



**Keys to youth-friendly services:
Introducing the series**

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'Unlocking' access

It is often said that young people are the future. This may be true, but they are also very much the present. There are approximately 3 billion people under the age of twenty-five living on the planet, and a large percentage of those young people lack the access to sexual and reproductive health services or information that they need to translate their decisions into realities for their lives now and in the future.

The *Keys to youth-friendly services series* explores what IPPF considers to be the key elements for 'unlocking' access to sexual and reproductive health services for young people. We believe that if every health professional and health-providing institution adopted these keys in the day-to-day implementation of their work, that it would go a long way in eradicating the stigma and other barriers that prevent young people from accessing the services, information and support that they are entitled to receive.

The International Planned Parenthood Federation (IPPF) has a long tradition of providing services to young people¹, and Member Associations view the provision of services to young people as one of their core activities. Between 2008 and 2010, the percentage of IPPF's services that were provided to young people doubled, with over thirty per cent of the IPPF services across the world being provided to that age group.

Our approach to the provision of sexual and reproductive health services for young people is based upon their rights, as opposed to solely their needs. The needs-based approach can be reactionary, whilst the rights-based approach compels us to be proactive in providing information and access for young people in a manner that resonates with their unique realities. The needs-based approach focuses primarily on health, whilst the rights-based approach focuses on health, participation and empowerment.

The *Keys* series explores how to adopt the rights-based approach in any setting within which sexual and reproductive health services are being provided. We believe that institutions and professionals that embody the characteristics outlined in this series are well-placed and better-equipped to attract under-served young clients, to meet all their sexual and reproductive health needs (both real and perceived), to empower them in realizing their sexual rights, to guide them through decision-making processes and to retain them as clients for continuing care in the years to come.

In essence, the *Keys* are about the question of 'how' to provide services in a manner that is rights-based and can be considered 'youth-friendly.' We need to move beyond token gestures to an approach to sexual and reproductive health service provision that truly and holistically addresses the sexual rights of young people. Whilst the series is not meant to be exhaustive nor specific to the myriad of contexts within which IPPF operates, we do believe that these five publications are five giant steps in the right direction.

¹ Young people are defined as all those aged 10 to 24.

Package of services

The Keys series may provide the 'how', but often there are questions about the 'what' should be provided, too. Defining the package of sexual and reproductive health services should be for young people is not an easy task, but what we do know is that any such package should promote young people's sexual and reproductive health and well-being as well as provide options and choice.

IPPF has defined an integrated package of essential sexual and reproductive services (IPES) that should be provided by all Member Associations. The word 'essential' refers to the fact that this is the minimum package of services that should be in place at every IPPF service delivery point; of course, the greater the choice available for young clients, the better.

Types of SRH services	Essential components
1. Counselling	<ul style="list-style-type: none"> a. Sex and sexuality AND b. Relationship <p>[Note: counselling is also an essential component for the other types of services]</p>
2. Contraceptives	<ul style="list-style-type: none"> a. Counselling, AND b. Oral contraceptive pills, AND c. Condoms [also provided under RTIs/STIs & HIV], AND d. Injectables, AND e. At least one long-acting and reversible contraceptive (LARC): intra-uterine device/system (IUD/IUS) OR implants, AND f. At least one emergency contraceptive (EC) method: pill-based OR IUD
3. Safe abortion care	<p>At least one of:</p> <ul style="list-style-type: none"> a. induced surgical, OR b. induced medical, OR c. incomplete abortion treatment, AND d. Pre- and post-abortion counselling
4. RTIs/STIs	<ul style="list-style-type: none"> a. At least one RTI/STI treatment method, OR b. At least one RTI/STI lab test, AND c. Condoms [also provided under contraceptives & HIV]

Types of SRH services	Essential components
5. HIV	a. Pre- and post-test counselling, AND b. HIV sero-status lab test OR HIV staging and monitoring lab test, AND c. Condoms [also provided under contraceptives & RTIs/STIs]
6. Gynaecology	a. Manual pelvic examination for symptomatic clients, AND b. Manual breast examination, AND c. Pap smear OR other cervical cancer screening method
7. Prenatal and postnatal care	a. Confirmation of pregnancy, AND b. Essential prenatal care, AND c. Essential postnatal care
8. Sexual and gender-based violence (SGBV)	a. Screening for SGBV, AND b. Referral mechanisms for clinical*, psycho-social, and protection services [*Note: EC provided under contraceptives. Other life-saving clinical services include STI presumptive treatment and HIV post-exposure prophylaxis (PEP)]

Further, the following principles guide the delivery of IPES by all IPPF Member Associations:

1. Integration of sexual and reproductive health services regardless of the initial point of entry.
2. Ensuring high quality, effective and efficient services by applying the *IPES Quality Assurance Toolkit*.
3. Change from a provider-centred towards a client-centred approach within a rights perspective based on client satisfaction and improvements in the health of the communities we serve.
4. Ensuring universal access to SRH and minimizing missed opportunities, with attention to:
 - The needs of vulnerable groups, especially women and girls
 - The needs of adolescents and young people, both those sexually and non sexually-active.
5. Involving the community, in particular women and girls, to lead and shape the response to sexual and reproductive needs, taking into account considerations of gender equity.
6. Facilitating respect, protection and fulfilment of human rights, which include sexual and reproductive rights, by offering client-centred services that are stigma-free and youth-friendly;
7. Adopting a broader health care model that incorporates human and sexual rights of adolescents, women, and men, gender equity, and respects culture, values of choice, dignity, diversity and equality.
8. Pursuing the continuum of care by strengthening partnership with and referral to higher level clinical, psycho-social and protection services of governmental and non-governmental agencies that support IPPF values and objectives.
9. Ensuring rational, safe and acceptable de-medicalization of SRH services through task sharing and/or shifting where applicable.

Overview of the series

Each key in the series takes a slightly different approach, given the diverse nature of the topics addressed. However, you will find the following sections in each publication:

1. An introduction to the topic and why it is important for the provision of youth-friendly services.
2. A section rooting each topic in sexual rights and identifying the most relevant right to each topic
3. Top tips for health professionals
4. List of resources for further research and reading

The primary target audience for the *Keys* series is health professionals; however, we envision the series being useful for anyone who is working in the fields of sexual and reproductive health, health provision, youth work and human or sexual rights. Our hope is that these publications will help health professionals to apply a new 'lens' to their work and to work with young people to ensure that the services provided meet their needs, realities and rights.

The following five topics each form a 'key' in this series, and there are several more to be published in the coming year:

- **Understanding evolving capacity:** This key focuses on the evolving capacity of young people to make decisions in relation to their own sexual and reproductive health. It spells out the key factors that influence young people's capacity to make autonomous decisions as well as measures that safeguard against their abuse or exploitation.
- **Ensuring confidentiality:** This key will focus on the importance of trust between young clients and providers. Attention will also be given to how a clinic's facilities can promote or hinder confidentiality and how a lack of confidentiality can inhibit access for young people.
- **Obtaining informed consent:** This key will focus on the importance of informed consent and providing young people with enough information to make informed decisions. Attention will also be given to the legal framework in relation to legal minors, with examples provided from England.
- **Celebrating diversity:** This key will focus on the diverse needs facing young people and the importance of respecting choices and promoting dignity in a clinical setting. This key will focus on how choice empowers young people and what choices should be available for young people within a clinical setting.
- **Adopting a sex positive approach:** This key will focus on the need for providers and staff to be 'sex positive' in providing services for young people. This means accepting that young people are sexual beings and promoting healthy and pleasurable sexual experiences.

Authors

IPPF commissioned most of the publications from within its own ranks. However, Ms Susie Daniel and Mr Simon Blake must be thanked for their expertise and contributions. Mr Blake wrote the key on informed consent alongside health professionals working for the UK-based young people's sexual health charity, Brook. Ms Daniel provided insight from decades spent in the sexual and reproductive health sector in the UK and beyond.

Contributors

The production Keys series was a team effort within IPPF and with external partners. We were committed to ensuring that it adequately represented the views of health professionals within the IPPF network and would be useful for them in their day-to-day work.

To that end, an advisory group of Youth Programme Officers in each of IPPF's six regional offices as well as health professionals or youth workers from IPPF Member Associations in the Philippines, Palestine, Nepal, the Netherlands, Benin and India were invited to provide input on every draft and re-draft. Their participation in this process was both invaluable and inspirational.

The former Director-General of IPPF, Dr Gill Greer, spent countless hours going through each publication line-by-line with her infamous red pen; she must be duly thanked for her attention to detail as well as her commitment to young people's sexual rights.

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