



# Adolescent Risk Behaviors

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FOUNDER PRESIDENT SAPA – 2014 -16

PRESIDENT IAP 2013

# Risk Behavior ?

**“Doing activities that may cause physical or mental harm”,**

- ▶ Behaviors that contribute to unintentional injuries (Reckless driving- RTA and violence)
- ▶ Tobacco Abuse
- ▶ Alcohol Abuse
- ▶ Risky Sexual behaviors that contribute to unintended pregnancy and STDs, including HIV
- ▶ Unhealthy dietary behaviors
- ▶ Inadequate physical activity

# Pune Porsche crash: Teen spent ₹72,000 at pubs, 24 May 2024,



Pune hit and run Horror, teens was heavily drunk in two bars,  
Driver called father that he (minor) is insisting to drive – father said let him  
Speeding PORSCHE killed two techies, Bail granted in 15 hours, Court orders  
essay writing, Now father and pub owner both are in Jail.  
This depicts - Multiple risk behaviors



**THE TIMES OF INDIA**

# Recent Incidences

- ▶ **3-year-old girl raped and murdered by 2 minor** cousins in Rajasthan's Dholpur – May 23, 2024
- ▶ **Minor girl killed; teen detained.** The accused suspected that the girl, with whom he was in a relationship, was talking to someone else. May 24, 2024
- ▶ **Minor boy (17 years) shoots – 14-year girl** in MP Balaghat, May 20, 2024,
- ▶ **18-year-old girl blackmails friend to kill grandmother,** both held, May 17, 2024,

# The Teenage Brain and Risk Taking

- **The Developing Brain:**, undergoes significant development.
- **Prefrontal Cortex:** responsible for higher functions like planning, decision-making, and impulse control. **It is still maturing in teenagers. (23-25 years)**
- **Limbic System:** Controls emotions, motivation, and reward seeking. It **matures earlier in adolescence.**
- **The Analogy:** Because of this uneven development, the teenage brain can be likened to **a car with a powerful engine (limbic system) but underdeveloped brakes (prefrontal cortex).** **This leads to impulsive decisions and risk-taking behavior.**

# Predisposing factors to Risk behavior

- ▶ During early childhood factors:
  - ▶ Low socioeconomic status at birth, and
  - ▶ **Adverse Childhood Experiences**, such as abuse, neglect, family violence, adoption prenatal exposure to drugs, poverty etc.
  - ▶ Intrauterine exposure to Nicotine, alcohol, cocaine, lead, caffeine.
  - ▶ Birth conditions (LBW, prematurity, delivery complications).
  - ▶ Maternal depression in the child's early life
  - ▶ Peer Pressure

# Protective Factors for Adolescent Health

- **Individual Protective Factors:**

- Strong self-esteem
- Positive coping skills
- Good decision-making skills
- Strong sense of identity

- **Family Protective Factors:**

- Warm and supportive family relationships
- Effective parental monitoring
- Clear communication about expectations
- Connectedness to family traditions and values

- **Peer Protective Factors:**

- Association with positive peers who make healthy choices
- Supportive and encouraging friendships
- Positive role models

- **Community Protective Factors:**

- Safe neighborhoods
- Access to quality education and healthcare
- Positive community programs and activities for youth
- Strong social support networks



# Behaviors that contribute to unintentional injuries and violence

RECKLESS DRIVING

VIOLENCE

## Behaviors that lead to unintentional injury - RTA;

- ▶ Using Cell phone or eating /drinking while driving – Distracted Driving
- ▶ Not using helmet or seatbelts
- ▶ Doing Stunts while driving

# Global status report on road safety **2023**



- ▶ 1.19 million road traffic deaths in 2021
- ▶ > half of all United Nations Member States reduced road traffic deaths.
- ▶ United Nations pledge to halve the RTA deaths by 2030
- ▶ **9 out of 10 RTA deaths occur in LMICs. (92%)**

# Disturbing Data – INDIA

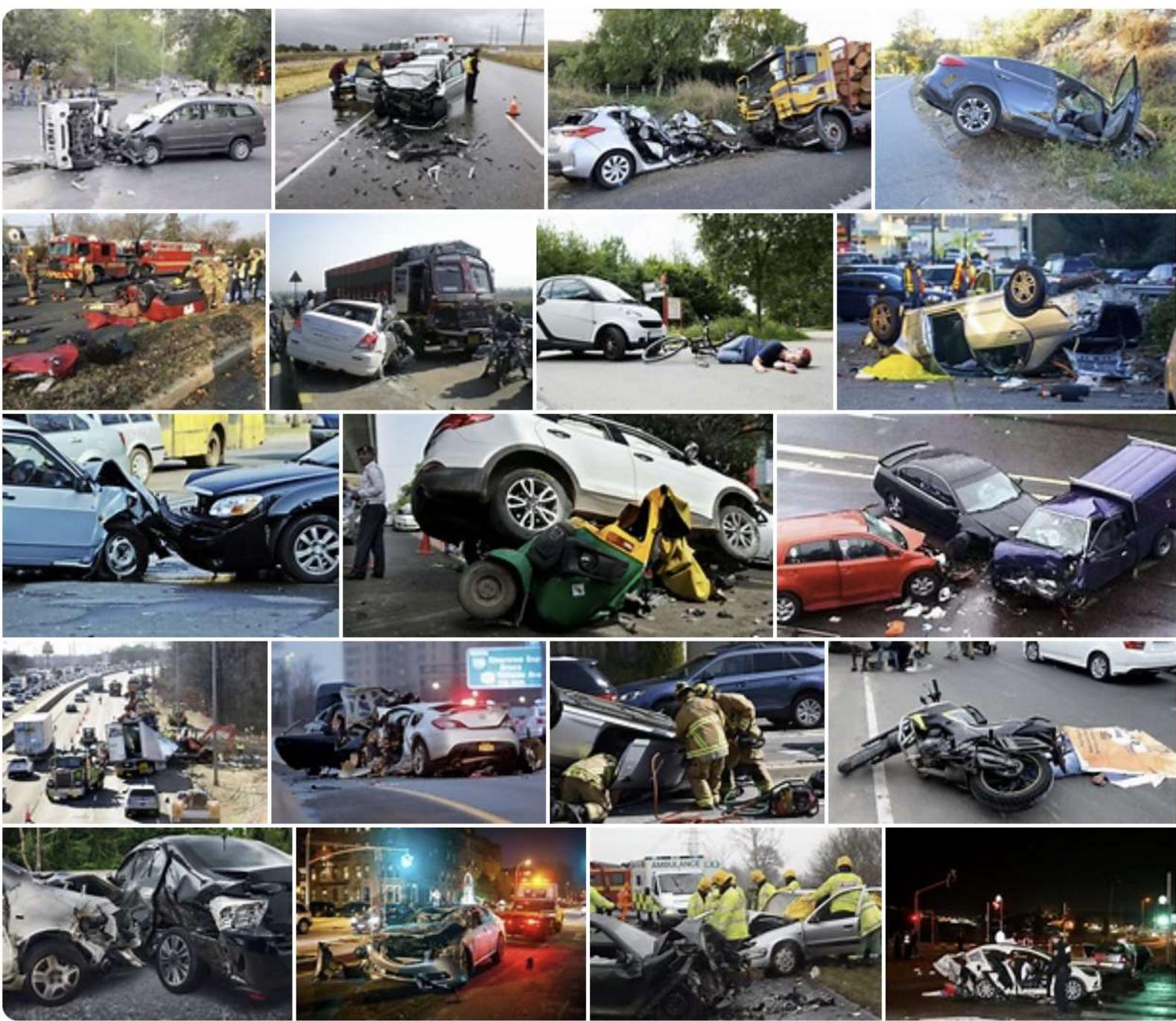
- ▶ In INDIA Road accidents kill ;
  - ▶ 1,68,491 died in RTA in 2022
  - ▶ >460 every day
  - ▶ 19 Death/Hr - **Globally 136/hour**
  - ▶ 1% vehicle but 7% deaths of Global death

Undeclared pandemic, tragedy of immense human proportion, sadly we hear very little about it

# Road Traffic Accidents SAPA Countries

Country	Age	Prevalence	Males	female
India	10-19 years	9,528 in 2022		
Pakistan	10- 19 years	2393		
Bangladesh	On-road accidents and casualties doubled bet 2010 - 2020			
Nepal	About 10% of the total fatalities are of <16 years			
Sri Lanka	Total death 2,536 in last year, maximum 820 motorcyclist			

- [https://morth.nic.in/sites/default/files/RA\\_2022\\_30\\_Oct.pdf](https://morth.nic.in/sites/default/files/RA_2022_30_Oct.pdf)
- <https://journals.sagepub.com/doi/abs/10.1177/10105395231211979>
- <https://www.unicef.org/rosa/media/28141/file/Child%20and%20Adolescent%20Road%20Safety%20in%20South%20Asia.pdf>
- <https://ejournals.pncampus.edu.np/ejournals/ajps/wp-content/uploads/2024/01/6-70-82.pdf>
- [https://www.epid.gov.lk/epid/public/storage/post/pdfs/en\\_65fc547b1177c\\_Vol\\_51\\_no\\_07-english.pdf](https://www.epid.gov.lk/epid/public/storage/post/pdfs/en_65fc547b1177c_Vol_51_no_07-english.pdf)



THE IMPACT OF  
**distracted driving**

**THREE PRIMARY FORMS OF DRIVER DISTRACTION**



**OPTIC DISTRACTION**  
 Anything that takes your visual attention off the road



**MANUAL DISTRACTION**  
 Anything that requires you to take your hands off the steering wheel



**MENTAL DISTRACTION**  
 Anything that diverts your mind from the task of driving



# Teen Violence

# Key Facts – Youth Violence

- ▶ Worldwide over **1,76, 000 homicides among youth**, it is 37% of the total number of homicides globally each year.
- ▶ **Homicide is the third leading cause of death in youth.**
- ▶ For each young person killed, many more sustain serious injuries.

# Teen Violence – India

- ▶ A schoolboy is beaten and sexually assaulted by his classmates over a small argument – in Delhi.
- ▶ A 13-year-old student stabs to death a nine-year-old student in Tamil Nadu's Madurai district following an argument.
- ▶ NEW DELHI: a group of students thrashed their classmate to death.
- ▶ Three students stabbed their senior to death to escape from his bullying.
- ▶ Just two days back, a 12-year-old boy thrashed his senior to death.
- ▶ A 14-year-old girl in a girls' school was attacked by her classmate with a blade, resulting in serious injuries that required 17 stiches on her face.

# Factors for teen violence

- ▶ Media Exposure;
- ▶ Witness domestic violence in their homes,
- ▶ Illiteracy in parents;
- ▶ Poverty may also lead violence in schools

# Teen dating violence?

Up to 19% of teens experience dating violence.

- ▶ It is a type of **Intimate Partner Violence** - following types of behavior:
- ▶ **Physical violence**; hitting, kicking, or using another physical force.
- ▶ **Sexual violence** is forcing or attempting to force a partner to take part in a sex act.
- ▶ **Sextortion and Sexting**
- ▶ **Psychological aggression**; Using verbal or non-verbal communication.
- ▶ It profoundly impacts lifelong health, opportunity, and wellbeing.

# Teen Suicides and Homicide in INDIA

- ▶ Suicide is the 4th leading cause of death among 15–19 years.
- ▶ NCRB, 2021 report - 10,730 adolescents died due to suicide.
- ▶ **30,555 crimes were committed by minors last year;**
- ▶ The rate of crimes has gone up to 42% in Delhi

<https://www.who.int/news-room/fact-sheets/detail/suicide> Accessed 20 Mar 2022

[https://ncrb.gov.in/sites/default/files/ADSI-2021/adsi2021\\_Chapter-2-Suicides.pdf](https://ncrb.gov.in/sites/default/files/ADSI-2021/adsi2021_Chapter-2-Suicides.pdf) Accessed 20 Mar 2022

<https://indianexpress.com/article/cities/delhi/juvenile-crime-rate-highest-in-delhi-last-year-ncrb-data-9056140/>

<https://www.thehindu.com/news/cities/chennai/ias-academy-founder-commits-suicide/article25209622.ece>

<https://www.indiatoday.in/education-today/featurephilia/story/rise-in-teen-aggression-deaths-by-suicide-over-minor-issues-experts-explain-2412533-2023-07-27>

# Suicide among adolescents

Country	Age	Prevalence	Males	female
India	15-19	10,731 NCRB 2021		
Pakistan	15-19	289	51.5%	48.5%
Bangladesh	15-17	14/100,000	50% Higher in Females	
Nepal	In 2020	1350 with 319 children		
Sri Lanka	30–100 per 100,000 population in males and 20–70 per 100,000 population in females			

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9843018/>

[https://www.researchgate.net/publication/321073830\\_High\\_Rates\\_of\\_Suicide\\_and\\_Violence\\_in\\_the\\_Lives\\_of\\_Girls\\_and\\_Young\\_Women\\_in\\_Bangladesh\\_Issues\\_for\\_Feminist\\_Intervention](https://www.researchgate.net/publication/321073830_High_Rates_of_Suicide_and_Violence_in_the_Lives_of_Girls_and_Young_Women_in_Bangladesh_Issues_for_Feminist_Intervention)

<https://www.cambridge.org/core/journals/bjpsych-international/article/development-of-adolescent-mental-health-services-in-sri-lanka/4634B545006E24D403EC6AFC54F663A9>



# Vaping and Tobacco

# Global Youth Tobacco Survey (GYTS-4) India 2019

Report

- **Tobacco in children aged 13-15 years – 8.5%**
- 20% of Global TB incidence is attributed to Smoking
- **Smoking is reduced in boys by 50% while increased in Girls by 40% in last 16 years.**
- The median age at initiation: Boys- cigarette - 11.5 years, Bidi - 10.5 years, SLT -9.9 years.
- Girls - initiated tobacco earlier than boys.



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# Prevalence of Tobacco use among Teens;

Country	Age	Prevalence	Male	female
India	13-15	8.5%		
Pakistan	13-15	10.7%	13.3%	6.6%
Bangladesh	students	9%	15.8%	4.8%
Nepal	Students	9%	14.1%	5.9%
Sri Lanka	Overall	12.5%	17.5%	6.8%

- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10637613/>
- [https://assets.tobaccofreekids.org/global/pdfs/en/Pakistan\\_tob\\_burden\\_en.pdf](https://assets.tobaccofreekids.org/global/pdfs/en/Pakistan_tob_burden_en.pdf)
- <https://doaj.org/article/0cbc929f0bcb4134beaf65163a3ae0f1>
- [https://cdn.who.int/media/docs/default-source/ncds/ncd-surveillance/data-reporting/nepal/gyts/nepal-gyts-2011-factsheet-\(ages-13-15\)\\_tag508.pdf?sfhttps://cdn.who.int/media/docs/default-source/ncds/ncd-surveillance/data-reporting/sri-lanka/gyts/sri\\_gyts\\_report\\_1999.pdf?sfvrsn=404fcf3a\\_5&download=true](https://cdn.who.int/media/docs/default-source/ncds/ncd-surveillance/data-reporting/nepal/gyts/nepal-gyts-2011-factsheet-(ages-13-15)_tag508.pdf?sfhttps://cdn.who.int/media/docs/default-source/ncds/ncd-surveillance/data-reporting/sri-lanka/gyts/sri_gyts_report_1999.pdf?sfvrsn=404fcf3a_5&download=true)
- [vrsn=8530def2\\_5&download=true](https://cdn.who.int/media/docs/default-source/ncds/ncd-surveillance/data-reporting/sri-lanka/gyts/sri_gyts_report_1999.pdf?sfvrsn=8530def2_5&download=true)

# Tobacco and Film stars- Role Model of youth;



Alcohol

# Alcohol;

- **Risk factors include;** peer pressure, family history of addiction, and mental health issues.
- **Consequences include;** addiction, impaired brain development, health problems, and accidents.
- Leads to **Lack of inhibition that further leads to elevated risk-taking.**

# Alcohol consumption in SAPA Adolescents

Country	Age	Prevalence	Male	female
India	>15 (NFHS 5)		15%	1%
Pakistan	Underage consumption is increasing			
Bangladesh	Students	15.1%		
Nepal	15-49		42%	11%
Sri Lanka	Overall		39.6%	2.4%

[https://www.researchgate.net/profile/Sana-Fatima26/publication/366544851\\_Pakistan.pdf](https://www.researchgate.net/profile/Sana-Fatima26/publication/366544851_Pakistan.pdf)

<https://typeset.io/questions/what-is-the-rate-of-alcohol-and-drug-usage-among-adolescent-3fjp2u8f27>

<https://kathmandupost.com/health/2023/07/20/more-people-consume-alcohol-than-smoke-in-nepal-report-says#:~:text=According%20to%20the%20final%20report,the%20month%20preceding%20the%20survey>

<https://srilanka.unfpa.org/sites/default/files/pub-pdf/Youth%20Health%20Survey.pdf>

# Liquor inside the school

- ▶ “My friend brought vodka in a water bottle. We tried it during the lunch break. Nobody got to know,” says Shruti\*, a Class 12 student in Indore. Her friend had arranged the booze from her father’s bar.
- ▶ In another incident in Delhi, Kunal\*, a student of Class 9 mixed vodka in water and brought it to the school. Not only was he drinking it inside the classroom but was also sharing it with his friends.



# Sexual behaviors

that contribute to unintended pregnancy and STDs,  
including HIV

# Unsafe Sexual Behavior

## Risky behaviors are.

- Early sexual activity,
- Unprotected intercourse, and
- Having multiple sexual partners,
- Coerced sexual intercourse,
- Sexual intercourse with commercial sex workers and
- Sexual intercourse for reward

## Risk factors include

- Lack of knowledge about contraception,
- Pressure from peers, and
- Sexual abuse.

## Consequences include;

- Sexually transmitted infections (stis),
- Unintended pregnancy, and
- Emotional distress.

# Teen Pregnancy - Global

- ▶ As of 2019, adolescents aged 15–19 years in LMICs
  - ▶ Had an estimated 21 million pregnancies each year,
  - ▶ About 12 million births.
  - ▶ 55% pregnancies were unintended - end in abortions - which are often unsafe in LMICs.
- ▶ 5.8 %of Adolescent girls in India give Birth. NFHS 5 (2019-2021)
- ▶ **Adolescent mothers (10–19 years) face higher risks** of eclampsia, puerperal endometritis and systemic infections.
- ▶ **Babies of adolescent mothers** face much higher risks

# Pornography among teens in SAPA Countries

- ▶ **India:** 47% of adolescent boys and 6% of girls are exposed to pornography.
- ▶ **Pakistan:** 83% of street children were sexually active, with a median age of 11 years at initiation of sexual activity,
- ▶ **Bangladesh;** 54% of males and 12.5% of females aged 20–25 years in accessed online pornography,
- ▶ Nepal: remains uncertain due to a lack of hard data
- ▶ Sri Lanka: Limited literature exists the **prevalence of risky sexual behavior was higher than expected by parents.**

<https://link.springer.com/content/pdf/10.1007/s10508-022-02411-7.pdf>

<https://capmh.biomedcentral.com/articles/10.1186/s13034-021-00420-3>

<https://link.springer.com/content/pdf/10.1007/s11469-018-0021-7.pdf>

<https://www.frontiersin.org/journals/public-health/articles/10.3389/fpubh.2022.1046813/full>

# Comprehensive Sexuality Education

## Key Aspects:

- ▶ **Holistic Approach:** Covers cognitive, emotional, physical, and social dimensions.
- ▶ **Age-Appropriate:** Tailored to different age groups.
- ▶ **Gender-Inclusive:** Addresses gender norms and equality.
- ▶ **Rights-Based:** Focuses on sexual and reproductive rights.
- ▶ **Evidence-Based:** Grounded in scientific research.



Unhealthy dietary behaviors  
Inadequate physical activity

# Unhealthy food habits

Putting millennials at risk of non-communicable diseases



# Obesity - A silent epidemic

The most common nutrition mistakes committed by adolescents are;

- ▶ Eating meals irregularly,
- ▶ Omitting breakfast,
- ▶ Consuming an improperly balanced diet and
- ▶ **Consuming large amounts of ultra processed products and sweetened beverages.**

# Incidence of Obesity and Overweight

Country	Overweight	Obesity
India	12.4%	8.4%
Pakistan	5.8%	5.4%
Bangladesh		1.7 to 25.6%
Nepal	14.6%	14.6%
Sri Lanka	11%	6.3%

<https://www.sciencedirect.com/science/article/pii/S221339842300177X>

<https://doi.org/10.1186%2Fs12887-021-02501-w>

<https://doi.org/10.3390%2Fijerph191811619>

<https://doi.org/10.1155%2F2023%2F2957278>

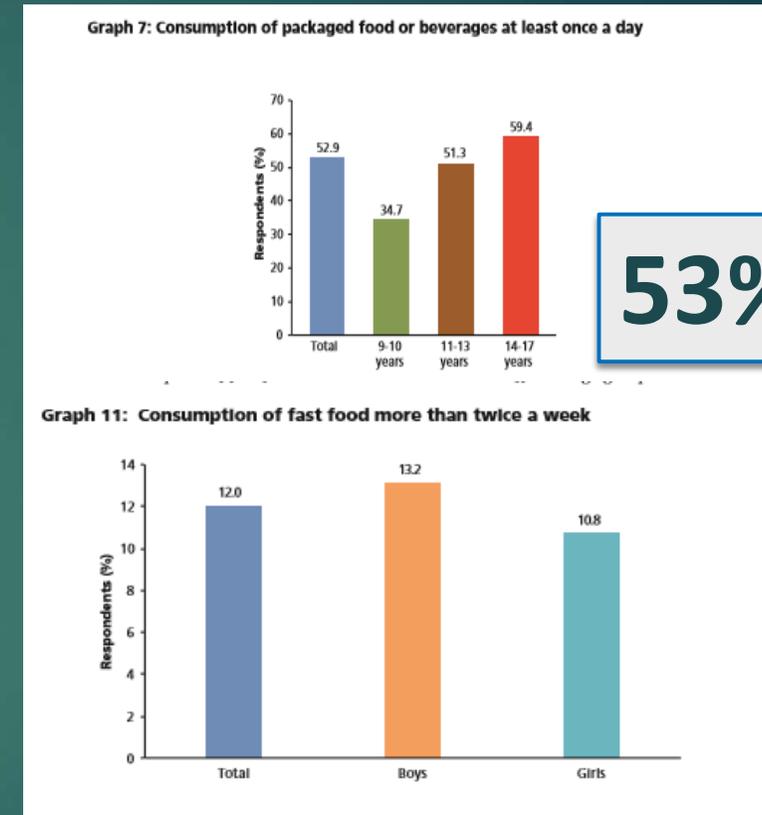
<https://doi.org/10.1093/inthealth/ihae012>



# Prevalence of fast-food consumption in Indian children

## CSE survey (2017)

- ▶ Pan India survey 123 districts(24states/1UT)
- ▶ 13,274 school children, 9–17 years
- ▶ almost every child consumed packaged food
  - ▶ salted packaged food (94.3 %)
  - ▶ sweet packaged food (95.1%)
  - ▶ sugar-sweetened beverages (92.1%)



Bhushan C, Taneja S, Khurana A. Burden of Packaged Food on Schoolchildren: Based on the CSE survey 'Know Your Diet' 2017. **Centre for Science and Environment, New Delhi.**

**Every other child (53%) consumed packaged food or beverages at least once a day**

## RECOMMENDATIONS

### **Indian Academy of Pediatrics Guidelines on the Fast and Junk Foods, Sugar Sweetened Beverages, and Energy Drinks**

**PIYUSH GUPTA<sup>1</sup>, DHEERAJ SHAH<sup>1</sup>, PRAVEEN KUMAR<sup>2</sup>, NIDHI BEDI<sup>3</sup>, HEMA GUPTA MITTAL<sup>4</sup>,  
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SACHDEV<sup>17</sup>; FOR THE PEDIATRIC AND ADOLESCENT NUTRITION SOCIETY (NUTRITION CHAPTER) OF  
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# The JUNCS Foods: A New Terminology

- ▶ **J-** Junk food (foods high in fats, especially saturated and trans-fats, sugars and salts, and foods lacking in micronutrients/minerals)
- ▶ **U-** Ultra processed foods (as defined in the fourth category of NOVA classification)
- ▶ **N-** Nutritionally inappropriate foods. Home-made foods - if prepared in recycled oil, or contain high amount of sugar, fat or salt.
- ▶ **C-** Caffeinated/coloured/carbonated beverages
- ▶ **S-** Sugar sweetened beverages

# Practice Guidelines for JUNCS

- ▶ Limit consumption of JUNCS to **not more than once per week.**
- ▶ **Avoid completely Fruit Juices and SSBs in children <2 yr & avoid as far as possible in 2-18 yr.**
- ▶ **Avoid tea/coffee completely in children < 5 y**
- ▶ Limit tea/coffee to maximum;
  - ▶ 1/2 cup (100ml)/day in 5 – 9 yr.
  - ▶ 1 cup/day (200ml) in adolescents 10 – 18 yr

Indian Academy of Pediatrics (IAP)



## GUIDELINES FOR PARENTS

# Nutrition of Adolescents (10–19 Years)

Convener: Srikanta Basu

Members: Avinash Bansal, Nigam P Narain,  
Alpana Chawla

Reviewers: Dheeraj Shah, Arvind Savant



### 10 FAQs on NUTRITION OF ADOLESCENTS (10–19 YEARS)

1. I am worried about the nutrition of my 12-year-old daughter as I read somewhere that nutrition in teenagers is very important. Can you explain why?
2. As my son is growing older, he has become picky eater. How to change his eating behavior?
3. My daughter takes the meal we provide at home and looks healthy too. How will I know whether she is getting adequate nutrition or not. Should I monitor her calorie intake?
4. I have heard a lot about balanced diet. Please tell me, what is a balanced diet and how to give balanced diet to my adolescent children?
5. My son who is a teenager is very fond of snacks/packaged food or beverages, and when he is with his friend he eats outside. Even at home, he demands outside food increasingly and he does not listen, and we often have fought over this. Please help me to tackle this and please suggest some healthy snacks.
6. My daughter who is 16 years old, off-late is skipping her dinner regularly. She says she is becoming fat and is into some form of dieting. She says, she is looking for dieting program on the net which will help her to lose some weight and look smarter. Is it OK, if she continues with this?
7. My son is in class XII and is preparing for medical entrance. He is overburdened with studies (school, coaching, tuition, etc.). He is either with books or on screen. Off-late, he seems to be gaining weight. I want him to spend some time outside for physical activities but he will not listen. How to go about it?
8. My son (16 years old) is very lean and thin, has a close friend, who is a good sportsman, goes to gym regularly. His friend has recommended him to buy some protein powders from the market to gain some weight. What should I do?
9. Doctor, can you give me few practical tips so that I can ensure good nutrition in my growing teenaged children?
10. As a parent when should I consult an expert for the nutritional issues related to my adolescent children?

Under the Auspices of the IAP Action Plan 2021–2022

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## GUIDELINES FOR PARENTS

# Overweight and Obesity: Detection, Prevention, and Management

Convener: Rekha Harish

Members: Kavitha Sakamuri,  
Satish V Agarwal,  
Shilpa P Aroskar



### 10 FAQs on OVERWEIGHT AND OBESITY: DETECTION, PREVENTION, AND MANAGEMENT

1. My son is 8-year-old. His height is 135 cm and weight is 35 kg. My daughter is 3-year-old, her height is 97 cm and weight is 16 kg. How can I calculate their body mass index (BMI)? How do I interpret the value?
2. We, our parents and our children all look alike, hence we think fatness is genetic. Do we need tests to confirm this? We are lucky to have our great grandparents 90 and 84 years in our family who are slim and still much more active than us? Why did we not inherit their genes? Kindly explain.
3. When I went for vaccination for my 5-year-old son, my doctor told me that he is obese. We always thought he is normal, as he looks like us. We are now worried about his future. We are also planning for a second child. Please let us know precautionary steps to prevent obesity in our next baby.
4. Our 5-year-old son spends all his free time watching TV and playing video games. He has been advised physical activity. Please guide us what exercises he can do at home.
5. We both are working parents and hardly get time for ourselves, so we give money to our son to buy food from school canteen. Now, his favorite foods are banned in the school, please guide us how to manage.
6. What will you recommend to us as a family to develop healthy eating habits in our children?
7. I have two sons, 6- and 11-year olds. Both resemble us and weigh 29 kg and 48 kg, respectively. Can you recommend some practical exercises for weight loss which can be done in my small apartment?
8. My 12-year-old daughter weighs 61 kg. What should we do about her obesity? Please guide us. Should we enroll her for a weight loss package offered by a cosmetic chain?
9. My 13-year-old child weighs 88 kg. She was 75 kg a year ago. She tried dieting and going to the gym. It did not work, rather she developed pain in her knees. Are there any pills or medicines to reduce her weight?
10. She also has irregular periods and headache very often. Will she need bariatric surgery ultimately.

Under the Auspices of the IAP Action Plan 2020–2021

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IAP President 2020

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Deepak Ugra  
National Co-ordinator



- ▶ Regular physical activity **promotes both mental and physical health.**
- ▶ **More than 80%** of adolescents globally did not meet current recommendations **of at least one hour of physical activity per day.**
- ▶ Regular physical activity is a **key protective factor for the prevention and management of NCDs**

# The Role of Pediatricians in Addressing Risk Behaviors

- Pediatricians are in a unique position to identify, prevent, and intervene in adolescent risk behaviors.
  - Conduct **comprehensive screenings** during well-child visits.
  - **Provide education and counseling** on risk behaviors.
  - **Refer teenagers to appropriate** mental health or social services when needed.
  - **Open communication channels** to build trust with teenagers.
  - Advocate for policies that promote adolescent health.

# Screening Tools for Adolescent Risk Behaviors

- Several validated screening tools can help identify teenagers at risk of various behaviors.
- Examples include:
  - ▶ ASSIST (Alcohol, Smoking and Substance Involvement Screening Test)
  - ▶ AUDIT (Alcohol Use Disorders Identification Test)
  - ▶ PHQ-9 (Patient Health Questionnaire-9)
  - ▶ RAAPS (Rapid Adolescent Prevention Screening)
  - ▶ HEEADSS (H: Home and Environment, E: Education and Employment, E: Eating and Exercise, A: Activities and Interests, D: Drugs and Alcohol, S: Sexuality and Sexual Health, S: Suicide and Depression)

# When should parents worry about risk-taking behaviour?

- ▶ It's time to worry if your teenager is;
  - ▶ Engaging in risks that could have lasting consequences such as; **harm to themselves or others**
  - ▶ Does not seem to be learning from their mistakes.
  - ▶ Continues to use alcohol in a way that is out of control.

# How can parents help keep teens safe?

- ▶ The first thing parents and caregivers can do is to **provide reasonable levels of supervision**, it can reduce the likelihood of dangerous risk-taking in teenagers.
- ▶ The second thing parents should do is **offer themselves as a partner in their safety**.

# When should parents seek professional help?

- ▶ If the teenagers routinely engage in worrisome or dangerous behaviours, such as;
  - ▶ Self-harm, or violence towards others
  - ▶ Falling grades in school – and
  - ▶ High-risk substance use,
  - ▶ Persistent recklessness,
  - ▶ The efforts you are making to help them take better care of themselves are not working.



Adolescents need freedom to choose, but not so much freedom that they cannot, in fact, make a choice.

— Erik Erikson —

AZ QUOTES

thank  
you  
&

The image displays the words "thank you &" in a highly decorative, black calligraphic font. The text is arranged in three lines: "thank" on the top line, "you" on the middle line, and "&" on the bottom line. Each letter is surrounded by a network of small blue squares and lines, which are vector control handles used for adjusting the shape and position of the text in a design software. The background is white, and the entire composition is set against a dark teal background with a red rectangular element in the top right corner.