

# YOUTH-FRIENDLY FACILITIES

## What Is It?

There is growing recognition of the need to make all health facilities youth-friendly—an approach that has been shown to increase access to contraceptive services (USAID, 2015). The characteristics of the health facilities that young people visit are just as important as the service providers they meet and the choices available to them. Many essential and supportive elements of youth-friendly services relate to the facilities themselves (ICRW, 2014). **Any facility can be youth-friendly** if it welcomes and supports young people, acknowledges their needs and experiences, and respects their privacy, diversity and individuality.



According to the WHO's [Global Standards for Quality Health-Care Services for Adolescents](#), youth-friendly facility characteristics include the following:

*Standard 5. The health facility has convenient operating hours, a welcoming and clean environment and maintains privacy and confidentiality. It has the equipment, medicines, supplies and technology needed to ensure effective service provision to adolescents.*

Young people care about a facility's physical environment (e.g., cleanliness, design features that enable privacy and confidentiality) (Ambresin et al., 2013). The organizational and design features of the facility are important to ensure that accessible, efficient and safe clinical care is provided in a secure and supportive environment. There are **three key elements** to consider when assessing the youth-friendliness of a facility:

- Operating hours and an appointment system to meet the needs of adolescents;
- Design features and local policies to maintain privacy and confidentiality; and
- Systems to ensure adequate equipment, drugs and supplies.

## Essential and Supportive Elements of Youth-friendly Services

### Essential

#### Access

- Convenient hours
- Reasonable waiting time
- Affordable fees
- Separate space and/or hours for youth, where needed

#### Quality

- Specially trained staff
- Respect for youth
- Adequate time for client-provider interaction

- Privacy and confidentiality
- Package of essential services available
- Referrals available
- Sufficient supply of drugs and commodities
- Range of contraceptives offered
- Emphasis on dual protection/ condoms (male and female)

## Supportive

### Access

- Outreach services available
- Accessible location
- Male and female youth welcomed and served
- Publicity that informs and reassures young people

### Quality

- Comfortable setting
- Adequate space
- Youth input/feedback to operations
- Educational materials available
- Provision of additional educational opportunities
- Peer providers/counselors available

## What Are the Benefits?

- **Youth-friendly facilities encourage future health-seeking behavior:** When young people visit a facility that is ill-equipped with supplies, closed at the time of their arrival, or perceived to be unsafe or unclean, they may be discouraged from returning to that facility. This may be especially true for young people who have to travel to a facility, especially if they are spending money or taking time off from school to do so. When adolescents find clean, friendly, well-stocked facilities, they are more likely to return.
- **Youth-friendly facilities bolster efforts to improve youth-friendly services.** Research has shown that adolescent use of SRH services can be increased, especially when four complementary approaches are implemented together:
  - Providers are trained and supported to be nonjudgmental and friendly to adolescent clients;
  - Health facilities are welcoming and appealing;
  - Communication and outreach activities inform adolescents about services and encourage them to make use of services; and
  - Community members are supportive of the importance of providing health services to adolescents.
- While many projects and programs around the world aim to provide “youth-friendly services,” careful examination suggests that most programs do not implement these four approaches together (Chandra-Mouli et al., 2015).

## Programmatic example: Mozambique and Tanzania

To improve access to and quality of youth-friendly SRH services (YFS) for Mozambican and Tanzanian adolescents and youth, Pathfinder used a people-centered approach that focused on a continuum of interventions in the community and the facility to deliver mainstreamed YFS in a sustainable and scalable manner. The project shifted away from a one-size-fits-all model of youth-friendly service delivery, and away from a “separate spaces” model, towards a more context-specific, mainstreamed approach. This was found to contribute to significant youth uptake in services – particularly for long-acting reversible contraceptives (LARCs). [Pathfinder’s technical paper](#) on its approach concludes with recommendations for future YFS programming, including:

- Expand solicitation of youth feedback on service delivery
- Shift from one-size-fits-all towards context- and youth-responsive models of service delivery
- Collaborate with government for youth-friendly and responsive systems-level interventions.

## How to Implement?

### Involve diverse perspectives of young people in the process of defining the characteristics of youth-friendly facilities

There’s no better way to ensure whether or not young people find your facility to be youth-friendly than engaging them in the process of defining what it would look like. It can be as simple as holding focus groups and running through the different criteria that matter to them when accessing facility-based services.

### Assess your facility

There are a number of tools you can use, including the [High Impact Practices Strategic Planning Guide](#) and the [Provide: Self-Assessment Tool for Youth-friendly Services](#). These tools will help you assess the following components of your facility to determine how youth-friendly it is:

- **Branding** (stigma-free): Do you market your facility as a youth-friendly center? (e.g., separate brand name for the youth-friendly services within your facility, logo that doesn’t picture a family, facility name that doesn’t include “family planning”) Does the signage on the front of your facility welcome young people?
- **Convenient location** (accessible): Is your facility easy to find? (e.g., sign posted from the main road)? Is your facility within walking distance of a public transport hub?
- **Convenient opening hours** (accessible): Is your facility open during after-school hours and/or on weekends? Are there specific hours for young people? Does your facility have an easy appointment system for young people to use? (e.g., walk-in clinic, appointment system, emergency appointments)
- **Reception area** (confidential): Is the average waiting time satisfactory for young clients? Can clients speak to the receptionist without being overheard by other clients? (e.g., clients can write down what service they need, separate entrance, separate waiting area, etc.)
- **Affordable fees** (accessible): Does your facility provide subsidized and/or free services for young people? If no, can young people receive SRH services regardless of their ability to pay? Do you display the prices of your services clearly for clients to see? Does your facility have a strategy in place to ensure sustainability of subsidized services (e.g., fundraising strategy, focus on fee-paying clients, etc.)?
- **Consultation rooms** (confidential): Are the consultation areas away from public view? Are the consultation rooms marked in a neutral way (i.e., no name of the service provided), so as to avoid stigmatization? Are the consultation areas soundproof?
- **Privacy** (confidential): Are clients’ files stored securely, so that only the relevant service provider(s) can access them? Are young clients asked before their personal information is shared with third parties? If cases are shared between health providers for learning purposes, are clients’ details left out to ensure anonymity? Is the client given the option to provide the most appropriate

address for maintaining their right to privacy, as opposed to requiring a home address? (e.g., post, email, phone call, SMS, etc.)

## Solicit feedback from the adolescents and young people who visit your facility and strengthen facility based on this feedback

Ask young clients:

- How they found out about your facility
- If they would refer the service to their peers
- If they felt respected
- If their privacy was protected
- If they received the services they came for or were denied on the basis of age, marital status, or other markers

Setting up a facility advisory committee that includes some young clients would enable regular quality improvement for the facility, and ensure that young people can hold the facility accountable. Toolkits like [PROVIDE](#) can also support ongoing self-monitoring. Using monitoring tools and disaggregated data on client age, sex, and service type, facilities can be very responsive to the needs and realities of the young people in their vicinity. It is important to act on the results and recommendations coming from these feedback mechanisms as well as those from the assessments. Young clients should be able to see that their opinions and needs are listened to and acted upon at the facility.

### Programmatic example

#### Young researchers determine youth-friendliness in Malawi and Bangladesh

[Rutgers](#) and the International Planned Parenthood Federation (IPPF) trained young people as researchers in Malawi and Bangladesh. A two-week intensive training included topics such as sexual and reproductive health, qualitative research methodologies and data analysis. Over an extended period, the young researchers were engaged in interviews and focus groups with peers who had accessed services at health clinics (both urban and rural) to determine the extent to which young people's expectations were met by each clinic. Results from [Malawi](#) indicated that young people were drawn to facilities depending upon how confidential they were, the availability of services, friendliness of providers and the cost of services.

## What Is the Evidence?

- A literature review on young people's perspectives on health care revealed that there are eight indicators which are central to young people's positive experience of care: accessibility of health care; staff attitude; communication; medical competency; guideline-driven care; age appropriate environments; youth involvement in health care; and health outcomes (Ambresin et al., 2013). Another literature review on evidence for improving adolescent access to and use of SRH services highlights that the most effective interventions in increasing adolescents' and young people's access to services is to ensure that, other than quality clinical services, sexuality and life skills education, and linkages with educational and economic opportunities and supportive adults are in place (Denno et al., 2015).
- Case studies from Ecuador and Peru reveal that introducing and sustaining youth-friendly health services is a long-term process that requires a team effort from a wide range of stakeholders including donors, public institutions and health providers (Goicolea et al., 2017). Transforming existing health facilities into youth-friendly health facilities was linked with the broader organization of the national health system and the development of adolescent health policies.
- A project on mainstreaming youth-friendly services in Mozambique and Tanzania demonstrated an increase in new contraceptive users among 10-24 year olds, and a significant number of young clients reported satisfaction with the services and being treated with respect by the service providers (Pathfinder International, 2017).

## Helpful Tips

- **It will take more than just a coat of paint.** While some aesthetic and structural improvements to a facility add to its youth-friendliness, especially those that encourage privacy and confidentiality, it's important not to oversimplify. A fresh coat of paint doesn't replace a trained provider or a full stock of contraceptive supplies.
- **Perception is just as important as reality for young people.** If your facility is not seen to be youth-friendly among the young people in your catchment area, then they will not come. Management, providers, and other staff must all work to promote the perception that services are meant for young people and that they meet the criteria set out on this page.
- **If your services aren't affordable for young people, it won't matter what your facility looks like.** Consider removing or reducing user fees or providing vouchers and cash transfers to adolescents and young people.
- **There is no one-size-fits-all-approach.** Often, young people have more concerns on the social and mental aspects of sexual and reproductive health, rather than clinical services. Partnering with specialized services for referrals can help serve these non-clinical needs. (See references: Braeken 2012, Beguy et al. 2014, and STEP UP 2013).
- **Adolescents and youth are diverse, and the options for services should be too.** The same service delivery model is rarely able to serve all cohorts and sub-populations of adolescents and youth, so program designers should identify and prioritize the subpopulation(s) of young people that they wish to serve

### Youth Participation

- As you're reviewing the youth-friendliness of your service delivery point by going through the PROVIDE tool, ask some of your young clients to fill it out on their own and compare your answers.
- Include young people on your quality improvement teams by ensuring that they understand what they are signing up for and are equipped to contribute meaningfully.

### Data Management

- Toolkits like PROVIDE can also enable ongoing self-monitoring of the facilities. Combined with disaggregated data on age, sex, and service type, facilities can be very responsive to the needs and realities of the young people in their vicinity.
- Advocate for the collection of data on a national scale on the percentage of public and private clinics that meet established criteria for youth-friendliness.

### Multisectoral Collaboration

- There is no one-size-fits-all-approach, which is why it is important to reach adolescents with sexual and reproductive
- health services at different stages of need. Often, young people have more concerns on the social and mental aspects of sexual and reproductive health, rather than clinical services. Therefore, partnering with specialized services for referrals, based on an assessment of local needs, is important.

## Challenges

- Making any facility youth-friendly may require an initial injection of financial resources, including to make adjustments to clinic layout (construction and/or furniture) to respect young clients' privacy.
- There may be forces outside of the control of the facility that mean that it cannot meet all standards of youth-friendliness. For example, supply chain blockages may make it impossible to procure adequate commodities.
- Monitoring and evaluation often requires (human) resources and expertise that some facilities don't have, which means that there is no feedback mechanism to check the youth-friendliness of the facility.

## Tools Related to This Approach

- [Thinking outside the separate space: A decision-making tool for designing youth-friendly services](#), E2A Project
- [Provide: A Self-Assessment Tool for Youth-Friendly Services](#), IPPF
- [Global Standards for Quality Health-care Services for Adolescents \(2015\)](#), WHO

## Related Approaches

- [Facility Makeover](#)
- [Health Facility Strengthening](#)

## References

- Ambresin et al (2013) [Assessment of youth-friendly health care: a systematic review of indicators drawn from young people's perspectives](#)
- Beguy et al (2014) [Unintended pregnancies among young women living in urban slums: evidence from a prospective study in Nairobi City, Kenya](#)
- Chandra-Mouli et al (2015) [What Does Not Work in Adolescent Sexual and Reproductive Health: A Review of Evidence on Interventions Commonly Accepted as Best Practices](#)
- Denno et al (2015) [Effective Strategies to Provide Adolescent Sexual and Reproductive Health Services and to Increase Demand and Community Support](#)
- Evidence to Action Project, USAID (2014) [Reaching Young First-Time Parents for the Healthy Spacing of Second and Subsequent Pregnancies](#)
- Evidence to Action Project, USAID & Pathfinder International (2015) [Thinking outside the separate space: A decision-making tool for designing youth-friendly services](#)
- Goicolea et al (2017) [Developing and sustaining adolescent-friendly health services: A multiple case study from Ecuador and Peru](#)
- International Council for Research on Women (2014) [Adolescents and Family Planning: What the Evidence Shows](#)
- International Planned Parenthood Federation (2014) [Provide: A youth-friendly services assessment tool](#)
- International Planned Parenthood Federation (2012) [Sexual and reproductive health needs of young people: Matching needs with systems](#)
- Munthali et al (2011) [Do They Match? Adolescents' Realities and Needs Relating to Sexuality and Youth Friendly Service Provision in Dowa District, Central Malawi](#)
- Pathfinder International (2017) [Mainstreaming Youth-friendly Sexual & Reproductive Health Services in the Public Sector in Mozambique & Tanzania](#)
- Population Council (2014) [Assessing Adolescent Friendly Health Services in India: The Perspectives of Adolescent and Youth](#)
- Population Council (2013) [Status Report on the Sexual and Reproductive Health of Adolescents Living in Urban Slums in Kenya](#)
- USAID (2015) [High-Impact Practices in Family Planning \(HIPs\). Adolescent-friendly contraceptive services: mainstreaming adolescent-friendly elements into existing contraceptive services](#)
- WHO & UNAIDS (2015) [Global standards for quality health-care services for adolescents: a guide to implement a standards-driven approach to improve the quality of health care services for adolescents](#)

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