



HEALTH COMMUNICATION  
PARTNERSHIP

# Involving Youth in the Development of Youth-Friendly Services: Adaptation of the Partnership Defined Quality Process in Haiti

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# Haiti in the world



[www.cia.gov/library/publications/the-world-factbook/flags/ha-flag.html](http://www.cia.gov/library/publications/the-world-factbook/flags/ha-flag.html)



[http://www.lib.utexas.edu/maps/cia07/haiti\\_sm\\_2007.gif](http://www.lib.utexas.edu/maps/cia07/haiti_sm_2007.gif)

[www.worldatlas.com/webimage/countrys/carib.htm](http://www.worldatlas.com/webimage/countrys/carib.htm)



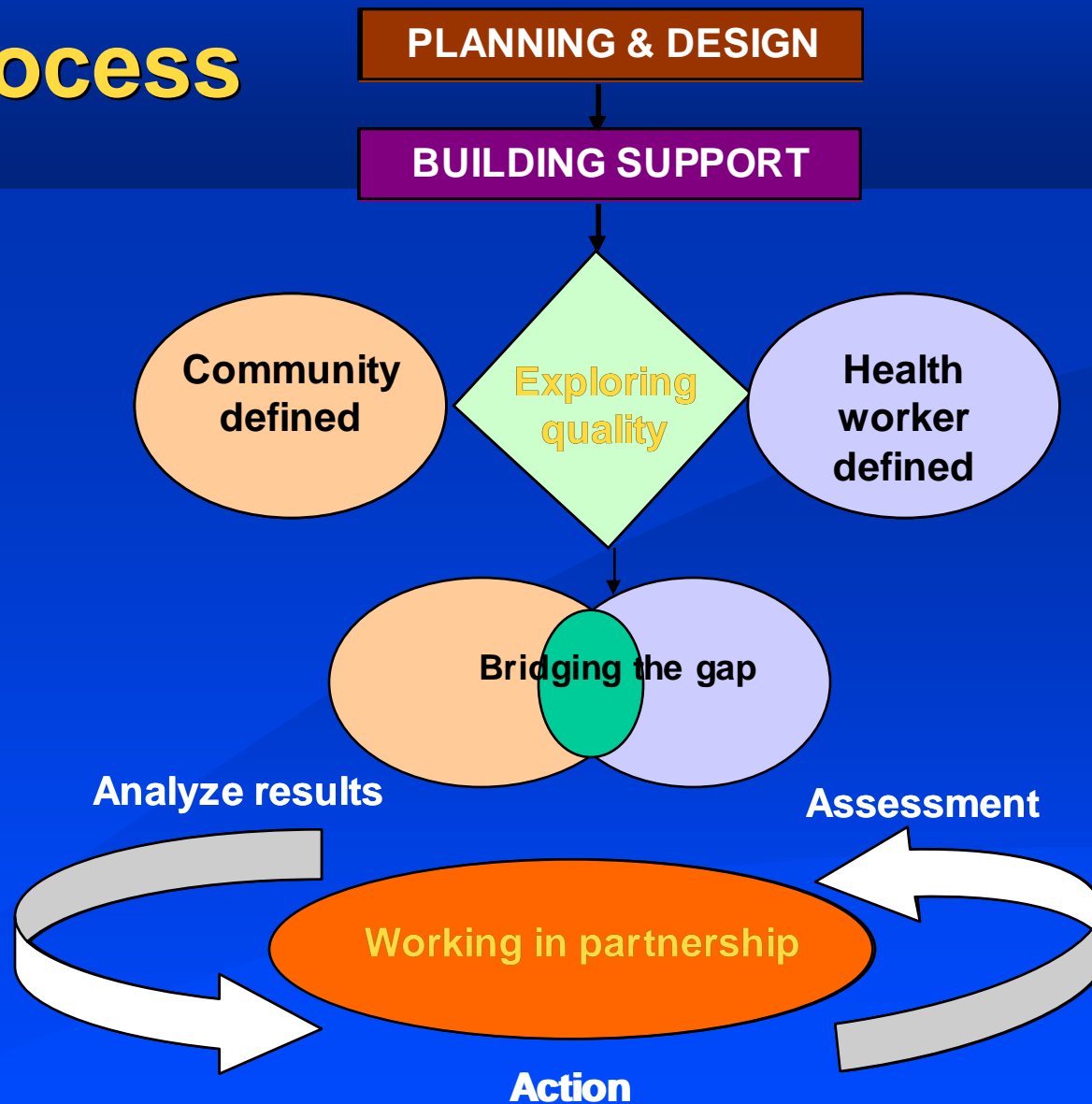
# PDQ Process

- PDQ = Partnership Defined Quality
- Developed by Save the Children/US
- What is PDQ?
- Why was PDQ developed?
- PDQ applied in various countries and settings:  
E.g. Peru, Nepal

Reference: Lovich R, Rubardt M, Fagan D & Powers MB. 2003 .Partnership Defined Quality. A tool book for community and health provider collaboration for quality improvement. Save he Children/US.



# PDQ Process



From Lovich R,  
Rubardt M,  
Fagan D &  
Powers MB.  
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# Presentation of HCP

- **HCP = Health Communication Partnership**
- **Partners in Haiti:**
  - **Johns Hopkins Bloomberg School of Public Health Center for Communication Programs**
  - **Save the Children/US**
  - **The International HIV/AIDS Alliance**
  - **Academy for Educational Development**
- **Main activities in Haiti**



# Y-PDQ in Haiti

- **What for?**
  - To develop youth-friendly services
- **Why?**
  - Services available not always known by youth
  - Services do not always correspond to youth's needs
- **When?**
  - From September 2005 to August 2006

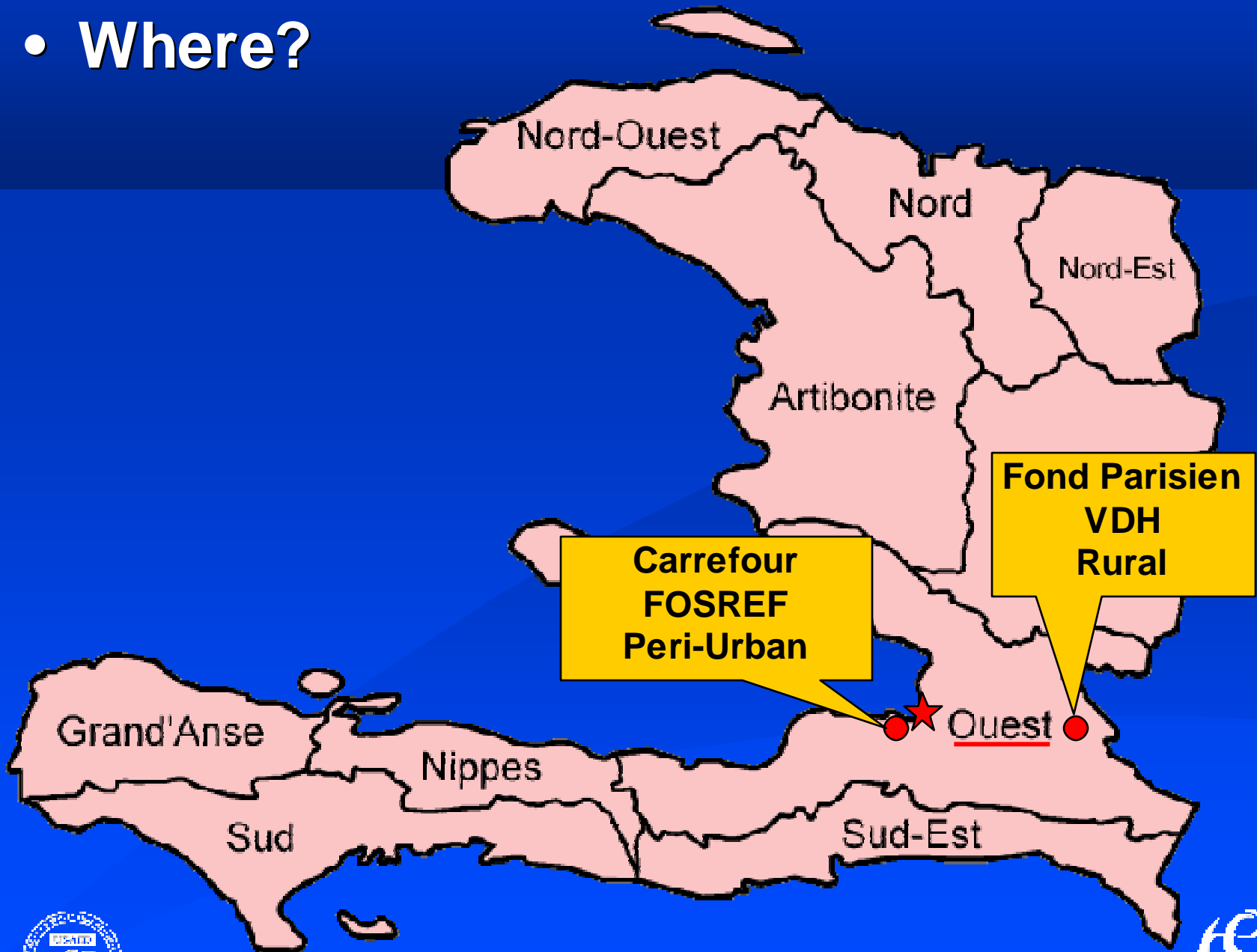


# Y-PDQ in Haiti

- **Who?**
  - Youth age 18-24
  - NGOs chosen with the Ministry of Health/UCP based on their experience and credibility
    - **VHD**
      - Health and HIV/AIDS prevention
      - Educational and capacity-building activities for/with youth
    - **FOSREF**
      - Sexual and reproductive health and HIV/AIDS prevention among youth
      - VCT services (youth)
      - Family health education



- Where?



[http://en.wikipedia.org/wiki/Category:Maps\\_of\\_Haiti](http://en.wikipedia.org/wiki/Category:Maps_of_Haiti)





# Y-PDQ in Haiti

How was PDQ adapted?

- Phase 1: Building support
  - a. Identification of partners and commitment of the parties
    - Selection of communities
    - Selection of members of facilitation teams
    - Training of facilitation teams
    - Selection of participants:
      - Health and social services providers
      - Male and female youth (18-24 years old)



# Y-PDQ in Haiti

- Phase 2: Exploring quality
  - b. Separate meetings of youth and service providers
    - Assessment of the current situation
    - Lead by facilitation teams
  - c. Analysis of meeting results and self-reflection
    - What is working well?
    - What needs improvement?
    - Preparation of synthesis for presentation to the other group



# Y-PDQ in Haiti

- Phase 3: Bridging the gap
  - d. Joint meeting youth & service providers
    - Presentation of groups' results
    - Development of shared vision
    - Initial discussion of possible actions for QI
  - e. Election of a “Quality Improvement Committee” (QIC)
    - Made up with initial participants and others from community
    - In charge of developing and implementing action plans, mobilizing networks and resources, monitoring implementation, evaluating collective action



# Y-PDQ in Haiti

- Phase 4: Working in partnership
  - f. QIC develops a joint action plan
    - Focus on common concerns while integrating each group's views and needs
    - Plan includes:
      - Achievable, short, medium and long-term objectives
      - Realistic chronogram & budget
      - Expected results
    - Plan is shared with broader community



# Y-PDQ in Haiti

- Phase 4: Working in partnership (cont'd)
  - g. Implementation of the action plan
    - Encouraging broad participation in implementation
    - Establishment of sub-committees as needed
  - h. Evaluation of activities
    - QIC periodic meetings
    - Review/adaptation of plan
    - New plan

**Assistance of HCP and VDH/FOSREF  
throughout process**



# Y-PDQ in Haiti

- **Examples of issues raised by youth**
  - Youth are not familiar with the services
  - Some providers do not know how to welcome youth
  - Service hours coincide with school hours
  - Parents don't allow their children to use (youth/RH) services
  - Lack of interesting materials (“*Same old boring things*”)



# Y-PDQ in Haiti

- **Examples of issues raised by service providers**
  - **Some youth do not know how to talk to providers**
  - **Youth only come when they are sick**
  - **Lack of training among service providers**
  - **Lack of interesting, updated materials**
  - **Lack of adequate equipment**



# Y-PDQ in Haiti

## Translation into action: VDH – Fond Parisien

<b>Some illustrative activities</b>	<b>Objective</b>
Enter-education activity to share action plan	Broaden participation base
Awareness days March for the promotion of (youth-friendly) services	Increase awareness of services
Tours of services offered by health centers/providers Tours of places where youth meet (by youth for service providers)	Get acquainted with each other Improve mutual understanding
"Parents' school"	Dispel parents' fears Overcome barriers to service utilization by youth
Inventory of recent materials & reproduction	Update and disseminate available resources



# Y-PDQ in Haiti

## Translation into action: FOSREF – Carrefour

<b>Some illustrative activities</b>	<b>Objective</b>
Tours of services and tours of places where youth meet	Get acquainted with each other Improve mutual understanding & knowledge
Capacity building on interpersonal & intergenerational communication for service providers	Improve HP - youth interaction
Adaptation of services hours	Facilitate increasing use of services by school youth
Parents' involvement in the center's activities	Dispel parents' fears Facilitate utilization by youth
Supply of educational materials	Update existing resources with attractive materials

# Lessons learned

- **PDQ is a participatory approach that requires new ways of “doing” and “being”**
  - **SP & youth may not be used to working together**
    - Encourage informal team-building activities
  - **Facilitators may not know at first how to “guide” the process**
    - Learn to be patient
    - Take the time to discuss & clarify PDQ principles and methods as needed
    - Skilfully accompany the process without imposing own views
  - **Internalized “vertical” models may prevail**
    - Address and revise underlying assumptions



# Lessons learned

- **Conflicts are likely to emerge between parties, especially in a context of social and political instability and tension**
  - **Strengthen conflict-resolution skills and provide continual technical support to facilitate equal participation**



# Lessons learned

- **PDQ is a delicate process that requires local adaptation**
  - Prepare the sessions meticulously, but be flexible in the priorities, timetable, and tools
  - Some steps may require special attention, particularly when
    - A conflict emerges
    - Unanticipated needs arise
    - The rationale of equal dialogue/participation is not well understood
    - Different (underlying) interests clash



# Lessons learned

- Integrating PDQ into existing programs ensures sustainability and facilitates institutionalization
- Caveat: Natural tendency to prioritize the acquisition of “tangible elements” (e.g. wall separators, chairs, cameras) to ensure “ongoing” activities
  - Strike a balance between organizational priorities & those identified through PDQ
  - Encourage the use of local assets/resources and of activities focused on self-reliance



# Lessons learned

- **As other participatory methodologies, PDQ is a continuous learning process**
  - **Plan capacity-building at different levels (e.g. active listening, participatory leadership & planning, conflict-resolution skills, participatory M&E)**
  - **Strengthen the facilitation teams' capacity to develop accompanying (discussion, tour, PM&E) guides as needed**
  - **Provide continuous mentorship**



# Conclusion

- **Y-PDQ was successfully implemented in Haiti and proved to be valuable for the development of youth-friendly services**
- **Ingredients of success:**
  - **Commitment to the process**
  - **Openness (question own assumptions, learn)**
  - **Flexibility (adjust as needed)**
  - **Patience (listen, clarify, respect participants' pace)**



# Conclusion

- All partners highly appreciated the process
- FOSREF institutionalized Y-PDQ and integrated it into its network of youth centers
- Other programs (e.g. HS-2007) have adapted it
- Potential for scale up through institutional, NGOs and community-based networks, and across sectors (e.g. health, education, environment, etc)





# Thank you

