AYFHS Modular Training

MODULE 7:
SRH & Referrals for Young Clients
Thanks

- Participants
- Facility leadership
- Ministry of Health
- PEPFAR (PUSH and Star-L Districts)

All material developed for the training are based on Lesotho national health policy and guidelines.
Training Progress Discussion

• Attendance
• Pre and post test scores
• Between training, site support and data review.
• Reflect on the application and use of training content in the facility;
  – **Module 1:** Friendly services for adolescents and young people
  – **Module 2:** TnT for Adolescents in Lesotho
  – **Module 3:** Undetectable Viral Load: Adherence for AYPLHIV Treatment Success
  – **Module 4:** Treatment Support: Disclosure in the family, school and in relationships
  – **Module 5:** Aging with HIV: Transitioning Care from childhood to adulthood
  – **Module 6:** Teen MCH

What has been accomplished? Why?
Review the Facility Accomplishments

• What are all the improvements that have happened as a result of training participation and site support?
## Module 7 Overview: 3 hours

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<th>TIME</th>
<th>TOPIC</th>
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<tr>
<td>15 min</td>
<td>Welcome &amp; Opening</td>
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<tr>
<td>10 min</td>
<td>Pre-test</td>
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<td>25 min</td>
<td>SRH Services Available</td>
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<td>30 min</td>
<td>Services available to young people &amp; additional needs</td>
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<tr>
<td>5 min</td>
<td>Break</td>
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<tr>
<td>45 min</td>
<td>Developing a referral directory</td>
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<td>15 min</td>
<td>Planning to improve SRH services and completed referrals</td>
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<td>30 min</td>
<td>Post test for all 7 Modules</td>
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<td>15 min</td>
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<td>Training Evaluation</td>
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Learning Objectives

• Review the sexual & reproductive health (SRH) services available in this facility
• Brainstorm on the SRH needs of adolescents and young people
• Identify non-health services to support youth development
• Clarify integration & the facility-facility referral process
• Create a directory for referrals (across facilities and into the community)
Welcome

REVIEW GROUND RULES

– Participate
– Ask for clarification if unclear
– Provide constructive comments and share professional experience
– Cell phones on silent for 3 hours
– Prepare for success and certification
  • Participate in all trainings & pass tests
  • Demonstrate use in the facility
Pre Test

- 10 minutes given to answer a multiple choice test on the topic area.
- At the end of this last module, you’ll be given a post-test to check your learning for the entire course.
Relevant Standards

Young people can access information and services in convenient working hours irrespective of ability to pay.

Health services are accepted by young people due to the friendly attitude of health care providers, reasonable waiting time, and because confidentiality and privacy are maintained.

Young people get all the relevant services that they need from trained health professionals with knowledge and skills in reproductive health, sexuality and care, treatment of STIs, mental health, domestic and sexual violence.
Sexual & Reproductive Health Services

• How do we define sexual and reproductive health?

• On flipchart list all the services and products available at this health facility.

When complete, self analyze:
• Circle all the services available to young females aged 15-24 years in one color.
• Place a ✓ (tick mark) next to all services available to young males aged 15-24 years.
Reflect on Analysis:

• What happened in our discussions?
• Does age impact provider’s decisions for care?
• What do we learn about SRH access in this facility from our discussions? (positive and negative)
• What can we take into our work in the clinic?
  – Do our personal values influence professional decisions?
Female SRH Needs

**Sexual Health**
- Fertility awareness
- Contraceptives
- STI Screening & Treatment
- PrEP

**Mental Health**
- Counseling
- Intimate partner violence
- Sexual abuse
- Drug/alcohol abuse

**RH**
- Fertility awareness
- Conception support
- MCH (ANC & PNC)
- Postpartum FP

**HIV**
- Testing
- ART
- Index & partner HTS
- Peer support
Male SRH Needs

Sexual Health
- VMMC
- STI Screening & Treatment
- Fertility awareness & FP

Mental Health
- Counseling
- Drug/alcohol abuse
- Violence or abuse

HIV
- HIV Testing
- Care & Treatment
- Risk reduction counselling
- Sexual partner testing
What are ALHIV SRH needs?
Who can support these?

- Doctor
- Adolescent Nurse
- Social Worker
- Treatment Support at home or school
- Psychologist
- Counsellors
- Youth Ambassador / expert clients / peer educators
- Doctor
- Adolescent Nurse
- Social Worker
- Treatment Support at home or school
- Psychologist
- Counsellors
- Youth Ambassador / expert clients / peer educators
Tips for Discussing Sex with Young Patients

• Start early; when signs of puberty start and clients see changes and may have basic questions.

• Normalize the discussion; “I talk with all my patients about sex. Would it be okay to talk about this today?”

• Use resources in the clinic such as peers (educators/leaders/expert clients/Ambassadors) talking about sex without an adult can assist youth to feel free and open up.
Contraception for adolescents

• Answer true or false to the following
• In general, with the exception of male and female sterilization, all methods that are appropriate for healthy adults are also potentially appropriate for healthy, post-pubertal adolescents.
  • True
• Once puberty has been achieved, methods that are physiologically safe for adults are also physiologically safe for adolescents.
  • True
• No method of contraception should be excluded based on adolescent age alone
  • True
Contraception for adolescents

• The provision of contraception to adolescents should be
  – holistic
  – take their sexual and reproductive health needs into account
  – consider all medically appropriate options

• True
• Adolescent women only need education on the method of contraception they request
• False

• Family planning methods for male adolescents include condoms, vasectomy and withdrawal that males use directly, and the Standard Days Method (SDM) that requires their participation.
  False
Contraceptive choices for adolescents and young people

- 18 year old male student who is sexually active with multiple partners and does not want a child with any of his partners. He says he cannot come to the clinic with any of the partners. He would like to have a child when he is over 30.

- 14 year old female coming in after an abortion – does not want her mother to know she is sexually active.

- Obese 17 year old female with acne and irregular periods

- 18 year old female adolescent who is married and is non-compliant with her medications.

- Discordant couple, both 21 who have 2 children and do not want anymore children. Male partner is HIV positive.

- Mentally retarded 14 year old who has a history of being sexually abused whose mother requests permanent contraception.
Definitions

1. **Integrated services**
   Integrated care is a concept bringing together inputs, delivery, management and organization of services related to diagnosis, treatment, care, rehabilitation and health promotion. Integration is a means to improve services in relation to access, quality, user satisfaction and efficiency.

2. **Referral**
   is when a provider (lay or professional) reviews a client’s needs, discussed options, and provides advice on a service not available in that space.

3. **Non-health services**
   Refers to assistance and services provided by persons who are not nurses, doctors, or other licensed medical personnel.
Integration = access to multiple services

Integrated Facility

- MCH
- ART
- TB
- Family Planning
- Pharmacy

Integrated Clinic – Youth Corner

- Teen MCH
- HIV testing
- Youth ART

Integrated provider

- HIV care
- Sexual health
Referral

A referral is when a provider (lay or professional) reviews a client’s needs, discussed options, and provides advice on a service not available in that space.

Sometimes referrals have forms/tools to be completed, sometimes they are verbal directions, and sometimes there is someone (peer or professional) who walks the client to the referral service.

Which of these methods works best for adolescents?
Health Related Needs for 10-24 year olds

Church & faith support

Sports and clubs
Non-health Resources in the Community

• What are all the non-clinical resources that are available to youth in our community being served in our facility?

• How do patients know about these facility-community linkages available?
Creating a Referral Directory

See the handout for examples of:
– A Facility to facility directory
– A Facility to community directory

Let’s create one for our facility.

Split into two groups to complete them.
Next Steps for Improving SRH & Tracking Referrals in our Facility

- What do we need to improve SRH access for young people?
- What are the next steps?
- How do we track referrals and their completion?
- How do we promote community resources?

Make notes on the Module Report for continued site support.
Learning Objectives; Did we?

- Review the sexual & reproductive health (SRH) services available in this facility
- Brainstorm on the SRH needs of adolescents and young people
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Final Posttest

• Post test
• Attendance
Training Evaluation

Please give your feedback on the training modules and facilitation.
Official Closing

• Training Representative
  – Reflections on the training and participation

• Facilitator
  – Summary of achievements

• Facility head
  – Appreciation
  – Thanks
  – Moving Forward