

දුරකථන) 011 2669192, 011 2675011
தொலைபேசி) 011 2698507, 011 2694033
Telephone) 011 2675449, 011 2675280

ෆැක්ස්) 011 2693866
பெக்ஸ்) 011 2693869
Fax) 011 2692913

විද්‍යුත් තැපෑල)
postmaster@health.gov.lk
மின்னஞ்சல் முகவரி)
e-mail)

වෙබ් අඩවිය) www.health.gov.lk
இணையத்தளம்)



සුවසිරිපාය

சுவசிரிபாய

SUWASIRIPAYA

මගේ අංකය)
எனது இல) FHB/AH/Gen/2017
My No.)

ඔබේ අංකය)
உமது இல)
Your No. :)

දිනය)
திகதி) 25 /07/2017
Date)

සෞඛ්‍ය, පෝෂණ සහ දේශීය වෛද්‍ය අමාත්‍යාංශය
சுகாதார, போசணை மற்றும் சுதேச வைத்திய அமைச்சு
Ministry of Health, Nutrition & Indigenous Medicine

General Circular No: - 01 - 43 / 2017

All Provincial Secretaries of Health
All Provincial Directors of Health Services
All Regional Directors of Health Services
All Directors/Officers in Charge of Medical Institutions
All Directors of Special programmes
Director, National Institute of Health Science
Chief MOH, Municipal Council, Colombo
All Medical Officers of Health

Provision of adolescent and youth friendly health services in the field

This circular is issued on provision of adolescent health care in the field for non-school going adolescents as well as school going adolescents while the circular 01-36/2010 dated 01.10.2010 is hereby cancelled.

The Medical Officer of Health (MOH) of the area has the overall responsibility for the adolescent and youth health programme. MOH should take necessary steps to ensure both clinic and field component of adolescent and youth friendly health services are carried out to meet the standards. At least, one adolescent and youth friendly health clinic should be conducted once or twice a month on a fixed day (e.g. fourth Saturday morning) at MOH office or in a field clinic.

This clinic should be conducted by the MOH /AMOH with the support of PHNS, SPHM, PHM and other public health staff. Quarterly return should be sent to Family Health Bureau (FHB) and medical officer maternal and child health (MOMCH). Further to AYFHS clinic, nutrition counselling should also be provided at the nutrition clinic for adolescent and youth.

Adequate steps have to be taken to publicize adolescent and youth friendly clinic services among the young persons of age 10-24 years at schools, vocational training places, youth corps, work places etc. Awareness should also be raised among their parents and the community.

Young persons are to be referred to this clinic from school medical inspection, PHM home visits, PHI sessions at schools/occupational and vocational training settings.

MOH and staff should develop partnerships with educational institutions, vocational training centers, social service sectors and divisional secretariat as well as with NGOs helping with provision of certain facilities for adolescents. Service provision as well as necessary referral within and out-side the health sectors should be provided.

Caring for non-school going adolescents is a responsibility of PHM under the guidance of the MOH and assisted by the health team PHNS, SPHM SPHI& PHI. PHI has to conduct health education programmes for this group at the work places.

The roles and responsibilities of the PHMs:

- Should follow up and monitor children till the age of 18 years by maintaining birth and immunization register. Dates of school entry and drop outs should be marked in the remarks column.
- Be a member of the school committee and frequent school absenteeism should be monitored and discussed with school authorities and particularly with the care giver. All school dropouts should be assessed to exclude health reasons and remedial action should be taken with the MOH and health team.
- Should register adolescent in the eligible family register, while doing home visits. Registration of the adolescents in the eligible families should be conducted in the same row as that eligible family in the register. Adolescents who are not in the eligible families should be registered in the last pages allocated for this group in the eligible family register.
- Should identify adolescents with risk conditions as well as disease conditions during home visits. Should provide necessary counseling and refer adolescents to adolescent and youth friendly clinic at the MOH office or at the hospital. Should identify and follow up the adolescents at risk.
- Should conduct educational small group activities, at home and at field level to empower adolescents on sexual and reproductive health using the PHMM package developed on adolescent sexual and reproductive health.
- Should develop life skills of non-school going adolescents in order to empower them to prevent teenage pregnancies, prevent and reduce sexually transmitted diseases and other risk behaviors.
- Assist MOH, PHNS, PHI and teachers to conduct reproductive health and life skill development programmes to empower adolescents to reduce teenage pregnancies, other reproductive health problems including STI, HIV& AIDS and substance use among adolescents in school.
- Should work together with the health care staff of adolescent and youth friendly clinics of the hospitals in the area. Should promote awareness among adolescents, youth, parents and communities about adolescent and youth friendly health services in the hospital and the field.
- Should provide weekly iron folate supplementation (WIFS) to all the non-school going adolescents if they have not received it for that particular year.
- Before starting WIFS, one tablet of Mebendazole (500mg) should be given. After that weekly Iron Folate supplementation (WIFS) has to be given as below, for 6 months (24 weeks) per annum.

Type of pill	Strength	No. of pills(per week)	Duration (in weeks)
Iron	FeSO ₄ 200mg	1	24
Folic Acid	1 mg	1	24
Vitamin C	100 mg	1	24

(Refer the General Circular No: 02-0812007(1) dated 2013-03-25 on Weekly Iron Folate Supplementation for school children-year 2013 onwards for further details as scheduled same for non-school going children.)

- Should refer the needy adolescents to adolescent and youth friendly clinic and should help to arrange and conduct the clinic as well as follow up.
- Assist MOH and PHI in screening of the adolescents in Grade 7 and 10. When girls are screened, a female health worker should be present when a male medical officer examines the child.
- Assist the PHI to identify children who need counseling and provide counseling services within the school or at the MOH clinic.
- Educate children about healthy life styles and assist to create a supportive environment to practice those at school and at home.
- Follow up adolescents at home and assist in correcting health problems identified at school medical inspection.
- Provide assistance to school authorities and PHI in establishing health promoting schools and conduct health promotional activities for adolescents.
- Ensure that all adolescents in the area are immunized against Rubella and aTD according to the national guidelines.
- Assist MOH in medical inspection for the adolescent and youth trainees at the training centers.

Roles and responsibilities of PHI:

- In addition to activities of school health programme as indicated in general circular number 01-37/2007(1) dated 06.01.2016, has to conduct programmes to increase the awareness of adolescent and youth friendly health services among school going adolescents, parents, teachers and community.
- Increase awareness of adolescent and youth friendly health services among non-school going adolescents and youth at their work places.
- Should conduct life skill development and health educational activities for non-school going adolescents at the work places.
- Pre-arrange and assist MOH in medical inspection for the adolescent and youth trainees at the training centers of his/her area

Role and Responsibilities of SPHM:

- Should assist MOH and PHNS in planning and implementing the adolescent and youth health programme in the area.
- Should supervise and monitor adolescent and youth friendly health activities carried out by PHM.

Role and Responsibilities of PHNS:

- Should assist the MOH in planning and implementing the adolescent health programme in the area and supervise the activities done by PHM.
- Should help in conduction of adolescent and youth friendly clinics in the MOH office or in the field.

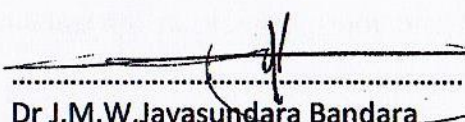
Roles and responsibilities of SPHI:

- Should assist in implementation, supervision and monitoring of adolescent and youth health programmes conducted by PHI.

Roles and responsibilities of MOH:

- MOH should establish at least one adolescent and youth friendly health service center in their MOH area and the community should be made aware about the services.
- Should have a nutrition clinic for adolescents once in 4 weeks.
- Conduct medical inspection for the adolescent and youth trainees at the training centers.
- Participate as a resource person for the health module at training centers.
- Should develop partnerships with support services such as social services to provide assistance to adolescents with special needs.
- Monitor and review the activities carried out in the field for adolescents and youth at each monthly conference.
- Should provide necessary trainings for your staff, on Adolescent and youth health services with the knowledge of MOMCH.

Provincial Directors of Health Services, Regional Directors of Health Services and Heads of Institutions are requested to ensure that above instructions are carried out in their respective areas and institutions.


Dr. J. M. W. Jayasundara Bandara
Director General of Health Services (Acting)
Ministry of Health, Nutrition and Indigenous Medicine
"Sewana" (Signature)
Director General of Health Services 365, Rev. Baddegama Wimalawansa Thero Mawatha,
Colombo 10.

Copies to:

Secretary, Ministry of Health, Nutrition and Indigenous Medicine
Add. Secretary, Medical Services, Ministry of Health, Nutrition and Indigenous Medicine
Add. Secretary, Public Health Services, Ministry of Health, Nutrition and Indigenous Medicine
DDG PHS – I and II, Ministry of Health, Nutrition and Indigenous Medicine
DDG Medical Services, Ministry of Health, Nutrition and Indigenous Medicine
DDG Planning, Ministry of Health, Nutrition and Indigenous Medicine
DDG ET & R, Ministry of Health, Nutrition and Indigenous Medicine
DDG Lab Services, Ministry of Health, Nutrition and Indigenous Medicine
All Medical Officers of Maternal and Child Health
Presidents of Professional Colleges
Country Representative – WHO/UNFPA/UNICEF/World Bank/World Food Programme