

## **Perception of adolescent friendly health services: the reality in Kenya**

Adolescent friendly health services have not yet been well established as opposed to the demand. We cannot say that the services are totally unavailable but the main problem is that the current services do not answer the real demand. Most of the existing clinics and services are located in large cities and within provisional and referral hospitals.

In Kenya, the ministry of Health has started the campaign of establishing Youth HIV clinics as a separate entity. Within these clinics adolescents also receive services such as family planning and reproductive health counseling, with an easier access.

With the new national constitution passed recently, young adults and adolescents are finding it easier to receive some reproductive health services legally and according to the recommendation of the national guidelines.

## **WHO's approach to improving the quality and expanding the coverage of health services to adolescents: potential utility**

1. To use strategic entry points like the HIV clinics and rehab centers in order to make adolescent health as an integration of these services is potentially an approach that can be utilized without need for new changes. This is the best and the most practical method for making the services available.
2. The WHO approach can be used as a guideline and a protocol in hospitals and organizations for the setup and managing of the youth friendly services.

## **WHO's approach to improving the quality and expanding the coverage of health services to adolescents: potential feasibility**

1. These approaches address all the health problems of youth and adolescents and look for the ways to solve them; they are therefore all potentially feasible and make sense when it comes to the actual implementation.
2. These approaches target to use the already existing health care services as the HIV clinics. Using NGOs, youth clubs and posters as alternative ways of targeting the youth is also potentially feasible.

## **Case study: South Africa's evaluation of National Adolescent Friendly Clinics Initiative**

The document describes an initiative for quality improvement in adolescent-friendly services implemented in public-sector primary health care clinics in South Africa. The program was coordinated by the Reproductive Health Research Unit (RHRU), University of Witwatersrand, Chris Hani Baragwaneth Hospital, Johannesburg, South Africa.

The first important point of the document is the idea to start the program from grass roots with the main initiative coming from the community itself. The community felt that there was need for establishing such services, because there was an increase in the number of youth with HIV and unwanted pregnancy in the country. The initiative was also supported and appreciated by the government and was considered as a national priority.

The next important aspect of the initiative that made it a successful and feasible, and a good example for other countries to follow, is the way it has been established. The system was set up by beginning with the process of consensus, a draft of the first National Adolescent-Friendly Clinic Initiative (NAFCI) program guidelines was developed and distributed to stakeholders. The NAFCI structure was made of a strong team including all cadres and all were trained and sensitized about the idea of youth friendly clinics.

Another aspect of the system was the regular follow up and mentoring. The idea of giving the health workers and stakeholders' incentive for providing quality services gave morale and the need of increasing the effectiveness and quality of the services provided. Continuous mentoring and evaluation makes the initiative a growing and chance for future improvement.

### **Assignment documents**

1. [WHO. Adolescent friendly health services - An agenda for change. Geneva: WHO; 2002.](#)
2. [WHO. Evolution of the national adolescent-friendly clinic initiative in South Africa. Geneva: WHO; 2009.](#)
3. [WHO. Methods and tools to scale up quality health service provision to adolescents. Geneva: WHO; 2010.](#)