

Orientation Programme on Adolescent Health for Health-care Providers

*Handout for*

Module F

**Concluding**



This handout provides information to complement the material covered in module F *Concluding*. The facilitator may refer to the text in this handout during the sessions.

## **THIS HANDOUT PROVIDES INFORMATION ON THE FOLLOWING:**

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|---|------|
| 1. Adolescents at the centre                          | F-5  |
| 2. Health-care providers and the needs of adolescents | F-6  |
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## 1. ADOLESCENTS AT THE CENTRE

Many individuals and institutions have important contributions to make to the health and development of adolescents. It may be useful to think of them in concentric circles of contact and influence. At the centre is the adolescent himself or herself. Parents, siblings and some other family members are in immediate contact with the adolescent and constitute the first circle. The second circle includes people in regular contact with them such as their own friends, family friends, teachers, religious leaders and others. The third circle includes musicians, film stars and sports figures who have a tremendous influence on them from afar. Finally in the fourth circle, politicians, journalists and bureaucrats (within the government and private sectors) affect their lives in small and big ways, through their words and deeds.

Health-care workers fit within the second circle in this scheme. They need to play a role in helping ill adolescents get back to good health (by diagnosing health problems/detecting problem behaviours and managing or referring them elsewhere). They also need to play a role in helping well adolescents stay well and develop into healthy adults, by providing information, advice and preventive services (or products). Unfortunately, in many places health-care workers do not make the valuable contributions that they could, either because they do not have the technical competencies needed or – which is often the case – they are unable or unwilling to relate to and work with adolescents.

## 2. HEALTH-CARE PROVIDERS AND THE NEEDS OF ADOLESCENTS

This OP has been developed for health-care providers like you – nurses, clinical officers, doctors and others who provide preventive and curative health services to adolescents (as well as to other segments of the population). It is intended to assist you in responding to your adolescent patients more effectively and with greater sensitivity. In practical terms, it is intended to provide you with ideas and practical tips to two key questions:

- What do I, as a health-care provider, need to know and do differently if the person who walks into my clinic is aged 16 years, rather than 6 or 36?
- How could I help? in the clinic? away from the clinic? are there other influential people in my community who understand and respond better to the needs and problems of adolescents?

Health-care providers like yourself, who have participated in OP workshops conducted around the world, have said that they have learned new things and more importantly learned to see things in new ways. We hope you have found this OP workshop both useful and interesting. We expect that you have gained new knowledge and understanding from the facts and figures, concepts and case studies presented by the facilitators, from the insights and experiences shared by your co-participants and most importantly, from yourself – as you reflected on your professional and personal experiences.

Applying what we have learned to change the way in which we do things – either in our professional or in our personal lives, is not easy to do. The OP is carefully structured to help you clearly define the changes you want to make, and the support you would need to make them. If you are in a powerful position – perhaps as the nursing superintendent or the head of the paediatrics department of a big hospital – you could possibly make a wide range of changes. Even if you are a junior doctor or nurse beginning your professional career in a small rural health centre, there could still be meaningful changes beginning with yourself, then reaching out to your colleagues, and then to the community beyond the walls of the health centre. Something that you should certainly do is to identify the competencies you need for your work (e.g. in counselling young people with HIV infection, or in managing young people with overdoses of psychoactive substances) and to search for opportunities to develop them.

There are likely to be times when you ask yourself: “Why should I take this on when I have more than enough on my hands?” At times like this, it may be helpful to think of the adolescents whose lives could have been changed because they were inspired by a few words from you, or whose lives were saved because of prompt medical intervention by you. Or you could recall the statement made by Dr Gro Harlem Brundtland, the former Director-General of the World Health Organization, at a ministerial conference on Population and Development in 1999: *“Think of the costs of failing to ensure that young people – our common future – have the knowledge, skills and services they need to help them make healthy choices in their sexual and reproductive health...”*

Orientation Programme on Adolescent Health for Health-care Providers

*Annex 1*

# Activity sheet

Session 3: ACTIVITY 3-1





## THE IMPROVEMENTS YOU PROPOSE TO MAKE IN YOUR WORK FOR AND WITH ADOLESCENTS

### Purpose

The purpose of this exercise is to help you prepare the outline of a personal plan to improve your work for and with adolescents. In this plan you will identify the changes you intend making in the way you will work. The plan includes the following elements:

- The proposed changes you intend to make;
- The importance of the proposed changes;
- How you will assess whether or not you are successful in making these changes;
- The personal and professional challenges and problems you may face in making these changes;
- The ways in which you are likely to address these challenges and problems, and the support you will need.

### General instructions

- Please use the tables entitled “*Individual implementation plan*”, which appear on the following pages, to record five changes you intend making in the way you work with or for adolescents.
- Please review the example on page F-11.
- Please designate one sheet for each change you intend to make. This way you will have extra writing space.
- For each change you propose in column 1, complete columns 2, 3, 4 and 5.
- In monitoring your own changes and application of this plan, it would be useful to set yourself target dates to review your progress and reassess your plans.

We wish you all success in your endeavours to improve your work with and for adolescents.



Sample Individual Implementation Plan				
Column 1	Column 2	Column 3	Column 4	Column 5
The changes I plan to make in my everyday work with or for adolescents.	Why I believe this change is important: who or what will benefit and why?	How will I know whether or not I have been successful and when will I know this?	Any challenges or problems I anticipate in carrying out the changes.	What help am I likely to need and who could provide me with this help?
	Who/what will benefit?	Why?	How?	When?
				Help needed
				Source
<b>EXAMPLE</b>				
Contact the local schools to provide information on the new adolescent-friendly health services being provided by our clinic.	Students in local schools. Friends of students, and family members of school staff who are not in local schools.	They will find it easier to obtain the services they need. "-"	A steady increase in the number of students who come to the clinic to obtain services.	Six months after making contact with the schools.
			Lack of interest from the school administration. Resistance from the teachers.	Support from the district education authority. A seminar to convince them of the value of this work.
				The director of the local hospital could request this. Leaders of the parent-teachers association.

Individual Implementation Plan				
Column 1	Column 2	Column 3	Column 4	Column 5
The changes I plan to make in my everyday work with or for adolescents.	Why I believe this change is important: who or what will benefit and why?	How will I know whether or not I have been successful and when will I know this?	Any challenges or problems I anticipate in carrying out the changes.	What help am I likely to need and who could provide me with this help?
	Who/what will benefit?	Why?	How?	When?
				Help needed
				Source

Individual Implementation Plan				
Column 1	Column 2	Column 3	Column 4	Column 5
<p>The changes I plan to make in my everyday work with or for adolescents.</p>	<p>Why I believe this change is important: who or what will benefit and why?</p>	<p>How will I know whether or not I have been successful and when will I know this?</p>	<p>Any challenges or problems I anticipate in carrying out the changes.</p>	<p>What help am I likely to need and who could provide me with this help?</p>
	<p>Who/what will benefit?</p>	<p>Why?</p>	<p>How?</p>	<p>When?</p>
			<p>Help needed</p>	<p>Source</p>

Individual Implementation Plan				
Column 1	Column 2	Column 3	Column 4	Column 5
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				Help needed
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	Who/what will benefit?	Why?	How?	When?
				Help needed
				Source



Orientation Programme on Adolescent Health for Health-care Providers

*Annex 2*

# Scenarios

Session 5: ACTIVITY 5-1



Please review your assigned scenario and reflect on the following questions:

- How do you think health-care providers would respond when faced with this situation?
- Why?

### SCENARIO 1

A young man comes into your clinic and says that he has no problem. He just wants some condoms for "protection". When you begin taking the history, he tells you that he is 18 years old, knows about AIDS, and does not want to listen to a lecture on morality. How would you react to this situation?

### SCENARIO 2

A young woman of 16, whom you have known as a child and whose parents and siblings you know very well, comes to your clinic for help. She says that she thinks she is pregnant, and wants you to give her or prescribe for her some emergency contraceptive pills. She insists that she does not want her parents to know about this. How would you react to this situation?

### SCENARIO 3

A girl of 14 is brought to your clinic by her mother. The mother says that the girl has been complaining of abdominal pain and backache for the past two weeks, and that she thinks that the pain is related to menstruation. When taking the history, you notice that the girl is silent – even shy – and allows her mother to speak on her behalf. You gently persuade the mother to wait in the consultation room when you take the girl into the examination room. Soon after the door is shut, the girl tells you that the problem is that her father forces her to have sex with him whenever they are alone at home. With tears in her eyes, she asks you to promise not to tell her mother, because it would break her heart. What would you do in this situation?

### SCENARIO 4

A young man of 18 bursts into your room, slams the door and walks towards you. He reaches your table and remains standing. You can see that he is very angry – literally trembling and there are tears in his eyes. He thumps the table and shouts at you: "When I saw you last week you promised me that no one would come to know about my problem. Yesterday, my mother said that she knew everything! She said that one of the nurses in your clinic, who is her friend, told her. I will never trust you people with white coats again...".

