

CHAPTER 31

TOWARDS 'ADOLESCENTS'

31.1 Adolescents accounts for one fifth of the World's population and have been on an increasing trend. In India, they account for 22.8% of the population (as on 1st March, 2000, according to the Planning Commission's population projections). This implies that about 230 million Indians are adolescents in the age group of 10-19 years.

31.2 The term adolescent means to emerge or achieve identity. Adolescents is defined as a phase of life characterized by rapid physical growth and development, physical, social and psychological changes and maturity, sexual maturity, experimentation, development of adult mental processes and a move from the earlier childhood socio-economic dependence towards relative independence.

31.3 Since adolescents have very special and distinct needs, which can now no longer be overlooked, therefore, it is also essential to invest in adolescents as they are the future of the country. By addressing their needs one would not only be contributing to the socio-economic development of the country but also to other sectoral concerns like social harmony, gender justice, population stabilisation and improving the quality of life of our people.

31.4 Different policies and programmes define the adolescents age group differently. The draft youth policy have been defined as the age group between 13-19 years, under ICDS adolescents girls are considered to be between 11-18 years, the Constitution of India and Labour Laws of the country consider people upto the age of 14 as children, whereas the Reproductive and Child Health Programme mentions adolescents as being between 10-19 years of age. Internationally and is with most UN agencies like WHO, UNICEF, UNFPA etc. the age group of 10-19 years is considered to be the age of adolescents. However, keeping in view the totality of adolescents and the characteristics of this age group, it is felt that it would be most appropriate to consider adolescence as the age between 10-19 years.

The Policies :

31.5 Mentions on adolescents in the Ninth Plan include commitments towards the child to universalise supplementary feeding with a special emphasis on adolescent girls, to expand the adolescent girls scheme and to assess the health needs of adolescents in Reproductive and Child Health programme. But at the same time, the Ninth Plan explicitly makes a commitment to human development. Therefore, the Tenth Plan needs to be more focussed on the same and the number of policies which have been perpetrated so far are as follows :-

1. Draft National Youth Policy (2001)
2. National Policy on Education (1986 modifies in 1992)
3. National Population Policy (2000)
4. Draft Health Policy (1999)
5. Draft National AIDS Policy (2000)
6. National Nutrition Policy (1983)
7. National Policy for the Empowerment of Women (2001)

Analysis of Policies adopted so far :

31.6 One can say that though adolescents are mentioned in many of the above policies, but it is only in the latter policies like Population Policy, 2000 and the Draft Youth Policy, 2001 that the unique and special needs of adolescents have been recognised.

31.7 It will be seen from the above that the present policies address themselves to specific sectors like education, health, family welfare, nutrition, HIV / AIDS and sports etc. or address certain population groups like women, children and youths. But none of the policies however take an integral and holistic view of adolescents.

The Programmes For Adolescents :

31.8 Although there are no comprehensive programmes or schemes addressing all the needs of adolescents, however a number of Government departments have interventions that impact the live of adolescents. Some of the deparments adopting the schemes of adolescents are :-

1. Women & Child Development
2. Youth Affairs & Sports
3. Social Justic & Empowerment
4. Human Resource Development
5. Family Welfare & Health
6. Rajiv Gandhi Drinking Water Mission
7. Employment & Training
8. Rural Development
9. Lok Jumbish

Rajasthan And Adolescent Welfare :

31.9 For the first time, a special intervention has been devised for adolescent girls using the ICDS infrastructure. ICDS with its opportunity for childhood development, seeks to reduce both socio-economic and gender inequities. The Adolescent Girls Scheme under ICDS primarily aimed at breaking the inter-generational life cycle of nutritional and gender disadvantage and providing a supportive environment for self development.

31.10 The present adolescent girl intervention scheme in its present form is being implemented through Anganwadi Centres in both rural and urban settings. Under the scheme, the adolescent girls who are unmarried and belong to families below poverty line and school drop outs are selected and attached to the local Anganwadi Centres for six months stints of learning and training activities. The objective of scheme is to increase self confidence, boost moral and give dignity.

31.11 Similarly, Lok Jumbish, since 1995 has been organising residential adolescent girls camps for about 6 months duration.

31.12 Medical & Health have launched Reproductive & Child Health care activities where special care are included for the group falling in adolescent age group.

31.13 Youth and Welfare Department through its sports activities giving fillip to health care.

31.14 However, multi-dimensional approach and importance of a holistic perspective, policy making invariably involves towards prioritation of the cause.