### Web Box I Screening Tools for Common Mental Disorders

**Depression screening**
- Patient Health Questionnaire-2 (PHQ-2): https://aidsetc.org/sites/default/files/resources_files/PHQ-2_English.pdf
- Becks Depression Inventory (BDI): https://www.ismanet.org/doctoryourspirit/pdfs/Beck-Depression-Inventory-BDI.pdf
- Patient Health Questionnaire-9: Modified for teens (PHQ-9): https://www.aacap.org/App_Themes/AACAP/docs/member_resources/toolbox_for_clinical_practice_and_outcomes/symptoms/GLAD-PC_PHQ-9.pdf

**Anxiety disorder screening**
- Screen for Child Anxiety Related Emotional Disorders (SCARED): https://www.ohsu.edu/sites/default/files/2019-06/SCARED-form-Parent-and-Child-version.pdf

**Substance use disorder screening**
- Screening to brief intervention tool (S2BI): https://www.drugabuse.gov/ast/s2bi/#/

**Suicide screening**
- Adolescent Suicide- Screening Questionnaire (ASQ): https://www.nimh.nih.gov/research/research-conducted-at-nimh/asq-toolkit-materials/asq-tool/asq-screening-tool

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### Web Box II IAP Advocacy – Strategies for AFHS

1. **Dissemination of guidelines to all IAP members and share with other professional organizations like Indian Medical Association, Federation of Obstetrics and Gynecology Institutions and Community Medicine.**

2. **Conduct training workshops for pediatricians, allied health professionals, parents, teachers and adolescents in AFHS.**

3. **Ensure that AFHS is an integral part of the department of pediatrics at all medical colleges, hospitals and private healthcare establishments. Update the IAP adolescent health card. Encourage research on various adolescent health issues.**

4. **Suggest to NMC to include hospital and community based AFHS skill training sessions with emphasis on mental health evaluation, digital wellness, counselling, trauma informed care and planning transition to adult care in undergraduate and postgraduate curriculum. Evaluation of medical trainees to include the above. Strive for NMC approved fellowships and a super specialty course in adolescent health.**

5. **Suggest to government to approve extension of adolescent healthcare up to 18 years under the purview of pediatricians with universal implementation. Extending the adolescent age up to 24 years to be considered as per existing global practice.**

6. **Emphasize on the need to review certain laws e.g., POCSO and laws regarding consent and confidentiality, especially for married and sexually active adolescents to enable access to health services without legal liabilities. Rigorous enforcement of the Motor Vehicle Act, Narcotic Drugs Psychotropic Act and laws for nutrient labelling of packaged food items. Stronger laws for online safety and to restrict the access of minors to pornography and online child sexual abuse material. A change in the nature of laws from being punitive to more reformatory is recommended.**

7. **IAP should have a public private partnership with the government to strengthen RKSK and AFHS. Telehealth, tele-counselling, m-Health and digital health services should be integrated into AFHS and RKSK with active participation of all stakeholders including adolescents in its design.**
# Adolescent Friendly Health Services

## Web Table I Expanded Adolescent Friendly Health Services

| Health care Domains Addressed | Expanded Action Plan at various levels |
|-------------------------------|---------------------------------------|
|                              | Health services | Schools | Communities | Mobile health | Media and marketing |
| Sexual and reproductive health, including HIV/AIDS | Early diagnosis and treatment of HIV/AIDS and STDs | Comprehensive sexuality education | Positive youth development Peer education Teen clubs | Targeting of knowledge, attitudes, and risk behaviors | Promotion of community for sexual and reproductive and HIV/AIDS health access |
| Malnutrition (under and over nutrition, micronutrient deficiencies) | Screening and micronutrient supplementation Management of co-morbidities | Micronutrient supplements Healthy school meals, physical activity | Micronutrient and protein-energy supplements De-worming Nutrition education | Interactive personalized feedback | Junk food advertising restrictions Campaigns community awareness |
| Vaccine-preventable and infectious diseases | Early identification and treatment Vaccinations De-worming Bed net distribution | Vaccinations De-worming | De-worming Bed net distribution | Vaccine reminders via SMS | Campaigns community awareness |
| Injury and violence | Trauma care, including first responders (ambulances) Screening for mental disorders | Multi component interventions targeting violent behavior and substance use | Promotion of parental skills, communicatio n, gender equality Economic Police enforcement of traffic rules | | Promotion of knowledge of effects of violence and available services |
| Tobacco, alcohol, and illicit drugs | Risk screening Motivational interviewing to promote cessation | Alcohol and smoke-free policies Parent and teacher | Promotion of positive parenting skills Mentoring | Targeting of knowledge, attitudes, and risk behaviours | Promotion of adolescent mental health literacy |