**INDICATOR:** Number of health care workers who report implementing at least two youth friendly standards at their facility

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<thead>
<tr>
<th>STANDARD SECTOR INDICATOR CODE:</th>
<th>HEALTH SECTOR</th>
<th>PROJECT AREA: Youth Health and Well-Being</th>
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<td>HE_YOUTH_262</td>
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**Type:** Outcome  
**Unit of Measure:** Health-care worker  
**Disaggregation:** Sex: Male, Female  
Provider Type: Nursing Staff (RN, Nursing Officer, Principle/Chief Nurse)  
Pharmacy Staff (Pharmacy Assistant, Pharmacy Technician, Pharmacist)  
Health Lay Worker/Health-Care Auxiliary: Physician

**Related Objective:** Increase the capacity of school-based staff and health-care workers to provide health education and youth-friendly services (Objective 3)

**Precise definitions**

**Health-care workers:** Given that youth could interact with a number of individuals at a clinic, training could be done with the following: nursing staff (RN, nursing officer, principle/chief nurse), pharmacy staff (pharmacy assistant, pharmacy technician, pharmacist), health lay worker/health-care auxiliary, or physician.

**Report:** This indicator is self-reported by the providers and does not need to be directly observed.

**Youth-friendly facility standards:**

- **Adolescents’ health literacy:** 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.
- **Community support:** 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.
- **Appropriate package of services:** The health facility provides a package of information, counseling, diagnostics, treatment, and care services that fulfill the needs of all adolescents. Services are provided in the facility and through referral linkages and outreach.
- **Providers’ competencies:** 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 fulfill adolescents’ rights to information, privacy, confidentiality, nondiscrimination, nonjudgmental attitudes, and respect.
- **Facility characteristics:** 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 nondiscrimination:** 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**: The health facility collects, analyzes, and uses data on service utilization and quality of care, disaggregated by age and sex, to support quality improvement. Health facility staff are supported to participate in continuous quality improvement.

• **Adolescents’ participation**: 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.

**Data collection**

**Tool**: Youth Health Training Tracking Tool

Data should be collected at the beginning of the intervention (pre-test) and a second time at the end of training (post-test). Only individuals attending at least 75 percent of the sessions should be counted under this indicator. Some basic attributes of each participant should also be tracked for reporting purposes. For this indicator, sex (male/female) and type of staff (health-care worker, school-based staff, NGO/CBO, other) should be tracked. Posts could also track different fields for their own use.

An individual should only be reported once under this indicator even if they have attended multiple sessions.

**Reporting**

**To be counted for this indicator the following criteria must be met:**

- The individuals must have received at least 75 percent of the training sessions and/or information offered on implementing youth-friendly services.

- The information must have been provided by a PCV or their partner in an individual or small group setting with 25 people or less.

- Attendance at each session must be documented by the Volunteer or their partner.