Pacific Regional Guideline Manual on Standards for The Youth Friendly Services

Program Name: Youth Friendly Services
Department: Adolescence Health & Development
Focus Area: Youth friendly services for the most at risk young people at school and at community
Product/Process: Guideline Manual and Assessment Tool

Prepared By:

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<th>Document Owner(s)</th>
<th>Project/Organization Role</th>
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<tr>
<td>Countries</td>
<td>Service providers and managers</td>
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<td>UNFPA</td>
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1. INTRODUCTION

This is the Pacific Youth Friendly Services Guideline Manual developed for the centers and clinics offering adolescents health and development information, education and reproductive health, counseling and STI services.

This guideline manual has been developed following a small qualitative YFS study done in ten PICs in 2010 by the AHD section of SPC.

Hence, the guideline manual is contextualized and focused to the pacific islands situation. Nonetheless, the standards are universal based on best practices.

Goal

The overall goal of the Pacific YFS Manual is to assist national services providers and managers provide a quality, efficiency and accessible youth friendly services to the key populations with primary focus to the young people between 10-24 years old in the PICs.

Objective(s)

The YF Guide focuses on the 4 key objectives:

1. All designated youth friendly services clinic (or centers’) facilities meet the recommended standards prescribed in this YFS Guide.

2. All designated youth friendly services clinic (or centers’) service providers meet the recommended standards prescribed in this YFS Guide.

3. All designated youth friendly services clinic (or centers’) centers’ program management meet the recommended standards prescribed in this YFS Guide.

4. All designated youth friendly services clinic (or centers’) client satisfaction meet the recommended standards prescribed in this YFS Guide.

Policy directions:

Services can be said to be “youth-friendly” if they have policies and attributes that attract young people to the facility or programme and provide them with a comfortable and appropriate setting.

It is the obligations of the national health authorities such as the directors of public health divisions and the NGOs to ensure that national policies prioritize youth health and related developments.
Services directions:
These types of services meet the needs of students and young people and encourage them to follow up their visits. Hence, these standards adaptable to adolescences age group of 10-19years and older youth 20-24 years. The service standards are to be used at the following set ups:

- Primary health clinics
- Youth centers
- Reproductive health services centers and clinics
- School health clinics

Key people in the manual
The manual uses the following key actors as crucial for sustaining the youth friendly services in the clinics¹ and centers².

- **Program manager**: the person in charge for the overall development planning, management and monitoring of the youth friendly services center or clinic.

- **Facility manager**: the person in authority of the day to day administration and management of the clinic (s) or center (s).

- **Service provider or staff**: the person (s) actually trained or skilled and recognized by accreditation to deliver youth friendly services to the adolescents (10-19 years old) and older youths 20-24 years old.

- **The client**: the young person aged 10-24 years boy and girl attending the facility, or benefiting from the program; or seeking help and service(s) from the service provider and staff; and changing his/ her behavior as a result of integrating with the clinic, program and the services offered.

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¹ Clinics -referred to; - as facilities with the universal understanding of a health clinic operating full time for the people in need of health care e.g. seeking clinical services such as STI and HIV screening and treatments; whilst

² Centers-referred to: - as facilities without the universal understanding of a health clinic operating a full time for the sick but also incorporates and adopts a function of a health clinic; and also delivers other non-clinical but development services for the young people.
2. WHAT MAKES YOUTH FRIENDLY SERVICES

Characteristics of Youth Friendly Services in brief:

Drawing form the recent youth friendly services study and from other examples and references. The Pacific AHD program decided that the following requirements make a youth friendly services:

1. User-friendly facility
2. Welcoming staff
3. Adolescence-sexual reproductive health commodities and services
4. Supporting enabling environment, policy and adults (including the parents and communities
5. Ongoing improvement and quality assurance measures

2.1. A: FACILITY STANDARDS

This section sets the standards for all facilities designated as youth friendly services centers/clinics.

2.1.1. Convenient hours:

Std 1. Facility managers must ensure that the opening and closings hours are convenient for the youths in and out of schools or work.

I. Youth should access service at their convenient timing from 8.00am to 4.30pm and extended beyond if it is necessary during social occasions as such festivals etc.

II. Timely opening and flexible operating hours are crucial to increase acceptability of the youth to access services with and without urgency for services or just to clear their query and myths of sexual health and other development issues.

III. Closing hours should be flexible but within the cost of the limited resources of the facility in terms of manpower and evidence of overwhelming need from the most at risk young people targeted by the facility.

A.T. M-12; Y-16
2.1.2. Convenient locations:

Std 2. Facility and program managers must ensure that the facilities are close to means of transportation and close to places whereby youths hang around during their free times.

I. Location of facilities (a center or a clinic) designated to offer youth friendly services allow easy access and opportunity to visualize its youth tailored center.

II. Location to a public transport is crucial

III. Location to a place whereby youths spend their free time allows easy access to keep them less risky and vulnerable. Examples of such places are internet cafes, sports grounds, shopping centers, parks,

A.T 2. M-13, 16, 18

2.1.3. Sufficient space and privacy:

Std 3. There must be adequate space and privacy for the youths seeking services at the facility.

I. All designated facilities for youth friendly services must have a separate waiting room with privacy to information, advice and services.

II. There should be separate rooms for the youths in facilities offering multiple services to older men and women. However, the resources offered must be the same and similar to all others.

A.T 3. M 19, 20, 21; S 6, 8; Y- 31, 32, 33, 34, 37; S-31, 33, 34;
2.1.4. Comfortable surroundings and welcoming staff

Std 4. All youths despite their age group, race, culture and religious background must be treated with respect and welcoming to the facility from the staff.

I. The facility must clean, tidy and comfortable

II. All staff attending the youth must dress up and communicate with youths with sensitivity and respect.

III. The waiting rooms must be comfortable in size, temperature, attentive, informative, and with flow of clients.

IV. The facility functional structure should have a comfortable sized waiting room, a separate consultation room (sound proof), and a treatment room.

V. All staff must be trained to work with youth. They (staff) should demonstrate to their youth client supportive attitude.

A.T 4. S-12, 14; S-19, 20, 26
2.2. B: SERVICE PROVIDERS & STAFF STANDARDS

2.2.1. Trained staff for youth services

All designated centers/clinics must have (through full-time or part-time employment) an appropriate level of trained staff(s) which should be sustained, inspired, and couched in the process of delivering youth services.

Std 5. Staff assigned to work for youth must have the following skill mix:

I. Sexual reproductive health knowledge and skills including update technology in contraception (trained nurse)

II. Basic counseling for youth as young as ten years old (adolescence counselor)

III. Specialized counseling such as VCCT and sexual psychology

IV. STI/HIV screening and management

V. Peer to peer education skills (including life skills, and harm reduction skills)

VI. Youth development skills at the community level

VII. Basic public health knowledge and skills such as community health development and program implementation.

VIII. Program managers must ensure service providers are undergoing education and accreditation to ensure youths are accessing quality services that changed their lives.

A.T 5. M-24, 25, 27; S16, 17, 18;
2.2.2. Competency and Staff Attitude:

Std 6. It is recommended that all staff dealing with youths in the daily administration of ASRH information, education and services offered at the YFS center/clinics must be competent and have the right attitude towards young boys and girls seeking help.

I. All staff must show courtesy and welcoming, and show serious concerns to help solve the youth’s problem (Y38).

II. There must be little interruption as much as possible during interviews (and consultations) with the young people (Y39).

III. There must be passion and interest in knowing the youth as a person with integrity, and hence there must be meaningful engagements with the young boy and girl (Y40).

IV. As much as possible staffs are encouraged to use visual aids to provide a very clear perception and understanding of the problem and the solutions proposed with and for the youth (Y42-44).

V. All facility staff must ensure the youth is comfortable during the interviews (and consultations) (Y46-48).

VI. There must be enough time spent with each youth (minimum of 15-20mins per youth client) (Y49).


2.2.3. Adolescences-sexual reproductive health commodities and services (Role Delineation)

Std 7. All or any facility designated offer youth friendly services must ensure they offer (at least) level 1 basic sexual reproductive health services listed below:

I. Level 1 Basic services (more of primary and prevention):

i. Reproductive Health counseling services
ii. Contraceptive counseling services
iii. Contraceptives
iv. Male and Female condom distribution
v. Emergency oral contraceptives (EOC)
vi. Intra-Uterine Device (IUDs)
vii. HIV/ AIDS counseling and information sharing to the young people
viii. STIs counseling and referrals

II. Level 2 additional: Desirable services (more of secondary preventions):

i. STIs treatment (with approved antibiotics regimen)

ii. HIV counseling and testing on site

iii. Sexual psychosocial counseling

iv. General medical services for general purposes including visa applications etc

A.T 7. F-201A-201I

2.3. C: MANAGEMENT STANDARDS

2.3.1. Supervision

Std 8. Program managers must ensure regular supervision to the facility happens. The facility must ensure that there are adequate information materials for the following:-

I. Proper supervision

i. Supervision checklist

ii. Time and dates of visit and changes recommended


Std 9. Guidelines: The facility must ensure that all approved management and clinical guidelines are kept safely and regularly used, and updated by appropriate agencies.

I. It is advised that all written guidelines and protocols are kept safely and used regularly (F501-504).

II. There must be at least one short refresher training on the guidelines and protocols annually for the facility staff and volunteers.

A.T 9. F-501, 502, 503, 504
YFS Standards & Guideline Manual

Std 10. The facility must have in place a proper record keeping and information management system.

   I. There must be a clinic registry of clients and the details for follow up.
   II. Clinic statistics of the youth attendants must be entered during daily visits, updated regularly and produced quarterly by the facility manager.
   III. The facility manager must be able to review the clinic data and make some sense or analysis at that level before submitting to the higher health authorities.
   IV. The must be a dedicated facility staff to keep the clinic statistics and information.

2.3.2. Supporting enabling environment, policy and adults

Std 11. Policy and written procedures: All managers must ensure there are policies to support the delivery of youth friendly services at the facility. The policy must entail into a guideline etc to ensure the client’s privacy and confidentiality is protected. The guidelines must be a written document that protects the youth client in the following ways:

   I. Not to restrict their access to all youth friendly services
   II. Not to restrict their access to the contraceptives including Emergency Oral Contraceptives (EOC).
   III. Not to fabricate information based on the provider’s political, religious and cultural beliefs and myths.
   IV. Not to restrict advices and services just because of his age, race, sexual history, and spousal and parents beliefs and myths.
   V. However, there must be written procedures that clearly outlined based on evidences circumstances where by proper consultations with the youth and his/her next of kin or spouse or husband or wife or partner must take place for the benefit of the young client.

Std 12. Appointments: The facility must ensure that there is easy access to the services from all youth as young as ten years old.

   I. There must be appointments easy to make and promoted by other facilities other than a health clinic e.g. schools.
   II. As much as possible, all new clients should not need an appointment.
   III. Regular clients (and those of with special needs) should be given advice for follow up appointments.
YFS Standards & Guideline Manual

Std 13. Information about the facility should be widely available and promoted within and outside the communities the facility is responsible for its young people.

A.T 10. F-501, 502, 503, 504; M 56, 57, 58, 59, 60, 61, 62, 63

2.3.3. Ongoing improvement and quality assurance measures

Std 14. The facility manager must ensure that he has in place methods to solicit youth opinions on the quality, efficiency and access to the services offered by the facility. Below are some examples:

I. Quality assurance such as client suggestion box etc
II. Client suggestion box
III. Provider ask clients (focus group discussions and one on one interactions)
IV. Other staff ask clients
V. Protocols and guidelines on management and clinic operations

A.T 11. F-501, 502, 503, 504, 601

2.3.4. Publicity

Std 15. There must be enough publicity on the details of the service, the locations and promotion activities.

I. There must be signs specifically targeting youth that announces that reproductive health services and counseling are available (64).
II. There must be volunteers, peer educators or any staff who do the outreach of activities (65).
III. Services at the facility should be widely promoted through mass media (66).

A.T 12. M-64, 65, 66,
2.4. D: Client’s satisfaction standards

2.4.1. Young people’s psychological barriers prevented through adult support

Std 16. The management of the facility must ensure that adults and the community are showing support and provide conducive environment for the information and services to the youth.

I. Adults in the community served by the center/clinic should show some support for youths in seeking reproductive health services (M69).

II. Staff should also help in changing negative attitudes from the adults preventing youth to seek reproductive health services (M70).

A.T 13. M-69, 70;

2.4.2. Youth client satisfaction

Std 17. There must be evidence that all youth served by the center/clinic are satisfied with the access, quality and services offered by the facility.

I. The facility must have a client satisfaction information source (e.g. client survey, suggestion box; regular focus group discussions etc.)

II. More half of the youth clients should show evidence of satisfaction

III. There must be evidence that the youth would recommend to his/her friend to come to the center/clinic.

A.T 14. Y-57 & 58
2.4.3. Youth involvement

Std 18. All facility managers must ensure that youths (or representative(s)) are involved in the operation and decision making of the services at that community. Areas of youth participation may be (but not restricted) to the following:-

I. Annual evaluation of the access, quality and efficiency of the services through what methodology suggested to them (youth).

II. Promotion of the services offered by the facility (promotion activities).

III. Planning of the services offered by the facility.

IV. Cleaning up of the center/ clinic.

V. Part of a decision making body for the center/ clinic (e.g. advocacy team etc) (M44-45).

A.T 15. M44-45

2.4.4. Youth coverage

Std 19. The facility must be available and ready to meet the needs of all age group as young as 10 years and still at schools.

I. There must be evidence that more than 80% of the youths within the center/ clinic’s catchment physically accessed the information, education and services offered by the facility (see clinic utilization records and information if kept at the clinic or other reliable sources).

II. All information, education and services received by the young person is complete or if not allow by providing opportunity for the return and follow up session (Y52-55).

III. The facility must be sensitive to all genders included including young boys and older males (Y56; M47-49).

A.T 16. Y 52-56; M47-49
3. Implementation and Assessment Tools

The implementation of the YFS standards

The YFS regional standards are to be used during the following events and processes:

I. Planning of a youth friendly services for an existing as well as new facility designated for youth health and development.

II. Monitoring and evaluation of the clinical sexual reproductive health services for the adolescence and young men and women.

The use of the Assessment Tool

I. The assessment tool is a set of questionnaires written for annual YFS survey see ANNEX A. The assessment tool is developed to allow both an internal self assessment and an external assessment from the Government or the NGO or an authorized agent other than the above.

II. There is also an assessment rating based on the key themes of the youth friendly services standards ANNEX B.

III. All facilities rated less than xxx are implied poor or unsatisfactory, and facilities rated above xxx meets the required basic or level 1 youth friendly services as the minimum standard for a youth friendly services.

Other Links

The YFS Guideline Manual should not be used in isolation. The following other links should be also considered:

I. Annual management and planning: the rating of the centers/ clinics should provide the managers guidance to what and which areas of the services needing attention.

II. Human Resource Training and Development activities: the guideline also provides information on areas of technical and program management deficiencies or human resources gaps for development and training of the local staff.

III. Clinic Statistics and reporting: It is always useful to keep along with the statistics reporting of the clinic with the standards require for being youth friendly services. Whilst this guideline provides the qualitative evaluation of whether the facility meets the regional standards, the clinic statistics provides a complementary quantitative assessment support to the managers and services providers.
## 4. The Assessment Matrix

### Table 1 The Assessment Matrix

<table>
<thead>
<tr>
<th>Key features of youth friendly services</th>
<th>Recommended Standards</th>
<th>Assessment Tool Reference</th>
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<tr>
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<td>M 19, 20, 21; S 6, 8; Y-31, 32, 33, 34, 37; S-31, 33, 34;</td>
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<td>Comfortable surroundings and welcoming staff</td>
<td>Std 4: All youths despite their age group, race, culture and religious background must be treated with respect and welcoming to the facility from the staff.</td>
<td>S-12, 14; S-19, 20, 22, 26</td>
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<td><strong>B: SERVICE PROVIDERS &amp; STAFF STANDARDS</strong></td>
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<td>Trained staff for youth services</td>
<td>Std 5: Staff assigned to work for youth must have the following skill mix:</td>
<td>M-24, 25, 27; S18-19;</td>
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<td>Competency and Staff Attitude</td>
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<td>Y (1) 38, 39, 40, 41, 42-44, 46-48 &amp; 49.</td>
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center/clinics must be competent and have the right attitude towards young boys and girls seeking help.

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<th>Std 7: All or any facility designated offer youth friendly services must ensure they offer (at least) level 1 basic sexual reproductive health services listed below: Level 1 Basic services (more of primary and prevention): Level 2 additional: Desirable services (more of secondary preventions):</th>
<th>F-201A-201I</th>
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### C: MANAGEMENT STANDARDS

| Supervision | Std 8: Program managers must ensure regular supervision to the facility happens. The facility must ensure that there are adequate information materials for the following:- Std 9: Guidelines: The facility must ensure that all approved management and clinical guidelines are kept safely and regularly used, and updated by appropriate agencies. Std 10: The facility must have in place a proper record keeping and information management system. | F-401, 402, F-501, 502, 503, 504 |
| Supporting enabling environment, policy and adults | Std 11: Policy and written procedures: All managers must ensure there are policies to support the delivery of youth friendly services at the facility. The policy must entail into a guideline etc to ensure the client’s privacy and confidentiality is protected. The guidelines must be a | F-501, 502, 503, 504; M 56, 57, 58, 59, 60, 61, 62, 63 |
written document that protects the youth client in the following ways:

**Std 12: Appointments:** The facility must ensure that there is easy access to the services from all youth as young as ten years old.

**Std 13: Information about the facility** should be widely available and promoted within and outside the communities the facility is responsible for its young people.

**Ongoing improvement and quality assurance measures**

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**Publicity**

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<th>Std 15: There must be enough publicity on the details of the service, the locations and promotion activities.</th>
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<td>M-64, 65, 66,</td>
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**D: CLIENT’S SATISFACTION STANDARDS**

**Young people’s psychological barriers prevented through adult support**

<table>
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<th>Std 16: The management of the facility must ensure that adults and the community are showing support and provide conducive environment for the information and services to the youth.</th>
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**Youth client satisfaction**

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<th>Std 17: There must be evidence that all youth served by the center/ clinic are satisfied with the access, quality and services offered by the facility.</th>
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<td>Y-57 &amp; 58</td>
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**Youth involvement**

<table>
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<th>Std 18: All facility managers</th>
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<td>M44-45</td>
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must ensure that youths (or representative(s)) are involvement in the operation and decision making of the services at that community. Areas of youth participation may be (but not restricted) to the following:-

| Youth coverage | Std 19: The facility must be available and ready to meet the needs of all age group as young as 10 years and still at schools. | Y 52-56; M47-49 |
5. Rating of the Facility during Assessment

Rating of the Facility, services providers, management and clients should be during the inspection of the center/clinic regularly (annually). This information should be seen as bench markers for development, planning and management. All centers/clinics rated below the minimum acceptable standards should be made known to appropriate authorities for consideration and improvement.

Of the total of 19 standards, there are 16 key measurable or assessable outcomes. Table 2 below shows the details of the tool.

Table 2 Youth Friendly Services Rating (scores)

<table>
<thead>
<tr>
<th>Outcome indicators</th>
<th>Sources of information: M-manager, S-Services Providers, Y-Youth/client, F-Facility</th>
<th>Manager</th>
<th>Staff – service providers</th>
<th>Clients/Youth</th>
<th>Facility</th>
<th>Score</th>
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<tbody>
<tr>
<td>A: FACILITY RATING</td>
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<tr>
<td>Convenient hours</td>
<td>M &amp; Y</td>
<td>3/3</td>
<td>3/3</td>
<td>2</td>
<td></td>
<td></td>
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<tr>
<td>Convenient locations</td>
<td>M</td>
<td>3/3</td>
<td></td>
<td>1</td>
<td></td>
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<tr>
<td>Sufficient space and privacy</td>
<td>M, Y &amp; S</td>
<td>3/3</td>
<td>3/3</td>
<td>3/3</td>
<td></td>
<td>3</td>
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<tr>
<td>Comfortable surroundings and welcoming staff</td>
<td>S</td>
<td>3/3</td>
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<td>Sub-total</td>
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<td>2</td>
<td>2</td>
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<td>7</td>
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<td>B: SERVICE PROVIDERS &amp; STAFF STANDARDS</td>
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<tr>
<td>Competency and Staff Attitude</td>
<td>Y</td>
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<td>3/3</td>
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<td>3/3</td>
<td>1</td>
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<tr>
<td>Sub-total</td>
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<td>4</td>
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<td>C: MANAGEMENT STANDARDS</td>
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