

# **Standards of Health and Reproductive Health Services for Young People**

**(in the Project for Development of Health and Reproductive Health Services for Young People )**

## **Part 1**

### **1.1 Background**

In Thailand, the number of population aged between 10 – 24 years accounts approximately 17 millions or about 27 percent of the total population. Figures show that young people health problems have become one among major health problems at national level. These include STDs/HIV/AIDs, unwanted pregnancy, mal/over-nutrition, violence, and stress, all of which are preventable and reducible if young people can access and utilize existing health services provided in those government and non-government facilities.

Most of the health and reproductive health services are available for adults and general population, young people are thus afraid of or reluctant to use the services for several reasons. They are lacked of information about the sources of service; the facilities are far from home or school; inconvenient time and travel; including unfriendly and judging service providers. The problems had accumulated and become too serious to be handled.

Concerned sectors of both the government and non-government had introduced a number of small scales of pilot studies related to Friendly Health and Reproductive Health Services for Young people, however, very few of such area-based services are readily available. So far, exchange of learning experience, conclusion of the lessons learnt as well as the success factors have not yet been conducted, hence not possible to facilitate the development of “What and How to implement “Friendly Health and Reproductive Health Services for Young people”. And this development would be useful for facilitating health facilities as guideline to implement and scale up friendly health and reproductive health services for young people.

Among others, the Department of Health (DOH) plays key role not only in developing a betterment of young people health and reproductive health but also standard development, supporting and assuring that concerned organizations in various settings operate complying with the defined standards. Apart from implementing the policy under the Ministry of Public Health (MOPH), it also adopts relevant policies and strategies mainly executed by the WHO and relevant UN agencies. In addition, the DOH follows the National Policy and Plan for Development of Children and the Youth, under which the government and non-government sectors are expedited to manage health services to be accessible and

used by young people, which is consistent to the MOPH policy that emphasizes on improving and making health service system cover the entire area and every target group in Thailand.

The DOH by Reproductive Health Division (RHD) had launched the project for development of young people health and reproductive health services, to be implemented during the fiscal year 2006 – 2007. In the first year, the focus is on developing the standards of young people health and reproductive health services, followed by encouraging and improving the pilot hospitals to meet such standards. The second year is planned for evaluation activity guided by the standards and basic principles of the project.

## **1.2 Standard development**

Standards or basic principle is developed by firstly documenting relevant information and experience of related research, followed by discussions in the workshop on “Development of standards for health and reproductive health service for Thai young people” taken place during 26-28 April 2006 at Viengthai Hotel in Bangkok. This is a participative event among experts, academicians, and those representing young people group from concerned organizations under the Ministry of Education, MOPH, Universities, and NGOs. It comprised both the participants with and without experience in operating the friendly health and reproductive health services for young people. Service providers both doctors and nurses from enrolled hospitals were also invited to involve in this activity so that the standards is more likely based on the assumption of feasibility and meeting young people’s need.

Following to the above meeting, the Delphi technique was applied to the draft version of standards by experts and individuals with extensive experience in standard development and FHS for young people. Then it became ready for the trials in enrolled hospitals. Evaluation and revision of the standards are expected in the year 2007, and the final version will be announced and used throughout the country afterwards.

## **1.3 Objective**

To guide those facilities enrolled in the project in managing their friendly health and reproductive health services for young people.

## **1.4 Beneficiaries**

The target groups of this project cover young people aged between 10 – 24 years under both formal and informal education; those in the remote areas and slums; street children; and the disadvantaged group.

## **1.5 The target group**

The main benefit for target groups who will use the standards are administrators, service providers, and concerned staff in the facilities enrolled in the project. The standards will guide them in managing the friendly health and reproductive health services for young peoples in their setting.

The standard is also beneficial to other GO and NGO facilities in which having an intention to improve and develop their health services to become more friendly and responsive to young people' need. It is also useful for those supervisors of service support units at regional, provincial, district, and sub-district levels.

## **1.6 Basic principle**

The basic principles for the management of friendly health and reproductive health services for young people are as follows:

- 1) It focuses on integrated services, privacy, confidentiality, respect, and responding the different need of young people.
- 2) Involvement of young people is important in every step of work, ensuring that their need is paid attention and served.
- 3) Acceptance and support from the community, stakeholders, and those influences on young people' decision making are significant for effective and sustained implementation.
- 4) Services provided to young people should include health promotion, prevention of diseases, treatment, and rehabilitation.
- 5) The service should run with good management system accorded by policy, leadership, and support from administrators, including the plan, personnel development, public relations, supervision and monitoring, and knowledge management.
- 6) The services should put importance on proactive approach and activities that reach out the target population and create their service need.
- 7) Acceptance from young people and the community, and responding the different need of young people require efficient coordinating mechanism as well as active and continuing work with the network and partners.

## Part 2

### Component 1: Management

| Sub-component         | Indicators   | (Examples) Data  | (Examples) Tools/Methods  |
|-----------------------|--|--|---|
| 1.1 Vision and policy | <ol style="list-style-type: none"> <li>1. Obtaining a commitment from administrator in providing full support to the project.</li> <li>2. Having vision &amp; clear policy, and a commitment to developing young people.</li> <li>3. Having vision &amp; policy in written form</li> <li>4. Transferring and creating understanding among related personnel.</li> </ol>  | <ol style="list-style-type: none"> <li>1. Commitment of the administrator</li> <li>2-3. Details of vision &amp; policy of the hospital, attempting to improving young people's health.</li> <li>4. Record of policy orientation meeting and lists of implementers with acknowledgement.</li> </ol>   | <ol style="list-style-type: none"> <li>1. Records of hospital administrators/project executive board meetings</li> <li>2-3. Report of the workshop certified by the administrator, vision &amp; policy document, record of the meetings</li> <li>4. Reports of hospital executive board, working group and staff, lists of the orientation meeting attendants, interviews with the concerns.</li> </ol> |
| 1.2 Working groups    | <ol style="list-style-type: none"> <li>1. Concerned doctors come to play key role, take responsibility, and support the service development.</li> <li>2. Managing as a working group or a committee comprising various concerns.</li> <li>3. Having working groups and defined core body responsible for different tasks.</li> <li>4. The working groups have acquired knowledge, understanding, and competency to work for improving services for young people.</li> <li>5. The working groups are able to coordinate with organizations internally and externally.</li> <li>6. Having active mechanisms for the linkage of cooperating and communicating information.</li> </ol> | <ol style="list-style-type: none"> <li>1. Including concerned doctors in the committees, working groups, and in implementing the project</li> <li>2-3. Designating committees/working groups, with defined roles, responsibilities, functions, and authorities</li> <li>4-5. Knowledge and skill of the working groups about young people development.</li> <li>6. The plan of working system and communication of the committees/working groups.</li> </ol> | <ol style="list-style-type: none"> <li>1-3. Orders of designation of the committees/working groups, records of the committee/working group meetings.</li> <li>4-5. Interviews, observations, records of the committee/working group meetings, evaluation report</li> <li>6. Interviews, record of the workshop on working system planning, and operational plan</li> </ol>                              |

**Component 1: Management (continued)**

| <b>Sub-component</b>           | <b>Indicators</b>   | <b>(Examples) Data</b>   | <b>(Examples) Tools/Methods</b>  |
|--------------------------------|---|--|--|
| 1.3 Plan and project           | <ol style="list-style-type: none"> <li>1. Having a work-plan linking with other related plans/projects of the hospital such as HPH, HA, health insurance, social medicines, health education, QC, TQA, and ISO including the involvement of network partners.</li> <li>2. Having annual budget plan for the management of services for young people.</li> <li>3. Having quality monthly/annual plans (operation).</li> <li>4. Having projects that cover 5 standard's component such as the following activities:               <ol style="list-style-type: none"> <li>4.1 Provision of services (with details of information on problems and need of young people and networks in respective areas)                   <ul style="list-style-type: none"> <li>- Treatment</li> <li>- Health prevention/promotion</li> <li>- Counseling</li> <li>- Referring (inside and outside the facility)</li> </ul> </li> <li>4.2 Health personnel development and peer education</li> <li>4.3 Public relations</li> </ol> </li> </ol> | <ol style="list-style-type: none"> <li>1. Plans that link with other projects of the hospital and the networks</li> <li>2. Budget plan of the project</li> <li>3. Quality operational plan</li> <li>4.1 Details of services provided to young people, in terms of treatment, health prevention/promotion</li> <li>4.2 Plans for development of related health personnel and peer empowerment</li> <li>4.3 Plan for public relations of the services</li> </ol> | <ol style="list-style-type: none"> <li>1. Document about the plans obtained from the workshop</li> <li>2. Budget plan document</li> <li>3. Operational plan document</li> <li>4.1 Document of service provision plan, interviews with responsible persons and those in various sections of the hospital</li> <li>4.2 Personnel development plan obtained from the workshop</li> <li>4.3 Public relations plan</li> </ol> |
| 1.4 Collection of service data | <ol style="list-style-type: none"> <li>1. Having data collection system for the clients and for various provided services, on a daily/monthly, and continuously basis.</li> <li>2. Continuously evaluating the clients' satisfaction and preparing a monthly (or periodically)/annual reports submitted to the administrator.</li> </ol>  | <ol style="list-style-type: none"> <li>1. Details of information in medical records can be analyzed to assess the statistics of the clients classified by their origins, types of service, continuum of visits, activities, referred networks, follow-up, problems, and solution.</li> <li>2. Progressive reports, problems, and suggestions to the committee and administrator.</li> </ol>  | <ol style="list-style-type: none"> <li>1. Information system document</li> <li>2. Monthly/periodically/annual progression reports; meeting records</li> </ol>  |

**Component 1: Management (continued)**

| <b>Sub-component</b>       | <b>Indicators</b>  | <b>(Examples) Data</b>   | <b>(Examples) Tools/Methods</b>   |
|----------------------------|--|--|---|
| 1.5 Public relations       | 1. Having public relations activities among personnel of organizations both internally and externally, regularly and continuously.   | 1. Details of public relations plan within the hospital, among networks, and in general public that reach young people   | 1. Public relations plan  |
| 1.6 Network and partners   | 1. Having active networks among service organizations both internally and externally.<br>2. Having defined coordinating plan and working system for management of services of the network.<br>3. Network and partners play continuous roles in management of the services. | 1. Lists of sections, organizations, and personnel of the hospital, and lists of the networks<br>2. Details of internal and external coordinating plan and system of the hospital<br>3. Operational plan of different sections of the hospital and of the networks.                | 1. Directory of network partners, orders, or meeting reports<br>2. Network meeting plan, meeting records of working groups of the hospital and of the networks<br>3. Operational plan of different sections of the hospitals, and of the networks |
| 1.7 Support and monitoring | 1. Having strong supports for the operation of the plan.<br>2. Having monitoring system and responsible persons to do this task regularly and continuously.<br>3. Having problem solving and improving the implementation extendedly.                                      | 1. Support of resources from the administrator and the networks to the operation of project<br>2. Monitoring plan in various forms such as paying visits and inspections, meetings, reports.<br>3. Problems, solutions, and improvement  | 1. Interviews, report of working group meetings, evidence of support<br>2. Monitoring plan, reports, meeting records, interviews<br>3. Meeting records, reports   |
| 1.8 Evaluation             | 1. Assessment covering the 5 components.<br>2. Utilizing the monitoring & evaluating results for the analysis and further planning of problem management.<br>3. Reporting the result to the administrator and disseminate it to all concerns.                              | 1. Monitoring system and plan<br>2. Details of quality assessment and utilization of results<br>3. Reporting the monitoring result to the hospital committee, administrator, and network executives; and disseminating it within and outside the network hospitals and the public. | 1. Record of the workshop meeting, monitoring plan and report<br>2. Interviews with concerns, monitoring report, project development report<br>3. Report documents, meeting records, dissemination plan and media.                                |

## 2: Reaching out the target, and creating the need in service use

| Sub-component  | Indicators  | (Examples) Data  | (Examples) Tools/Methods   |
|--|---|--|--|
| 2.1 Client network   | <ol style="list-style-type: none"> <li>1. Conducting survey of and coordinating with network organizations of the hospital such as GOs/NGOs networks, Local Administration Organization, schools, parent clubs/groups, and other NGOs, to plan and build up the client network by linking with its members to utilize the services.</li> <li>2. Having implementation plan of network organizations, allowing young people to involve in and utilize the services.</li> <li>3. Developing and expanding client network continuously.</li> <li>4. Monitoring and concluding the lessons learnt for further development of the client network.</li> </ol> | <ol style="list-style-type: none"> <li>1. Data of the network organizations having the youth involving in the project or under their supervision               <ul style="list-style-type: none"> <li>- Data of the youth from each partner and their service need</li> <li>- Result of the coordination for involving young people in the project and encouraging them to use the service</li> </ul> </li> <li>2. Agreement, guidelines, and plan for sending young people to service facilities, and engaging them in activities</li> <li>3. Data of the core persons in the network               <ul style="list-style-type: none"> <li>- Guidelines and plan of work of the core persons in advocating the youth to involve in the project</li> </ul> </li> <li>4. Evaluation result and conclusion of the lessons learnt from the client network development.</li> </ol> | <ol style="list-style-type: none"> <li>1. Lists of network organizations, number and categories of the youth, service needed, meeting records, and report of coordination</li> <li>2. Record of the workshop, and operational plan for advocating and involving the youth in the project.</li> <li>3. Record of data about the core persons in the database of network organizations, their work plans, and record of results of the workshop meeting</li> <li>4. Results of evaluation and conclusion of the lessons learnt from the clients network development</li> </ol> |
| 2.2 Public relations of services for young people and health and reproductive health information | <ol style="list-style-type: none"> <li>1. Having public relations plan through various channels (e.g. document, printed material, radio, television, the internet, etc. or organizing activities/exhibition in the hospital).</li> <li>2. Conducting public relations as planned</li> <li>3. Monitoring perceived information of the target group</li> </ol>  | <ol style="list-style-type: none"> <li>1. Details of extended public relations plan that reach-out the target group</li> <li>2. Data of the plan implementation</li> <li>3. Data of perceived information of the youth, teachers, and parents</li> </ol>   | <ol style="list-style-type: none"> <li>1. Public relations plan of the hospitals and the network organizations</li> <li>2. Report of public relations result</li> <li>3. Survey report</li> </ol>  |

## Component 2: Reaching out the target, and creating the need in service use (continued)

| Sub-component  | Indicators  | (Examples) Data  | (Examples) Tools/Methods   |
|--|---|--|--|
| 2.3 Civil society forum/mobile forum   | <ol style="list-style-type: none"> <li>1. Offering a forum for exploring the service problems and need.</li> <li>2. Offering a forum for knowledge exchanges.</li> <li>3. Evaluation and concluding the lessons learnt.</li> </ol>  | <ol style="list-style-type: none"> <li>1. Data of the problems and need of services obtained from the civil society forum</li> <li>2. Provision of services according to the data on the need of young people</li> <li>3. Result of evaluation and conclusion of the lessons learnt</li> </ol>   | <ol style="list-style-type: none"> <li>1. Record of the result of conducting civil society forum and youth involvement</li> <li>2. Plan of service management, compared with the data of service need</li> <li>3. Report of evaluation and conclusion of the lessons learnt</li> </ol>   |
| 2.4 Provision of service and health promotion activities in the network organizations and in the community | <ol style="list-style-type: none"> <li>1. Having plans for the provision of service and health promotion activities of the network organizations that link with the hospital plan (e.g. schools, business establishments, communities)</li> </ol>   | <ol style="list-style-type: none"> <li>1. Details of the provision of service and health promotion activities of the network organizations</li> </ol>  | <ol style="list-style-type: none"> <li>1. Plan of the provision of service and health promotion activities of the network organizations, record of the workshop</li> </ol>   |
| 2.5 Monitoring and evaluation for improving and making the service more outreach and used by young people  | <ol style="list-style-type: none"> <li>1. Young people have more utilized the services provided in the hospital :               <ul style="list-style-type: none"> <li>- Increase in number in overall</li> <li>- Increase in coverage</li> <li>- Increase coverage in types of service use</li> </ul> </li> <li>2. Young people have utilized the services provided by the network organizations as planned, and as the number of referred cases are gradually increasing.</li> <li>3. Young people had satisfaction towards the received service.</li> <li>4. Having a participative monitoring and evaluation activities for improving and making the service more outreach and used by target group</li> <li>5. Using the data for adjusting the plan to improve and make the service more outreach and used by target group</li> </ol> | <ol style="list-style-type: none"> <li>1. Statistics of service use in the hospitals, classified by respective area, referring organizations, type and section of service</li> <li>2. Statistics of activity involvement and service use in the network organizations</li> <li>3. Clients' opinions</li> <li>4. Monitoring and improving the service use of the target group</li> <li>5. Utilizing the data for improving and making the service more outreach and used by target group</li> </ol> | <ol style="list-style-type: none"> <li>1. Medical record, and additional record form of the project</li> <li>2. Record form of statistics of referring and received referring, and the record form of service users/participation of activities of the network organizations</li> <li>3. Survey form, interview form</li> <li>4. Details in the plan and record of participative monitoring and evaluation</li> <li>5. Details of plan adjustment, compared with the data of service use and clients' opinion</li> </ol> |

### Component 3: Service covering the need of target group

| Sub-component                             | Indicators   | (Examples) Data   | (Examples) Tools/Methods   |
|---|--|---|--|
| 3.1 Providing health information services | <ol style="list-style-type: none"> <li>1. Providing health information/knowledge services with effective systems, means, and a wide variety of media through different channels of the network; with easy access, covering the following issues:               <ul style="list-style-type: none"> <li>- Self esteem</li> <li>- Life skill (basic life skill and specific skill)</li> <li>- Health problems and adolescence development</li> <li>- Reproductive health (sex education, contraception, STDs)</li> <li>- Cigarette, alcohol, and substances</li> <li>- Indulgence in the internet games</li> <li>- Skin care</li> <li>- Nutrition</li> <li>- etc.</li> </ul> </li> <li>2. Having relevant health handbook for the concerns</li> <li>3. Having the computerized educating programme</li> </ol> | <ol style="list-style-type: none"> <li>1. Knowledge dissemination plan, lists of media, titles, and modes of dissemination</li> <li>2. Educating handbook containing existing and expecting issues</li> <li>3. Having, using, preparing computerized educating programme</li> </ol> | <ol style="list-style-type: none"> <li>1. Operational plan of knowledge and information dissemination; media; document; lists of disseminated topics</li> <li>2. Educating handbook</li> <li>3. Existing programme or plan; report of provided service and service use of the youth</li> </ol> |
| 3.2 Counseling service                    | <ol style="list-style-type: none"> <li>1. Providing counseling service during the office hours and after hours through a wide variety of channels in both the hospitals and the network partners systems.</li> <li>2. Having counseling handbook</li> </ol>  | <ol style="list-style-type: none"> <li>1. Counselling system and plan of the hospital and network organizations; statistics and youth counselling issues</li> <li>2. Counseling handbook containing various issues</li> <li>3. Training plan and report</li> </ol>                  | <ol style="list-style-type: none"> <li>1. Counseling plan of the hospitals and network organizations; statistics record; counselling issues of the hospitals and network organizations</li> <li>2. Existing or expecting handbooks</li> <li>3. Training plan and report</li> </ol>             |

### Component 3: Service covering the need of target group (continued)

| Sub-component   | Indicators  | (Examples) Data   | (Examples) Tools/Methods   |
|---|---|---|--|
| 3.3 Health services covering the need of young people | <ol style="list-style-type: none"> <li>1. Undertaking risk behavior assessment (e.g., using risk behavior assessment programme of Ramathibodi Hospital)</li> <li>2. Conducting health status assessment               <ul style="list-style-type: none"> <li>- Measuring weight &amp; height, BMI</li> <li>- Stress assessment</li> <li>- EQ assessment</li> <li>- Personality assessment</li> </ul> </li> <li>3. Providing the prevention of health and reproductive health problems services (e.g., pregnancy test, oral contraceptives, condom, etc.)</li> <li>4. Treatment of diseases and abnormality according to the need and problems of young people such as pimples, menstruation problem, physical and psychological changes due to physical growth and development, overweight, illness from risk behavior and other illnesses, etc.</li> <li>5. Arrangement of health promotion activities in the hospitals, e.g., Happy Family Project (building life skills), clinic of good shape, friend corner, etc.</li> <li>6. Operating mobile clinics for young people</li> </ol> | <ol style="list-style-type: none"> <li>1. Result of risk behavior assessment among young people in the target areas</li> <li>2. Plan and result of young people health status assessment in the target areas, covering important components</li> <li>3-5. Details of services for young people provided by the hospitals and network organizations, compared with the data on young people need obtained from the civil society forum. Details of health promotion services and activities of the hospitals and network.</li> <li>6. Details of the provision of services and health promotion activities of the hospitals and network</li> </ol> | <ol style="list-style-type: none"> <li>1. Report of assessment by using questionnaires or the focus group discussion with young people</li> <li>2. Plan and result of assessment of young people health status in the target areas</li> <li>3-5. Report of the working group workshop, report from the civil society forum, operational plan of the provision of services of the hospitals and network, operational plan of the provision of services and activities of the hospitals and network</li> <li>6. Operational plan of the provision of mobile service and activities of the hospitals and network</li> </ol> |
| 3.4 Referral system                                   | <ol style="list-style-type: none"> <li>1. Having registrations and data of the network organizations and referring.</li> <li>2. Having a clear network referral system.</li> <li>3. Having a rehearsal of understanding in the system and coordination of referral system among all concerns.</li> <li>4. Evaluating and solving referral problems.</li> <li>5. Having an accompany for special cases</li> </ol>  | <ol style="list-style-type: none"> <li>1. Data of referral network</li> <li>2. Details of referral system</li> <li>3. Plan and report of the workshops</li> <li>4. Monitoring plan and report</li> <li>5. Agreement of sending system</li> </ol>  | <ol style="list-style-type: none"> <li>1. Registrations</li> <li>2. Record of network meeting</li> <li>3. Plan and record of the workshop</li> <li>4. Monitoring plan and report</li> <li>5. Report of the workshops</li> </ol>  |

#### Component 4: Efficient and friendly service system for young people

| Sub-component  | Indicators   | (Examples) Data  | (Examples) Tools/Methods  |
|--|--|--|---|
| 4.1 Service place and environment are supportive to the use of service of young people | <ol style="list-style-type: none"> <li>1. Having a room /service spot and counseling corner that regard young people' privacy and confidentiality, or having spaces on hospital capacity.</li> <li>2. Having signboards of               <ul style="list-style-type: none"> <li>- Activities</li> <li>- Service dates/time</li> <li>- Names of service provider</li> </ul> </li> <li>3. The location is convenient, easy to reach, and safe.</li> <li>4. The service room/unit is clean, ventilation, and youthfully attractive.</li> </ol>  | 1-4. Details of the plan or condition of the improved service unit                                     | 1-4. Improvement plan, record of inspection visit   |
| 4.2 Efficient and suitable service system/steps for young people                       | <ol style="list-style-type: none"> <li>1. Having suitable arrangement of service hours for young people.</li> <li>2. Having appointment and referral systems to facilitate the clients.</li> <li>3. Having hospital record system and data record that regard the confidentiality of the clients</li> <li>4. Adjustment of service procedure and hospital regulation to facilitating young people's convenience, fastness, and needs.</li> <li>5. Provision of a comprehensive, holistic, and integrated services considering the health problems of the clients, including the remedy, rehabilitation, prevention of risk behavior, friendly health promotion, and linkage with network.</li> <li>6. Involving the clients in decision making process.</li> <li>7. Management of suitable service system within the hospital that links every section.</li> </ol> | 1-7. Details of the system/steps of the services provided to young people by the hospital and network. | 1-7. Record of the hospital/network workshops, service management plan of the hospital and network, interviews with hospital staff and the network, interview with young people clients |

#### Component 4: Efficient and friendly service system for young people (continued)

| Sub-component                 | Indicators   | (Examples) Data   | (Examples) Tools/Methods  |
|-------------------------------|--|---|---|
| 4.3 Efficient service network | <ol style="list-style-type: none"> <li>1. Linking with the services and projects of the network for efficient and effective promotion, prevention, treatment, and rehabilitation of young people health.</li> <li>2. Training peers and involves them in service management and conducting various activities.</li> <li>3. Involving parents, teachers, community leaders as deemed appropriate (e.g., in improving life skill and psychosocial immune, promoting health)</li> </ol> | 1-3. Details of the system and steps of services provided to young people by the hospital and network | 1-3. Record of the hospital/network workshops, service management plan of the hospital and network, interviews with hospital staff and the network, interview with young people clients |

#### Component 5: Service provider

| Sub-component  | Indicators   | (Examples) Data   | (Examples) Tools/Methods   |
|--|--|---|--|
| 5.1 Promoting positive attitude and commitment to provide services to young people among all concerns in the project network both within and outside the organizations | <ol style="list-style-type: none"> <li>1. Having effective plan and process for advocating and promoting attitude and commitment to cooperate in the project among all concerns at all levels. <ul style="list-style-type: none"> <li>- Internal network includes sections, administrator, doctors, nurses, social welfare nurse, psychologist, medical record staff, etc.</li> <li>- External network includes health personnel, teachers, and related organizations such as NGOs, municipality, Tambon Administration Organization, volunteers.</li> </ul> </li> </ol> | <ol style="list-style-type: none"> <li>1. Plan and result of advocators team preparation about advocating technique and project details</li> <li>2. Document about advocacy</li> <li>3. Result of advocating at each level and each organization</li> </ol> | <ol style="list-style-type: none"> <li>1. Plan/report of advocators preparation</li> <li>2. Document about advocating</li> <li>3. Report of advocating, report of the working group workshop, evaluation of the attitude and commitment to involve in the project of the concerns</li> </ol> |

**Component 5: Service provider(continued)**

| <b>Sub-component</b>           | <b>Indicators</b>  | <b>(Examples) Data</b>  | <b>(Examples) Tools/Methods</b>   |
|--------------------------------|--|---|---|
| 5.2 Friendly service providers | <ol style="list-style-type: none"> <li>1. Major service providers were trained in <ul style="list-style-type: none"> <li>- Development of self esteem in young people</li> <li>- Life skill (basic life skills/ specific skills)</li> <li>- Adolescence health problems and development</li> <li>- Reproductive health (sex education, contraception, STDs, HIV/AIDs, etc.)</li> <li>- Cigarette, alcohol, substances</li> <li>- Indulgence of the internet games</li> <li>- Skin care</li> <li>- Nutrition</li> <li>- Friendly services for young people/youth, and service system of the project network</li> <li>- Young people counseling</li> <li>- Working with young people</li> </ul> </li> <li>2. Transferring essential knowledge and skill to service providers under the network</li> <li>3. Service providers and the clients are satisfied with the service</li> </ol> | <ol style="list-style-type: none"> <li>1. Details of the plan and result of the training of service providers in the hospital and the network</li> <br/> <li>2. Knowledge and skill of service providers</li> <li>3. Satisfaction of service providers and clients</li> </ol> | <ol style="list-style-type: none"> <li>1. Plan and report of the training, technical papers distributed to attendants, result of evaluation of the training, interview with training organizers and trainees.</li> <br/> <li>2. Evaluation of knowledge and skill of service providers at the training and on the job, and interview with the clients.</li> <li>3. Evaluation of the satisfaction of service providers and the clients, using participative evaluation method.</li> </ol> |