In Ethiopia, significant attention has been given to improving youth sexual and reproductive health (SRH) services, including the establishment of youth-friendly services (YFS). Yet high rates of child marriage, unmet need for family planning, and adolescent childbearing persist, particularly in rural areas where over 84 percent of the population lives. Reaching rural youth with timely SRH information and services that are relevant to their varying ages and life stages remains a challenge.

The Evidence Project is examining the coverage and reach of public and NGO-supported youth SRH services in several rural regions of Ethiopia. The study focuses on the service utilization patterns, behaviors, and experiences of young people, ages 12-24 years, females and males, unmarried and married, and in-school and out-of-school. The study also is assessing providers’ and influential adults’ perceptions of the barriers to and opportunities for services to meet the unique needs of young people. The knowledge generated from this study will provide needed evidence for strengthening youth SRH services in the country.

**STUDY OBJECTIVES**

1. Assess young people’s awareness and perceptions of available SRH services.
2. Explore young people’s service utilization patterns and behaviors, preferences and experiences obtaining SRH services from different sources (e.g., stand-alone YFS or facility-based integrated services), and reasons for non-use of SRH services.
3. Explore the perceptions of facility administrators, providers, and influential adults (e.g., parents, husbands, in-laws) about young people’s access to and use of SRH services and the specific challenges to and opportunities for meeting their SRH needs.
4. Identify promising youth-friendly service practices and document lessons learned that can inform YFS programming in Ethiopia.
YOUTH-FRIENDLY SRH SERVICES IN ETHIOPIA

The Ethiopian Government, along with a number of international NGOs, has been supporting activities to increase access to SRH services by young people, including the scale-up and institutionalization of YFS through intensive capacity building at all levels of the health system. For example, the Federal Ministry of Health (FMOH) has developed planning, implementation, and monitoring tools to identify and fill implementation gaps related to YFS at health facilities. Another example is Pathfinder’s Integrated Family Health Program (IFHP), which went from 20 YFS facilities in four regions to 163 facilities in six regions, offers a comprehensive package of services that range from pregnancy-related care to HIV counseling, testing, and treatment to contraceptive counseling and method provision. Family Guidance Association of Ethiopia (FGAE), an IPPF-affiliate, provides comprehensive and high quality SRH information and YFS to young people through over 350 multi-purpose youth centers across the country.

What are Youth-friendly Services (YFS)?

- YFS provide a safe environment at an accessible location, have convenient hours, offer privacy and avoid stigma, and provide information and education material.
- Health care providers are technically competent, offering health promotion, prevention, treatment, and care relevant to each young person’s maturation and social circumstances. Providers have interpersonal and communication skills, are nonjudgmental and considerate, treat all young people with equal care and respect, and provide information and support to enable each young person to freely make the right choices for his or her unique needs.
- YFS reach young people in different ways, such as through health facilities, stand-alone youth centers, youth clubs, community or peer outreach, and mobile units.


METHODOLOGY

The study’s objectives will be met by using quantitative and qualitative methods. The research team will randomly choose 14 YFS sites in rural and peri-urban areas across five regions of the country: Amhara, Oromia, Tigray, SNNP, and Benishangul Gumuz. The team will then administer a survey to a total of 3,108 eligible young people living in randomly selected households located within 15 kilometers from the chosen YFS sites. The team also will administer the survey to an additional 740 eligible young people living near facilities without YFS. One comparison facility will be identified per region. To supplement the quantitative results, 40 young people, sub-divided by sex, age, and marital status, will be selected from the survey participants to take part in in-depth interviews. In-depth interviews also will be conducted with 25 influential adults (5 per region) and with one to two YFS facility administrators or providers from each of the 14 YFS study sites.

RESEARCH UTILIZATION

The Evidence Project will organize a technical advisory group (TAG) to convene 2-3 times during the duration of the study. The TAG will consist of a range of stakeholders including SRH and YFS experts from each of the 5 regional health bureaus where the study will take place; and representatives of international NGOs; USAID/Ethiopia; FMOH; Ministry of Women, Youth, and Children’s Affairs; and a youth expert. The TAG will provide guidance on the study, and help interpret, disseminate, and apply the findings, which will identify promising practices and future opportunities for improving SRH services for rural young people in Ethiopia by the FMOH, USAID/Ethiopia, international NGOs and others.

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