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ANNUAL REPORT

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PATH

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A

EXECUTIVE SUMMARY

The implementation of the Comprehensive Postpartum (CPP) Project started in June 1996 by opening the project office within the MOH premises. According to the original contract, thirteen CPP centers were to be established. However, during the course of the project, the needs of the country were reassessed by USAID/Jordan, the Ministry of Health and Health Care (MOHHC) and Pathfinder International and they decided to increase the number of the centers to 20 in the kingdom.

When the number of the CPP centers will increase to 20, it is estimated that 58 percent of all those women who deliver in hospitals in a year, will be reached by the CPP project. This also means that 91 percent of all the women, who deliver in government hospitals and 94 percent of those who deliver in the army hospitals will be able to have an access to high quality postpartum services.

The project has achieved most of its targets, specifically in services and training components. In the IEC component, the production of almost all the print materials was accomplished during this report period. However, there were some delays in the production of audiovisuals, which will be given a high priority during the second reporting year of the program.

A. Establish comprehensive postpartum centers

Most of the centers were already renovated/upgraded and refurbished before the Pathfinder team arrived in the country. During the first one and a half years, renovation was completed in thirteen centers. At the end of this period, eight centers are operational, including Al-Basheer, Zarqa, Madaba, and Princess Badia of MOHHC; King Hussein Medical Center and Prince Rashed of Royal Medical Services; Community Center of SFWS and Red Crescent. In Karak, Mafraq, and Jerash, the centers' renovation are completed, the managers are assigned. Due to some customs problems for the equipment, these three centers have not been fully equipped yet and will start operating as soon as they are equipped. The Tafelah Center is under renovation and expected to be completed at the end of the first quarter of the second year of the project.

Until the end of the project period, six additional centers will be included in the project to improve CPP services. These are three MOHHC Hospitals including Salt, Ajlun and Yajouz; two RMS Hospitals including Prince Hashem in Zarqa and Queen Alia in Amman. The negotiations are underway whether to include another NGO Hospital or another MOHHC hospital in the project.

The demand of the clients to these new, high quality services showed that some of the centers' spaces were not adequate. Therefore, for example, Princess Haya Hospital Directorship provided a larger space for the center and moved its center to this new space. Now, King Hussein Medical Center and Prince Rashed Hospitals are willing to expand their clinic spaces as well.

Until the end of this period, staffing problems were still not resolved in Maan Hospital's CPP Center, which delayed the opening of the center. The project is awaiting the MOHHC's decision for a resolution.

B. Develop and establish the National Standards and Service Delivery Guidelines

During the first quarter of the project, four working groups were established to develop four national guidelines in the topics of family planning, maternal health, infant health and counseling. The members of the working groups were selected among the highly respected representatives of the Ministry of Health, Royal Medical Services, Jordan University, JAFPP and private sector. Some international agency representatives were also among the members of these groups. After the completion of the group work, one member from each group, formed the guidelines finalization committee and collected the recommendations of the working groups. The committee worked on the consistency of the information and formatting. The committee finalized its work by the end of the third quarter. Four guidelines were printed during the fourth quarter and the distribution to the centers began at the beginning of the fifth quarter. The guidelines are now in use by all the operating centers.

C. Develop and establish the standardized Computerized Management Information Systems (CMIS)

Before the development of the CMIS, existing data collection and recording systems in the MOHHC, Al-Sareeh Center and JAFPP have been reviewed by the project. Then, a MIS committee was established, comprised of representatives from the MOHHC, RMS, SFWS and CPP Project. The committee developed the first draft of the woman and infant health care records, which were pilot tested in one center for a month and then in three centers for three months after the revision. The client forms were finalized, printed and distributed during the fourth quarter of the project.

During the third quarter of the project, the software application contracted out to a local company. The computerized system was developed and then tested at three sites during the fifth quarter. The project took into consideration the opinions and comments provided by the users and modified the system accordingly. At the end of the fifth quarter, the final system was installed in eight CPP centers. The managers of these centers and the receptionists received training in basic computer skills and system use.

Currently, all client records data are entered into the computers of eight CPP centers on regular basis and they are up to date. Center managers started pulling out the computerized reports in order to monitor their achievements regularly. The centers send their monthly data in diskettes to the project office, where these data are loaded into a central system and produce the necessary reports according to the needs of the project management.

The project has also established a referral mechanism to allow the family planning clients to be referred to the primary health care facilities after they complete their visits to the CPP centers. A list of PHC units in Jordan was obtained by the project and those in the same governorates are made available at each center in each governorate. Once the referral occurs, the PHC center, where the client wishes to continue to receive the services, are recorded in the system and on the referral card, which is in the MCH booklet.

Besides the service data of the centers, the project office has developed two more database to monitor its activities. One of them is the IEC inventory database that monitors the production and distribution of IEC materials developed by the project. This database is kept in the project office and provides information about the materials ordered, received, and distributed as well as stock figures.

Another database, which is the training database, provides information about the training topics, the names of the trainees according to each topic, trainers and trainers' evaluation.

D. Conduct operations research

During this period, two surveys were undertaken by the project through two separate subcontracts.

First study, which took place during the third quarter of the project assessed the behavior of the potential clients in the catchment areas of the project. It was conducted by a local research firm using the Participatory Rapid Appraisal technique. The study revealed significant findings on the health seeking behavior, community participation and media habits of the potential clients

The second survey was conducted during the fourth quarter of the project by another local research firm. This survey was undertaken to seek the rumors and misconception on contraceptives among the potential clients and service providers. The significant study findings have been assisting the project to revise its communication messages and address issues, that would help the information given to center clients who use family planning services, as well as family planning service providers.

E. Services

The services in three centers started during fourth quarter of the project and as of the end of the sixth quarter, eight centers are providing CPP services. The project was able to achieve, 80 percent of its targets by reaching 9,575 women who made a total of 15,375 visits during the reporting period. The statistics show that the demand for services increases monthly. (See Attachment 1 for the services in each center since the beginning of their operations).

II. TRAINING

A. Develop and Update the Counseling and Clinical Curricula

The counseling and clinical curricula used in the three CPP training centers were developed by two separate committees comprised of representatives from various institutions of the kingdom. Two external consultants assisted the committees to develop the curricula. Both curricula were made available in the training centers as well as other institutions who needed them, at the end of the fourth quarter of the project.

The counseling and the clinical curricula were updated and revised during the sixth quarter with the assistance of the same external consultants.

B. Provide in-country Training

The project has achieved 85 percent of its targets projected in its first and a half years workplans.

During the second quarter, training of trainers in both counseling and clinical skills were accomplished. Both trainings were delivered by Pathfinder training consultants. At the end of the TOT, ten physicians were certified as clinical trainers and, seven physicians and nurse/midwives were certified as counseling trainers. The counseling training of those who would serve as counselors in the CPP centers started during the third quarter.

The counseling trainers received a refresher course during the sixth quarter of the project and discussed in length how to improve their training courses in their centers.

Other in-country training courses which were delivered by Pathfinder training consultants during this period were the following:

- 1) Theoretical and practical skills course in modern contraceptive technology – Theoretical part of the course was attended by 20 physicians and seven nurse/midwives and the practical part was attended by ten physicians. This course took place during the third quarter of the project
- 2) Introduction to Management – All center managers attended the course during the third quarter of the project. A refresher course by the same consultant was provided during the sixth quarter of the project, where the new center managers who were recently assigned were able to participate.
- 3) Well baby care – Thirteen pediatricians and 24 nurse/midwives attended the course during the fourth quarter of the project, designed and conducted by local trainers with assistance from Pathfinder International. This course was repeated during the sixth quarter and 14 pediatricians attended the second course
- 4) Guidelines orientation training - Delivered by the members of the Guidelines Development Committee to a total of 19 service providers including the clinical and counseling trainers.
- 5) Quality in Management – Conducted by Pathfinder consultants and attended by the center managers during the fifth quarter. The participants of the workshop formed five committees to develop the quality indicators, elements of quality, standards, job descriptions for center staff and clinic assessment tools. The committees finalized their work and formed a final committee comprised of one member from each committee to review, standardize and establish the quality assurance system of the CPP Centers.

C. Provide out-of- country Training

All the out-of-country training activities planned for the first one and a half years of the project were accomplished.

The project provided the following out-of-country trainings during this period:

- 1) Family Planning Program Management and Supervision Training at the International Health Program in Santa Cruz, CA, USA – The Project Director attended the course during the second quarter.
- 2) Communication Course by JHU/CCP in Amman, Jordan – The Director of the Planning Department and one staff member of the Health Education Unit of the MOHHC attended the course during the second quarter.

- 3) LAM training at the Reproductive Health Institute in Georgetown University, Washington DC, USA – A senior pediatrician from Al-Basheer Hospital attended the course during the third quarter of the project.
- 4) Norplant insertion and removal skills training at Hasan Sadikin Hospital, Bandung, Indonesia – Five trainers from the three training centers and the Project Director attended the course during the fourth quarter of the project.
- 5) Postpartum IUD insertion skills training at Social Security Hospital in Mexico City, Mexico – Four trainers from three training centers attended the course during the fourth quarter of the project.
- 6) Planning and Managing Information Systems and Communication at Management Sciences for Health, Boston, MA, USA – The MIS specialist of the project attended the course during the fifth quarter of the project.

III. INFORMATION, EDUCATION & COMMUNICATION (IEC)

A. Strengthen IEC Management Capacity at the Ministry of Health

Starting in the first quarter, the Health Education Department of the MOH was contacted to collaborate in some communication activities. One of the HEU department staff was sponsored to attend the international communications course held in Amman. She was also provided some guidance by the project to improve the coordination. However, the collaboration did not prove to be very successful yet and this issue will be revisited during the second year of the project.

B. Increasing Awareness of Families

1) Advertising Campaign

This activity was not achieved due to problems with the former communications advisor as well as inadequate capacity of the local production firms to deliver high quality mass media materials. Through two RFPs issued during the third and sixth months of the project, the project was not able to receive any satisfactory proposals. In addition to lack of quality in the proposals, the high costs in Jordan is also a problem for the communications budget of the contract. A waiver is requested from USAID to seek opportunities in other Arab countries, that are reputable in production of family planning promotion material and social marketing.

2) Media Relations

The project held a workshop during the fourth quarter to which 19 journalists from various media agencies were invited. These journalists were provided information about the CPP centers, the importance of post partum care and family planning and given some idea of their role in improving the health of women and children in the Kingdom. During the fifth quarter of the project another meeting was held at the project office, providing information about the current project activities and its achievements. The participants requested a continuous flow of information from the project. In order to provide this information, with assistance from PAIH, media kits were developed. The kits will be finalized, printed and distributed to the agencies during the first quarter of the second year.

Additional activities to improve the relations between the media agencies have been on hold awaiting the replacement of the Communications Advisor, however have been incorporated into the 1998 Workplan.

C. Increase Knowledge of Women

1) Waiting Room Video

The production of the waiting room video was delayed due to inadequate assistance of the former communication advisor. A contract was signed by a local production company during the sixth quarter and this activity will closely be monitored by the new Communications Advisor and Glovis.

At the meantime, two videotapes which were produced in Egypt and provide information about family planning, contraceptives and postpartum care were reproduced, distributed to the operating centers and they are currently shown in the waiting rooms.

2) Print Materials for the Clients

All print materials that were planned for the first year, to improve the clients' knowledge were finalized and distributed to the centers with some delays. The print materials that were produced for the clients during the first and half years of the project are as follows;

- a) Promotional brochure for policy makers: The brochure was designed for the representatives of international agencies, government agencies and others who have influence in making the population policies in the country.
- b) All methods brochure: Aimed at providing women a general overview of methods available at the CPP centers, emphasizing on postpartum contraception.
- c) MCH booklet: A booklet combining a client record card, well baby card, referral card and some messages were produced for women who visit the CPP centers.

- d) Promotional poster: The poster was designed to provide some information about the services at centers and aimed at attracting the attention of the women who might be visiting the MCH centers and hospitals for various reasons
- e) All methods poster: It was designed for the clients in the waiting rooms
- f) PP/IUD flier: The flier was designed to promote the postpartum IUD insertion which is introduced in the services with this project. It is distributed widely in the centers and the MCH centers

All these materials were pre-tested at least twice by a local research firm. The feedback and comments received during pre-testing of the materials were taken into full consideration.

During the second year of the project, some these materials will be distributed to the MCH centers with the assistance of the FPLM project's commodity distribution system.

D Increase Service Providers Capacity

During this reporting period, the following materials were developed for the service providers:

a) All-methods flipchart : It was designed based on the findings of the IEC needs assessment and the study of the service providers' use of existing print materials. The project collaborated with UNFPA/MCH project and provided technical assistance in the production of the flipchart, where the UNFPA provided the necessary funds for printing. Two versions of the flipchart were produced, one containing natural family planning methods for the MCH Directorate and one without natural family planning methods for the CPP centers. The flipcharts were widely distributed to other agencies who provide family planning counseling in their programs.

b) All methods wallchart: This wallchart was designed for service providers to serve as a reminder for some significant information about the contraceptives during the counseling sessions. The printing of the wallcharts were delayed due to some technical problems in the print house. They will be printed and distributed during the first quarter of the second year of the project.

One of the materials that were identified to increase the capacity of the service providers has been re-release of duplication of any existing training videos that would have been produced by other agencies. Several videos were selected among those produced by Johns Hopkins University, Futures Group, IPPF and others. Norplant and IUD insertion tapes have been approved by the project management and distributed to the centers. The review is still going on to find the appropriate tapes for training.

IV. PROGRAM MANAGEMENT

The coordination between USAID/Jordan, MOHHC, Pathfinder Project Team and the other counterparts have been excellent which contributed significantly to achieve the successful results of the program. The project office staff and the center managers were also in full coordination to implement the program all over the kingdom. The meetings between the donor agency and in-country counterparts as well as project and the center managers took place, regularly. Also, regular monitoring visits to the centers were made by the project management as well as USAID/Jordan representatives.

Two replacements took place during the first year of the project, including the Project Director and the Communications Advisor. Both posts will be filled in during the first month of the second year.

The project was visited by Pathfinder International, Glovis and PATH headquarters and regional office representatives.

Program Achievements

A. Training

Type of Training	Number of Trainees	
	Projected	Achieved
Clinical skills	132	14 ¹
Counseling skills	373	388
FP Theoretical	146	64 ²
Management	26	28
Well baby care	20	51
Quality Assurance	13	14
MIS/Computer skills	26	35
Norplant insertion/removal	4	6
PP/IUD Theoretical	NA	28
PP/IUD insertion	8	4
LAM	NA	1
Ultrasound skills	NA	12
TOTAL	748	645

¹ The clinical training has not fully started due to unresolved training fees issue

² Curriculum and guidelines orientation integrated into this training

B. IEC Materials

Type of materials	Produced	Distributed
Promotional Brochure	2,500 English 2,500 Arabic	1,950 English 800 Arabic
Flipchart	400	196
MCH Booklet	40,000	26,533
All-Method Brochure	40,500	18,000
Promotional Poster	200	47
IUD Flier	100,000	31,000
Clients' All Methods Poster	500	44

C. Services

Number of VISITS at Active Sites by Admission Status

Reporting Period: 26/5/1997 - 31/12/1997

Center Name	Antenatal	Postpartum	Family Planing	Total Visits	Infant Visits	Date Service Started
Royal Medical Services	3	768	870	1641	0	5/97
Al Bashir	3572	1102	1342	6016	318	6/97
Madaba	1275	118	88	1481	37	6/97
Princess Badaia	273	180	376	829	10	8/97
Prince Rashed	1296	13	36	1345	0	8/97
Zarqa Gov. Hospital	1546	496	454	2496	431	9/97
SFWS	270	61	976	1307	0	9/97
Red Crescent	209	38	13	260	0	9/97
Total	8444	2776	4155	15375	796	

Number of CLIENTS at Active Sites by Admission Status

Reporting Period: 26/5/1997 - 31/12/1997

Center Name	Antenatal	Postpartum	Family Planing	Total Women	Total Infant
Royal Medical Services	1	480	549	1030	0
Al Bashir	2155	679	1004	3838	265
Madaba	588	98	67	753	33
Princess Badiaa	217	124	246	587	10
Prince Rashed	649	25	45	719	0
Zarqa Gov. Hospital	727	430	289	1446	356
SFWS	133	49	843	1025	0
Red Crescent	121	42	14	177	0
Total	4591	1927	3057	9575	664

New Family Planning Method Users

Method Center	Condom	DMPA	IUD	Norplant	Pills	Sterilization*	Total
Royal Medical Services	42	137	346	99	390	0	1014
Al Bashir	122	124	324	110	330	5	1015
Madaba	33	13	13	0	54	12	125
Princess Badiaa	89	9	71	11	182	4	366
Prince Rashed	13	1	12	0	16	0	42
Zarqa Gov. Hospital	64	30	93	39	138	0	364
SFWS	81	99	129	0	265	0	574
Red Crescent	0	5	4	0	22	0	31
Total	444	418	992	259	1397	21	3531

* Confirmed referrals from CPP centers