WHO/UNAIDS global standards for quality health care services for adolescents

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Making health services adolescent-friendly

Adolescents are unique. They need quality health services that recognize this.

I want to have a say in decisions about my health.

I don’t want my parents to know.

Please respect my privacy.

Don’t treat me like a child.

WHO/UNAIDS set global standards to improve the quality of health services for all adolescents.
Definitions

• **Standard** - A statement of a defined level of quality in the delivery of services that is required to meet the needs of intended beneficiaries.

• A standard defines the performance expectations, structures, or processes needed for an organization to provide safe, equitable, acceptable, accessible, effective and appropriate services.
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<th>Standard statements</th>
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<td><strong>Adolescents’ health literacy</strong></td>
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<td><strong>Standard 1.</strong> The health facility implements systems to ensure that adolescents are knowledgeable about their own health, and they know where and when to obtain health services.</td>
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<td><strong>Community support</strong></td>
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<td><strong>Standard 2.</strong> The health facility implements systems to ensure that parents, guardians and other community members and community organizations recognize the value of providing health services to adolescents. They support such provision and the utilization of services by adolescents.</td>
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<td><strong>A package of services</strong></td>
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<td><strong>Standard 3.</strong> The health facility provides a package of information, counselling, diagnostic, treatment and care services that fulfils the needs of all adolescents. Services are provided in the facility and through referral linkages and outreach.</td>
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<td><strong>Providers’ competencies</strong></td>
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<td><strong>Standard 4.</strong> Health-care providers demonstrate the technical competence required to provide effective health services to adolescents. Both health-care providers and support staff respect, protect and fulfil adolescents’ rights to information, privacy, confidentiality, non-discrimination, non-judgemental attitude and respect.</td>
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# Standard statements

| **Facility characteristics** | **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. |
| **Equity and non-discrimination** | **Standard 6.** The health facility provides quality services to all adolescents irrespective of their ability to pay, age, sex, marital status, education level, ethnic origin, sexual orientation or other characteristics. |
| **Data and quality improvement** | **Standard 7.** The health facility collects, analyses and uses data on service utilization and quality of care, disaggregated by age and sex, to support quality improvement. Health facility staff is supported to participate in continuous quality improvement. |
| **Adolescents’ participation** | **Standard 8.** Adolescents are involved in the planning, monitoring and evaluation of health services and in decisions regarding their own care, as well as in certain appropriate aspects of service provision. |
Implementation

Advocates experience many barriers to health care

Global initiatives are urging countries to prioritize quality as a way of maintaining human rights-based approaches to health (WHO, 2013). Yet, evidence from both high-income and low-income settings shows that, in many contexts, quality of care remains highly fragmented, poorly coordinated and assessed in quality (WHO, 2014). Evidence suggests that adolescents experience many barriers to health care (WHO, 2013).

- Adolescents do not have adequate health literacy to enable them to gain access to, understand and effectively use information in ways that promote and maintain their good health.
- Adolescents’ use of health services can be highly influenced by the social values and attitudes (perceived or real) of their peers, parents and other adult gatekeepers including clinicians.
- Important causes of adolescent mortality and morbidity, and their risk factors, do not get sufficient attention in primary care nor in many initiatives labeled “adolescent friendly”, which often focus on a limited range of issues, such as sexual and reproductive health.
- Mental health disorders, nutrition, substance use, intentional and unintentional injuries and chronic illness are often neglected. In addition, health services are often clinically oriented and opportunities for preventive interventions are historically overlooked.
- Adolescents experience primary care services, unsatisfactorily because of perceived lack of respect, privacy and confidentiality, lack of dignity and discrimination, and impediments of the moral issues of health care providers.
- Conventional service delivery (e.g., outside of school hours) and flexible appointment procedures (e.g., the possibility of consultation without an appointment) are important for adolescents’ access to services and are not always provided. In addition, adolescents may not use the facility if they perceive it to be unacceptably inadequate, or lacking the necessary drugs and supplies.
- Some groups of adolescents within the community may fall outside the planning because they are too visible, are socially marginalized or are signaled. In addition, or some payments that have a deterrent effect on access to services for any reason, especially among adolescents, may have a disproportionate effect on adolescents because of their limited access to cash and dependent on family resources.
- Pockets of excellent practice exist, but overall, services need significant improvement.

Develop a shared understanding of adolescent health and the need to improve the quality of health-care services

within national policies and strategies

within quality improvement mechanisms and initiatives

Conduct a situation analysis to inform the adaptation of the global standards and their implementation plan

Conduct preparatory work to facilitate implementation

Monitor and evaluate the implementation of the standards

Implement actions at facility, district and national levels to meet the standards
http://www.who.int/maternal_child_adolescent/topics/adolescence/graphics/en/
Making Health Services Adolescent-Friendly

What Adolescents Can Do:

- Don't hesitate to talk about sensitive topics. Your health worker is there to listen without judgement.
- Find out how to access your local health services.
- Ask your health worker for more information to help make decisions about your health.
- Be aware of your rights to privacy and confidentiality.
- Speak to a trusted adult if you experience discrimination or disrespect.
- Provide feedback to your health centre on how it can improve services for you and your friends.

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Standard 4: providers’ competencies

- Core competencies in adolescent health and development for primary care providers