**Presentation Title:** Unlocking Doors and Minds: Leadership development for youth-friendly SRH services in Uganda

**Introduction and Background:** To reach young people, Reproductive Health Uganda’s (RHU) Mbarara Clinic has a youth center at their facility, but family planning and reproductive health (FP/RH) services are underutilized by the youth who attend the center. In March 2014, the RHU senior management team was trained in a participatory leadership development program that enables teams to face challenges and achieve results through team-based action learning (known as LDP+). The team identified the following challenges through a root cause analysis: the clinic and youth center function separately even though they are part of the same facility, and youth are not involved in in the clinic beyond the youth center activities.

**Methods:**  Several strategies were utilized to increase the number of youth receiving FP/RH services from the Mbarara clinic. First, staff meetings were rescheduled from Monday mornings to Friday afternoons and opened to the community. This allowed for increased youth involvement, and joint staff meetings between the clinic and youth center which improved collaboration between the two. During these meetings, young people requested monthly health education seminars at the youth center facilitated by clinic health workers to promote knowledge and awareness of available FP/RH services. Additionally, health workers provided services for adolescents during special FP/RH health days exclusively for young people including HIV testing and counseling, and provision of contraceptives.

**Results and Conclusion:** By initiating the strategies to face the challenges the clinic face, more young people were able to attend and participate in clinic meetings. The presence of young people allowed the Mbarara clinic to better tailor its services and resulted in them hosting educational seminars and service days exclusively for young people. Before this tailored health intervention, there was an average of 39 young people receiving SRH services a month. After involving young people in the clinic’s decision-making, the monthly average increased to 136 young people accessing FP/RH services for the following 6 months.

Having a youth center at the health clinic facility was not enough for the Mbarara Clinic to reach young people. Through the implementation of the LDP+, the Mbarara management team worked together to identify root causes of poor uptake of SRH services, including lack of youth involvement in the health clinic and the separate management of the clinic and youth center. The clinic created solutions to improve SRH services for youth in Mbarara, demonstrating how youth participation in decision-making can ensure SRH services are responsive to the needs of young people and produce positive health outcomes.