



7 PROVINCES AFHS SITES 14

A Brief Report on AFHS Sites in Nepal

About the Project

Visible Impact is a young-women-led not-for-profit company that aims to create a ‘visible impact’ in the lives of youth, adolescent girls, and women and their immediate families and communities with a focus on leadership development, advocacy, and realization of their sexual and reproductive health and rights. We have been conducting the Youth Empowerment for Sexual and Reproductive Health and Rights (YES) Project, supported by CORE Group started in January 2023 with the aim of advocating for stigma-free, youth-friendly, disability-friendly and gender-friendly sexual and reproductive health and rights (SRHR) services in Nepal.

Adolescent-friendly health services in Nepal

The Family Welfare Division under the Ministry of Health and Population (MoHP) has developed an ‘Adolescent-Friendly Health Service Operations Guideline 2079’ to ensure all health services provided by the health institutions of Nepal are adolescent-friendly. Adolescent-friendly services are defined as health services available in health institutions that enable adolescent girls and boys to access care in a safe, convenient, and welcoming environment. This guideline deals with different aspects of information and service provision to adolescents including adolescents’ health literacy, community support, appropriate package of services, providers’ competencies, health institutions’ characteristics, services free of discrimination, data and quality improvement, and participation of adolescents. It also provides conditions required for a center’s certification to be adolescent-friendly. It enlists the roles and responsibilities of different bodies of government to ensure a safe and convenient environment towards service access by the adolescent age group. As of 2022, the Family Welfare Division

has listed 110 health institutions as adolescent-friendly service centers across the seven provinces of Nepal.

The Youth Champions under the YES project conducted different informative sessions in their communities to increase knowledge on different aspects of sexual and reproductive health and the rights of adolescents and young people. They also talked with different adolescents and school students to learn about their knowledge regarding the AFHS services in their communities. They also visited a few of the listed adolescent-friendly service centers to understand the status of service provision and to learn what measures were being taken to maintain the adolescent-friendly status in some of these institutions. 14 AFHS centers were visited in seven provinces (2 in each province).

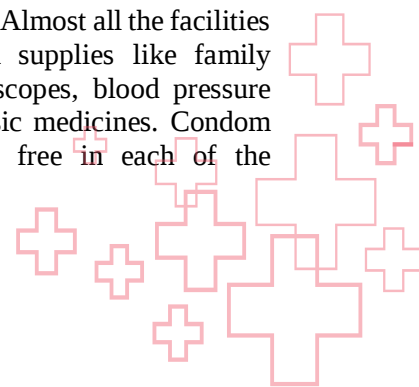
This report summarizes the findings from these service site visits and compares the information received from service sites with the experiences of adolescents regarding these services.

Summary of the findings

A. Perspectives from the healthcare center visits

1. Physical Infrastructures: Most health facilities did not have separate facilities or rooms for counseling and maintaining confidentiality while providing services to adolescents. Many of them had wheelchairs but the infrastructure was inaccessible in terms of its use.

2. Equipment and supplies: Almost all the facilities had basic equipment and supplies like family planning materials, stethoscopes, blood pressure measurement sets, and basic medicines. Condom boxes were available for free in each of the facilities.



3. Management: The healthcare providers were present in all the service centers during the time of the visit. The timing of the services was not appropriate for adolescent clients as all service centers functioned from 10 to 3 or 4 pm. None of the facilities had the involvement of adolescents in the health facilities meetings. Likewise, almost all the service centers reported that no specific budget for adolescents had been allocated from the local government.

4. Availability of IEC materials: Many health facilities had IEC materials for counseling and study purposes in the facility itself. However, most of them lacked distributable IEC materials for them to take away.

5. Availability of services: Different services like family planning services, ante-natal care, counseling, nutrition-related services and counseling, and services for STIs and HIV were present in most of the health facilities. However, counseling services were not specific to the adolescent population.

6. Capacity and skills of healthcare providers: Most of the healthcare providers reported not having received any specific training or orientation that was specific to adolescent-friendly service or counseling. Many also reported having no knowledge about the Adolescent Friendly Health Service Guideline of the government.

7. Community support: Very few health facilities have frequently conducted information and discussion programs with the community around them. However, most of them were not catered specifically to adolescents.

8. Data and quality improvement: Adolescent-specific service information and reporting are done in line with other reporting conducted regularly by the health facilities. However, many service providers reported that different indicators to report adolescent-specific services were not adequate in the reporting system. Likewise, regular assessment and improvement for adolescent-friendly service and quality were also lacking in most of the facilities.

B. Experiences of adolescents

Almost all adolescents that the Youth Champions talked to did not know about the provision of adolescent-friendly health services around them. They did not have knowledge about the service centers that provided adolescent-friendly services.

Many of them had not utilized these services and preferred to visit centers away from their homes to seek services related to SRH.

Recommendations

Overall, the outreach of the service centers needs to be expanded so that the adolescents have knowledge about these centers and available services. Many service centers met some standards for adolescent-friendly services but were not certified so speeding of the certification is needed. Likewise, adolescent-friendly services should be implemented in an integrated manner with all the services provided through the service center. Many healthcare providers feel discomfort, negative judgment, and stigma when adolescents seek services particularly related to SRH. Appropriate training is needed to clarify the values of the service providers so that the services are provided in a safe and non-judgmental manner. The facilities' operation timing and infrastructures should be made feasible for all adolescents, which has caused hesitation in them utilizing the service.

Contact Information

This report has been published with technical support of CORE Group, under the project Youth Empowerment for SRHR (YES), which advocates for an enhanced experience for adolescent and young people, persons with disability, sexual and gender minorities in SRHR.

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