



## **Module C5: Adolescent / Youth Friendly Health Services (YFHS)**

**Entry Scenario** *The entry scenario addresses a variety of issues and problems associated with the module topic. It may be used at the beginning of the course to stimulate the students to identify their own needs and interests. The results may be utilized by the individual to assess own learning process, or be integrated with class objectives.*

*Depending on your audience you may elect to begin with scenario 1 (administrators and policymakers) or scenario 2 (clinicians)*

### **Scenario**

A recent health survey carried out in your city indicates that only 10% of youth aged 15-19 years see a health care provider regularly (at least once a year). Among the reasons cited for not seeking health services, they enumerate: lack of confidence in the staff, fear that their parents would be informed, having to be accompanied by an adult, feeling that they are being judged, or, simply, that they do not know where to go. The majority of them indicate that in case of need they would go the city hospital emergency room for acute care.

As the city council's health officer, these results surprise you since the city hospital created an Adolescent Outpatient Clinic (open every morning Monday to Friday) four years ago, and family physicians in the four city-supported outreach clinics are due to take care of patients aged 15 and up. Reflect on top priority objectives and settings which you would address to improve the health care of young people as well as their access to these health care

### **General Goals for Learners**

*By completing the module the participant will be able to:*

- I. Understand and detail the basic elements of youth friendly health services (YFHS)
- II. Identify and employ strategies to implement youth friendly health services
- III. Sensitize participants to the need of monitoring/evaluating youth friendly health services

**Goal I. Understand and detail the basic elements of youth friendly health services**

	<b>Training Objectives</b> Key topics to be covered	<b>Educational Methodology</b>	<b>Activities, Issues, and Questions</b>
<b>K N O W L E D G E</b>	<p><b>A. Describe the characteristics of the five major components of youth friendly health services</b></p> <p><b>1. Environment</b></p> <p><b>2. Staff</b></p> <p><b>3. Procedures &amp; policies</b></p> <p><b>4. Locations</b></p> <p><b>5. Content &amp; services</b></p>	<p>Reading</p> <p>Class discussion</p> <p>Small groups discussion</p> <p>Interview with young people</p> <p>Visit of various health care settings</p>	<p>Module preparation: Search for examples of YFHS on the Internet.</p> <p>Ask participants to reflect on their own experience as adolescent patients. What qualities of services would they have wanted? Explore experiences of participants with YHFS in their own settings.</p> <p>Groups develop the arguments in favor of youth friendly services:</p> <ul style="list-style-type: none"> <li>a. Evidence regarding adolescents' health status and services utilization</li> <li>b. Children's' Rights</li> <li>c. Teenagers' needs (e.g. privacy, dignity, confidentiality, continuity of care, time)</li> </ul> <p>Ask young people to attend the meeting to help professionals in identifying key components of YFHS.</p> <p>List possible settings and models in which YHFS concepts can be put into practice Discuss how a YFHS can be made culturally sensitive</p> <p>Suggested follow-up to course: Ask participants to gather a focus group of young people in their own country and review with them the basic ingredients of YFHS</p>

**Goal II. Identify and implement youth friendly health services**

	Training Objectives Topics to be covered	Educational Methodology	Activities, Issues, and Questions
<b>S K I L L S</b>	<p><b>A. Select best practices which facilitate the implementation of YFHS in various settings</b> - Identify obstacles and decide how they can be overcome</p> <p><b>B. Design a basic plan for a new YFHS in a chosen setting and be prepared to advocate for it.</b></p> <p><b>C. Select target audiences for training intervention and outline the content of the intervention</b></p>	<p>Small group discussion</p> <p>Followed by plenary</p> <p>Interview of young people, of health professionals and decision-makers</p> <p>Small group discussion</p> <p>Followed by plenary</p>	<p>Is it possible to change a traditional care setting into youth friendly instead of creating a new unit? Use the workshop scenario in annex 2 to facilitate the discussion of the following issues:</p> <ul style="list-style-type: none"> <li>- How to identify the specific needs of an adolescent population</li> <li>- How to identify setting in which to implement YFHS</li> <li>- How to get young people involved</li> <li>- How to convince staff to engage in such actions</li> <li>- How to activate a network of professionals</li> <li>- Ensuring logistics and supplies</li> <li>- Fund raising and resource allocation</li> </ul> <p>Provide a concrete example of how to set-up a new YFHS in various settings:</p> <ul style="list-style-type: none"> <li>- In a hospital</li> <li>- In an outpatient unit</li> <li>- In a group of practitioners</li> <li>- In a school</li> <li>- In a leisure center (counseling)</li> <li>- In a deprived area</li> </ul> <p>Brainstorm ideas on advocating for the implementation of YFHS in these different settings.</p> <p>Discuss</p> <ul style="list-style-type: none"> <li>- How to identify the professionals in need of training</li> <li>- How to identify potential teachers / trainers</li> <li>- How to assess the needs of these professionals to define the content of training</li> <li>- How to plan the implementation (e.g. using the EuTEACH website)</li> </ul>

**Goal III. Sensitize participants to the need to monitor and evaluate YFHS**

	<b>Training Objectives</b> Topics to be covered	<b>Educational Methodology</b>	<b>Activities, Issues, and Questions</b>
<b>K N O W L E D G E</b>	<b>A. Identify process, output and outcome indicators</b>	Mini lecture and Class discussion	<p>Taking into account the objectives of your YFHS, define and list process indicators as well as output and outcome indicators. Discuss the usefulness and limitations of these indicators.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>- Process indicator (the way services are organized and delivered) number of facilities opened, number of services offered, user satisfaction</li> <li>- Output indicator (immediate and concrete results of services): number of consultations, profile of users, change in user knowledge and practice</li> <li>- Outcome indicator: (the effect of the service on the health status of the target population): reduction of teenage suicides, STIs or pregnancies.</li> </ul>
	<b>B. Describe how to involve young people in evaluating YFHS</b>		<p>Objective B examples:</p> <ul style="list-style-type: none"> <li>- Ask young people to generate indicators and measures</li> <li>- Involve young people in data collection</li> <li>- Engage young people in the interpretation of the data</li> <li>- Encourage young people to participate in the translation and dissemination of evaluation results</li> </ul>
	<b>C. Understand the importance of ethical guidelines for YFHS</b>	Class discussion	<p>Discuss the ethical principles that are important to YFHS. How can ethical standards be monitored?</p>
<b>S K I L L S</b>			



## **Resources**

**WHO: Adolescent friendly health services: An agenda for change**

[http://www.who.int/child\\_adolescent\\_health/documents/fch\\_cah\\_02\\_14/en/index.html](http://www.who.int/child_adolescent_health/documents/fch_cah_02_14/en/index.html)

**Tylee A & al. Youth-friendly primary-care services: how are we doing and what more needs to be done? The Lancet, Vol. 369 No. 9572 pp 1565-1573**

<http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673607603717.pdf?id=40bade4753939e7f:ec6d6a4:132e2826d3a:2fe51318065564737>

**ChandraMouli V. Adolescent friendly health services Training Course in Sexual and Reproductive Health Research Geneva, WHO, February 2009**

[http://www.gfmer.ch/Medical\\_education\\_En/PGC\\_SRH\\_2009/pdf/Adolescent\\_friendly\\_health\\_services\\_Mouli\\_2009.pdf](http://www.gfmer.ch/Medical_education_En/PGC_SRH_2009/pdf/Adolescent_friendly_health_services_Mouli_2009.pdf)

**International Planned Parenthood Federation: Strengthening youth friendly services**

<http://www.ippf.org/NR/rdonlyres/61BA967F-5D07-41EA-907D-C8AB128E002D/0/InspireProvide.pdf>

**Youth friendly health services in the European Region: Sharing experiences (WHO)**

[http://www.euro.who.int/\\_data/assets/pdf\\_file/0017/123128/E94322.pdf](http://www.euro.who.int/_data/assets/pdf_file/0017/123128/E94322.pdf)

## **Annex 1: Basic components of youth friendly services**

### **Youth friendly staff**

- Technically competent, interested and concerned
- Well supervised
- Keep a positive look at adolescent health and illness
- Experienced in group work
- Knowledgeable on adolescent hot topics (i.e. music)
- Understanding and considerate, easy to relate to and trustworthy
- Able and willing to devote adequate time
- Can be contacted at repeat visits (continuity of providers)
- Stability of staff

### **Youth friendly environment**

- No stigma
- Appealing milieu
- Accessible location
- Gender specific opening hours
- Convenient working hours
- Convenient location
- Nice waiting room :  
music, pamphlets, visuals, TV, educational material, internet café
- Privacy in the examination/consultation/waiting rooms,  
and in the entrance/exit
- Link with the community (i.e. school health services, leisure centers, hospitals, etc)

## Youth friendly procedures and policies

- **Youth friendly policies**
  - Guarantee confidentiality
  - Do not require parental consent
  - Do not withhold provision of services and products
  - Holistic approach
- **Youth friendly procedures**
  - Easy access, registration/retrieval procedure (anonymity if required)
  - Freedom to choose one's health care provider
  - Short waiting time
  - Drops-ins' without prior appointment possible
  - Strong linkages to other health and social service providers
  - Free or inexpensive and flexible about payment

## Kind of services provided

- General health (endemic diseases, injuries, TB, hepatitis)
- Sexual and reproductive health (STI, contraceptives, management of pregnancy)
- Voluntary Confidential Counselling & Testing (VCCT)
- Management of domestic and sexual violence
- Mental health services
- Substance abuse (alcohol, illicit drugs, tobacco)
- Information and counselling on a range of issues (sexual & reproductive health, nutrition, hygiene, substance use)

## Locations

- School health services
  - Nurse and doctors
  - Teachers, mediators, social workers
  - Outsiders: adult experts, trained peers
- Sports groups, youth clubs, church
- Primary health care services
  - In practice physicians
  - Clinics
  - Hospitals
- NGO's
- Websites
- Media, youth magazine

## Several models of YFHS

- Integrated into primary health care
- Integrated in student health facilities
- Integrated into the educational system
- Integrated into and/or linkages with Youth Centres
- Out reach services for especially vulnerable young people
- Integrated into several sectors with municipal coordination



## **Annex 2: Workshop example for Goals II A and B**

Use the following scenario to set the scene of the workshop:

You are a pediatrician in a group (two persons) practice who also works part-time in a well-baby clinic of the local hospital in a working-class city of 60,000. Your 16 year-old daughter confides in you that a girl in school is planning to sneak away to a larger city for “help” with a suspected pregnancy. The girl is apparently embarrassed and afraid to go to a local doctor and she doesn’t trust the nurse who visits the school irregularly. Although you think your own daughter would consult you with her problems, you have doubts about your 15 year-old son who is fast maturing, risk-taking, and non-communicative. You feel something must be done about health services for youth in your city, and you resolve to do something about it.