-day meal providing almost a third of energy and protein requirements for 200 days a year in all government schools.

These services are being provided through government of India's national programs implemented by

Ministry of Health

Anaemia Mukht Bharat, Rashtriya Bal Swasthya Karyakram and Rashtriya Kishore Swasthya Karyakram

Ministry of Human Resource Development

Mid-day meal scheme

Menstrual hygiene and Water Sanitation and Hygiene Services



For a healthy growing India



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Visit us at www.adanifoundation.org/www.suposhan.in



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