



Adolescent Today

A Subspeciality Chapter of Indian Academy of Pediatrics
Society Registration No. 02/42/01/14649/11



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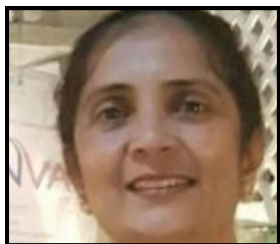


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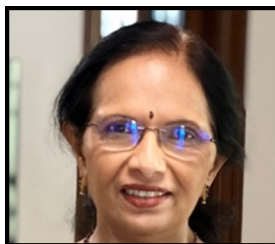
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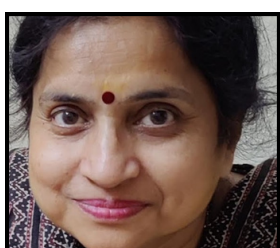
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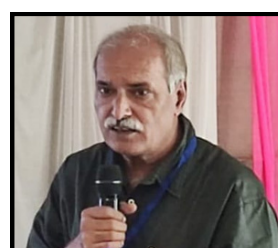
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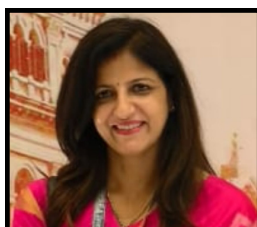


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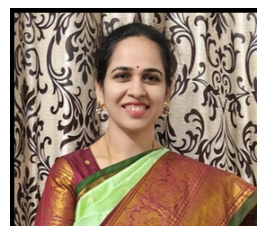
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Editorial

Dear Readers

The cover of this issue draws inspiration from another Japanese philosophy *Ikigai* - *a reason* for being, which beautifully harmonizes with our theme, “*Thriving Inside Out.*” The picture reflects this essence — calm, centred, and radiant — symbolizing *growth, harmony, and the quiet elegance of a life guided by purpose.* Ikigai reminds us that *true thriving begins within.* When passion meets purpose, life blossoms naturally.

Adolescence, an age of self-discovery, is filled with questions — Who am I? What do I want to do? Where do I belong? Guiding young minds toward *discovering their Ikigai* helps them grow from within, finding clarity, balance, and fulfillment in a world overflowing with noise and choices.

Ikigai as the Inner Compass teaches that *thriving is not about achievements or appearances but about an inner purpose that anchors us.* When adolescents align what they love, what they are good at, what the world needs, and what they can be rewarded for, they *begin to flourish — authentically, from the inside out.*

In this special Silver Jubilee Issue, we celebrate the visions of our past Chairpersons, whose leadership continues to inspire and strengthen AHA’s journey —

Dr. J S Tuteja, whose presence keeps creating ripples of inspiration across AHA and IAP; **Prof. Dr. Sangeeta Yadav**, a leader of immense knowledge and foresight; **Dr. Preeti Galagali**, whose energy and wisdom continue to illuminate our path; and **Dr. AS Chawla**, admired for his warmth, graciousness, and hospitality.

Our special column brings together two compelling voices — that of a parent and a teenager — reflecting two sides of the same emotional landscape. The teen insightfully writes, “I am growing up while you are still figuring out how to raise children,” while the mother — an IITian and Global Math Ambassador — shares her perspective on building resilience in children.

We are also delighted to feature an inspiring article on International Adolescent Health Week (IAHW) by **Dr. Ngozi Oketah**, Global Director, IAHW, and our own

Dr. Preeti Galagali, Vice President, South Zone IAP and Vice President-Elect, South East Asia.

This issue further presents a vibrant collection of reflections and features, including an exploration of Radical Therapy and its relevance in today's context; a Book Review exploring the complex intersection of gender and malnutrition; and a thoughtful review on parenting, inspired by a trending Netflix series - ADOLESCENCE.

We also present articles on thriving adolescents, addressing emotional challenges such as breakups, with contributions from clinical experts and psychologists offering valuable insights and practical perspectives. Do not miss the highlights of the Silver Jubilee ADOLESCON @ Ahmedabad and our WAVE 18 activities, which truly embody the spirit of collaboration, resilience, and continued growth.

So, this journal becomes our Ikigai — a source of purpose and fulfillment, not only for our academic pursuits but for every reader who engages with it with thought and curiosity. Each article reflects our shared dedication to advancing adolescent health and well-being, while also inspiring meaningful reflection and dialogue. As we turn each page, may it remind us that learning is a lifelong journey — one that connects minds, nurtures passions, and shapes the future we envision together.

Together, we continue nurturing passions and shaping futures.

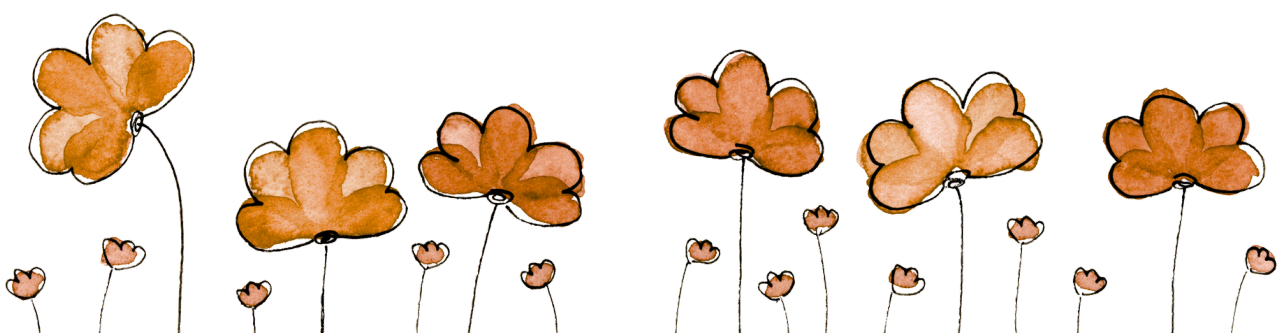
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Dr. Gayatri Bezboruah

Dr. Sonia Bhatt

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Silver Jubilee Chronicles

“Turning a Vision into a Movement”



DR. JOGENDER SINGH TUTEJA

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He is a distinguished pediatrician and adolescent health counsellor with decades of experience in guiding young individuals through the complex emotional, psychological, and developmental challenges of adolescence. With a strong academic foundation—holding an MD and DCH, a Fellowship of the Indian Academy of Pediatrics (FIAP), and a Postgraduate Diploma in Adolescent Pediatrics from Kerala University—Dr. Tuteja brings both clinical expertise and compassionate insight to his practice.



My association with the **Adolescent Health Academy (AHA)** has been one of the most meaningful chapters of my professional life. Having completed my **MBBS, DCH, and MD (Pediatrics)** from **MGM Medical College, Indore**, and later my **PGD-AP from Kerala University**, I have always believed that learning never stops. My training in Neonatology under the **UK National Health Scheme (NHS)** in 1977–78 widened my perspective on holistic child and adolescent care — a vision that I carried forward on returning to India. Over the years, I was privileged to work closely with national and international bodies on adolescent health initiatives. I have been honored with several

recognitions, including the FIAP Award (2013), Dr. MKC Nair Oration (2013), Dr. Swati Bhawe–Dr. MKC Nair Oration (2020), Late Prof. S.D. Singh Oration (2021), GAPIO International Award (2020), and Dr. B.C. Chapperwal Oration (2025), among others. Being felicitated by the Union Health Minister at Adolescon 2017, Khajuraho,

for lifetime contributions remains a moment of immense pride and gratitude. When I took over as Chairperson of the Adolescent Health Academy (2012–2015), I envisioned a structured, independent, and nationally recognized body that would sustain beyond individuals — an academy built on participation, accountability, and continuity. With the support of an exceptional team, we succeeded in getting AHA registered as a society in Gwalior, giving it a formal identity. Membership grew rapidly, *crossing 600 members across India* — including pediatricians, gynecologists, and psychologists — who shared a common passion for adolescent health.

We initiated city branches in several states including Delhi, Lucknow, Gwalior, Chennai, Pune, Hyderabad, Surat, and Bikaner, thus expanding AHA's footprint across the nation. During my tenure, we organized four consecutive national Adolescon conferences — in Goa, Pune, Ludhiana, and Mangalore — each one a step forward in academic excellence and collaboration.



Constitutional amendments were introduced in 2015 to align AHA with IAP guidelines, ensuring smoother elections and well-defined responsibilities for every office bearer. We framed Adolescon Guidelines and established a transparent system for awards, orations, and election procedures. Under our collective effort, AHA was recognized nationally, receiving the Second Best Chapter Award (2015) and later the Best Chapter Award (2016) at Pedicon, Hyderabad.



Beyond administration, my focus remained on capacity building. As National Convener and later Advisor for various IAP Presidential Action Plans — including Mission Kishore Uday, Difficult Adolescent Modules, Suicide Intervention Programs, and Mission School Uday — I had the privilege of training thousands of pediatricians, teachers, and students across India. Each session reaffirmed the importance of reaching adolescents with empathy, science, and a sense of shared responsibility.

Creating the Adolescence India Google Group in 2009 and later the Dr. Tuteja Talk Show in 2024 were ways to sustain communication and mentorship for pediatricians and parents beyond conferences. These platforms connected thousands and helped keep the dialogue on adolescent issues alive. Looking back, I feel grateful for the unwavering support of my colleagues, mentors, and students. Together, we turned a small chapter into a vibrant academy — one that continues to grow with every passing year.

My journey with AHA remains a testament to teamwork, perseverance, and the belief that when you work with purpose, institutions outlive individuals.

Silver Jubilee Chronicles

Journey and Birth towards IAP Adolescent chapter 2000



PROF SANGEETA YADAV

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Currently serving at HIMSR and HAHC, formerly Professor of Excellence and Head of Pediatrics at Maulana Azad Medical College, University of Delhi. A graduate of Lady Hardinge Medical College and Kalavati Saran Children's Hospital, with over four decades of teaching, research, and leadership in pediatric and adolescent health. A Fellow of the Indian Academy of Pediatrics (IAP, 2008), with 170+ publications and numerous research awards. Served as Vice President (2021) and Joint Secretary Liaison (2018–19) of IAP, and Chairperson of its Adolescent Health Academy. Founder member of both the Adolescent Chapter (2000) and the Indian Society of Pediatric and Adolescent Endocrinology.

I feel immensely honoured for the kind invite to share **my Journey related to the Vision and Mission for the Adolescent Health in this country**. I am herewith sharing the Milestones taken towards providing training not only for self but the Medical fraternity who were keen in providing services to the Adolescent Population of this great country. These are the Historical reflections of the past.

My tryst for Adolescent Health and passion for addressing the Adolescents concerns started way back in 1990 when **I started the Pediatric and Adolescent Endocrinology Clinic for the first time in the State of Delhi** in the Public Health sector from Maulana Azad Medical college and assoc L N Hospital complex.

I got further opportunity towards training myself both in the Pediatric Endocrinology and Adolescent Health when my name was nominated from the Ministry of Family Welfare and Health, Government of India for a WHO Fellowship program training in United States for 12 weeks in 1996. I received training in the premier Universities and best of Children's Hospitals while attending Pediatric Endocrinology Divisions and Adolescent Clinics at Philadelphia, Ann Arbor and Nashville and developed passion to work for the

Adolescents of this country.

On return in 1997 I was keen to take the Adolescent Health services forward in the set up.

Journey and Birth towards IAP Adolescent chapter 2000

I got the opportunity when I was elected in 1998 as Secretary Elect for IAP Delhi state. There and then it was decided to go ahead with the First Adolescent Conference in 2000 with Dr. T S Jain as the President of Delhi state. This conference for the first time brought all the National stalwarts of IAP Dr. M K C Nair, Dr. Swati Bhawe, Dr. Dilip Mukhrejje with keen interest and working for Adolescent Health in the country. This initiative was well supported by DELHI STATE Govt with the presence of Dr. A K Walia, as the Chief Guest, IAP Delhi state organizing team, UNICEF, NACO MoHFW, GOI and Delhi State. The 2 days of deliberations witnessed the galaxy of Adolescent health experts from across the Nation as Faculty from across various organizations working in Adolescent Health and attended by more than 200 Delegates from North and Central India to take the Mission of providing Adolescent Health Services forward at the turn of the century for Gen Z.



I was lucky enough to be part of the First Workshop on 2000- Participated in the 1st Workshop on Adolescent Care in Mumbai organized by Central IAP by Dr. Swati Bhawe as the President in 2000 supported by UNICEF and the stalwarts of IAP working in Adolescent Health across the country.

Hence the chapter of IAP Adolescent Health was begun with some of us as the Founder members. A task Force for Adolescent Health was made for 2000-2004 to initiate and implement the Adolescent Health services by the interested members.

Further, to bring the Adolescent Health services in the main stream a Workshop ACADEMIA ADOLESCENT was organized, at the IMA Annual Meet Academia 2000 supported by WHO, which brought all the stake holders from the various Departments in the Medical Colleges, NGOs and the Medical Fraternity to chart out how to organize and implement further.

In recognition towards the Initiation and taking the mission of Adolescent Health forward the IAP Delhi state received the Best Branch Award for 2000 for the first time IAP Delhi.



In 2002 Organized as a team member IAP ITPAH the first International Conference on Adolescent Health a weeklong program for Capacity Building of Pediatricians across the country for those interested in providing the Adolescent Health services and was attended by 150 Pediatricians.

In 2003-Participated and organized as team member the 1st Mental Health WS on Adolescent Health as IAP Delhi along with VIMHANS-Delhi.

Thereby, IAP Adolescent chapter became the Youngest and fastest growing chapter of IAP and received the best Chapter Award for 3 times under the leadership of Dr. Swati Bhawe madam and Dr. M KC Nair Sir and all the contributors who had the dream to work for the Adolescent Population which was being neglected in this country and there was an urgent need to address their issues.

Once again organized and conducted the ITPAH in 2004 and 2006 in Delhi to continue with the Training for Adolescent Health services with the support of Delhi State

In 2003-2004 actively participated and contributed towards the Capacity building Workshops for Adolescent Health organized by SHAN –WHO. In 2005 got trained in Capacity building WS by WHO on Life skills.

Attended and Participated in the IAAH Conferences 2002 in London and 2006 in Greece and presented papers.

These were followed by Conducting Workshops in many schools of Delhi for Adolescent Health. Contributed towards many scientific publications and in Adolescent Today. Conducted WS on RMNCH-A and RCH by GOI, Delhi State and WHO.

Conducted research and presented and published on Adolescent Health: parameters in schools, Risk taking behaviors, School stress, General health, Eating disorders, Violence and aggression, Obesity, T1DM, Thyroid, Growth and puberty, Metabolic syndrome etc. In 2006-2007 was elected as EB Member of IAP Adolescent Chapter.

Faculty and contributor for adolescent health programs of IAP and adolescent chapter like the Adolescent Friendly school initiative, Adolescent Office practice

Journey of and with AHA from-

In 2010 was Instrumental in contributions for registering as Adolescent Health Academy. Contributed towards various modules for training in Adolescent Health services like Difficult adolescent, Mission Kishore Uday I, II, Parenting 2016 etc. Organized Training Workshops regularly related to Adolescent Health in various IAP and Institutional Forums Adolescent Health, Adolescent Endocrinology, At risk adolescent Represented IAP at International forums of adolescent Health-Nepal, Singapore etc. in 2018



GBM of AHA at Adolescon 2018

Invited for Launch of Rastriya Kishore Swasthya Karykrama Jan 2014 as Official Invitee. Conducted workshops for RSKS Training programs. Worked closely with Adolescent Health division of MOHFW GOI.

In 2014-15 Chairperson Adolescent Health Academy Delhi and conducted training Workshops

Yes it was a very long journey of 18 years towards

2018 Chairperson Central Adolescent Health Academy. The vision was to create data with the Research on Physical and Mental Health GAP Initiative and modules related to Suicide prevention, Sports participation and prevention of Violence and aggression in the Adolescent age group. The basic ground work was done along with the Zonal EB members. Chief Organizing Chairperson for the National ADOLESCON 2018 a conference with a difference along with 4 Preconference workshops.

Once again attended and participated in the IAAH Conference in Delhi in 2017. Attended and participated in ITPAH in 2019 as part of the CME and Capacity building.

It was entirely a self-trained and experiential learning. Contributed towards Adolescent Health through Workshops, Symposiums, in every PEDICON and ADOLESCON.

This was the Journey and the milestones with IAP Adolescent Chapter and AHA till then, with satisfying achievements and working, therefore, never felt the challenges even though challenges were there. When one works with passion the challenges are overcome with the determination.



A lot was achieved towards the mission. Very many were trained and providing Adolescent Health services as Expert Clinicians.

Yes we certainly need to work more in the Community and with the Parents and families.



The IAP Adolescent health chapter and AHA has been spear heading as one of the largest Speciality Chapters of IAP with the leadership of its stalwarts and the dedicated team of Adolescent Health experts with the mission of Healthy Adolescents and Healthy India.

Silver Jubilee Chronicles

From Vision to Impact: My Journey with AHA



DR. PREETI M GALAGALI

Consultant Adolescent Health Specialist and Pediatrician

- IAAH Vice President Elect, South East Asia
- Vice President, South Zone, Indian Academy of Pediatrics
- Country: India
- IAHW (International Adolescent Health Week)
- IAAH (International Association for Adolescent Health)

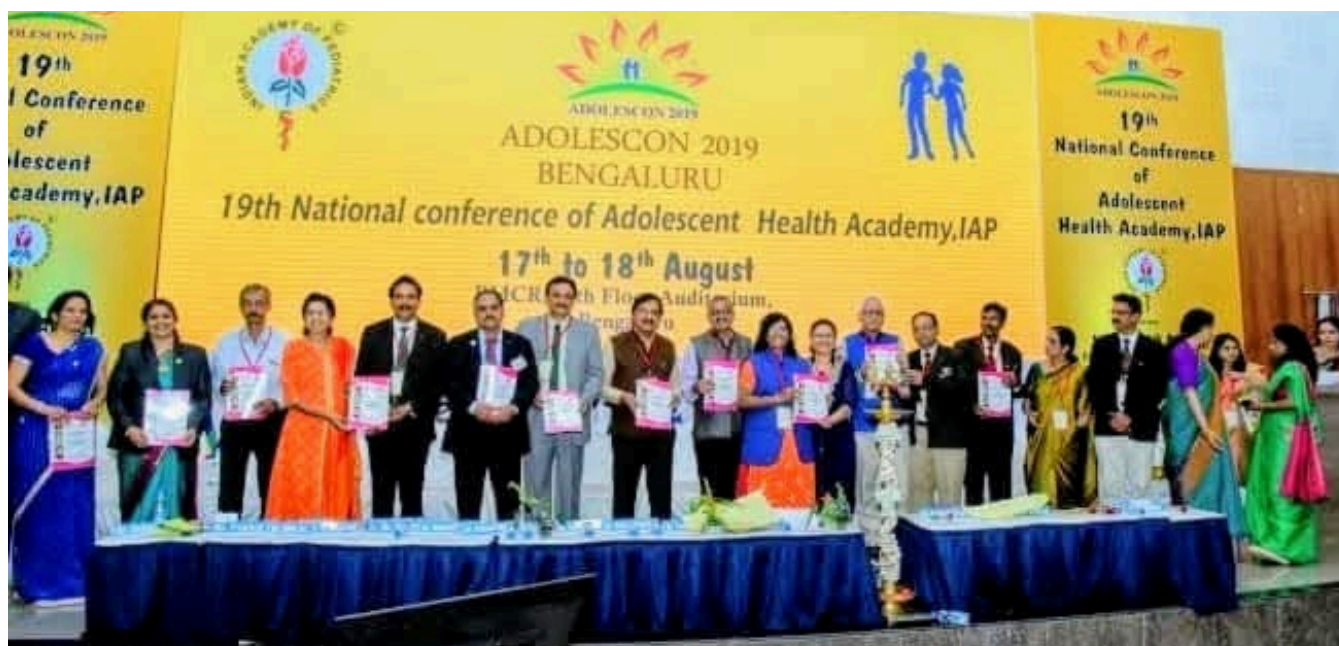
Vision : My vision at the start of the tenure was to develop AHA into a world class professional organisation. I planned to:

- Enhance capacity training of paediatricians in adolescent health through workshops and conferences, publications, guidelines, development of an interactive website and social media page.
- Conduct community health education programs for adolescents, teachers, parents, non-profit organisations and encourage media related publications and programs to spread awareness regarding the importance of adolescent health.
- Increase membership of AHA and form city/ district branches
- Make AHA a financially strong organisation

Journey with AHA

Opportunities : I received tremendous support from the executive board 2019- Dr. AS Chawla, Dr. Sangeeta Yadav, Dr. JC Garg, Dr. Prakash Arya, Dr. Harmesh Bains, Dr. Sushma Desai, Dr. Sonia Kanitkar, Dr. RN Sharma, Dr. Garima Saikia and from all AHA members to live my dream. We were fortunate that IAP leadership, Dr. Santosh Soans, Dr. Digant Shastri, Dr. Remesh Kumar and Team IAP EB included Mission Kishore Uday Program on Management of Teen Suicidal Behavior and Prevention under IAP Presidential Action Plans 2018-2019. We received invaluable guidance from AHA patrons and mentors throughout the year- Dr. MKC Nair, Dr. Swati Bhawe, Dr. CP Bansal, Dr. JS Tuteja, Dr. Piyush Gupta, Dr. Gnanamurthy N, Dr. Shubha Badami, Dr. Shivananda and Dr. Atul Kanikar.

Challenges : We faced a financial crunch in organising academic programs due to paucity of academic grants and sponsorships. CIAP sponsored nationwide MKU workshops helped us to overcome this liability without compromising on the quantity and quality of academic programs. This helped us to build awareness about holistic adolescent healthcare in clinical practice and community and increase AHA membership. The finances of AHA were strengthened and streamlined by astute budgetary planning by Dr. JC Garg, Secretary and Dr. PV Arya, Treasurer AHA 2019.



Launch of the 1st Online AHA Teachers Self Learning Module 17 August 2019

Realization of vision :

We could realize the vision by working together as a dedicated team in a mission mode. The following milestones were achieved in 2019:

- The first AHA and IAP adolescent mental health program on Teen Suicide Prevention was conducted under the aegis of the IAP Presidential Action Plans 2018-19 for paediatricians, adolescents, parents and teachers under the leadership of Dr. Atul Kanikar. It reached over 30000 stakeholders- adolescents, teachers, parents and paediatricians.
- AHA website was revived and re launched under the leadership of Dr. Amit Shah and Dr. Poonam Bhatia.
- AHA facebook page was revived under leadership of Dr. Piyali Bhattacharya

The first self-learning Teachers Module was launched and uploaded on the AHA website under leadership of Dr. Shubhada Khiwadkar, Dr. Swati Ghate, Dr. Nishikant Kotwal

- The first AHA journal was launched- the Indian Journal of Adolescent Medicine with myself, Dr. Chitra Dinakar, Dr. Amitha Rao and Dr. Jayshree K as editors and a fine editorial board.
- The first Indian Journal of Practical Pediatrics series on Adolescence was published.
- The AHA newsletter Adolescent Today was revived under the leadership of Dr. Ashok Banga and Dr. Usha Banga.
- We conducted a unique national adolescent conference-19th Adolescon at Bengaluru- high on academics and research with a national consultative meet on the first IAP guidelines on adolescent health and a fine preconference workshop on mental health by child and adolescent psychiatrists. For the 1st time in history of AHA, adolescents themselves inaugurated the conference and addressed the delegates, paper and case presentation competitions were part of the main conference. The conference was very well attended by over 450 delegates- the highest ever count of attendees then!
- The membership increased by 150 in 2019 - the highest ever increase in 1 year then!
- We reached out to over 45000 beneficiaries by conducting 220 branch activities and 217 individual activities- the maximum ever in 1 year then! AHA won the IAP Best Branch Award for its stellar performance.



National Consultative Meet to formulate 1st IAP guidelines on Adolescent Health
16 August 2019

Reflections- Present and Future

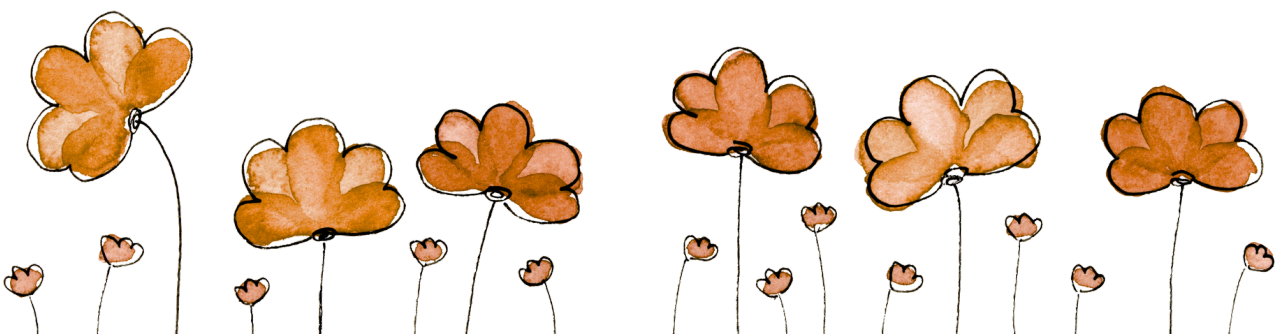
AHA has come a long way in 25 years in terms of membership and quality of academic and community programs. We have grown into a very strong professional body thanks to the dedicated and consistent work of IAPians over successive years. We need to do a lot more in establishing adolescent friendly health services/ clinics all over the country- safe places where adolescents could seek confidential and respectful healthcare.

The emerging challenges of climate change, food insecurity, use of digital devices and AI innovations, wars, conflicts, non-communicable diseases, mental and sexual and reproductive health issues in an evolving landscape of changing societal values, economic disparities and legal reforms will require AHA to raise its bar and think 'out of the box'. Interdisciplinary collaborations with health professionals, schools, parent groups, community leaders, government, non-profit organisations, media moguls, international professional organisations and meaningful engagement with adolescents themselves would advancing the agenda of adolescent well-being forward.



Mission Kishore Uday TOT Mumbai Jan 2019

Let's do it with enthusiasm, hope and innovations.
Wishing AHA and all of us- the vibrant AHA members- the very best
in this fascinating journey ahead!



Silver Jubilee Chronicles

Leading Through Challenges: Strengthening AHA During the Pandemic Year (2020)



DR. AJIT SINGH CHAWLA

Chairperson AHA 2020

Contact : E-mail: draschawla@gmail.com

Senior Paediatrician & Adolescent Health Expert Chairperson, Adolescent Health Academy (AHA) – 2020 Founder, Chawla Clinic, Ludhiana

Dr. Ajit Singh Chawla is a distinguished senior paediatrician and nationally recognized expert in adolescent health, with over three decades of clinical and academic excellence. Based in Ludhiana, he is the founder of Chawla Clinic, a trusted center for comprehensive pediatric and adolescent care.

It has been a matter of immense pride and privilege to be part of the Adolescent Health Academy (AHA) — a family of learned, warm, and committed professionals devoted to improving adolescent health and well-being across India.

I, along with my team, assumed responsibility in January 2020, with a clear vision to strengthen the AHA network, expand its academic footprint, and continue collaborative initiatives across the nation.

However, the unforeseen onset of the COVID-19 pandemic soon transformed the way we worked, taught, and connected. What could have been a year of pause instead became a year of purpose and innovation — as AHA embraced digital platforms to reach more professionals, adolescents, and parents than ever before.

AHA Team 2020

- Chairperson: Dr. Ajit Singh Chawla
- Secretary General: Dr. Sushma Desai
- Treasurer: Dr. Ashok Banga
- Past Chairperson (2019): Dr. Preeti Galagali

Executive Board Members:

- Dr. Nishikant Kotwal – West Zone
- Dr. Vijaya Rani – South Zone
- Dr. Swati Ghate – North Zone
- Dr. P. Deka – East Zone
- Dr. Poonam Bhatia- Central Zone

Vision and Objectives :

1. To address and streamline challenges within AHA through cooperation, coordination, and transparency.
2. To raise awareness about adolescent health at three levels:
 - Among adolescents
 - Among teachers, parents, and the community
 - Among pediatricians and healthcare professionals
3. To actively participate in national adolescent health programs and contribute expert recommendations to the Government.
4. To implement and promote “Awesome AYA”, the flagship project under the IAP Presidential Action Plan 2020, through all AHA branches.
5. To engage AHA in international adolescent health activities, including International Adolescent Health Week celebrations.
6. To celebrate Adolescent Week under the IAP Action Plan in November 2020.
7. To enhance digital presence and academic continuity through the AHA website and social media.
8. To revive AHA publications — Adolescent Today and Indian Journal of Adolescent Health.
9. To strengthen the membership drive and enhance active participation across India.

Journey of AHA 2020 : Our tenure began with enthusiasm through the North Zone AdolescCon 2020, held on 8–9 February 2020 at Ludhiana.

At Everest Public School, Ludhiana, separate training sessions were held for boys and girls on adolescent health. Parents and teachers participated in interactive workshops on Family Life Education, Parenting, and Life Skills Education.

A Workshop on “Awesome AYA” was conducted for pediatricians and postgraduate students, attended by around 80 delegates, with faculty including Dr. C.P. Bansal, Dr. J.S. Tuteja, Dr. Atul Kanikar, Dr. A.S. Chawla, Dr. H.S. Bains, and Dr. Sushma Desai.

A CME for pediatricians followed, covering vital topics such as pubertal changes, adolescent behaviour, substance use, sexuality, pornography, and non-communicable diseases.

Faculty included Drs. Harish Pemde, J.S. Tuteja, C.P. Bansal, Atul Kanikar, Alok Gupta, Ajit Singh Chawla, and H.S. Bains.

Adapting During the COVID-19 Pandemic: Soon after, the nationwide lockdown brought all physical gatherings to a halt. Yet, this challenge became an opportunity for transformation. AHA quickly shifted to the digital medium, conducting the majority of its programs virtually.

The Awesome AYA Programme, a three-pronged initiative involving adolescents, parents, teachers, and pediatricians, was rolled out online through zonal, state, and city branches.

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International Adolescent Week

Ensuring Our Youths Are Thriving, Not Just Surviving!



Introduction

Adolescence is a period of dynamic brain development in which the interaction with the social environment can shape the capabilities an individual takes forward into adult life and a time to reinforce a healthy lifestyle for preventing non-communicable diseases and managing chronic health conditions. It is a time where effective interventions can support their physical, cognitive, emotional, social, wellbeing which will form the foundation for health and wellbeing over the entire life course.

International adolescent health week

International adolescent health week (IAHW) is a global grass roots initiative for young people currently governed by the International Association for Adolescent health (IAAH). IAHW, founded by Dr. Laura Offutt started as a Teen Health Week in Philadelphia in 2016 very quickly becoming a global celebration in 2018 and has continued to grow over the years to involve many more organisations and partners. Previously celebrated annually in March, it is now celebrated in October as a health campaign of dynamic participatory events aimed at inspiring adolescents and their communities to advocate for a successful transition into adulthood.

IAHW has three main goals of increasing recognition of the unique health issues facing adolescents worldwide by both adults and adolescents, increasing the engagement of

adolescents in their own health decisions and facilitating events worldwide that highlight adolescent concerns and ways to address them. The theme changes from year to year focusing on different aspects of care.



The theme for 2025 celebrations is **“Thriving Inside and Out: Strengthening Adolescent Physical and Mental Health”** and focuses on highlighting the importance of a holistic approach towards caring for young people in all settings including not limited to health care establishments and schools. The Official colour of **IAHW** is lime green, which represents health, happiness, and the high energy and passion of adolescents.

Over the course of the week, activities mainly focus on community specific adolescent health issues, including youth

focused policies addressing healthy and safe communities, socioeconomic determinants of health, adolescents’ rights, and developing programs to bolster regional and local implementation.

Youth Ambassador Program

In 2020, the IAHW special interest group launched the youth ambassadors’ (YA) program initiative which has had tremendous success. The youth ambassador program has steadily grown over the years from 185 applicant from 18 countries in 2020, 250 applicants from 44 countries in 2021 to 531 applications from 47 countries in 2025. The program was initially open to 13-22 year old but based on feedback now open to 16-24 year olds. Youth ambassadors who perform exceptionally well were also invited to participate for a second year in more senior mentorship roles.

The selected Youth Ambassadors were charged with suggesting a broad theme for IAHW 2021 celebrations focusing on health topics affecting teenagers. They participate in monthly interactive meetings with IAHW SIG senior leadership who provide guidance through preparation for and the celebration of IAHW.

Participation :

IAHW encourages participations from individuals or any organisations who deal with young people including but not limited to parents, health care professionals, schools, hospitals, charities and community centres. IAHW can be celebrated with special events, social media campaigns, health and physical education classes, advocacy work, community events, sponsorship events, competitions, school campaigns and other events.

IAP, AHA and IAHW

IAP and AHA have participated enthusiastically and organised over 200 IAHW activities every year since its inception.

IAP and AHA have also been at the forefront of IAHW leadership. Dr. Swati Bhawe, Past President IAP and Past Chairperson AHA was among the first global leaders of IAHW 2018-2020, followed by Dr. Preeti Galagali, Past Chairperson AHA from 2020 to 2023.

Dr. Samir Shah is currently the lead of IAHW Special Interest Group at Society of Adolescent Health and Medicine (SAHM) and along with Dr. Preeti Galagali is a member of the IAHW committee led by Dr. Ngozi Oketah.

Over the years, during IAHW, IAP and AHA in partnership with youth have organised adolescent health CMEs, conferences, yoga sessions, webinars, youth talks, painting, poster making and elocution contests, interactive sessions with government officials, policy makers, community health workers, parents, teachers and adolescents themselves and published articles focussing on adolescent health concerns. Dr. Preeti Galagali has been a mentor for six IAHW Youth Ambassadors from India and has successfully guided them to conduct various online, school and community activities.

Conclusion

Participation in IAHW sends out strong messages of support to young people. It focuses on small actions by many people to create a change globally. The more people that are involved the stronger the impact made to benefit adolescents. The effects of poor health care can last well into the future and have grave consequences for the individual. This investment not only bring benefits now but also for the next generation and decades to come.

Teen Break Ups & Resilience-Heal Thyself With Love & Care



DR. AMOG SHAHANE

Practising Paediatrician & Adolescent health expert

At Saanvi Children's hospital Kharghar Navi Mumbai

Consultant at Sri Satya Sai Sanjeevaani cardiac hospital Kharghar Navi Mumbai

Practising since the last 18 years. Keen interest in Adolescent medicine & community awareness programs for both kids & parents.



“Not All Storms Come To Disrupt Your Life. Some Come To Clear Your Path.” - Paulo Coelho

This quote sounds quite positive in the real sense, but when it comes to a teen who has just had a break up, these words will seem like the unkindest thing to say to them.

And witnessing the number of teens going through such emotional upheavals in their life at a tender age, makes one realize how totally unprepared their highly emotionally wired brain is to such distressing situations.

There is no precise national statistic for the incidence of teen breakups in India, however reports and anecdotal evidence indicate that teen relationships and subsequent breakups are a common part of adolescence in India, with social media contributing to increased social pressure and potential for more frequent, short-term relationships that often end in breakups.

Experiencing teenage love is part of the process of growing up and identity formation and a sense of self, including gender identity and sexual orientation. The renowned child development psychologist Erik Erikson described teenage love as a form of self-development as opposed to true love and intimacy. Teens tumble headfirst into love due to multiple factors including hormonal surges, companionship and a sense of belonging, social and peer influence, easy communication, online interactions and adventure and

thrill-seeking sensation of being ‘head over heels’ in love!!



But, the flipside to this is rise in teen breakups too due to factors like heightened emotional immaturity from increased romantic exploration in emerging childhood, increased communication via social media fostering drama and comparison, differing expectations and goals in relationships, and underlying pressures and anxieties contributing to relationship instability.

So, what happens inside a teen’s brain after a break up!? They feel shattered and believe that they will never find love again. This would seem like an extreme reaction to us adults with our fully developed prefrontal cortex, but teens have an element of egocentrism, which is a perfectly natural, developmental process during the teenage years. Cognitively, teens have this idea that the world revolves around them, that all of their thoughts are unique to them, and that subsequently, no one can possibly understand them. We call this last trait the personal fable. So, all the stories about your own teen angst, may not completely resonate with them, and it’s perfectly normal for that to be the case.

Breakups during teen years are frequently associated with psychological distress, including heightened sadness, anxiety, and diminished self-worth. Research indicates that teens and young adults who experience relationship dissolution often engage in rumination and self-doubt, which can prolong negative emotional states and increase vulnerability to depression. Among these, rumination, defined as the repetitive and passive focus on negative emotions related to the break up, has been strongly associated with prolonged emotional distress and impaired psychological adjustment.

So, what can be done to help a teen recover from a break up?

Coping strategies play a crucial role in shaping post-breakup recovery. These strategies can be broadly categorized into adaptive (e.g. problem-solving, positive reframing) and maladaptive (e.g. avoidance, emotional disengagement) responses. While problem-focused coping is linked to positive adjustment, avoidance strategies, such as withdrawal, denial, or distraction, may prolong emotional distress by preventing effective emotional processing.

Below are some ideas for how an adult can help a teen through this difficult time:

1.Validation: Teen heartbreak is just as real, raw, and stressful for them as breakups are for an adult. Saying things like, “I know you are really hurting right now” helps to validate their feelings and make them feel heard.

2.Active listening: Teens may just want to vent in order to get the emotions out. Teen resilience is built upon overcoming challenges, and that resilience is only heightened when we know we have our parents to hug and love us as we muddle our way through.

3.Distraction: Encourage them to spend time with supportive friends, to spend time outdoors, to get involved in sports or other activities, and to focus on self-care and growth. Help them see that there is a life beyond the breakup.

4.Help make social media decisions: This one is a tough one. On one hand, teens can find support and validation that they are not alone when interacting on social media after a break up. But constant images of their ex or of other seemingly happy relationships might be a blow to their self-worth. Plus, they also might need help navigating the decision to end the friendship with their ex on social media channels. Be gentle with them as you discuss options that you think might be the healthiest.

5.Watch for signs of depression or anxiety. Sadness and other negative emotions are normal when one experiences heartbreak, but if the teen continues to show signs of extreme sadness or worry, or if these emotions are getting in the way of daily functioning, seek help from a licensed professional.

Strategies for Emotional Well-being & development of resilience post break up:

Dealing with separation can be one of the most challenging experiences in life, but emotional resilience can serve as a powerful tool to navigate through the tumultuous journey of healing and recovery. Here's how to harness emotional resilience in dealing with separation:

1. Acknowledge Your Feelings: Emotional resilience begins with acknowledging and accepting your emotions. Allow yourself to feel the pain, sadness, anger, or any other emotions that arise from the separation. Avoid suppressing or denying your feelings, as this can hinder the healing process.

2. Practice Self-Compassion: Treat yourself with kindness and compassion during this difficult time. Recognize that experiencing pain and grief after a separation is normal and natural. Offer yourself the same level of understanding and support that you would offer to a friend in a similar situation.

3. Seek Support: Talking to someone you trust can provide validation, comfort, and perspective. Surround yourself with a supportive network of individuals who can offer empathy, encouragement, and practical assistance as you navigate through the challenges of separation.

4. Focus on Self-Care: Prioritize self-care activities that nurture your physical health, and help in emotional control, and mental well-being. Engage in activities that bring you joy, relaxation, and a sense of fulfillment, whether it's spending time in nature, practicing mindfulness, exercising, or pursuing hobbies and interests.

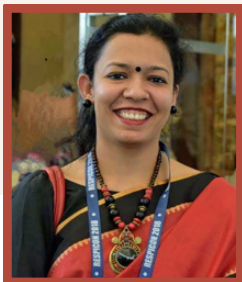
5. Cultivate Resilience: Cultivate resilience by adopting a growth mindset and reframing the narrative around separation. Instead of viewing the end of the relationship as a failure, see it as an opportunity for personal growth, self-discovery, and transformation. Recognize that setbacks are temporary and that you have the strength and resilience to overcome adversity.

6. Set Boundaries: Establish clear boundaries with your ex-partner to protect your emotional well-being and facilitate the healing process. Limit contact, if necessary, especially in the early stages of separation, to allow yourself space and time to process your emotions without unnecessary triggers or conflicts.



I would like to end with a quote by one of the most influential people in my lives, Maya Angelou who quotes: *“I can be changed by what happens to me, but I refuse to be reduced by it!!!”*

Helping Teens Build Resilience: Coping with Exam Failures and Competition Rejections



DR. ISHA SINGH

Pediatrician, Neonatologist, Child Health Specialist

Highly regarded pediatrician and neonatologist based in Indore, Madhya Pradesh, known for her compassionate and practical approach to child healthcare. She runs Kidz Clinic in Mahalaxmi Nagar, offering specialized services for infants, children, and adolescents, including newborn care, immunizations, allergy management, and adolescent health support. With an MBBS and a Diploma in Child Health from Pt. Jawahar Lal Nehru Medical College, Raipur, Dr. Singh brings over a decade of experience to her practice. She is a member of the Indian Academy of Paediatrics and is praised by parents for her gentle demeanor, clean and kid-friendly clinic, and her commitment to avoiding unnecessary medications.

Adolescence is a critical stage where identity, self-esteem, and coping mechanisms are actively shaped. Academic pressure, competitive environments, and cultural expectations often amplify the stress teenagers experience when they face exam failures or rejections in competitions. For many, these setbacks can trigger anxiety, self-doubt, or withdrawal from future challenges. As specialists working with adolescents, it is essential to remind both young people and their families that failure is not a final verdict but a powerful teacher. The skill that determines how effectively teenagers cope with setbacks is resilience—the ability to adapt, recover, and grow stronger in the face of challenges. Resilience is not about denying emotional pain or dismissing struggles. Instead, it empowers adolescents to process failure, learn from it, and reframe challenges as opportunities for growth.

Why Resilience Matters for Adolescents

- **Academics:** A student who performs poorly in mathematics may either give up or, with resilience, analyze mistakes, adopt new study strategies, and improve gradually.
- **Competitions:** A teenager who loses a debate or sports trial can, with resilience, channel feedback into practice and return with increased confidence.

Without resilience, adolescents risk internalizing failure, leading to avoidance behaviors and lowered self-worth. With resilience, they develop perseverance, emotional regulation, and problem-solving skills that extend far beyond academic and extracurricular contexts.

Practical Strategies to Foster Resilience in Teens

1. Reframe Failure as Feedback

Encouraging a growth mindset helps teens view mistakes as stepping stones.

- Case: A teen who lost an art competition discovered judges valued creativity over technique. By experimenting with new styles, she later earned recognition.
- Technique: Encourage adolescents to journal one failure, reflect on lessons learned, and identify one action step for improvement.

2. Support Emotional Regulation

Adolescents often experience intense emotions post-failure—shame, anger, or sadness. Teaching regulation skills prevents emotional overwhelm.

- Case: A boy rejected from the cricket team used journaling and parental support to process his disappointment, then improved his fitness with coaching.
- Exercise: Introduce calming strategies like “4-7-8” breathing or mindfulness practices during counseling sessions.

3. Strengthen Social Support Systems

Resilient adolescents rarely recover in isolation. Strong bonds with family, peers, and mentors buffer against setbacks.

- Case: A student struggling in chemistry regained confidence when reminded of her strengths in biology and supported by teachers to retry.
- Exercise: Have adolescents identify three trusted individuals they can approach during low moments—forming a “resilience circle.”

4. Cultivate Problem-Solving Skills

Helping teens shift from “Why me?” to “What’s next?” builds agency.

- Case: A student excluded from a play improved his voice projection and was cast the following year.
- Technique: Encourage brainstorming of three possible solutions whenever a setback occurs.

5. Reinforce Small Wins

Gradual progress builds confidence and reduces the fear of repeated failure.

- Case: A teen struggling in math regained motivation by practicing five sums daily, steadily improving.

6. Encourage Positive Self-Talk & Visualization

Internal dialogue strongly impacts resilience.

- Case: A music student rehearsed affirmations and visualization before an audition, which improved performance confidence.
- Exercise: Recommend mirror affirmations such as: “I learn from mistakes and grow stronger each time.”

7. Highlight the Bigger Picture

Exposure to role models normalizes setbacks and teaches persistence.

- Case: Dr. A.P.J. Abdul Kalam’s rejection as a pilot but later rise as India’s “Missile Man” illustrates resilience in action.
- Exercise: Share biographies of achievers who overcame rejection, prompting discussion on takeaways for the adolescent.

Role of Parents and Caregivers

Parental influence remains pivotal in resilience-building. Adolescents mirror adult coping styles, making it vital that parents:

- Avoid harsh criticism or overprotection after failures.
- Praise effort, persistence, and adaptability.
- Provide emotional validation before offering solutions.
- Model resilience by sharing their own setbacks and growth stories.

Conclusion

In today’s competitive landscape, exam failures and competition rejections are inevitable experiences for teenagers. What determines long-term success is not the absence of failure, but the presence of resilience.

For adolescent specialists, the goal is to equip teens with tools to process emotions, extract learning, and bounce back with renewed confidence. Resilience does not erase pain—it transforms it into growth.

By fostering resilience, we empower the next generation not only to achieve academic and extracurricular milestones but also to develop emotional strength and wisdom that will serve them throughout life.

Case Discussion : Building Resilience In A Teenager



DR. JAYASHREE SHIWALKAR

Developmental Pediatrician , Child and Adolescent Counsellor

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She is the director of Child Development and Activity Center. She has been the Ex Member State Advisory Committee, Govt. of Maharashtra and Ex President of Child Welfare Committee, Nagpur. Dr. Shiwalkar has conducted several workshops for students, parents and teachers and written numerous articles on Child Health and Child Development. She is the Recipient of Best Branch Award as President AHA Nagpur 2019, Nari Samman..Nagpur Mahanagar Palika, Woman Achiever...Madhav Netralaya.



Ishika, 13 yrs old student came with h/o not going to school after covid period. Previously as well she was not very keen for school. She had normal intelligence and was interested in playing badminton. Refusal to school had led to family conflicts with lot of fighting episodes. She came from affluent family with both parents working. Her behaviour was aggressive, non co operative and with occasional suicidal threats. Her screen time was more than 4 hrs a day.

After HEADSSS and initial sessions, the reason of her behaviour was diagnosed. She had developed Social Anxiety and going to school made her nervous and stressful. She was comfortable with selected friends at badminton.

Therapy programme was planned for Ishika which included..

Regular counselling –to develop coping skills

Behavioural therapy—to manage aggressive behaviour ,anger episodes

Remedial programme—to cope up with academic issues (as she had missed lot of syllabus)

School management—she was not attending school, hence co ordination with school m/m to promote her to next class. For her tenth, she was enrolled as outside candidate



Family therapy—parents counselling and training to deal with her tantrums at home

In due course, Ishika managed to cope up academically. Life skills training was useful to deal with anger and aggression. Her screen time and content were gradually monitored by parents.

Ishika completed her std tenth and now taken admission in junior college. She is attending college and has developed friendship with small group of friends.

At present...she still has anxiety episodes, but has learned to be self aware and take counselling

She is not comfortable with guests coming to her house, but has learned to be resilient and manage it.

College time and higher studies needs lot of social activities and exposure. She will have to continue therapy for a while, so that her academic life does not suffer.

Conclusion

Social anxiety is fairly common, but unrecognized problem in adolescents. This can lead to stress, depression and suicidal tendencies, if not recognized and managed timely.

Counselling and REBT are important tools to manage anxiety. But it needs to be supplemented with Remedial Programme and family therapy.

Academic success helps teenager to cope up and improve self esteem. Medicines were not used here, but in severe anxiety role of medicine as well as opinion of adolescent friendly psychiatrist is advisable.

Parent & Teen Narratives

Inculcating Resilience in Teens

How does it help in coping with stress and adverse situations



RAKHI CHAWLA

Founder, Ed3D – MathX | FutureX | ParentX

Rakhi Chawla is the Founder of Ed3D, home to MathX, FutureX, and ParentX, offering transformative programs that blend academic excellence with emotional intelligence and future-ready mindsets. An IIT Delhi alumna (M. Tech, Computers) and former corporate professional, she is a Global Math Ambassador and author of experiential math books. Rakhi empowers students, parents, and educators to move beyond control-based systems and raise resilient, connected learners in today's rapidly evolving world.

Take a deep breath before you begin.

Because this isn't another checklist on how to build resilience in teens. It's not a set of hacks, or a motivational pep talk, or a self-help pamphlet disguised as science.

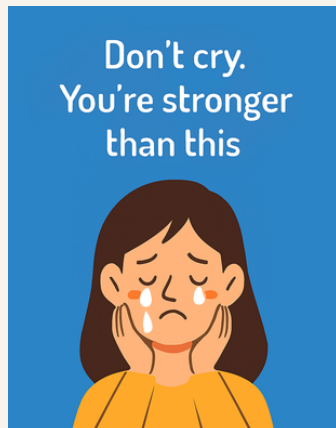
This is a mirror. For you.

We all want our children to thrive. To be strong, calm, and confident. To be able to handle failure, rejection, comparison, heartbreak, pressure. We want them to cope better than we ever could. But how do we teach our children something we're still trying to understand? Most of us weren't raised to be resilient. We were raised to conform. To please. To perform. We were rewarded for obedience, not for authenticity. Punished for mistakes, not supported through them. Told to suppress, not to feel.

And now, we're raising teenagers in a world that is loud, fast, and always-on. Teenagers today are not just growing up; they're growing up online. Their self-worth is measured in likes. Their success is filtered. Their failures are quietly buried. They are constantly exposed to curated perfection on social media, in global culture, and in peer groups. The dopamine rush from instant validation has replaced the deeper satisfaction of long-term effort. And while they scroll endlessly, we too are caught in a parallel loop of distraction, deadlines, and digital numbness.

Quick commerce delivers everything in ten minutes except patience.

Busy parents, exhausted by their own survival, try to compensate with more things, more holidays, and more quick fixes. But under the surface of weekend brunches and family selfies often lies an emotional gap. The deep eye contact, the uninterrupted listening, and the space where a child's full truth is allowed to unfold are often missing. And in this shallow overscheduling and under-connecting, resilience has little room to root.



In the face of all this, even the most well-meaning parents often fall into patterns that are born from love, but land as pressure:

"Don't cry. You're stronger than this."

"You think this is stress? Wait till real life hits."

"Just ignore it. Why are you so sensitive?"

"I've given you everything. What's there to be anxious about?"

"Why can't you be more like your sibling/cousin/friend?"

"Be grateful. You have no reason to feel this way."

Each of these statements comes from care. But they teach the teen to hide. To compress. To self-silence.

They learn: If I'm hurting, I must hide it.

If I'm scared, I must pretend.

If I'm struggling, I must perform.

This is not resilience. This is repression. And over time, it breaks more than it builds.

Real resilience comes from being allowed to feel everything without being shamed or hurried through it.

It comes from being allowed to fail and still be deeply loved.

It comes from being taught how to regulate emotions, not suppress them.

It comes from watching parents model calm, not demand perfection.



And it also comes from walking the tough paths of real life where choices and values are tested, not avoided. I remember a recent, very real moment with my own teen son. He came back from a gathering and shared that some of his peers were with substances vaping, alcohol, smoke.

He wasn't part of it, but he was watching. The beginning of a world that would test his values, not just his academics.

And I did not say: “You must stop being friends with them.”

Because the truth is, in the real world, our children will meet all kinds of people. They will walk into college dorms, parties, workplaces, and relationships where the line between right and wrong won't be clearly marked. They will be surrounded by choices we cannot always control. So instead, I said this: ***“Your values are not about who you reject or accept. They're about who you choose to be regardless of who is around.*** You cannot make friends based on what others eat, drink, wear, or post. What matters is what you carry inside. What you are rooted in. And whether your decisions come from your core or from a need to fit in.” Because fitting in is the opposite of resilience. It dilutes your truth for temporary acceptance. And truthfully, substance use in teens is often not about rebellion. It's about a quiet longing to belong. And if we respond to that with fear or control, we push them further away. We create shame. We create secrecy. We don't build strength we build walls. But if we can listen. If we can stay open. If we can ground them in the deep belief that they are already enough then we give them something extraordinary.

We give them the permission to choose from within.

That is resilience.

Not the ability to say “no” out of fear. But the power to say “yes” to their values.

And that ability doesn't come from one conversation. It comes from many.

It comes from space. Repetition. Reflection. Courage.

It comes from living those values yourself, even when it's hard.

It comes from letting your child see you pause, struggle, repair, and reflect.

Every time they watch you walk your truth, they are learning how to walk theirs.

You don't build resilience by giving lectures. You build it by giving space. By letting them return to their own voice again until that voice is louder than the noise outside.

This is what I try to do in my home, not once, but as a rhythm. A ritual. A way of life.

Because resilience is not a weekend lesson. It's a slow, sacred muscle that gets built through time, presence, and lived truth.

It is the most precious gift we can give our teens not to protect them from the world, but to prepare them to meet it with clarity, compassion, and courage. And that journey starts not with them but with us.

I'm Growing Up While You're Still Figuring Out How to Raise Me *A Teen's View on Resilience, Pressure, and the Confusing World Adults Created*



SHABD SATSANGI

16-year-old s/o Rakhi Chawala

A 16-year-old student, writer, observer, and voice for Gen Z teenagers navigating the contradictions of today's world. With a background in Model UN, creative expression, and emotional intelligence conversations with his mother (Rakhi Chawla), he shares raw, real reflections that represent what many teens think but rarely get to say out loud.

I've often been told by teachers, relatives, **"You have such a sorted life. Great exposure. You're doing well."** And I don't disagree.

But if I could speak without being interrupted, I'd say this: **I'm not here to perform. I'm here to understand my life.**

And that life, like most teens I know, is layered, confusing, and full of questions we're expected to answer before we're even ready.

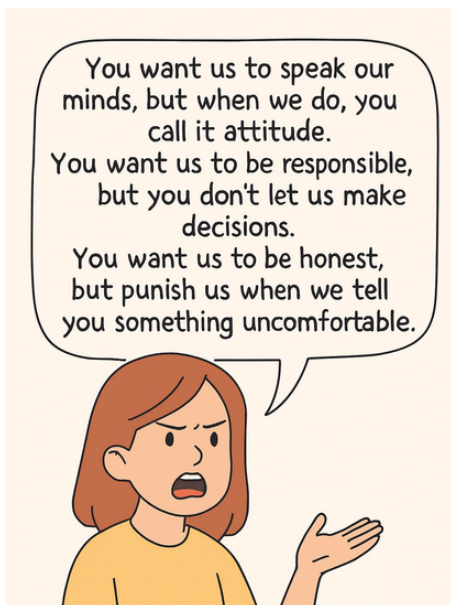
We're growing up in a world where *nothing makes sense and everything is fast*. We're expected to be **"resilient,"** but no one really shows us how especially **not when the adults around us are still figuring out how to raise us based on their moods, fears, or doubts.**

I've watched friends silently break under pressure, smile in front of parents but cry in the washroom. I've been in rooms where one child hides, while another is too scared. And both are craving the same thing: *a space where they can just be without judgment or control.*

Let me tell you what it's like from our side.

Authoritarian parenting is like walking on glass.

We're not *taught how to think*. We're *trained how to obey*.



*You want us to speak our minds, but
when we do, you call it attitude.*

*You want us to be responsible, but you
don't let us make decisions.*

*You want us to be honest, but punish
us when we tell you something
uncomfortable.*

One friend told me, “I can never tell my dad what I’m actually feeling. I just nod and say ‘yes’ to everything.”

*That’s not respect. That’s
fear dressed up as discipline.*



Helicopter parenting?

Some of us can’t even breathe without someone checking, tracking, or correcting us.

“You’re too young to decide.”

“You’ll ruin your future.”

“This is not how we raised you.”

But if we're too young to choose, how are we old enough to carry your expectations?

And then there are the busy parents.

The ones who overcompensate by overgiving.

The latest phone. The coolest holiday. The extra pocket money.

And we’re grateful, yes. But we’re also confused.

Because sometimes, all we want is for you to look at us without a screen between us.

A friend of mine whose parents are divorced said something that stayed with me:

“My parents love me, but they also love proving to each other who’s the better one. So I end up with double the gifts and half the presence.”

We sense everything.

Even if the house is intact, the energy sometimes isn't.

We see when parents are just roommates.

We see when one parent avoids the other.

We see when we're being used as the excuse or the ego boost.

Then there's school the place that tells us *we're preparing for life but never teaches us how to actually live.*

We memorize definitions but have no clue how to regulate our emotions.

We learn trigonometry but not how to handle heartbreak.

We sit through eight hours of classes that rarely ask us what we care about.

We're told to perform, produce, and participate but rarely, to pause.

And parents? Many of you are no different.



Social media? It's both our escape and our enemy.

Some adults think the solution is to just ban it. Take the phone away. Delete the app. Lock it down.

But that's not resilience. That's avoidance.

We don't need to quit the world to be strong. We need to learn how to be in the world without losing ourselves.

I'm on social media. I see the influencers, the edits, the fake lives.

But I've also learned to scroll without absorbing everything.

To watch without comparison.

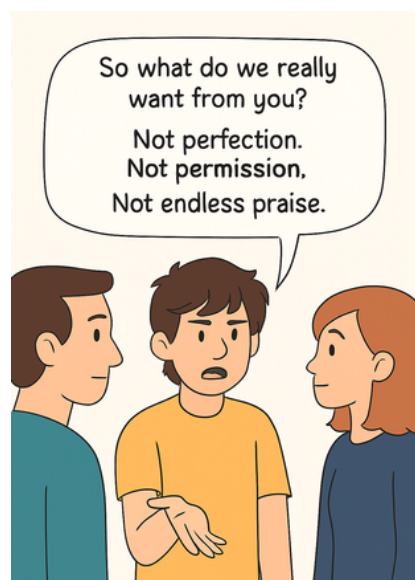
To post without attaching my worth.

Not because I'm better than anyone.

But because at home, I've been reminded that I don't have to belong everywhere. I just have to belong to myself.

It's not easy balancing different statuses either. Some of my friends come in Audis. Some eat organic food and travel to Europe. We all sit in the same classroom. We all have to act like we're the same. **But inside, we're not. We're carrying different fears, pressures, and privileges. To not let money become a measure of worth.**

To learn how to stay kind, stay grounded, and never humiliate anyone for where they come from.



We want to be seen for who we are,
not who you want us to be.
We want honesty not sugary speeches,
but honest presence.
We want safe spaces where we can say: "I messed up"
and not be destroyed for it.
Where we can say: "I'm scared"
and not be told to grow up.
Where we can say: "I'm not okay"
and not be dismissed.

Because the truth is, we are trying. More than you know.

We're navigating a world you didn't grow up in.

One with dopamine loops, cancel culture, AI apps, academic burnout, and anxiety while also dealing with our changing bodies, friendships, hormones, and heartbreaks.

We're not weak.

We're just tired of being treated like we're either superhumans or spoiled.

We don't need to be shielded from life.

We need to be prepared for it with values, not fear.

With presence, not pressure.

With love, not conditions.

That's how you help us build resilience. Not by demanding it. But by embodying it.

We are watching you. Every pause. Every repair. Every choice.

We learn not just by what you say, but by who you are when things get hard.

So please don't tell us to toughen up.

Show us how to soften without breaking.

That's when we'll stop pretending.

That's when we'll finally feel okay being ourselves.

Thriving Inside and Out - Strengthening Adolescents' Physical and Mental Health



SANJANA PB

Youth Ambassador of India,

She is a medical student at The Oxford Medical College, Bengaluru, and a multifaceted youth leader with experience in technology, writing, research, and social advocacy. Her academic focus reflects a deep commitment to adolescent health, public awareness, and community engagement. As a medical student, she combines clinical learning with real-world activism, making her a standout figure in youth health leadership.

Adolescence is described as a dynamic phase of growth, marking the delicate transition between childhood to adulthood in an individual's life. During this period, young people experience a myriad of profound physical and emotional changes, such as rapid physical growth, hormonal changes, evolving social roles, and the search for identity. Navigating through these changes is rarely easy, especially in the early formative years. Yet it plays a defining role in one's life since it shapes lifelong health and vitality. This is precisely why adolescent health is a key topic of discussion in the healthcare atmosphere.

Adolescent health is broadly discussed under two umbrella categories: physical health and mental health.

Every other aspect of development rests on the adolescents' physical health. Although strengthening one's physical health mainly focuses on avoiding illnesses that compromise the quality of life of an individual, it is not limited to this. It is also about creating space for adolescents to feel energetic, capable, and confident in their bodies. Dismantling stigma around topics such as body changes, menstruation, and sexual health also plays a decisive role by eliminating shame in adolescents who deserve to seek help in the areas mentioned above.

Routine health check-ups and prescribed vaccinations work as preventative care that ensures protection against several diseases, while awareness and access to reliable health-

related sources ensure that adolescents make informed choices. However, access to even basic amenities such as nutritious food, adequate sleep and exercise, and the availability of sanitary and menstrual products remains a luxury for many adolescents to this day. Establishing equity in access to healthcare and basic resources should thus be one of the top-most priorities of governments and organizations worldwide without question.

The changes that occur in the adolescent mind are often overlooked since they are not physically noticeable. Adolescents have to manage and deal with academic pressure, social expectations, identity struggles, anxiety, self-doubt, and the silent weight of comparison with their peers. Encouraging self-compassion amongst adolescents, providing them with safe spaces for expression, ensuring access to counseling support when needed, or even listening without judgment, can be a few steps we could take towards making them mentally fit.



Physical and mental health of adolescents are not separate entities, as they might seem to be; they are interdependent on each other. The mind and body simply do not coexist, but they shape each other. Failing to upkeep either one of them can result in the worsening of the other. Both are equally significant to bringing about the holistic development of an adolescent, and hence they should be treated as such.

This is the core objective of the International Adolescent Health Week (IAHW) initiative of 2025, with this year's theme being “Thriving Inside and Out - Strengthening Adolescents’ Physical and Mental Health”. We are intentional in using the word “thrive” because our goal extends beyond wanting adolescents to merely survive and get by. We envision ensuring that they are provided access to the right resources, opportunities, and support systems that enable them to flourish and unlock their full potential. By raising awareness and promoting action, our mission is to empower adolescents to prioritize taking good care of both their physical and mental health without neglecting either of them— laying the foundation for a healthier and happier generation, and a better tomorrow.

Radical Therapy in Adolescents: Building Resilience for a Thriving Future



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Abstract : Adolescence is marked by rapid physical, emotional, and social changes that can make it a period of vulnerability. Yet, it is also a unique window to build resilience — the capacity to recover, adapt, and thrive despite challenges. This article outlines the concept of radical therapy in adolescents: a strength-focused approach that emphasizes emotional regulation, cognitive restructuring, positive peer and family engagement, and supportive school environments. Key therapeutic tools are presented to help adolescents thrive “inside out.”

Introduction : Adolescence is often described as a time of “storm and stress” — a period when rapid biological, emotional, and social changes converge to shape identity and future well-being. Yet, beyond the turbulence lies a remarkable opportunity: the chance to build resilience. Resilience is the inner strength that enables young people not just to withstand challenges but to grow through them.

As adolescent health specialists, we see firsthand the pressures teens navigate today. The digital age brings unprecedented connectivity but also amplifies competition, comparison, and exposure to curated perfection. Add to this the weight of school expectations, peer influence, and parental aspirations, and adolescents can feel overwhelmed. Anxiety, depression, substance use, eating disorders, and even physical illnesses such as obesity and hypertension may follow.

In this context, “radical therapy” is not about extreme interventions but a radical shift in perspective — moving beyond problem-solving alone to cultivating strengths and

building resilience from the inside out.

Understanding Resilience in Teens : Resilience is not simply the absence of illness. It is the capacity to recover, adapt, and grow stronger through adversity. For adolescents, resilience includes:

- Managing exam stress without avoidance or phobia.
- Navigating peer pressure without losing values or self-esteem.
- Facing career dilemmas with self-awareness rather than fear.
- Maintaining mental health in the face of setbacks.
- Resilient adolescents cultivate the belief that they have the skills and support to shape their future.

The Pillars of Radical Therapy

1. Emotional Regulation & Mindfulness

Teens often struggle to process intense emotions. Radical therapy introduces mindfulness, journaling, breathing exercises, and cognitive reframing to regulate anxiety, anger, or sadness constructively.

2. Cognitive–Behavioral Tools

Negative thought patterns drive exam phobia, low confidence, and hopelessness. Cognitive restructuring, problem-solving therapy, and resilience journaling help adolescents reframe failures as learning opportunities and replace self-criticism with self-compassion.

3. Identity & Career Guidance

Conflicts between parental aspirations and a teen’s interests are common. Through aptitude testing, counseling, and open dialogue, adolescents can explore their identity and career paths with clarity, reducing rebellion or internalized stress.

4. Healthy Peer Influence

Peer pressure can be protective when harnessed positively. Radical therapy encourages peer mentorship, group activities, sports, arts, and community service to make healthy choices socially rewarding.

5. Family Engagement

Parents are not bystanders in resilience building. Counseling families to balance expectations with empathy fosters understanding at home — a strong buffer against

external stressors.

6. Schools as Healing Environments

Schools are more than academic spaces; they shape values and health. Integrating life-skills training, career workshops, mental health awareness, and safe spaces for expression transforms schools into ecosystems of resilience.

Tools for Radical Therapy

Table 1. Tools to Increase Resilience in Adolescents

Category	Key Tools	Outcomes
Cognitive–Behavioral	Cognitive restructuring, problem-solving therapy, resilience journaling	Improved self-efficacy, reduced avoidance
Mind–Body &	Mindfulness, yoga, meditation, somatic	Emotional regulation,
Somatic	experiencing, chakra affirmation therapy	balance, stress release
Narrative & Creative	Narrative therapy, art/music therapy, drama/role-play	Emotional expression, coping skills
Social & Group Work	Peer resilience circles, mentorship, service-learning	Belonging, empathy, protective peer influence
Dialectical Tools	DBT skills (distress tolerance, emotional regulation, interpersonal effectiveness), radical acceptance	Better coping with stress and difficult realities
Strength-Based & Positive Psychology	Strengths mapping, gratitude practice, hope-building	Optimism, resilience, self-confidence
Technology-Based	Resilience apps, CBT-based mobile tools, gamified coping platforms	Accessible, engaging self-help strategies

From Struggle to Strength : The goal is not to shield adolescents from all hardships. Exams, failures, heartbreak, and dilemmas are inevitable. The aim is to equip them with tools to bounce back and grow. A resilient teen:

- Uses time management instead of avoidance during academic stress.
- Declines risky peer behaviors with confidence in their values.
- Negotiates career decisions with self-awareness and mutual respect.

Conclusion : “Resilient Teens – Thriving Inside Out” is a call to action. Radical therapy invites parents, educators, healthcare professionals, and communities to focus not only on problems but on strengths — empowering adolescents to craft their own pathways. Every adolescent has the potential to thrive, but resilience does not develop by chance. It must be nurtured intentionally through emotional skills, supportive environments, and collaborative guidance. With this foundation, adolescents can navigate the storm of their teenage years and emerge stronger, confident, and future-ready.

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The BRIDGE to Resilience: Raising Teens Who Thrive Inside Out

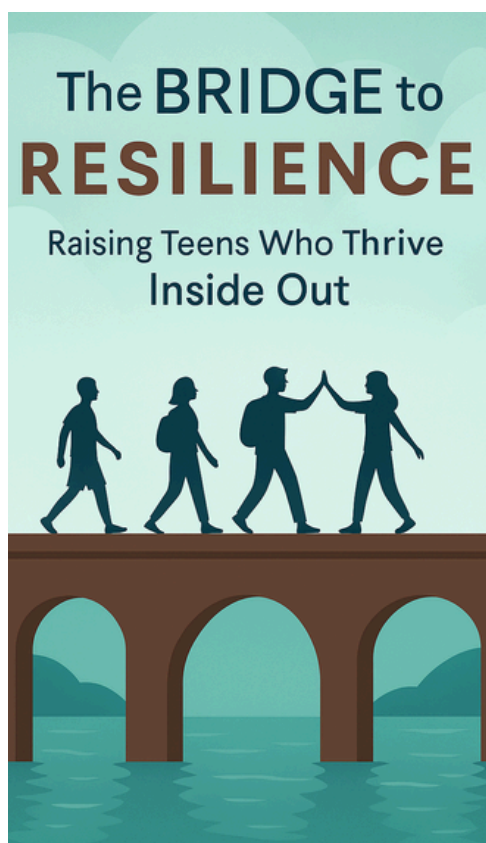


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“The Coach” — a multi-faceted professional who blends the science of the subconscious with the art of communication, leadership, and personal transformation. Over the years, he built a career at the crossroads of corporate training, life coaching, hypnotherapy, NLP, psychotherapy and thought leadership. Humbled to be the youngest recipient of the Chanakya Award (2014) by the Public Relations Council of India as the Most Promising Communications Trainer.



Why Resilience Matters More Than Ever

Adolescence has always been a testing ground. One reason I have dedicated the last two decades of my life to “being there” for young people as unconditionally as possible is because of the storms I myself weathered. Yet, compared to today’s teenagers, my generation was almost fortunate.

Today’s teens navigate challenges that previous generations could not have imagined—digital overload, academic pressure, identity struggles, climate anxiety, and the silent epidemic of loneliness. In this landscape, resilience is not a “good-to-have.” It is the lifeline—and necessity—that enables teenagers not merely to survive but to emerge stronger, adaptive, and thriving from the inside out.

Globally, approximately **one in seven** adolescents experiences a **mental disorder**, and **suicide** is the third leading cause of death among people aged 15–29 (World Health Organization, 2023). In the United States, over 40% of high school students report persistent sadness or hopelessness, and 20% have seriously considered suicide (Centers

for Disease Control and Prevention, 2023). These statistics make one truth clear: resilience is not optional—it is urgent.

Resilience is not about “toughing it out” or ignoring emotions. It is the dynamic capacity to bend without breaking, to adapt without losing authenticity, and to grow through adversity. And—crucially—it is not an inborn trait. Resilience can be taught, modelled, and nurtured (American Psychological Association, 2022).

A Case That Says It All – My Own Story :



Rather than sharing a client case, let me share my own. Coming from a renowned family of legendary pediatricians, I was often introduced as “**Dr. Benakappa’s grandson**” or “**Dr. Asha Benakappa’s son.**” Sometimes I wondered if people would ever remember my name. Alongside that pressure to live up to society’s expectations, another silent storm brewed: **body shaming.**

When I changed schools, my grades dropped, my temper flared, and I withdrew from friends. Teachers labelled me “difficult,” and my parents worried I was spiralling. The truth? I was being ridiculed daily for my gynecomastia. Bullies found cruel entertainment in mocking me publicly, comparing me to girls, even groping me in hallways. The trauma was unexplainable.

What worked was not immediate “fixes,” but the presence of a few adults and older peers who modelled calm, empathy, and—most importantly—non-judgment. They made me feel safe. They taught me coping strategies, not through textbooks but through lived wisdom. This “band of brothers” helped me lift my head again, find my voice, and eventually stand on stage speaking confidently before hundreds.

That experience built my resilience muscle. It helped me identify emotions without shame, reframe setbacks, and become a mentor to other struggling students. What transformed me was not the absence of pain—but the presence of resilience.

The Coach's BRIDGE Model of Resilience

Drawing from both research and lived experience, I propose the BRIDGE Model of Resilience—a six-pillar framework that empowers teens to cross life's adversities. Resilience is not about shielding them from hardship but building the bridge that carries them through.

B – Body & Breath (Mind-Body Practices)

Resilience is not purely psychological. Sleep, exercise, nutrition, and mindfulness practices like deep breathing or journaling equip teens with physiological stability to handle stress. Recent randomized trials show mindfulness-based interventions improve emotion regulation and stress tolerance (Zhou et al., 2024).

R – Relationships (The Anchor in Chaos)

Decades of research confirm that resilience is rooted in relationships, not rugged individualism. A single caring adult—be it a parent, teacher, coach, or relative—can dramatically alter a teenager's trajectory. Supportive relationships consistently emerge as the strongest protective factor (Masten & Motti-Stefanidi, 2022).

I – Inner Language (Naming the Storm)

Teens often experience overwhelming emotions but lack the vocabulary to express them. Encouraging them to name feelings (“I feel anxious,” “I feel hopeful”) increases self-awareness, activates the prefrontal cortex, and reduces emotional flooding. Emotional literacy interventions improve resilience and reduce distress (Lereya et al., 2023)

D – Dynamic Thinking (Reframing Failure)

A resilient teen learns to see setbacks not as verdicts but as feedback. Instead of “I failed; I'm a failure,” they can be taught to think, “I failed this time, but I can learn and try again.” Cognitive-behavioral reframing is strongly associated with increased resilience (Dray et al., 2022)

G – Growth Through Risk (Healthy Risk-Taking)

Shielding teens from all risks paradoxically weakens them. Encouraging calculated risks—trying out for a team, voicing an opinion, attempting something new—creates mastery experiences that build confidence. School programmes integrating skill-building and safe risk-taking show measurable improvements (Stockings et al., 2023).

E – Existential Purpose (Fuel for the Journey)

Teens who feel connected to something larger than themselves—whether a cause, passion, or community—display higher resilience. Helping them explore “What do I stand for?” anchors them in meaning even during instability. A sense of purpose is linked to lower depressive symptoms (Kleiman et al., 2022).

From Research to Reality : Over the years, I have seen research findings come alive in everyday moments. In one college workshop, the “class clown”—dismissed as disruptive and immature—surprised everyone during an identity exercise. Beneath the humour, he was resourceful, intelligent, and deeply reflective. His “cartoon” persona was a mask for belonging. With mentoring and guided exercises, he shifted from cracking jokes at others’ expense to performing stand-up comedy with self-expression. What meta-analyses might label “emotional literacy,” I witnessed as raw courage on stage.

Resilience often emerges not in grand interventions but in small, almost invisible shifts: a teacher checking in on a withdrawn child, a parent normalising failure, a teenager daring to raise their hand in class after months of self-doubt. These are not measured in effect sizes, but they are the sparks that ignite resilience in real time. That is **why I created the BRIDGE Model**—not to replicate research in jargon, but to give parents, educators, and clinicians a compass that is easy to remember, grounded in science, and alive in practice.

Practical Takeaway for Parents & Educators

Raising resilient teens isn’t about eliminating hardship. It’s about equipping them with the tools to navigate it. Here are three questions every adult can regularly ask a teenager in their life:

“What’s one challenge you’re proud of handling this week?”

“What’s one mistake you learned from?”

“Who is one person you know you can turn to when you feel low?”

Simple, consistent check-ins like these transform resilience from theory into lived reality.

Closing Reflection : Resilience is not a shield that prevents pain—it is the invisible bridge that carries a teenager across it. As adults, our role is not to clear every stone from their path, but to ensure they know how to climb, balance, and keep moving forward.

If today’s teens can learn resilience, they will not just thrive inside out—they will redefine what thriving looks like for the generations to come.

Lessons for Parents from Netflix Series – “Adolescence”

Building Resilience in Adolescents: Thriving Inside Out



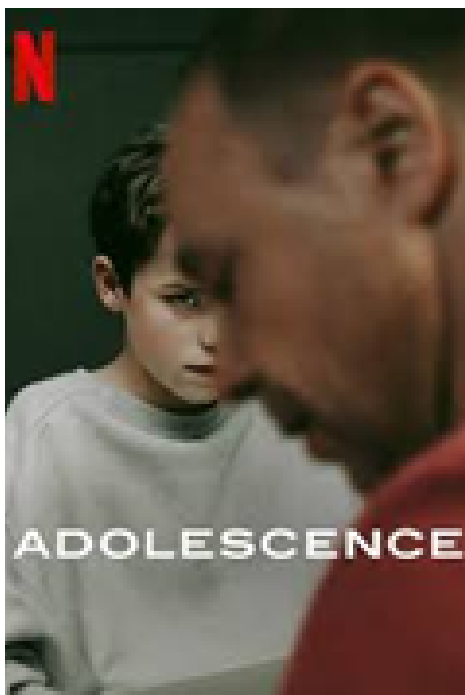
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Parenting adolescents is often compared to sailing in unpredictable waters. One moment the sea is calm—full of joy, laughter, and promise—and the next it is turbulent, with moods, conflicts, and uncertainties. Paediatricians, who work closely with both parents and young people, often witness this transition firsthand. While schools, peers, and social media undeniably shape adolescent behaviour, an often-overlooked influence is the **legacy of parental patterns and generational trauma**. How parents manage (or suppress) emotions, how they communicate, and how they respond under pressure quietly but powerfully shapes adolescents’ capacity to cope and thrive.

The British psychological drama ‘Adolescence’, the Netflix Series, starkly portrays these hidden dynamics. It follows 13-year-old Jamie Miller, arrested for the brutal stabbing of his schoolmate, Katie. The narrative unpacks how a mix of **low self-esteem, bullying, online radicalization, and paternal emotional absence** spiralled into tragedy.

Jamie lacked resilience—not because he was “weak” but because the protective scaffolding of emotional connection and validation was missing. His father’s silence, paired with subtle expectations, left him vulnerable to toxic external influences. Jamie’s reckless decisions, social media outbursts, and sometimes destructive choices are all

symptoms of this deeper craving- to be seen, accepted, and above all, to belong. The haunting scene of Eddie tucking Jamie's teddy bear into bed after the arrest encapsulates a tragic truth: love that is felt but never expressed cannot shield children from life's storms.

The Echoes of Generational Trauma in Parenting

We inherit more than just genes—we inherit ways of being. The emotional climate of a family often stretches across generations. Research in intergenerational trauma suggests that unprocessed pain, stress responses, and maladaptive coping styles are unconsciously transmitted to children (Yehuda & Lehrner, 2018).

Jamie's story offers a compelling illustration. His father, Eddie, was physically abused regularly by his own father during his childhood, which shut him down emotionally. He never learned emotional regulation, and veered between **silence and sudden outbursts**. He vowed never to repeat the cruelties with his own children and succeeded in breaking the visible cycle: Jamie was never beaten. But in spite of being a loving father, he failed to establish open communication and trust, he was physically present but emotionally absent. Jamie, like many children, became an “emotional barometer”—sensing the unspoken, mirroring the atmosphere. Without models of tenderness or open conversations about feelings, he too became a child of suppression.

This is the subtle power of generational trauma: even when abuse stops, emotional legacies persist—unless consciously healed.

The Pressure of Unmet Expectations

Resilience is not only eroded by neglect but also by **parental projections of unmet dreams**. Eddie loved football, and for him, it symbolized masculinity, belonging, and pride. He wished Jamie to share that passion but Jamie faltered on the field. He was hesitant, anxious under pressure, and often disappointed his father. Eddie did not scold, but his silence and obvious disappointment after a bad match were heavy for Jamie. He felt ashamed and guilty, and quietly internalized the message: ***“I am not good enough”***. Over time, he equated love with performance, and failure with rejection.

Such dynamics are not rare. Studies show that when children perceive their parents' love as conditional on achievement—whether academic, athletic, or social—their self-esteem and resilience decline (Assor et al., 2004). Paediatricians frequently meet adolescents

battling anxiety or burnout rooted in the silent burden of fulfilling parental dreams.

When Innocence Turns to Crime: The Making of a Troubled Teen

It was not a single event but a troubling mix of factors—lack of self-love, poor self-image, low self-esteem, the negative influence of social media, relentless bullying, and rejection from Katie. Together, these created a deep sense of failure, frustration, and insecurity. Unable to manage these overwhelming emotions, he acted out impulsively, leading to aggression and a violent outburst that tragically resulted in the killing.



Building Resilience: Thriving from the Inside Out

Resilience is not about toughness or suppression—it is about **adaptability, emotional regulation, and connectedness**. Ann Masten (2001) calls it “**ordinary magic**”—emerging not from extraordinary traits but from everyday systems of support: secure caregiving, consistent routines, and nurturing relationships.

Recent research underscores these foundations:

- **Warm parent–child relationships:** A 2023 UK study involving 12,000 adolescents found that parental warmth and emotional availability strongly predicted resilience, even in the presence of adversity. In today’s digital age, resilience also depends on how adolescents navigate social media. As ‘Adolescence’ highlights, unchecked online exposure can magnify vulnerabilities, making parental vigilance and open conversations around digital use an essential protective factor.
- **Self-esteem and optimism:** Meta-analyses reveal that adolescents with higher self-esteem and hope are less vulnerable to depression and anxiety (Orth & Robins, 2014).

*For paediatricians, these insights translate into a practical imperative: while treating adolescent mental health challenges, we must also help parents **strengthen protective factors at home**.*

Practical Pathways for Parents: Healing Patterns, Building Strength

• **Reflect on Inherited Patterns**

- Encourage parents to ask: What family patterns am I unconsciously repeating?
- Journaling, therapy, or parenting workshops can uncover these hidden legacies.

• **Model Emotional Openness**

- Instead of “Stop crying,” try: “I see you’re upset. Let’s talk.”
- Naming emotions builds adolescents’ emotional vocabulary and regulation skills.

• **Differentiate Dreams**

- Support parents in recognizing when they push children into their own unfulfilled desires. Encourage autonomy: adolescents thrive when allowed to explore personal passions

• **Celebrate Effort, Not Just Results**

- Research on growth mindset (Dweck, 2006) shows that praising effort fosters resilience, while overemphasis on outcomes breeds perfectionism and fragility.

• **Encourage Risk in Safe Environments**

- Resilience grows when adolescents try, fail, and learn with the assurance of parental support. Overprotection, though well-meaning, often undermines adaptability.

• **Foster Connection and Belonging**

- Open family rituals (shared meals, weekly check-ins, storytelling) strengthen relational bonds that buffer stress.

• **Guide Digital Consumption**

- Adolescents searching for belonging can stumble into radical or toxic online spaces. Paediatricians can advise parents to co-view media, discuss content critically, and redirect teens toward positive online communities.

The Paediatrician's Role: Beyond the Clinic

Paediatricians stand at a unique intersection: trusted by parents, accessible to adolescents, and positioned to detect subtle signs of distress. Incorporating resilience-building guidance into routine visits—whether through anticipatory guidance, screening for emotional wellbeing, or recommending parent education—can be transformative.

Workshops, school collaborations, and community sessions led by paediatricians can normalize conversations around emotions, resilience, and parenting patterns. This holistic approach shifts focus from fixing “problem teens” to nurturing environments where adolescents thrive from the inside out.

Conclusion: Healing Ourselves to Heal Them

Jamie's fictional story—and the all-too-real echoes it represents—reminds us of a critical truth: we cannot give what we have not learned. Parents who suppress emotions, chase unfulfilled dreams through their children, or withhold affection unintentionally weaken resilience. But cycles can be broken. When parents practice emotional regulation, express love openly, and create safe spaces for failure and recovery, they hand their adolescents the greatest gift: the ability to bend without breaking, to stumble yet rise, to navigate life's storms with inner strength.

As paediatricians, guiding parents toward this healing is perhaps as vital as prescribing any medicine. Resilience is not taught through lectures—it is modelled, felt, and lived. Thriving inside out begins not with “fixing” our children but with transforming ourselves.

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Book Review- Malnourished Mind & Broken Bodies

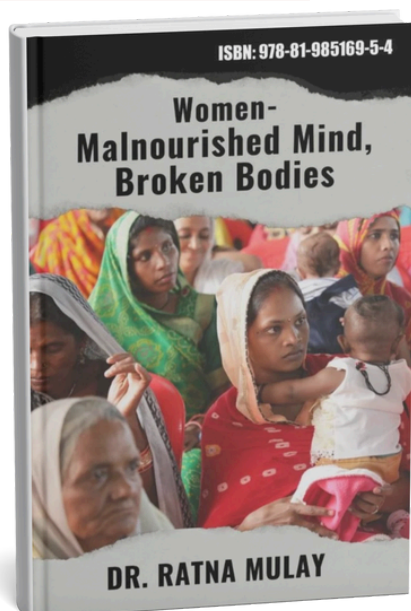


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Pursuing a Ph.D. is a long, winding, and often challenging journey, but for me, it has been uniquely rewarding. My path began under the guidance of my dear mentor, **Professor Asha Shukla**, Former Vice-Chancellor of BRAUSS, who recognized my potential despite my limited experience in the social sciences. Her encouragement inspired me to undertake a Ph.D. in Women's Studies.

My thesis, which focused on **multiple micronutrient deficiencies among young women**, represents a confluence of my medical and public health background with a new perspective shaped by women's studies. Following the kind advice of the external examiners, I developed this book from my Ph.D. thesis to make my research more accessible and to facilitate its use in policy formulation.

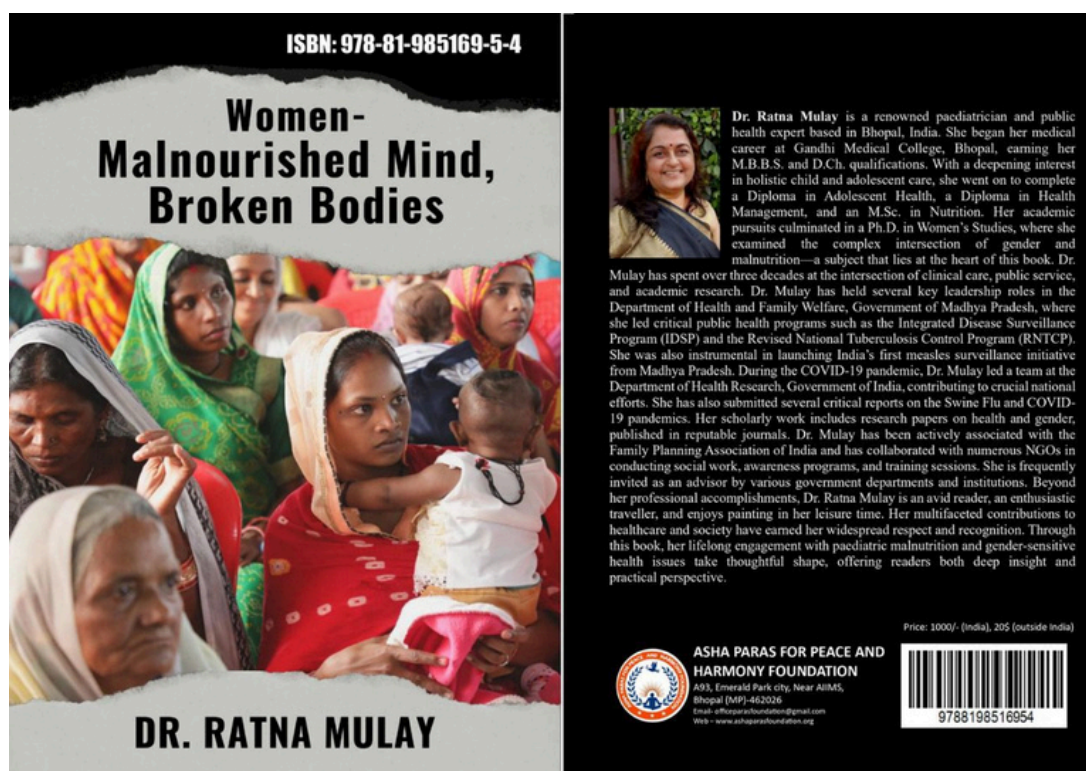
Malnutrition has long been perceived as a problem primarily affecting children. However, it is now increasingly evident that adolescents and young adults, particularly women, are also significantly impacted. In recent years, Multiple Micronutrient Deficiency (MMND) has emerged as a critical public health concern, contributing to a wide range of health issues across the globe.

As a paediatrician specializing in childhood and adolescent malnutrition and MMND for over three decades, I have observed that maternal malnutrition often serves as a major underlying cause of malnutrition in children. My two decades of work in public health—spanning both communicable and non-communicable diseases—have further underscored the pervasive impact of micronutrient deficiencies on overall health.

Micronutrients such as vitamins and minerals play a vital role in numerous metabolic processes. Their deficiencies can result in metabolic disturbances, early onset of non-communicable diseases (NCDs), and intergenerational cycles of malnutrition. This persistent cycle diminishes physical and cognitive potential, reduces earning capacity, and increases vulnerability to disease, ultimately placing a substantial burden on individuals, families, and society as a whole.

This book sheds light on the prevalence of Multiple Micronutrient Deficiency (MMND) among young women in India. The genetic foundation of an individual is established as early as in the maternal grandmother's womb—underscoring the profound and lasting impact of maternal nutrition across generations.

The research undertaken for my thesis focused on well-educated, college-going young women. Alarming, it revealed that nearly 75% of participants exhibited moderate to severe deficiencies in ten essential micronutrients, with only a 5–10% improvement even after two nutritional interventions.



Addressing MMND requires persistent, multi-generational efforts. While the problem is widespread, the solution, though conceptually simple, is challenging to implement. Of the more than almost fifty known causes of malnutrition and MMND, only a few lie within the control of young women themselves; the majority are rooted in socio-cultural, economic, and political determinants. In a society where girls are pressured to remain slim, lack access to adequate physical activity, and often experience the effects of prenatal undernutrition, there is an urgent need for strong political commitment to bring meaningful change.

Despite numerous programs that claim to address malnutrition, the ground reality remains disheartening. Girls and women are seldom encouraged to participate in physical exercise, and their diets continue to be predominantly carbohydrate-based, with inadequate intake of protein from pulses, animal sources, and dairy.

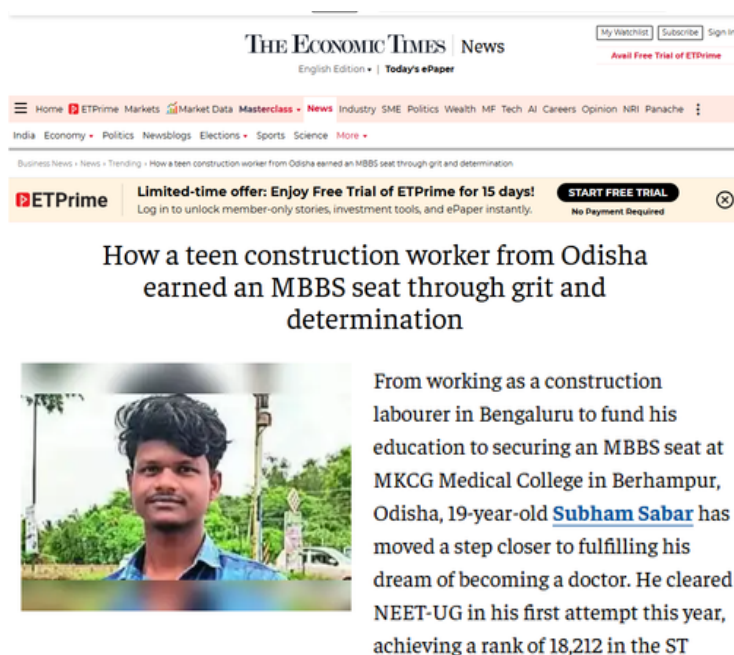
The recommendations presented in this book arise not only from the findings of this research but also from over three decades of experience and study. This work seeks to bridge the gap between scientific understanding and social realities through a gender-sensitive sociological lens, offering a small yet meaningful step toward addressing malnutrition from a sociological perspective.

The recommendations form the core of this book and are intended to serve as practical guidelines for policymakers, researchers, and public health professionals. It is my hope that they will contribute to shaping more inclusive and effective strategies to combat malnutrition and its far-reaching consequences.

Resilience Reimagined: *The Convergence of Difficulty and Resolve*

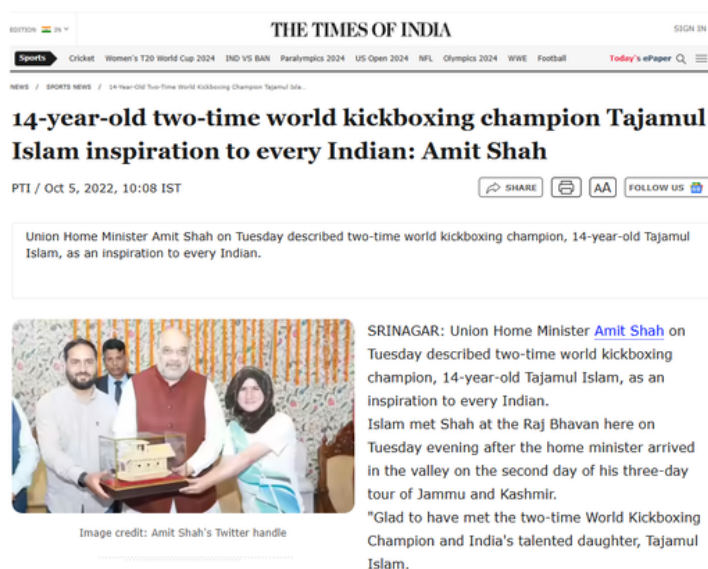
Adversity frequently imposes its own trials on young people, nevertheless, many of them have taken their trials and turned them into strength and purpose.

Their stories illustrate that resilience is not merely the act of getting through adversity, it is the act of becoming stronger on the other side of every adversity.



The screenshot shows the top of a news article on The Economic Times website. The headline reads: "How a teen construction worker from Odisha earned an MBBS seat through grit and determination". Below the headline is a photo of a young man, Subham Sabar. To the right of the photo, the text says: "From working as a construction labourer in Bengaluru to fund his education to securing an MBBS seat at MKCG Medical College in Berhampur, Odisha, 19-year-old [Subham Sabar](#) has moved a step closer to fulfilling his dream of becoming a doctor. He cleared NEET-UG in his first attempt this year, achieving a rank of 18,212 in the ST".

For example, look at **Subham Sabar** who is 19 years old and is from rural Odisha. He lives with the balance of his dreams and his daily work as construction worker to pay for his schooling. He overcame multiple adversities to earn a seat in MBBS at MKCG Medical College. His story shows how determination and self-belief can shift the hardest adversities into an advantage.



The screenshot shows a news article on The Times of India website. The headline reads: "14-year-old two-time world kickboxing champion Tajamul Islam inspiration to every Indian: Amit Shah". Below the headline is a photo of Union Home Minister Amit Shah and Tajamul Islam. To the right of the photo, the text says: "SRINAGAR: Union Home Minister [Amit Shah](#) on Tuesday described two-time world kickboxing champion, 14-year-old Tajamul Islam, as an inspiration to every Indian. Islam met Shah at the Raj Bhavan here on Tuesday evening after the home minister arrived in the valley on the second day of his three-day tour of Jammu and Kashmir. 'Glad to have met the two-time World Kickboxing Champion and India's talented daughter, Tajamul Islam.'".

Tajamul Islam, a 14-year-old kickboxing world champion from Kashmir. She faced not only competition in the ring but also against social limitations and the lack of opportunity to do what she loves. As a two-time world champion, she provides young people in India a source of inspiration through her determination, discipline, and passion.

Activity Report

Awareness session in Govt HS School Sukludhana

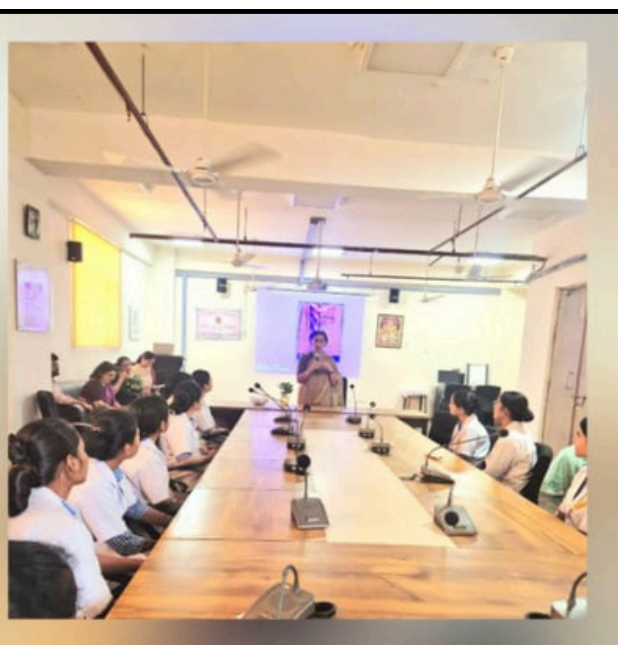


Dr. Alpana Shukla, along with IMA and IAP Chhindwara, led an awareness session at Govt HS School Sukludhana. **Dr. Sudhir Shukla** addressed hygiene, nutrition, career guidance, and gender respect, while Dr. Alpana Shukla spoke on mental health, menstrual hygiene, and the POCSO Act, fostering informed and empowered students.



*Talk on **MENSTRUAL HYGIENE** to Nursing Students & the PG's of Pediatric Department of Gandhi Medical College, Bhopal*

Dr. Rashmi Diwedi gave a talk on **MENSTRUAL HYGIENE** to Nursing Students & the PG's of Pediatric Department of Gandhi Medical College, Bhopal. Started with Q & A Session by answering the questions in the Question box followed by presentation on the topic, covering Physiology of Menstruation, importance of menstrual hygiene & it's various aspects. Finally concluded it on a Quiz based on the topic. The program was organized under the NARI SWASTHA, SHASHAKT PARIVAR program of P.M. Modi.



Adolescent Asthma (GINA 2025) (YUWA Day Academic Series – Under Silver Jubilee Year of CAHA)

Team AHA Jaipur, Rajasthan



Key Takeaways – Adolescent Asthma (GINA 2025) (YUWA Day Academic Series – Under Silver Jubilee Year of CAHA)

- 🎯 Treatment Goals
 - ✅ Symptom relief with improved quality of life
 - ✅ Minimal side effects & reduced exacerbations
- 💡 Stepwise Treatment
 - ✅ Budesonide + Formoterol (100 INH) with spacer
 - ✅ 1 puff BD + 1 puff SOS
- 🛎 Supportive Measures
 - ✅ Correct nasal spray technique (INS)
 - ✅ Obesity control with diet & exercise
- 🚫 Trigger Avoidance
 - ✅ House dust mites
 - ✅ Smoke exposure
- 📋 Asthma Action Plan
 - ✅ Individualized plan for every adolescent
- 💡 Reliever Options
 - ✅ Track 1 (Preferred): MART (Low-dose ICS-Formoterol) → fewer exacerbations, hospital visits
 - ✅ Track 2: ICS-SABA or SABA + regular low-dose ICS
- 📅 ICS Dosing
 - ✅ Low: 1–2 pu

Activities on Blood donation Day and International Elderly day.



Dr. Alpana Shukla with team conducted activities on **Blood donation Day and International Elderly day.**

Blood donation camps were organised on mobile van and Blood bank.

Members of **Godhuli Elderly Home** were provided health services by us.

Red cross and Rotary club Chhindwara conducted an activity in MLB School Chhindwara



IMA, IAP Chhindwara with Red cross and Rotary club Chhindwara conducted an activity in MLB School Chhindwara. Awareness session on Adolescence, Health hygiene, importance of reading of labels, POCSO, Anemia, Sickle cell, was given by **Dr. Alpana Shukla. Dr. Sudhir Shukla** addressed the Govt Program on Sickle cell elimination and TB diagnosis and elimination.

Health camp with Sickle cell, NFALD, and TB screening was conducted for girls and teachers.

IAP-AHA Youth Wellness Day organised by Raigad IAP & AHA Raigad with Patwardhan Hospital and Bharat Vikas Parishad, Panvel



IAP-AHA Youth Wellness Day was celebrated at MES Dyanmandir School, Kalamboli by Raigad IAP & AHA Raigad in collaboration with Patwardhan Hospital and Bharat Vikas Parishad, Panvel, promoting adolescent health with empathy and care. Led by **Dr. Sunita Ingle and Dr. Neha Singh**, along with pediatricians from IAP Raigad, around **432 teenagers** from Std 9–12 were examined for common health issues like poor nutrition, anemia, menstrual concerns, ear, dental, and vision problems.

around 432 teenagers from Std 9–12 were examined for common health issues like poor nutrition, anemia, menstrual concerns, ear, dental, and vision problems.

Dr. Neha Singh delivered an engaging talk on bullying, peer pressure, and academic stress, addressing teens' queries with compassion. **Free dental and ophthalmic screenings** were also conducted by specialists from Patwardhan Hospital.



Puberty & Menstrual awareness for girls of stds 9, 10 at Poyenje High school, Raigad



As part of NMAP's outreach to underserved communities, **Dr. Amog Shahane**, Joint Secretary of NMAP and AHA Navi Mumbai, conducted an adolescent health session on puberty and menstrual awareness for 9th and 10th grade girls at Poyenje High School in Raigad district.

The session covered **physical changes during puberty, menstrual hygiene**, and the eco-friendly use of cloth pads. In support of the Green Periods initiative, Rotary Mid-town Club of Kharghar distributed free cloth pads to the students, encouraging sustainable menstrual practices.

Glipmes of Adolescence Health Education programme conducted at NMC School no 8, Heerawadi today on 14/7/2025



On 8th July 2025, **AHA Raigad and IAP Raigad**, in collaboration with **Bharat Vikas Parishad and Sri Satya Sai Seva Samiti, Panvel**, organized a Free Medical Checkup Camp at MES Dyanmandir School, Kalamboli, focusing on early childhood health. Led by **Dr. Sunita Ingle and Dr. Neha Singh**, with support from senior pediatricians and specialists from Patwardhan Hospital, the camp examined 488 students from Std 1 to 4 for general health and common issues like malnutrition, ear and dental infections, respiratory problems, and anemia. Children were counseled on nutrition, hygiene, physical activity, and reducing screen time to foster lifelong well-being.

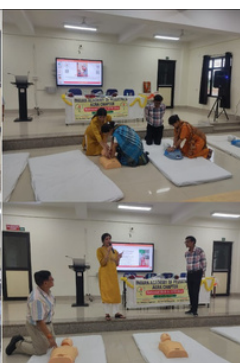
Adolescent awareness session for 200 students of class 5 to 8 at Indo Scots Global School, Kamothe, Navi Mumbai.



🌟 Demystifying teen life a little, Navi Mumbai IAP AHA EB member Dr. Amol Deshmukh along with NMAP Joint Secretary & Secretary Navi Mumbai AHA, Dr. Amog Shahane conducted an adolescent awareness session for 200 students of class 5 to 8 at Indo Scots Global School, Kamothe, Navi Mumbai.

🌟 The session touched upon the normal physiology of puberty, emotional changes, risk taking behaviour & healthy coping ideas to beat the stress for the teen of today.





Basic life support workshop for pharmacy students



Dr. Jayshree Shiwalkar Conducted 5 hrs workshop with presentation and activities. Topic : Emotional intelligence Understanding and implementation in school for children and adolescents



Intellectual Disability & Adolescence at the wonderful Annual Conference of Neurodevelopment Chapter at Trivandrum



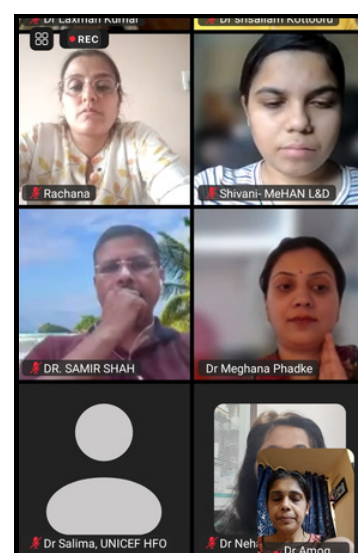
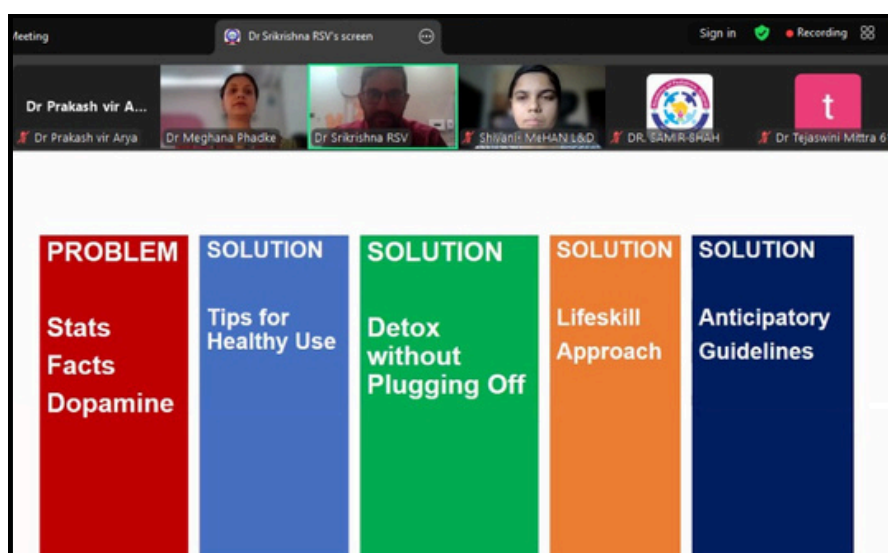
Delighted to be a faculty & speak on Intellectual Disability & Adolescence at the wonderful Annual Conference of Neurodevelopment Chapter at Trivandrum on **30 August 2025**.

Congratulations to the Team neurodevelopment chapter led by **Dr Multani & Shambhavi Seth**. It was great to meet my mentors **Dr. MKC Nair & Dr. Tuteja & stalwarts of IAP**
- **Dr. Preeti galagali**

Wave 18 activities

Wave for Digital Detox 18th June 2025

In an age where screens dominate every moment, Wave for Digital Detox aims to help adolescents rediscover balance. This session will focus on digital wellness, exploring how screen time impacts mental health, sleep, and social connections. Experts will share practical strategies for mindful tech use, emotional regulation, and nurturing real-world connections—followed by an engaging interactive Q&A with participants.




Anticipatory Guidelines – Digital Literacy

Before you Post

THINK

T - is it True?
H - is it Helpful?
I - is it Inspiring?
N - is it Necessary?
K - is it Kind?



Digital Footprints

Stay online forever
Can be traced
Harmful for future reference/jobs

MPOWER YUVA Program Series 18th July 2025

The **MPOWER YUVA Program Series** is a collaborative initiative designed to empower adolescents and young adults across India. It integrates health awareness, creative mentorship, and leadership development, with support from national institutions like the Indian Academy of Pediatrics (IAP), UNICEF, and State Adolescent Health Resource Centres



IAP-AHA YOUTH FORUM PRESENTS
MPOWER YUVA Program Series
WAVE FOR REPRODUCTIVE HEALTH: PREVENT STIS & UNWANTED PREGNANCY
BETWEEN CURIOSITY, CAUTION, AND COMPASSION
ON 18TH JULY 2025 FRIDAY, 3.30 PM
A PANEL DISCUSSION WITH ADOLESCENTS, PARENTS & EXPERTS
Meeting ID: 845 3969 7587
Passcode: 081324
https://youtube.com/live/OI_jmteU3wsk?feature=share

DR. VASANT KHALATKAR PRESIDENT 2023, NATIONAL IAP	DR. NEELAM MOHAN PRESIDENT-ELECT 2023, NATIONAL IAP	DR. G V BASAVRAJIA PRESIDENT 2024, NATIONAL IAP	DR. YOGESH PARIKH HON. SECRETARY GEN., NATIONAL IAP	DR. ATANU BHADRA TREASURER, NATIONAL IAP
DR. HIMABINDU SINGH CHAIRPERSON 2023, CENTRAL AHA	DR. GEETA PATIL CHAIRPERSON 2024, CENTRAL AHA	DR. SUSHMA DESAI CHAIRPERSON-ELECT 2023, CENTRAL AHA	DR. PRAKASH VIR ARYA HON. SECRETARY, CENTRAL AHA	DR. SHAMIK GHOSH JOINT SECRETARY, CENTRAL AHA
DR. SRISAILAM PROGRAM INCHARGE	DR. SAMIR SHAH PROGRAM INCHARGE	DR. SANGEETA LODHA CO-ORDINATOR	DR. SHIBHU K. CO-ORDINATOR	


COMMITTEE MEMBERS

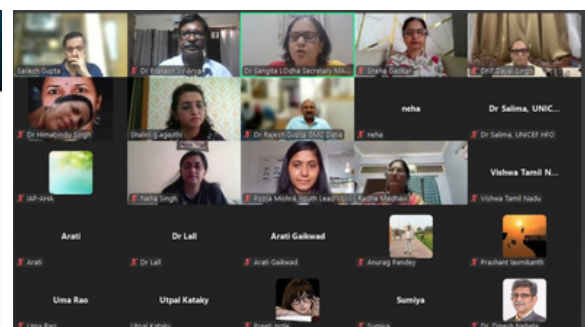
DR. AMOL PAIKAR	DR. AMOGH SHAHANE	DR. ANITHA BORISGALA	DR. NEHA SINGH	DR. RICHIA PARASHAR	DR. SHILPI SIDDANTA	DR. SRIKISHNA RSV	DR. SURITA MANCHANDA
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TIME	SESSION	MODERATORS	FACULTY/GUESTS
3.30 - 3.45 PM	Inauguration	Dr. Sangeeta Lodha (Program Co-ordinator)	<ul style="list-style-type: none"> Dr. Himabindu Singh (Chairperson, Central AHA) Dr. Vasant Khalatkar (President IAP) Dr. Dilip Bhanushali (President IMA) Dr. Syed Ali (UNICEF)
3.45 - 3.55 PM	Launch of Yuva Clinic from Datia, Madhya Pradesh		by Dr. Rajesh Gupta
3.55 - 4.45 PM	Youth Led PANEL DISCUSSION on "Reproductive Health - Preventing STIs & Unwanted Pregnancies" (with Adolescents and Experts)	<ul style="list-style-type: none"> Dr. Shalini Agasthi Youth Lead - Ms. Pooja Mishra 	Panelists for Discussion: <ul style="list-style-type: none"> Experts: <ul style="list-style-type: none"> Dr. Atul Kanikar Dr. Shailesh Gupta Dr. Salima Bhatia Dr. Neha Agarwal Dr. Radha Dr. T Dayal Singh (IMA) Dr. Apurba (FOGSI) Youth Voice: <ul style="list-style-type: none"> Ms. Jasmeet Kaur Ms. Preeti Ravikumar Ingle
4.45 - 5.00 PM	Result of Quiz 3 & Release of Quiz 4 (on Reproductive Health)		Dr. Samir Shah
5.00 PM	Vote of Thanks & Concluding Remarks		Dr. Prakash Vir Arya

WINNERS OF QUIZ 4

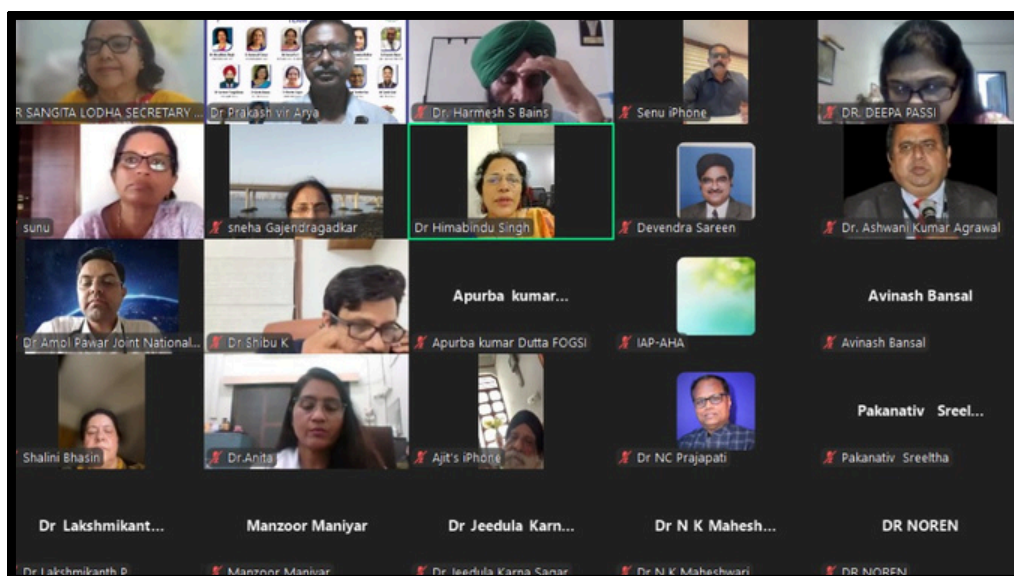
25 / 25

	Saina Gupta	18	Female	College	Patiala
	Devansh Shah	18	Male	College	Vadodara
	Naumika Khanna	25	Female	College	Mohali



IAP-AHA WAVE 18 18th August 2025

Let's Iron Out the Anemia, held in collaboration with **UNICEF** and leading health associations, focused on tackling anemia and promoting menstrual health among youth. The session highlighted that *anemia is preventable and treatable, and that strong blood builds strong futures*. Experts also broke taboos around menstruation, emphasizing hygiene, nutrition, and emotional well-being. The event inspired adolescents, parents, and teachers to make menstrual health a conversation, not a whisper — and to build a healthier, more confident generation.



ADOLESCON 2025

A Landmark Silver Jubilee Celebration of Adolescent Health in Ahmedabad

Dear Esteemed Colleagues and Friends,

On behalf of the entire organizing team, it is with immense pride and heartfelt gratitude that we share the highlights of the 25th Silver Jubilee National Conference of the Adolescent Health Academy, ADOLESCON 2025, held from 19th to 21st September 2025 in the vibrant city of Ahmedabad. This was not just a conference; it was a celebration of 25 years of dedication to adolescent health, a confluence of minds, and a powerful reaffirmation of our commitment to the youth of our nation.

Hosted at the elegant Crowne Plaza Ahmedabad City Centre, the event was a grand success, brought to life by the collaborative efforts of the Gujarat Adolescent Health Academy, AOP Ahmedabad, and AOP Gujarat. Our theme, "M-Power YUVA – Accelerate Action for Health of Adolescents (AAHA!!)", resonated through every session, reflecting our collective mission to empower pediatricians and, in turn, our young people.

A Conference of Unprecedented Scale

The enthusiasm was palpable even before the event, with over 550 registrations setting the stage for what was to become a historic gathering. The final event was a testament to our community's passion, featuring:

- **36 Hours of Immersive Science** spread across two parallel halls.
- An illustrious faculty of over **160 national experts**.
- A rich academic blend of **12 Panel Discussions, 7 Symposiums, 15 Solo Talks, 2 unique Debates, and 2 insightful Role Plays**.

Gujarat Medical Council has granted **10 Credit Points**

Engaging the Community: Beyond the Conference Halls

- Our commitment to "Accelerated Action" began a week prior to the conference. A series of impactful outreach programs were conducted across Gujarat, touching the lives of students, parents, and educators.

- These activities set a powerful tone of community engagement, extending the conference's reach far beyond the venue.
- Extensive media publicity in print and digital media along with press conference to spread awareness to common people about the event happening to discuss the issues related to adolescent health.

Day 0 (19th September): Community Action and Academic Skill-Building

The conference commenced with a full day dedicated to both community engagement and deep academic learning, truly setting the tone for "Accelerated Action".

Morning Session: Outreach Across the City The day began with a series of impactful outreach programs conducted simultaneously across Ahmedabad:

- A Self-Defence workshop was held for nursing students at Ahmedabad Institute of Nursing Sciences (AINS).
- Workshops on Exam Stress & Resilience were conducted for students of St. Xavier Loyola Hall and Adani Vidya Mandir.
- A life-saving CPR Training session was organized for teens at Happy Street, Law Garden.
- An awareness session took place at the KS School of Management.

Afternoon Session: Power-Packed Pre-Conference Workshops Following the morning's community activities, delegates gathered for five parallel, state-of-the-art workshops designed to equip them with practical skills:

1. EAPP: Endocrine Algorithm for Practicing Pediatrician
2. Halting the March of NCDs: Begin Early Begin Fast
3. Recognizing & Responding to Emotional Health & Behavioural Issues in Teens
4. Fit to Flourish: Tackling Teen Physical Health
5. From Digital Distraction to Digital Attraction

Extensive Media Coverage

The ADOLESCON 2025 conference was supported by extensive media publicity to spread awareness about adolescent health issues. A dedicated press conference was held to share details of the event with the media. This resulted in significant coverage across various platforms:

- **Print Media:** The event was featured in at least 13 print publications, including Ahmedabad Mirror, Sandesh (City Life), Rajasthan Patrika, and Free Press Gujarat.
- **Digital and Online Media:** News of the conference was published on numerous online portals such as UNI, Navjeevan Express, and Newzdaddy.
- **Video Coverage:** The event also received television and video coverage from media outlets like GSTV, Zee 24 Kalak, and Bulletin India.

Days 1 & 2: A Scientific and Cultural Extravaganza

The main conference on 20th and 21st September was a whirlwind of knowledge, dialogue, and inspiration. The scientific program was meticulously crafted to be practical and relevant for every practicing pediatrician.

Legends on Stage: We were honored to host luminaries of Indian pediatrics. The orations were a profound source of wisdom:

- **Dr. C. P. Bansal - Dr. J. S. Tuteja** Oration delivered by the venerable Dr. Y. K. Amdekar on the "Need to Monitor Adolescent Health".
- **Dr. Swati Bhave - Dr. MKC Nair** Oration delivered by the dynamic Dr. Indra Shekhar Rao on "The Adolescent Roadmap to Healthy Relationships".
- A powerful Keynote Address by the pioneer Dr. Swati Y. Bhave on "Pause Before You React- Recognizing a Child's True Needs".

Diverse Topics, Dynamic Formats:

The two halls, **AAHA!** and **MPOWER**, buzzed with activity, covering every facet of adolescent health. Panel discussions tackled sensitive topics like Substance Use Disorders (SUD), HPV prevention, and navigating the medicolegal realm. Symposiums delved into menstrual health, sports medicine, and lifestyle management. The innovative debates on Comprehensive Sexuality Education (CSE) and the influence of "Nurture vs. Network" on mental health sparked vibrant discussions and critical thinking.

Youth Voice and Power:

A unique highlight was the dedicated "Youth Power" segment. Sessions like "**Youth Unfiltered**" and the thrilling "**Yuva Quiz Final Showdown**" provided a platform for adolescents to share their perspectives on parenting, education, and substance abuse, reminding us all of the importance of listening to the voices we serve.

Sweet Memories

Silver Jubilee Adolescon 2025 @ Ahmedabad 19-21st September 2022



Sweet Memories

Silver Jubilee Adolescon 2025 @ Ahmedabad 19-21st September 2025



City hosts meet on adolescent healthcare



Experts and healthcare leaders from across the country on Friday stressed the role of paediatricians in adolescent healthcare during the three-day national conference "Adolescon 2025".

Organised by the Gujarat AHA, Indian Academy of Pediatrics, Ahmedabad, and AOP Gujarat, the conference is based on the theme "Mpower Yuva – Accelerated Action for the Health of Adolescents."

The event, which marks AHA's silver jubilee, also had sessions on mental health, exam and career stress, peer pressure, bullying, etc. **AM**



***Beyond the Lectures: Celebrating in True Gujarati Style** We believe that learning is best paired with fellowship and celebration. The Gala Banquet on 20th September was an unforgettable evening. Delegates experienced the vibrant culture of Gujarat with a spectacular **Traditional Garba & Dandia performance by the Radhe Shyam troupe**. The event was a perfect opportunity for networking and strengthening bonds, complemented by mouth-watering traditional Gujarati cuisine.*

*A Heartfelt Thank You A conference of this magnitude is the fruit of collective effort. Our deepest gratitude goes to the entire Pan-Gujarat organizing team. We are immensely thankful to the IAP AHA leadership, led by **Dr. Himabindu Singh & Dr. Prakash Vir Arya**, for their unwavering trust and support. Most importantly, thank you to every faculty member who shared their wisdom and every delegate who brought their enthusiasm. You were the heart of ADOLESCON 2025. We hope you carried back not just knowledge and credit points, but also cherished memories of learning, networking, and celebrating together.*



With sincere gratitude,

Organizing Chairpersons :

Dr. Sushma Desai

Dr. Nishchal Bhatt

Dr. Jagdish Khamar

Chief Organizing Secretary :

Dr. Samir Shah

& TEAM ADOLESCON 2025

Awards 2025



Dr Swati Bhave & Dr MKC Nair
Oration Award
Dr Indra Shekhar Rao

Dr J S Tuteja & Dr C P Bansal
Oration Award
Dr YK Amdekar

Life Time Achievement Award : Dr Swati Bhave

Best State Branch Awards

1st : IAP AHA Maharashtra State Branch
2nd : IAP AHA Gujarat State Branch
3rd : IAP AHA Chattisgarh State Branch

Consolation Awards (State Branches)

IAP AHA Delhi State Branch
IAP AHA UP State Branch
IAP AHA West Bengal State Branch

IAP- AHA Best City Branch Awards

1st : Surat
2nd : Nagpur
3rd : Jaipur

Consolation Awards (City Branches)

Raigad
Gwalior
Navi Mumbai

Individual Awards

1st : Dr Amog Shahane
2nd : Dr Arvind Prakash Savant
3rd : Dr Neema Sitapara

Consolation Awards (Individual)

Dr Tapan K Das
Dr Meena Deshmukh
Dr Pratibha Dhir

Chairperson APPRECIATION Award to AHA new State Branches

- AHA Bihar state branch
- AHA Odisha State Branch
- AHA Haryana State Branch



Get involved!

You can promote events participation in IAHW
by posting events on social media using

#IAHW2025 #ThriveInsideOut #StrongMindsStrongBodies

Follow **IAHW** on *social media*

Instagram

[@iahw_global](https://www.instagram.com/iahw_global)

Twitter)

[@IAHW_IAAH](https://twitter.com/IAHW_IAAH)

Facebook

[@internationaladolescenthealthweek](https://www.facebook.com/internationaladolescenthealthweek)

Linkedin

[International Adolescent Health Week](https://www.linkedin.com/company/international-adolescent-health-week)

For more information visit website

<https://iaah.org/about-iahw/>



We hope that IAP and AHA members would organise once again a plethora of meaningful youth led activities during IAHW 2025 from 13 to 19 October.

Please do post these on IAP and AHA social media handles and tag IAHW. Let's empower adolescents together!