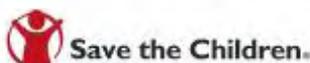


HEALTHY WOMEN IN GEORGIA PROGRAM ANNUAL REPORT FOR PROJECT YEAR FIVE OCTOBER 1, 2007 TO SEPTEMBER 30, 2008

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MCCANN ERICKSON Georgia



CLARITAS XXI



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2. ACRONYMS

AMTSL	Active management of the third stage of labor
APHA	American Public Health Association
CDC	Center for Disease Control and Prevention
CHCA	Charity Humanitarian Center “Abkhazeti”
CIF	Curatio International Foundation
CME	Continued medical education
COCs	Combined oral contraceptives
CYPs	Couple-years of protection
EPC	Effective Perinatal Care
EERFPA	Eastern European Regional Family Planning Activity
FP	Family planning
GoG	Government of Georgia
GPC	Gudushauri Perinatal Center
HEAL	Women’s Health and Healing in Abkhazia and South Ossetia
HLS	Healthy Lifestyles Program
HWG	Healthy Women in Georgia Program
IDP	Internally Displaced Person
IEC	Information, Education and Communication
IUD	Intra-Uterine Device
JSI	JSI Research and Training Institute, Inc.
KOGH	Kutaisi Obstetric Gynecological Hospital
LMIS	Logistics Management Information System
MCRC	Mother and Child Regional Diagnostic/Treatment Center
MoE	Ministry of Education
MoLHSA	Ministry of Labor, Health and Social Affairs
OB/GYN	Obstetrician/gynecologist
PHC	Primary health care
PS	Parents’ School
RAMOS	Reproductive-Age Mortality Study
RH	Reproductive health
STI	Sexually transmitted infections
UNICEF	United Nations Children’s Fund
UNFPA	United Nations Fund for Population Activities
USAID	United States Agency for International Development
WHO	World Health Organization
YFP	Youth-friendly pharmacy

3. EXECUTIVE SUMMARY

Two JSI HWG team members passed away this year. Their departure was particularly painful to the HWG Project staff. **Diane Hedgecock** was the Senior Advisor for HWG based in the US for most of the life of the project. A senior health professional with worldwide experience, Diane was a tireless advocate and wise advisor behind the scenes for HWG. **Tom Coles** served as Deputy Chief of Party of HWG from January to July 2008. His most notable contribution to Georgia was as the architect of the supportive supervision approach and system now being successfully rolled out.

This is the Annual Report of Project Year Five. The Healthy Women in Georgia Project began on September 24, 2003 and extends until September 23, 2009. This year marked by change of Chief of Party of the HWG Program– Nancy P. Harris was replaced by Kartlos Kankadze. HWG program staff will remain deeply grateful to Nancy for her immense contributions to HWG current achievements and her continuous efforts to make our project even more successful.

This year was dominated by series of political and military upheavals affecting Georgia as a whole, including political unrest and demonstrations leading to early elections, and most importantly, Russia-Georgia war erupted in August in breakaway region of Tskhinvali and expanded throughout the country with particular impact on its central (Shida Kartli and other areas adjacent to Tskhinvali region) and western (Samegrelo, adjacent to another breakaway region of Abkhazia) parts resulting in many civilian casualties and displacement of thousands of people.

Summer hostilities and its consequences had been logically reflected in the HWG Program activities during this period. Four HWG FP sites located in conflict zone in Shida Kartli: Nikozi, Tirdznisi, Tkviavi and Dzevera ambulatories, were heavily damaged and stopped operating. Access to many HWG sites for provision of logistics and supportive supervision services was impeded due to security reasons. Similarly, the planned full coverage of Kvemo Kartli region with FP trainings had been hampered. Number of HWG events such as Race for the Cure, EPC training for Kvemo Kartly maternity teams under the Co-Reform initiative, RAMOS study field work, as well as presentation of Teachers Training Curriculum, had been postponed.

HWG conducted a rapid assessment of the impact of war on women who were forced to flee the conflict areas. The findings of this assessment will be presented at the 136th APHA annual meeting in October. Save the Children IEC team, together with peer educators, packed and distributed 1600 food and hygiene parcels to new IDPs.

However, notwithstanding the political disturbances and summer clashes, overall, the HWG program has successfully achieved its major objectives defined for this year in all its components. HWG program was highly recognized and praised by the external team of Dr. Pinar Sinlet and Ms. Paula Bryant, conducted a sector assessment for USAID/Georgia.

HWG has exceeded its objectives under the “F” process by the end of this year in both MCH and FP areas.

Efforts to reform maternity and newborn care continue to experience good success, as can be seen by the growing number of institutions adopting Effective Perinatal Care (EPC) interventions. To date, 14,285 women have given birth receiving Active Management of the Third Stage Labor (AMTSL) and 14,277 newborns received essential newborn care in 15 target maternities throughout Georgia. Thus, HWG not only exceeded the program targets for September 2008, but even went over 2009 target for AMTSL and came close up to September 2009 target for essential newborn care.

HWG made a formal presentation on February 20 to the Reproductive Health Council on the results of its EPC component. Attendees expressed satisfaction with the data showing trends toward improved maternal and newborn outcomes. The First Lady of Georgia, Sandra Roelofs, who heads the RH Council, pledged to

advocate for the program. Subsequently, during a state visit by her husband to Washington DC, she visited both USAID and the JSI/Washington office to discuss program successes and future needs.

Data on contraceptive use, as represented by the proxy measure couple years of protection (CYP) continues to show a steady rise. A total of 43,683 Couple Years of Protection (CYP) have been generated as a result of HWG program assistance to 420 family planning sites, most in rural or underserved communities; thus HWG almost fulfilled the 2009 target for CYP, defined as 45,000.

The major highlight this year was that USAID approved HWG proposal regarding additional funding for Post Abortion Care (PAC). HWG has already initiated intensive preparatory works so that PAC activities will be rolled out at the outset of new project year. Additional funding was secured for expansion to Kvemo Kartli, pre-service training and other activities as well. These activities are now launched with some coming already to an end.

The Health and Reconciliation (**HEAL**) component completed its activities with a major success—a family planning training course in Ukraine in collaboration with the USAID-funded JSI Together for Health Program, that brought together health practitioners from Georgia and both breakaway regions, Abkhazia and South Ossetia. As a follow-up of the last-year EPC training in Ukraine, a team of Ukrainian trainers visited Georgia and provided supportive supervision in Zugdidi and Gori HEAL sites and elsewhere. Although formal HEAL program activities have ended, HWG continues to work in a number of sites added during HEAL and particularly those serving internally displaced persons (IDPs).

Remarkable policy or programmatic breakthroughs this year include:

- Ø An agreement was reached by the MOLHSA, UNFPA, USAID and HWG on a close collaboration to build a unified contraceptive logistics information system (LMIS) to be housed in the ministry of health. UNFPA and HWG will each second staff to work at the MOLHSA on this effort. This long held objective is a pivotal step in eventually developing a national logistics and family planning program.
- Ø Supportive supervision efforts in reproductive health in Georgia were launched when 19 senior trainers and managers from both the MOLHSA and health insurance programs attended the HWG and EERFPA workshop to pilot a supportive supervision system which eventually will be available to the entire EE Region. The first training-workshop for internal Supportive Supervision/Continuous Quality Improvement (SS/CQI) teams and the first external SS visit to Imereti Regional Family Medicine Training Center had already been conducted as well.
- Ø The HWG teacher training curriculum on healthy lifestyles and adolescent reproductive health was formally accepted by the Ministry of Education and Science of Georgia. This curriculum was elaborated jointly with HWG, the MOE, MOLHSA and regional consultants. HWG is now doing teacher training and working with Educational Resource Centers (ERCs) in Imereti and Kvemo Kartli Regions.
- Ø JSI HWG signed a MoU with the Tbilisi State Medical University (TSMU). Under the MoU parties agreed on collaboration in preparing standardized Regional FP Curricula for medical and nursing school students and for residency programs in Obstetrics/Gynecology and Family medicine.
- Ø Institutionalization of liberalized family planning and antenatal care in primary health care settings was advanced when HWG added several PHC training centers to its close collaborators and conducted training of trainers (TOT) for these centers.
- Ø The MOLHSA, the State Medical University, UNICEF and USAID/HWG continue collaborative efforts to institutionalize EPC practices, specifically in pre-service training. In this connection, the EPC experts' group had already developed six modules intended for sixth year students and Ob/Gyn

residency program of the State Medical University.

- Ø The Parents School curriculum was updated according to the international standards with international expert' technical assistance. Training of PS facilitators this year resulted in opening of five new schools throughout Georgia. HWG completed its partnership with Orthos, although continues to support the parents' school movement through other means and partners.
- Ø Infection control is one of the most challenging aspects in implementation of safe delivery practices. In order to address this problem JSI HWG and the local NGO Georgian Maternal and Child Care Union designed and launched a new clinical training course called "Infection Free Babies". It carries 30 continuing medical education (CME) credits. The course was accepted with great satisfaction by medical professionals in HWG target sites.
- Ø In light of public-private partnerships, HWG signed a Memorandum of Understanding with the National Association of Family Doctors and with private insurance company Aldagi-BCI's "My Family Clinic" regarding collaboration in the area of Supportive Supervision.
- Ø HWG continues to strengthen partnership in private sector. This year a Memorandum of Understanding (MoU) was signed with two private pharmaceutical companies: "Bayer Schering Pharma" representation in Georgia and "PSP-Richter" LTD to set forth their wish to cooperate with the MoLHSA in a mutual effort to support the Family Planning program.
- Ø Two major studies, a Cost-Impact Study of EPC and a Reproductive Age Mortality Study (RAMOS) occupied time and effort this year. The RAMOS study is just getting started and the Cost-Impact Study is yielding valuable data on the positive impact of EPC on cost as well as health outcomes. A joint RH/MCH survey was carried out by HWG and CoReform in collaboration with CIF and NCDC to assess women's reproductive health status and utilization of services in Kvemo Kartli with special focus on ethnic minorities.

This report details The Healthy Women in Georgia (HWG) Project's intended results and achievements throughout PY5 in three main program components: modernizing maternity care, increasing access to and utilization of family planning and creating informed consumers.

4. MODERNIZING MATERNITY CARE

The HWG Project is introducing evidence-based, family-friendly maternal and newborn care to improve maternal and neonatal outcomes and to make childbirth a more pleasant experience for Georgian women. Techniques such as active management of the third stage of labor (AMTSL), warm chain, overall de-medicalization of care, evidence-based management of major obstetric and neonatal conditions and Parent Schools' activities were included in EPC interventions. Modernizing maternity care is a slow process, which involves changing medical practice and creating an environment where clients are informed and prepared to give birth.

4.1 Results: Active Management of Third Stage Labor (AMTSL) and Essential Newborn Care

The chart below shows results to date on the two major "F" process indicators in MCH area. By the end of this year HWG exceeded not only its September 2008 target for both AMTSL and essential newborn care, but went over September 2009 target for AMTSL and came close up to September 2009 target for Essential Newborn Care.

Indicator	Baseline (end Sept '06)	Sept '07 Target	To date	Sept '08 Target	Sept '09 Target
Cumulative number of women giving birth who received Active Management of the Third Stage of Labor (AMSTL) through USG-supported programs	1,542	4,000	14,285	9,000	14,000
Cumulative number of newborns receiving essential newborn care through USG-supported programs	1,163	3,500	14,277	9,100	14,700

4.2 Implementation of Effective Perinatal Care (EPC)

This section describes results this year and to date, by region, in implementing EPC. It includes training, service delivery numbers and performance in key areas of hospital-based practice reform.

Throughout PY5 HWG expanded promotion of EPC principles conducting a ten-day EPC training for a total of 43 providers from four maternity hospitals: Tbilisi Chachava Institute of Perinatal Medicine and Obstetrics/Gynecology, Tbilisi Maternity Hospital "Orioni" (private clinic), Sachkhere and Sagarejo Maternity Departments. The training, conducted jointly by World Health Organization (WHO) experts and local master trainers, was provided to 23 OB/GYNs, 9 neonatologists, 8 midwives and 3 child-care nurses. As a result of this training three new sites: Chachava Institute, Sachkhere and Sagarejo maternity departments were added to the HWG Program.

The total number of HWG target hospitals by September 2008 is sixteen covering 60% of obstetric needs of country population. This year of a total of 13,182 women giving birth in 15 target maternity hospitals (data collection from Sachkhere Maternity Department will start in October) 9,417 received Active Management of the Third Stage of Labor (AMTSL) and 9,995 newborns received essential newborn care. The HWG EPC sites include 6 maternities in Western Georgia: Mother and Child Regional Diagnostic/Treatment Center (MCRC), Kutaisi Obstetric Gynecological Hospital (KOGH), Zestaphoni Maternity Hospital (ZMH), Chiatura Maternity Hospital (CMH) and newly-added Sachkhere Maternity Department in Imereti region; Zugdidi Maternity Department in Samegrelo region, and Batumi (Angisa) Maternal and Child Center in Adjara region. In Eastern Georgia program covers sixteen maternities: four in Tbilisi - Ghudushauri Perinatal Center (GPC), Maternity Hospital #2, Maternity Hospital #3 (Patriarchy Hospital) and Chachava Institute of Perinatal Medicine and Ob/Gyn; three in Kvemo Kartli - Rustavi, Marneuli and Bolnisi maternities; Gori

Supportive supervision visits and monthly monitoring data analysis reveal continuous progress in modernization of maternal and neonatal care in all our target hospitals. The data shows remarkable reductions in the use of unnecessary medical interventions (e.g. episiotomies, amniotomies, labor augmentation, birth canal examinations after labor, drug use, etc.). Partograph is successfully used in the overwhelming majority of deliveries. In all sites postpartum excessive bleeding is maintained at low rates, which is largely achieved through wide use of AMTSL technique and facilitated by continuous elimination of irrational use of labor induction, stimulation and episiotomies, as well as due to immediate breastfeeding. However, the rate of operative deliveries in some facilities continues to exceed WHO recommended standards. HWG continues to address this problem through close monitoring of partograph use and on-the-job trainings.

Remarkable progress is observed in implementation of the neonatal part of EPC component. This particularly refers to Essential Newborn Care practices (skin -to-skin contact and immediate breastfeeding) in all relatively new sites along with amazingly high performance in Tbilisi maternity #2, Ghudushauri and Zestaponi “mature” sites. More interventions and support is needed to improve newborns’ resuscitation practices in some facilities. This year HWG updated its EPC monitoring forms including additional indicators for measuring maternal and neonatal complications.

Family-friendly practices are progressively integrated in all maternities. Women giving physiological birth in individual delivery rooms are encouraged to choose free positions and to have companion during the labor and delivery. Increasing number of husbands/partners, equipped with appropriate knowledge and skills through parent school sessions, attend labor and delivery and provide extremely important support to women including postpartum. Rooming in became a routine practice almost in all EPC sites. There is a lack of parent schools in Kvemo Kartli Maternities that will be addressed next year by HWG project.

The major achievements in implementation of safe delivery practices in HWG sites by the end of this year are demonstrated in Figures 1-8. As shown, new sites make significant steps forward in implementation of EPC practices. Due to the conflict-related emergency situation, in August Gudushauri National Medical Center operated largely for military purposes, although continued to receive deliveries, mainly complicated cases and IDPs from the villages in Tskhinvali and Shida Kartly conflict zones. Despite the intense military operations in Gori and Zugdidi affecting Kvemo Kartli (mainly Marneuli) as well, all five target maternities in these regions were operating without major disruptions.

Following the August hostilities, HWG conducted a rapid assessment of the impact of war on women who were forced to flee the conflict zones in Tskhinvali and Shida Kartli regions. The major findings of the above-mentioned assessment will be presented by HWG at the 136th APHA annual meeting in October.

Figure 1. Implementation of EPC practices in Imereti Target Maternities. July-September 2008

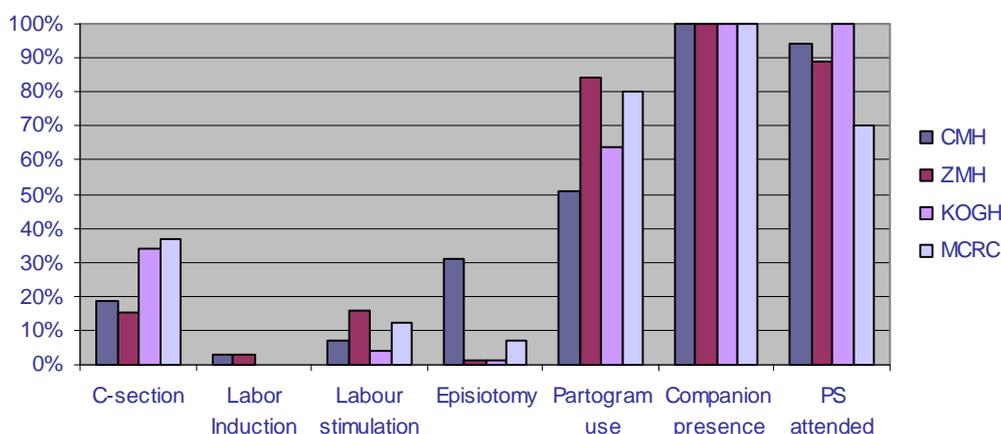


Figure 2. Implementation of EPC practices in Tbilisi Target Maternities. July-September 2008

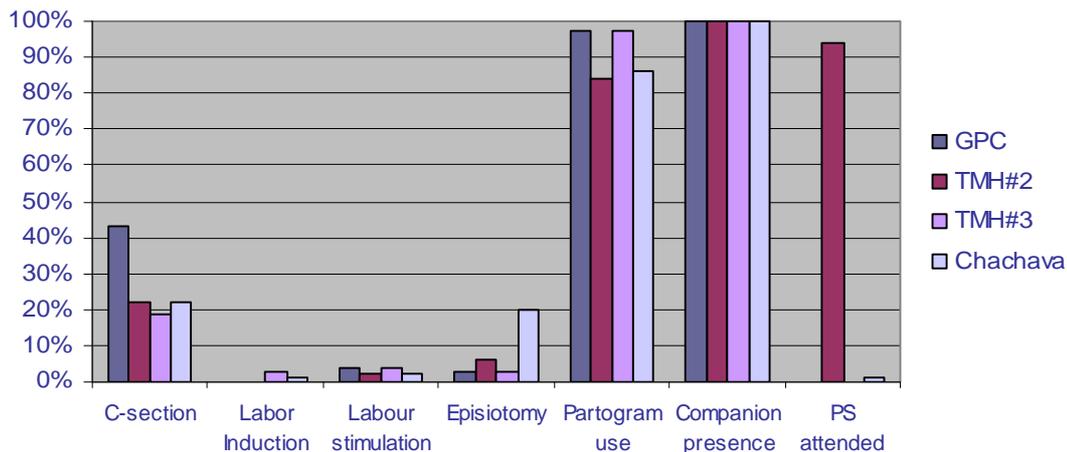


Figure 3. AMTSL and Postpartum Hemorrhage Imereti Target Maternities, December 2005- September 2008

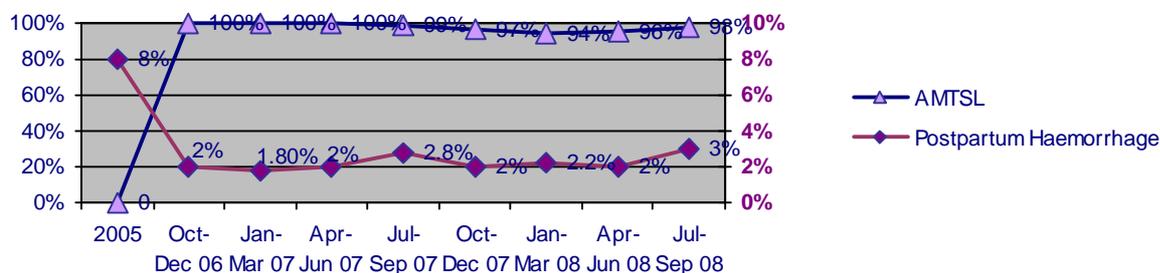


Figure 4. AMTSL and Postpartum Hemorrhage in Tbilisi Target Maternities by Quarter. January 2006-September 2008.

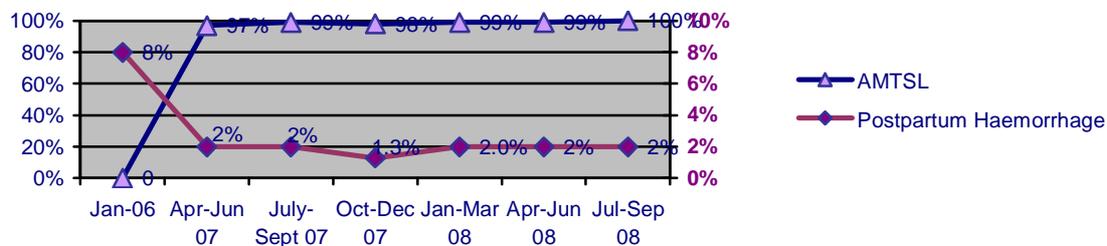


Figure 5. Essential Newborn Care. Imereti Target Maternities, December 2005- September 2008

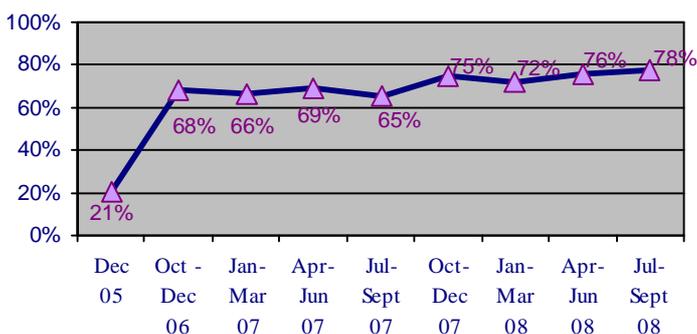


Figure 6. Essential Newborn Care. Tbilisi Target Maternities. January 2006-September 2008

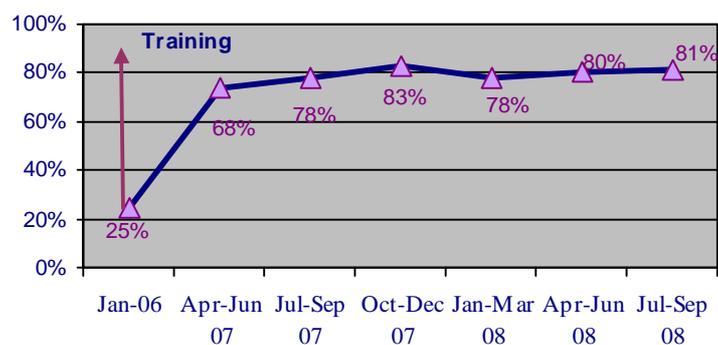


Figure 7. Implementation of EPC Component in Zugdidi, Gori, Batumi, and Sagarejo Maternities. July-September 2008

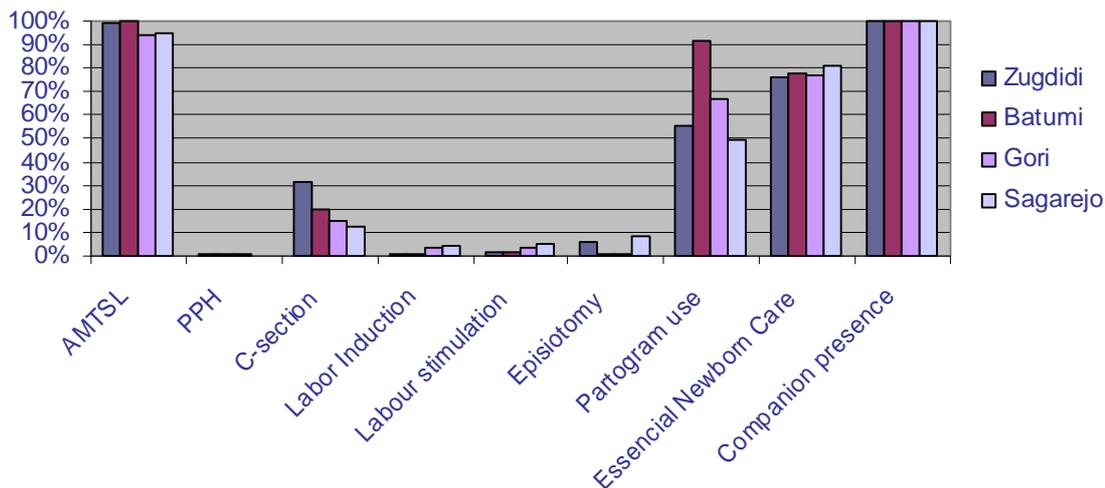
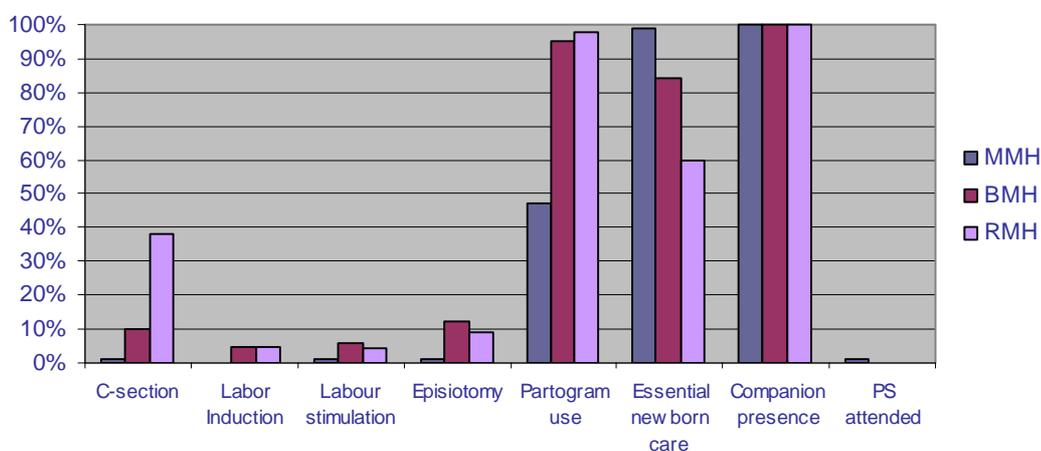


Figure 8. Implementation of EPC practices in Kvemo Kartli Target Maternities. July - September 2008



This year HWG conducted a total of 14 needs-based on-the-job trainings in its EPC sites throughout Georgia covering different topics in both obstetrics and neonatal fields. In addition, HWG conducted evaluation of delivery and neonatal practices in Rustavi Maternity and Kutaisi Mother and Child Regional Center. HWG consultants (EPC experts) produced and submitted the final evaluation report and appropriate recommendations.

In addition, HWG has produced a popular quarterly informal newsletter designed to share information, views and evidence that is being gathered at EPC target sites. Bolnisi Maternity Hospital was provided with a baby scale, donated by the US Embassy Medical Unit.

4.3 Parents' Schools

Parents' schools are the key "demand side" activity in modernizing maternity care. Evidence suggests that prepared women have better overall outcomes and a more positive birthing experience. Parents' schools are HWG's strategy for increasing both parents' awareness about pregnancy, delivery, postpartum and newborn care, FP issues and shared responsibilities of parenthood. Georgian experience demonstrates that parents' schools are an essential companion to EPC interventions. Gradually, the "culture" of childbirth is changing, and women and couples approach birth with greater knowledge and with the expectation of family-friendly deliveries, and companion presence at birth.

This year an important focus of Orthos and HWG activities was updating and improvement of Parents' School training curriculum. A curriculum design expert from JSI/Romania, Daniela Iancu, was invited to

provide technical assistance in revision of training curriculum that resulted in development of the following 10 modules: 1) Pregnancy; 2) Stages of Labor; 3) Coping with Confidence; 4) Postpartum Care for Moms and Dads; 5) Breastfeeding; 6) Newborn Care; 7) Family Planning, STDs and HIV/AIDS; 8) Growth of Baby – Birth to Age One; 9) Hospital Procedures and Caesarian Section; and 10) Conscious Fathering. Pre- and post-tests for each PS module have been also elaborated to evaluate the level of knowledge of pregnant couples before and after parenting classes.

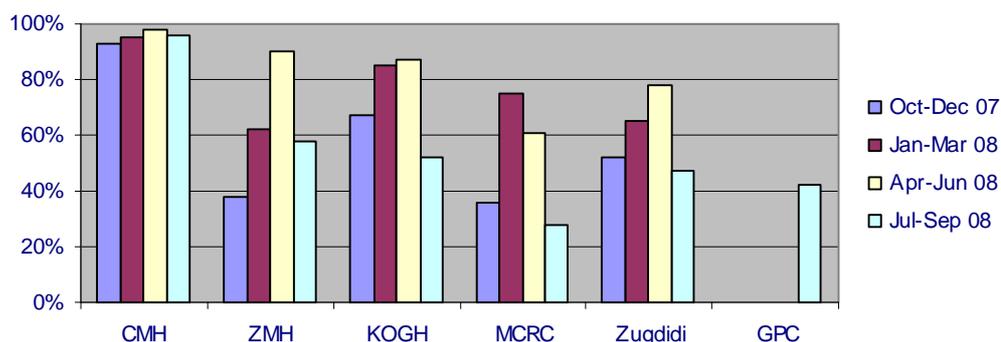
Throughout the year four Parents’ School trainings were conducted for a total of 49 health care providers (OB/GYNs, midwives, neonatologists and nurses) from 7 maternity hospitals (Chachava Institute, Patriarchy Maternity, Gagua Maternity, Gudushauri, Tbilisi Maternity Hospital # 2 and Batumi(Angisa) Maternity) and 3 women consultation clinics (Tbilisi WCC #1, Zugdidi and Khulo WCCs). The training was conducted using the new PS curriculum.

The training of Parent School facilitators were followed by opening of five Parent Schools in Patriarchy Maternity, Gagua Maternity, Gudushauri, Tbilisi Maternity # 2 and Zugdidi Maternity Hospital. HWG provided appropriate equipment and distributed all necessary IEC materials to the newly opened schools. The official opening ceremony in Gudushauri Perinatal Center was attended by the First Lady, Sandra Roelofs; Minister of Health, Sandro Kvitashvili; USAID CTO, Tamara Sirbiladze and Director of Gudushauri National Center, Zaza Sinauridze. The event was covered by TV.

Currently a total of 11 PSs are functioning throughout Georgia: five in Tbilisi (Chachava institute, Gudushauri, Gagua, #2 and # 3 (Patriarchy) maternities), four in Imreti (Kutaisi Maternal and Child Regional Center, Kutaisi OB/GYN Hospital, Zestaponi and Chiatura maternities), and two in Gori (Gori Maternity Hospital) and Zugdidi (Zugdidi Maternity Hospital). Parents’ School premises in Batumi (Angisa) Maternity Hospital are renovated and will be opened next quarter.

Figure 9 shows the dynamics of attendance of the PS classes by women who delivered in HWG EPC sites throughout this year. Decreased number of Parents’ School attendance during the last quarter could be explained largely by the August developments in the country along with seasonal patterns. Further support is needed to strengthen Parent Schools’ activities, particularly in Tbilisi sites. HWG plans to integrate monitoring of PS activities in EPC supportive supervision visits that will contribute to increasing awareness of and demand on modern delivery practices among clients.

Figure 9. Percentage of Delivered Women Attended Parents' School Sessions, by Facility and by Quarter. October 2007 – September 2008



Parents’ schools are becoming increasingly popular, and demand is steady among private hospitals, in addition to those originally targeted for HWG assistance. Insurance companies also express increasing interest towards the idea of integration of PS services in insurance package. HWG held a meeting with Aldagi-BCI to discuss the advantages of this strategy.

In May, upon request of the “Aversi” pharmaceutical company, HWG organized a PS session for Marneuli

Women Consultation at “Aversi” Clinic. About 50 pregnant women and their partners attended the session and expressed their willingness to attend the entire PS course.

Orthos has been a valuable partner in the HWG Parents’ Schools activities since the inception of the project. HWG and Orthos have mutually agreed to share the technology of parents’ schools, but to complete their partnership on a positive note. HWG continues to support the parents’ school movement through other means and partners and will maintain cordial contact with Orthos as it redefines its mission and future activities.

4.4 Training in “Infection Free Babies”

Infection control remains to be the most challenging aspect of EPC implementation. In order to address this problem JSI HWG and the local NGO Georgian Maternal and Child Care Union designed the new clinical training course called “Infection Free Babies”. It carries 30 continuing medical education (CME) credits.

The goal of the course is to provide medical professionals working at ante- and perinatal health care settings with advanced, evidence-based information about clinical and epidemiological aspects of perinatal infections; modern aspects of diagnosis, management and prevention strategies to decrease the risk factors for transmission of infections from mother-to-child and blood borne infections at maternity clinics.

Training carries 30 continuing medical education (CME) credits.

This year four five-day “Infection Free Babies” trainings were conducted for nine HWG EPC sites: Chiatura and Zestaponi Maternity Hospitals, Kutaisi Mother and Child Regional Center, Kutaisi Ob/Gyn Hospital, Tbilisi Patriarchy Maternity, Chachava Institute, Ghudushauri Perinatal Center, Batumi and Zugdidi Maternity Hospitals, as well as for Imereti and Adjara Regional family Medicine Training Centers, Zugdidi Women’s Consultation and Zugdidi IDP policlinic. A total of 132 OB/GYNs and neonatologists and four Family Medicine trainers participated in the training.

Guidebooks on “Transmission of Infections from Mother-to-Child” (PMTCT) and information booklets on the key control measures when working with blood and blood products were distributed to all trainees. Post-test results and participants’ feedback showed the great interest towards the training topics. Family medicine trainers underlined importance of received information in view of updating family medicine training curricula. HWG plans to assess the impact of the training on actual clinical practice in participant EPC sites.

5. INCREASING ACCESS TO AND UTILIZATION OF FAMILY PLANNING

Since its beginning in ten rural ambulatories (now Primary Health Care sites), HWG has demonstrated that it can rapidly and dramatically expand access and utilization of family planning services, especially in rural areas where it is needed most. Activities under this component include: training medical personnel and providing them with ongoing supportive supervision; provision of donated contraceptives and logistics; support to clinical providers; and reinforcement of post-partum and post-abortion family planning counseling. Clinical services and client counseling go hand-in-hand with community education, information-education and social marketing (described in Section 6). The overall goal of this component is to promote access and utilization of quality family planning services as a basic right of women and couples and to decrease the high abortion rates in Georgia.

5.1 Results: Number of Service Sites and Couple-Years of Protection (CYP)

The chart below describes the overall project results in the major “F” process indicators, Number of Service Delivery Sites and CYP. The map found on the cover of this report shows geographic coverage of the program. Note that HWG has already exceeded its cumulative target for CYP generation by September 2008 and even nearly achieved its September 2009 target. HWG is also on track in opening new service delivery points. Details are in the following sections.

Indicator	Baseline (end Sept '06)	Sept '07 Target	To date	Sept '08 Target	Sept '09 Target
Cumulative couple-years of protection (CYP) in USG-supported programs	3,977	11,000	43,683	25,000	45,000
Cumulative number of service delivery points providing FP counseling or services	141	276	420	390	390

5.2 Logistics Management Information System (LMIS) and Contraceptive Security Activities

This year **82** new family planning service delivery points were added to the 338 existing program sites: 63 sites in Kvemo Kartli, 8 in Imereti, 5 in Tbilisi, 2 in Batumi/Ajara, one in Kakheti, one in Gori and 2 in Samegrelo Region. By the end of this year number of HWG assisted FP sites reached **420**, surpassing September 2008 target for this indicator by 30. This represents access of over 60 % of total population of Georgia. Table 1 (below) gives details on population size and coverage by regions.

LMIS team continued to deliver donated contraceptives to all newly added sites following the trainings in FP and logistics issues. Contraceptives were also provided to Tsalenjikha and Jvari Women’s Consultation Centers in response to their request, thereby increasing access to contraceptive support for IDPs in Samegrelo region. In addition, posters, registration journals, medical clothes, gowns, medical cabinets and transportation bags were distributed to new target PHC facilities in Kvemo Kartli Region (Marneuli, Bolnisi, Rustavi and Gardabani).

Table 1. Population Coverage by FP Component of the HWG Project by September 2008.

	N of population	Coverage (N) Sept. 2008	Coverage (N) Sep. 2009
Target	3 874 266	2 028 173 (56%)	2 588 186
Regions			
Tbilisi	1081679	600000	600 000
Imereti	560683	560683	560 683
Kakheti	384866	384866	384 866
Shida Kartli	271948	106688	106 688
Kvemo Kartli	447336	437780	447 336
Samegrelo	412017	204131	412 017
Guria	139358	51596	51 596
Adjara	220565	25000	25 000
Mtskheta-Mtianeti		0	0
Racha-Lechkumi		0	0
Samtskhe-Javaketi		0	0
Actual coverage for October 2008	3 518 452	2 370 744 (67%)	

As a result of expansion of service sites along with effective supportive supervision and LMIS, as well as HWG-conducted social marketing campaigns, contraceptive use has been steadily increasing throughout this year among both new and return clients. Accordingly, Couple Years of Protection (CYP), a proxy measurement of contraceptive use, generated this year and collected through JSI LMIS, achieved 25,114 bringing a total cumulative CYP up to 43,683. Thus, HWG not only exceeded September 2008 target for CYP (25,000), but almost fulfilled September 2009 target defined as 45,000.

Figures 10 and 11 illustrate the dynamics of CYP since the beginning of the project. As shown, there is a steady rise of CYP that points to the growing demand for FP services and contraceptives among target communities. Figure 12 provides CYP distribution by contraceptive type for this year. The data for IUD indicate increasing popularity of this contraceptive mean among women.

Figure 10: CYP by Quarter, December 2006- September 2008

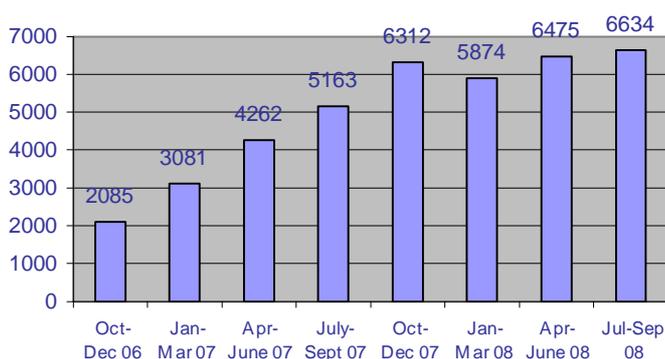


Figure 11. Cumulative CYP for All Contraceptives by Quarter. September 2006- September 2008.

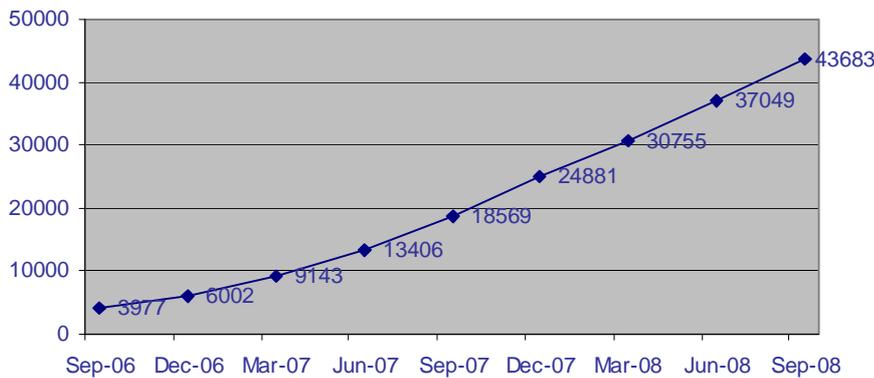
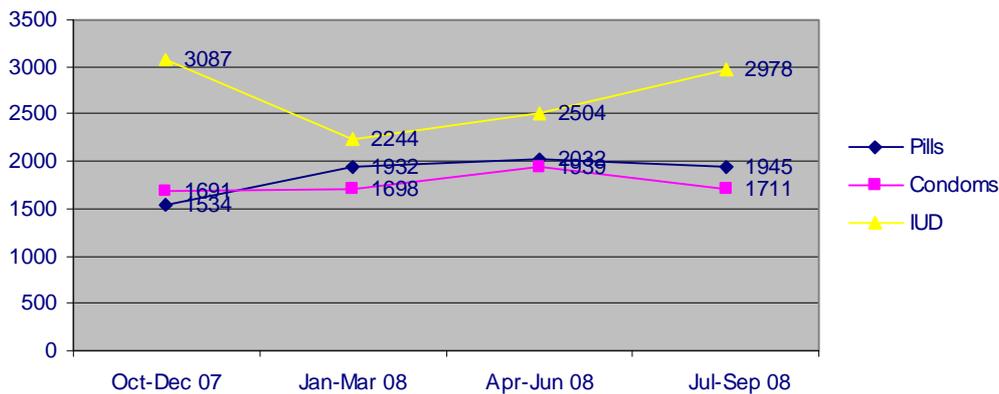


Figure 12: CYP by Contraceptive Types. October 2007 - September, 2008



This year HWG received 25,000 contraceptives (Lo-Feminal) for Kvemo Kartli target facilities which were stocked in a new warehouse (200 sq.m. storage area) selected through a successful bidding.

Three-month inventory of contraceptives was delivered by HWG LMIS team to all rayon warehouses in the beginning of each quarter according to the action plan. CIF continued distribution of contraceptives to all FP service delivery points in Kakheti region. Despite the summer hostilities in Georgia, distribution of contraceptives had been ensured to all regions without any impediment and for the most part, there were no contraceptive stock-outs reported this year. However, as a result of the August tragic events, four ambulatories: Nikozi, Tirdznisi, Tkviavi and Dzevera ambulatories in Shida Kartli stopped operating. Contraceptives stored in those ambulatories reportedly were stolen by looters.

Contraceptives distribution of to target rayons were accompanied by LMIS trainings for rayon coordinators. This year five LMIS trainings were conducted for a total of 17 rayon coordinators: 8 Rayon coordinators in Kakheti region, 2 in Tbilisi (Isani-samgori and Gldani-Nadzaladevi districts), one in Gori and 6 in Kvemo Kartli (Marneuli, Rustavi, Bolnisi, Gardabani, Dmanisi and Tetrtskaro). All relevant materials and tools were provided to trainees. Following the training for Tbilisi rayon coordinators HWG's NGO partner "CLARITAS XXI" started the data collection from Tbilisi target sites (26 in total) through its rayon coordinators for Gldani-Nadzaladevi and Isani-Samgori Districts. This is a part of HWG strategy to extend responsibility for data collection and supportive supervision to local partners enhancing local level "ownership" of the program, thus ensuring sustainability of interventions.

Given the significant increase in the number of family planning sites, the new quarterly reporting forms developed for rayon coordinators turned to be very effective allowing collection of both clinical and logistical data from each site, as well as information analysis at both the regional and central levels. Besides, all FP sites successfully used new family planning register books.

The follow-up LMIS training was provided for the staff members of poorly performing Gori medical

facilities with participation of Gori rayon and clinical coordinators. Participants were updated with relevant instructions recommendations for improvement of data collection and reporting, as well as other organizational issues.

Pasportization of target medical facilities was undergoing in the period of July-September. The data was obtained through the rayon coordinators. CIF completed pasportization of Kakheti sites in accordance with JSI HWG instructions. Thus, the major part of the data for the database has been already collected.

5.3 Family Planning Training

5.3.1 Family Planning Training for the Trainers of the Family Medicine Training Center

This year JSI HWG conducted 3 FP Trainings of Trainers (TOT) for family medicine trainers from 7 Family Medicine Training Centers (2 in Kutaisi, one in Batumi, one in Gori, and 3 in Tbilisi). Overall, 61 trainers attended the FP TOT sessions. Training of trainers at these centers is an important part of HWG sustainability efforts because these centers continue to train family doctors in a cascade manner with funding from other sources. The learning process is based on the evidence-based curriculum, developed within the framework of the HWG program and updated according to the most up-to-date information. Participants expressed their willingness to integrate the family planning component into the PHC providers'/family physicians' vocational training using the HWG curriculum. The efficiency of the training course was demonstrated by pre- and post-test scores: on average 63% vs 97% respectively.

5.3.2 Training in Mature Regions—Imereti and Tbilisi Sites

Currently, all 145 target facilities in Imereti Region are fully involved in program implementation. This year JSI HWG completed in-service FP trainings for the medical staff, remaining untrained in 13 Imereti FP sites. Two trainings were conducted separately for 15 doctors and 23 nurses from two maternities, 10 ambulatories, and one IDP polyclinic.

The FP training was provided by HWG to 12 OB/GYNs and 4 nurses from three medical facilities in Tbilisi: a women's consultation center for IDPs and two PHC centers. Involvement of IDPs from Abkhazia was initiated by the Minister of Health of Abkhazia, Mrs. Dalila Khorava. She expressed eagerness to continue and further advance cooperation with the HWG program that began under the now-completed HEAL component. As a result of training three more FP sites were added to Tbilisi target facilities.

Seven more clinical trainings on FP issues were carried out by Pediatricians' and Family Physicians' Association — "Claritas XXI" for 136 representatives from PHC centers of Vake-Saburtalo region in Tbilisi. The representative of the pharmaceutical company "Bayer Schering Pharma" also attended the trainings and participated in distribution of IEC materials among trainees. Presentation on contraceptives produced by "Bayer Schering Pharma" was also provided to the polyclinics' staff.

"Claritas XXI" conducted the FP trainings for Family Physicians as well. The training was held at the Tbilisi State Medical University's Family Medicine Center. Overall 19 doctors attended the training, of which seven were representatives from the Family Medicine Department of Tbilisi State Medical University, 11 from Family Medicine Center #1 and one OB/GYN from M. Iashvili Children's Central Hospital. As with training held in PHC Training Centers, this training of Family Medicine professors advances the de-facto expansion of family planning outside the realm of a specialized OB/GYN service.

5.3.3 FP Training and Expansion in Kvemo Kartli

This year HWG expanded its FP activities to Kvemo Kartli (KK) Region launching the series of training courses for health care providers from maternity hospitals, women's consultation clinics and primary health care centers (ambulatories). In total, 22 FP trainings were conducted for 346 health care providers

(28 OB/GYNs, 8 midwives, 153 PHC physicians and 157 PHC nurses) from 63 medical facilities (3 maternities/ women's consultation clinics and 60 ambulatories) in Marneuli, Bolnisi, Rustavi, Gardabani, Dmanisi and Tetrtskaro districts. Details of FP training courses in Kvemo Kartli region are provided in Table 2.

Thus, HWG now covers the entire Marneuli district (22 sites), and all ambulatories in Gardabani (20 sites) and Bolnisi (10 sites) districts. The program has involved Rustavi Maternity Hospital as well. Unfortunately, conflict escalation in August hampered the full coverage of Kvemo Kartli region with FP trainings according to the action plan limiting the new FP sites to ten: 5 in Dmanisi and 5 in Tetrtskaro districts. Medical personnel from the remaining Tsalka and Tetrtskaro ambulatories will be trained in the next fiscal year.

Table 2. Family Planning Training in Kvemo Kartli. October 2007-June 2008.

Region	Number of trainings	Date	Training Participants: Doctors/Nurses	Pre-test results	Post-test results	
Marneuli	1	22.10-26.10.07	8 4	35%	96%	
	3	18.02 - 22.02	22	34%	72%	
		25.02 - 29.02	17	37%	75%	
		17.02 - 21.02	15	53%	84%	
	3	05.03 - 07.03	20	30 %	73%	
		10.03 - 12.03	23	43 %	80%	
		25.03 - 27.03	28	60 %	87%	
	Bolnisi	1	30.11 - 4.12.07	7 4	36%	92 %
		2	16.06-20.06	15	53%	94%
			23.06-27.06	14	56%	88%
2		16.06-18.06	12	40 %	87%	
		23.06-25.06	13	17%	70%	
Rustavi	1	08.02 - 12.03	13	54%	93%	
Gardabani	3	05.05--09.05	17	47%	88%	
		19.05 - 23.05	13	47%	78%	
		02.06 - 06.06	14	53%	88%	
	3	14.05 - 16.05	17	23 %	73%	
		28.05 - 30.05	18	37 %	70%	
		11.06 - 13.06	15	33%	73%	
		23.06-25.06	13	17%	70%	
	Dmanisi	1	07.07-11.07	9	47%	88%
1		07.07 - 09.07	11	40 %	73%	
Tetrtskaro	1	22.09-26.09	17	44%	84%	
Total	21		181 165			

5.3.3 Cooperation with private insurance companies

Family Planning training courses had been conducted for the medical personnel of Aldagi-BCI “My Family Clinic” Batumi branch and Batumi maternity hospital: one training course for 18 doctors and one for 20 nurses. Both medical facilities are participants of the pilot program in Supportive Supervision. Involvement of “My Family Clinic” Batumi branch into training courses is particularly important as providers from this medical facility expressed their willingness to include counseling on up-to-date methods of FP into the service package and establish internal supportive supervision to ensure continuous quality improvement.

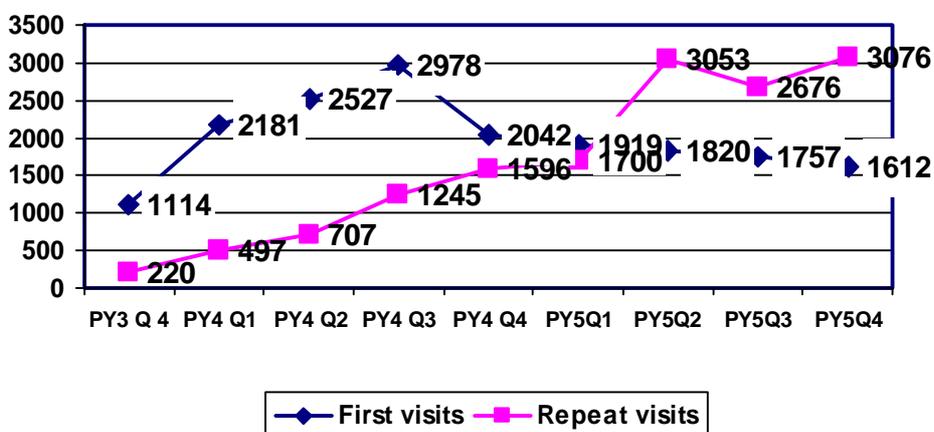
5.4 Supportive Supervision (SS)

Healthy Women in Georgia Program has developed the Family Planning Compliance (FPC) monitoring tool for the purpose of identification of violations in meeting of USAID requirements at all sites where HWG program implements family planning activities. Alongside with evaluation of providers’ knowledge and skills through a special checklist, the monitoring of FPC has been regularly held during the supervisory meetings. All medical facilities, involved in project implementation, signed the Memorandum of Understanding on FPC requirements. The process of signing of MoU is going on in Kvemo Kartli. At the end of FP and logistics training sessions contraceptives are distributed and FPC requirements are introduced to participants.

On average, 34 supportive supervision (SS) visits were conducted monthly in Imereti, Ozurgeti, Gori and Zugdidi target facilities. Because of conflict situation, SS visits were suspended in the period from August 8 through September 15.

The quarterly dynamics of the first and repeat visits to Imereti sites is demonstrated in Figure 13. The data show remarkable increase in total number of repeat visitors in HWG FP sites in Imereti: 3,076 versus 2,676 in the previous quarter.

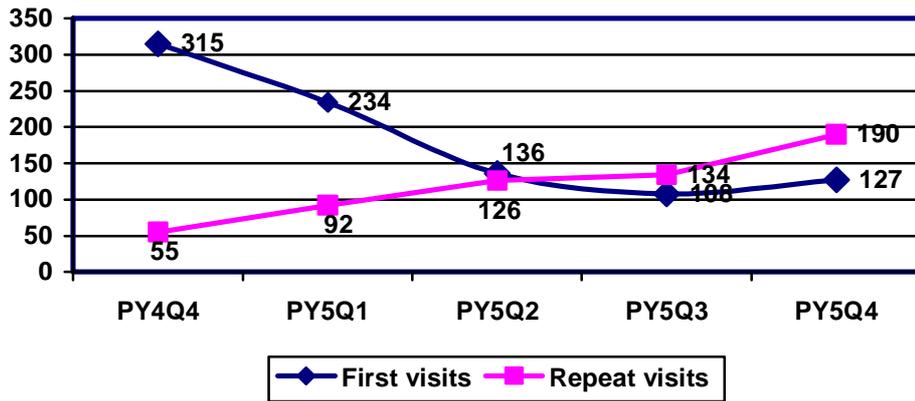
Figure 13: Quarterly Dynamics of the First and Repeat Visits in Imereti Region.



Of a total of 1,612 first visitors, registered during the last quarter, 419 women (26%) chose COC, 339 clients (21%) chose POC, 241 clients (15%) chose condoms, IUD were inserted to 466 women (29%), and 147 women (9%) chose other methods of contraception (LAM, spermicides, traditional, surgical). Accordingly, we expect 62% of the first visitors to come on repeat visits to restore contraceptive inventories. Of 3,076 repeat visitors coming to restore their contraceptive inventory 51% continue using COC, 20% POC and 29% - condoms.

Data collected in Guria region also showed increase in number of the first and repeat visits for contraceptives during the last quarter (Figure 14).

Figure 14. Quarterly dynamics of the first and repeat visits in Guria.



Military activities in Gori and Zugdidi region in August seriously damaged the HWG target facilities in conflict zones. Figures 15 and 16 illustrate the impact of war on the clients' visits, both first and repeat, for contraceptives.

Figure 15. Quarterly dynamics of the first and repeat visits in Gori.

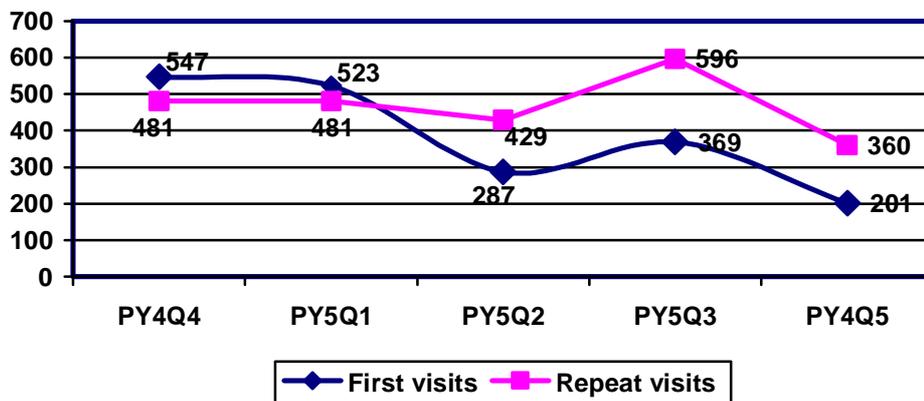


Figure 16. Quarterly dynamics of the first and repeat visits in Zugdidi.

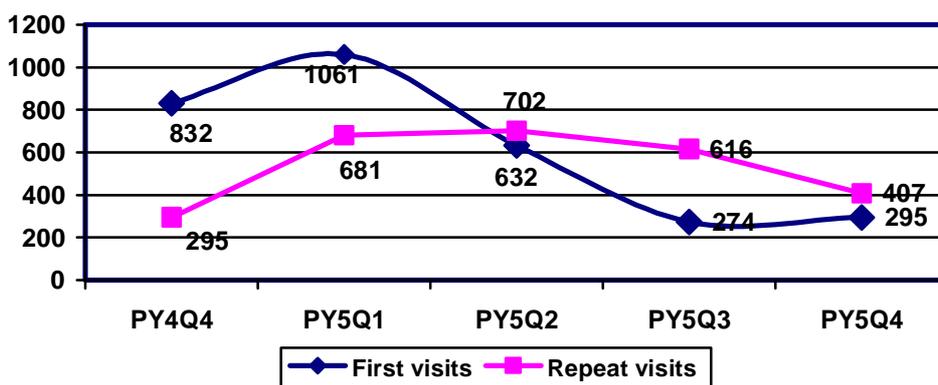


Figure 17 shows the positive dynamics of both first and repeat visits in Kvemo Kartli region that could be attributable to continuous opening of new FP sites in this region (currently 63 sites) and effectiveness of HWG trainings and supportive supervisory visits.

Figure 17. Quarterly dynamics of the first and repeat visits in Kvemo Kartli. January-September, 2008

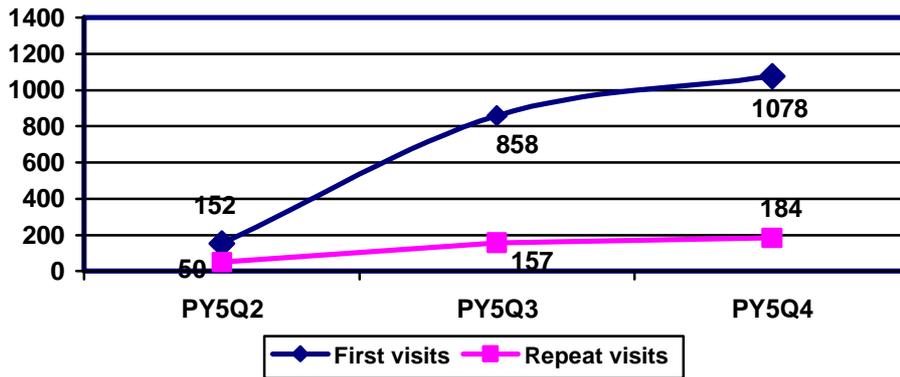


Figure 18 below provides quarterly comparison of CYP for condoms, pills and IUD for Kakheti region. As shown, significant increase in use of IUD was observed in the last quarter. Increasing demand for modern contraceptive methods among village population could be attributable to providers' competent services along with the community meetings routinely conducted by CIF.

Figure 18. CYP by Type of Contraceptives and by Quarter in Kakheti Region. January 2007- September 2008.

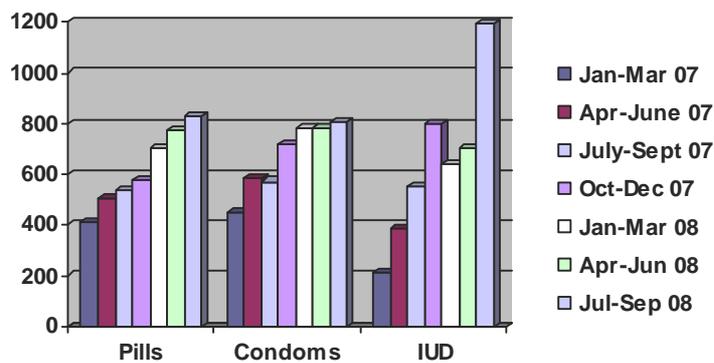


Figure 19. Number of First and Repeat Visits in Kakheti Region by Quarter. October 2007 –September 2008

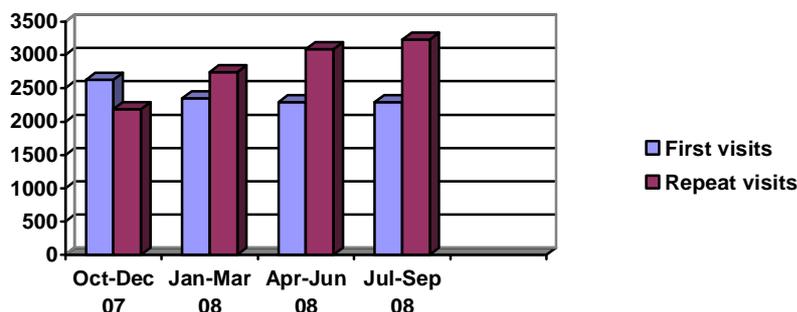
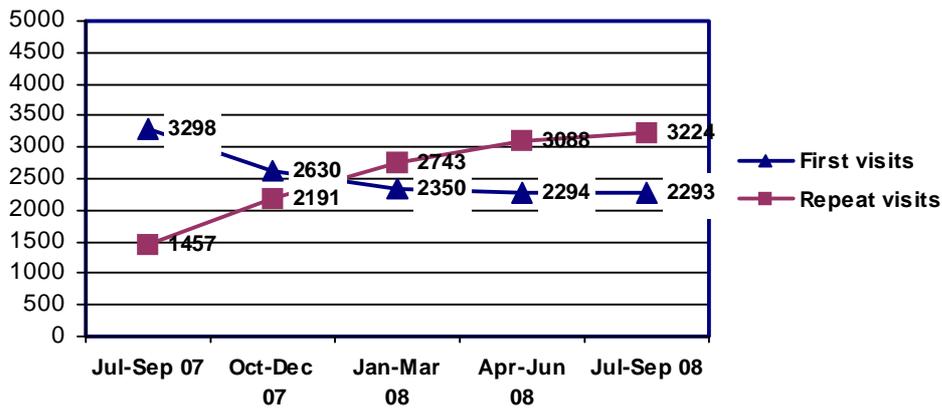


Figure 20. First and Repeat Client Visits in Kakheti Region by Quarter. July 2007 – September 2008.



The increasing numbers of continuous clients in Kakheti also points to the growing popularity of and trust in modern contraception methods among the population of this region (Figures 19, 20).

In October, "CLARITAS XXI" conducted a follow-up evaluation of the family planning services in seven children's outpatient clinics in Isani – Samgori Rayon. Overall, 1,784 women of reproductive age having children under three years of age were surveyed to assess their knowledge, attitudes and practice regarding RH/FP. Survey findings showed significant improvement in population awareness of FP/RH issues, as well as positive changes in their attitudes towards the modern methods of contraception as compared to outcomes of 2006 survey, conducted in the same Isani-Samgori Rayon. At the same time, the majority of women now acknowledge pediatricians' role in provision of FP/RH counseling and services.

5.5 Postabortion Care (PAC)

The USAID approved HWG proposal regarding additional funding for Post-abortion Care (PAC). This component aims to reduce maternal morbidity and mortality related to post-abortion complications.

HWG has already initiated intensive preparatory works so that PAC activities will be rolled out at the outset of new project year. The original version of PAC training curriculum was translated, adapted and will be finalized in October. Separate PAC curricula will be developed for OB/GYNs and PHC providers, although with importance of postabortion counseling will be particularly emphasized in both versions.

The TOT in PAC has been scheduled for November 2008. Overall, 40 training sessions in PAC will be provided upon completion of TOT that will cover Samegrelo, Kvemo Kartli, Kakheti and Tbilisi. A joint PAC and FP trainings are envisaged in Samegrelo region. In total, 600 clinicians (OB/GYNs, midwives, PHC providers) and pharmacists will be involved in training sessions.

A local NGO, Georgian Medical Group has been selected to conduct two-day trainings for pharmacists on modern contraception methods. This training covers basic FP issues, "two minute" counseling, emergency contraception, as well as danger signs of pregnancy.

JSI consultant in PAC, Kumkum Amin, provided guidance for preparatory research and research instruments for focus group discussions with pharmacists and clients planned for November 2008. A questionnaire of service providers' KAP survey regarding prevention of post-abortion infections has been designed as well.

6. HEAL

The Women's Health and Healing in Abkhazia and South Ossetia, or HEAL was a separate component within HWG Project designed to improve the health care providers' capacity in providing maternal and reproductive health services targeting the two conflict zones and internally displaced persons (IDPs) and fostering reconciliation among the different communities. Following the completion of this component in the end of the first quarter, activities related to IDPs and breakaway regions had been incorporated into the HWG general reporting.

6.1 Joint Family Planning Training in Ukraine

One of the key activities under HEAL was joint MCH and FP trainings with health care providers from the breakaway regions (Abkhazia and South Ossetia) and contiguous areas (Zugdidi and Gori) in third countries. HWG in partnership with JSI Ukraine's Together for Health Project and Gestalt Consulting Group organized the second joint-training in Kharkiv, Ukraine from October 29 to November 3, 2007. The five-day training in FP Counseling and Service Provision included 15 ob/gyns from Georgia (Samegrelo and Shida Kartli regions), Ukraine, and the breakaway regions of Abkhazia (Sukhumi) and South Ossetia (Tskhinvali). The training was conducted by two Ukrainian trainers using Ukrainian and Russian JSI project training materials and included one-day observation visit. It was one of the first times that the Georgian health care providers and their counterparts from both conflict zones jointly participated in reproductive health training since the civil wars in the early 1990s.

The training was successful in bringing together the different groups due to the HEAL components strong partnership with international organizations such as World Vision International in Abkhazia and OSCE and ADRA in South Ossetia.

6.2 EPC Reinforcement Training and Observation Visit

In follow-up to the EPC training, conducted under HEAL in Zhytomyr, Ukraine in April 2007, HWG invited the Ukrainian team of three trainers (OB/GYN, midwife and neonatologist) to conduct follow-up training and observation visits to EPC Zhytomir trained sites (Zugdidi, Gori, Tbilisi Maternity #2, Sagardejo) as well as mature sites in Imereti and Tbilisi (Zestaponi, KOGH, Gudushauri). The EPC follow-up envisaged on-site EPC reinforcement training at Tskhinvali Maternity Hospital as well. However, due to the de-facto authorities' refusal in permission, the training team conducted three-day intensive follow-up training at Gori Maternity Hospital.

6.3 IDP Activities

HWG and Save the Children partnered with local NGO, Charity Humanitarian Center "Abkhazeti" (CHCA) to promote healthy lifestyles (HLS) among IDP youth. HWG's partner organization, Save the Children, conducted five-day HLS training for trainers for CHCA youth club leaders and program staff from Kutaisi, Poti, Zugdidi, Tbilisi, Gori, and Gali (12 participants total). The training aimed at preparing healthy lifestyle trainers for IDP children's informal education weekend school activities. During the first four days qualified trainers discussed the topics on smoking, alcohol, drugs, STI, HIV/AIDS, early marriage, puberty. On the last day of the training, participants had an opportunity to make presentations demonstrating gained knowledge and skills.

7. CREATING AN INFORMED HEALTH CONSUMER

The overall goal of this component is to create educated and informed health consumers who make positive lifestyle and health seeking choices and contribute to their own health and the health of communities by collaborating with health professionals. Under this component, HWG undertakes a broad range of activities which address the demand side of health education, while directly enhancing and supporting clinical and systems components (the supply side). Taken together, these two sides form a holistic approach to improving women's health.

HWG believes that creating a solid base of informed health consumers is one of the most important aspects of health reform in Georgia. Prevention has been proven to be far less costly for the health system than curative programs, and informed consumers comply with treatment, seek treatment rationally, and reduce costs to themselves, insurance carriers and the government.

The main activities under this component are described below.

7.1 Healthy Lifestyles and Youth Reproductive Health Activities

HWG program is continuing to lead in innovative youth health promotional activities in Georgia. In recognition of these efforts Regional Government of Imereti awarded JSI HWG program and its partner, Save the Children as the most innovative organizations of the year 2007 working in the field of adolescent reproductive health and healthy lifestyles.

In the beginning of this year HWG IEC team organized two trainings on HIV/AIDS for 9 Medical University students and 10 peer educators in Kutaisi.

This year the HWG Program expanded its healthy lifestyle activities in Kvemo Kartli Region. The program interventions were preceded by the meeting with directors of all seven Educational Resource Center (ERC) in Kvemo Kartli. They emphasized the importance of youth education in practicing healthy behavior through the trained teachers. The Civil Development Agency and the Georgian Association of Educational Initiatives, having the broad experience in implementation of various youth programs, were considered as relevant partners in program implementation.

The most significant event of the year was the acceptance of Teacher Training Curriculum on Adolescent Reproductive Health and Healthy Lifestyles by the National Curriculum & Assessment Center of Georgia. The Ministry of Education and Science of Georgia (MESG) considers HWG youth-orient RH/HLS training materials to be important and culturally appropriate for Georgian youth. As a result of Georgia-Russia conflict, presentation of Teachers Training Curriculum, scheduled in the end of this year, had been postponed until November, 2008.

In collaboration with Regional Educational Resource Centers teachers training were conducted in Imereti and Kvemo Kartli Regions. Upon request of IDP society, additional trainings were conducted for Kutaisi Subtropical State University students and for NGO "Mega" representatives from Samegrelo. To summarize this year's training results, the total number of trained teachers/doctors/students in Imereti and Kvemo Kartli is 247 and number of newly involved HLS schools is 39. Details of the trainings are described in Table 3.

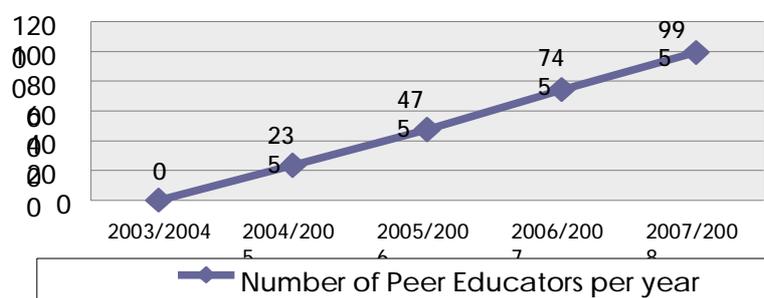
Teachers' trainings were followed by peer education training for 250 successful Healthy Lifestyle Course participants from Imereti. Professional trainers worked with peer leaders using modern techniques and new approaches in peer education, preparing them to act as role models. This year peer leaders have been selected and trained on Healthy Lifestyle issues by the trained teachers of their own schools as they received a four day TOT on Youth Reproductive Health and Healthy Lifestyle. Peer educators "armed" with Peer Educator Guidelines, certificates, and IEC materials were eager to get back to their communities and share the newly gained knowledge, skills and experience with their peers. Peer education training for Kvemo Kartli youth will be conducted in October 2008.

Table 3. Trainings for Teachers, School Nurses and Students in Imereti and Kvemo Kartli Regions. PY5

Region	Districts	Number of Schools	Date	Trained Teachers/School Nurses/Students
Imereti	Kutaisi	Schools # 32, #17, #19, #1, #9	February 22-25	18
			February 26-29	16
		Schools #31, #23, #5, #35, #13	March 1-4	22
			March 6-9	18
		Schools #14, #2, #26, #18, #10	March 10-13	18
			March 14-17	18
		Georgian Subtropical State University	May 16-27	60
	Zestaponi	Schools #7, #2, #3, #4	March 20-23	9
	Tskaltubo	Schools #2, #3, #4	March 24-27	15
	Bagdati	Schools #1, #2, Persati School	March 28-31	6
Sachkhere	6	April 20-24	11	
Chiatura	Youth Center "Jejili"	April 20-24	2	
Kvemo Kartli	Rustavi	5	May 1-5	5
	Gardabani	5	May 1-5	5
	Bolnisi	5	May 8 -12	5
	Dmanisi	5	May 8-12	5
	Marneuli	5	May 8-12	5
	Poti	NGO "Mega"	April 14-15	9
	Total	59 schools		247

As the result of four-year efforts, the total number of peer educators is 995 in Imereti. Figure 20 shows distribution of trained peer leaders by year.

Figure 20. Number of Peer Educators per year.



Since 2004, HLC has been completed in 104 schools in all districts of Imereti and KK regions. The total number of HLC participants is 4,160.

Figures 21 and 22 below illustrate the dynamics of schools providing HLS courses and youth coverage by year.

Figure 21. Number of schools providing Healthy Lifestyle courses by year.

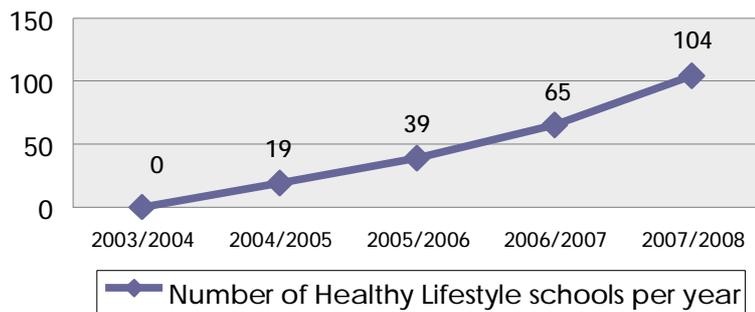


Figure 22. Number of Healthy Lifestyle Course participants by year.



The last quarter of this year was mainly dedicated to the assessment of Samegrelo Education System in order to prepare solid ground for further expansion of youth reproductive health/healthy lifestyle interventions in this region. The collected data is presented in Table 4 below:

Table 4. Assessment of Education system in Samegrelo Region. July-September, 2008

Samegrelo -Svaneti			
Resource Centers	Schools	Students	Teachers
1. Poti	12	6682	562
2. Abasha	24	3665	499
3. Zugdidi	60	16796	2111
4. Martvili	41	5575	929
5. Mestia	24	2088	481
6. Senaki	28	6312	807
7. Chxorotsku	22	3401	663
8. Tsalenjixa	37	4706	857
9. Khobi	28	4691	722
Total	276	53916	7631

Similar to other regions, qualitative research revealed youth HL/RH unmet needs, such as lack of HL/RH information and unavailability of youth friendly services. Parents and teachers emphasized the importance and at the same time sensitiveness of introducing RH issues at schools.

Program presentation and meeting with Directors of Samegrelo Educational Resource Centers will be organized in October. Overall, 50 target schools in Samegrelo will be involved in HWG youth health education component in 2009.

According to the data provided by MOE, there are a total of 2,443 schools in Georgia. So far the program has covered 4,2 % of schools in the country and by the end of 2009 the coverage will increase up to 6,3%. Figures

23 and 24 below describe percentage of schools covered in Imereti and Kvemo Kartli by HWG program. Figure 25 presents the planned coverage in Samegrelo region for 2009.

Figure 23. Coverage of Schools in Imereti by September, 2008

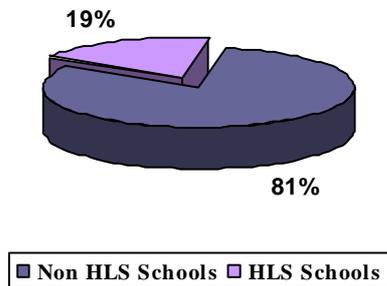


Figure 24. Coverage of Schools in Kvemo Kartli by September, 2008

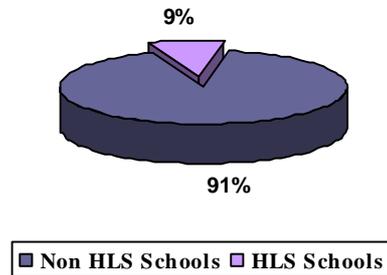
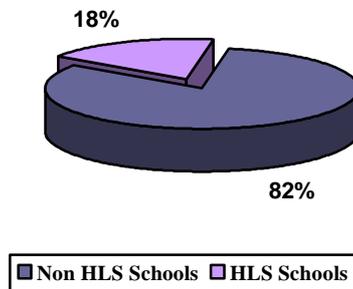


Figure 25. Coverage of Schools in Samegrelo by September, 2009



Distribution of sports inventory was completed in 35 schools in Kvemo Kartli Region. Target schools were supplied with football, basketball and volleyball balls, basketball and volleyball nets, skipping ropes and hula hoops as part of the HLS program.

Youth Friendly Pharmacy Training in Rustavi. Similar to Kutaisi, HWG program initiated the “youth-friendly” pharmacy program in Rustavi. Overall 20 pharmacists from the Rustavi pilot pharmacies attended two-day YFP training. The training aimed at: a) Improving effective communication skills; b) increasing awareness of dual protection; c) increasing knowledge of physical and emotional changes during adolescence; d) Identifying pharmacists’ feelings and values about adolescent RH and assessing their impact on the counseling process; e) Identifying the importance of STI risk assessment and referral/treatment. Pre- and post- tests were conducted to evaluate an impact of YFP training on pharmacists’ knowledge of STI management, HIV/AIDS, emergency contraception and adolescent reproductive health issues. The post-test results (89% vs 42% of pre-test) proved effectiveness of the training.

International Day of Disabled People. On December 10, HWG IEC team participated in the event dedicated to International Day of Disabled People. “*Nothing about Us without Us*” was the motto of this year. Proclaimed by the General Assembly in October 1992, the day aimed at raising awareness on disabled people’s rights through presenting art work performed by disabled children. The Day was celebrated by the Kutaisi private school “Goni” and Rehabilitation Center for the Disabled Children “Tonus”. HWG program with World Vision and the local Government took an active part in organizing the event. About 100 people attended the event. The audience was welcomed by Mayor of Kutaisi and representatives of Public Health. The students of the school Goni with participation of disabled children performed a concert. At the end of the concert Tamara Sirbiladze, CTO/USAID Caucasus, presented a DVD player and personal gifts to “Goni”.



World AIDS Day Events in Kutaisi and Marneuli. The HWG Program has established a tradition of

celebrating World AIDS Day in Kutaisi, together with World Vision, NGO Tanadgoma, Regional Public Health Department and HIV/AIDS Infected Assistance Fund representatives. This year, the event was organized in the Cinema “Suliko” and included an art exhibition of drawings and photos on HIV/AIDS, movie presentation on HIV/AIDS and drug abuse, young artists’ theatrical show dramatizing AIDS-related family problems and issues, as well as a health quiz competition on HIV/AIDS among university students’ and peer educator teams from World Vision, HERA XXI and the HWG, who won the competition. The Event was widely covered by the local print media and TV in Kutaisi.

In addition, HWG IEC team in collaboration with World Vision Marneuli field office organized the joint event to raise awareness on HIV/AIDS in Kvemo Kartli. More than 100 youth, equipped with IEC materials and red ribbons, participated in the walk disseminating information on HIV/AIDS transmission, and ways of prevention.

Calendar Competition. For the last three years, at the beginning of each school year, HWG conducts an annual poster competition in Imereti Region to select the 13 best adolescent drawings. This year competition was extended to students from Kvemo Kartli Region. On February 12, HWG hosted 13 winners of calendar competition together with their school directors, teachers, parents and friends. The ceremony was also attended by the representatives of Educational Resource Center and Youth Departments. The certificates were provided by Tamara Sirbiladze, CTO, USAID/Caucasus, Nancy Harris, HWG COP, Tom Vincent, SC Georgia Country Office Director and Kartlos Kankadze, Deputy COP, HWG. Each winner also received a 300 GEL bonus.

Overall, 1500 copies of the popular 2008 calendar were produced with the selected drawings focusing on 13 key health messages on puberty, STIs, HIV/AIDS, smoking, alcohol, drugs, peer education, youth-friendly pharmacies and reproductive health, developed by peer educators. The calendars were distributed among all target schools and health care facilities, as well as to the ministries of health and education, public health departments, international organizations and many local NGOs.

New Year Charitable Event in Samtredia Special Boarding School. On January 15, HWG organized a charitable event in Samtredia Boarding School and donated a DVD player was donated to youth group. The representatives of Regional Youth Department, the students’ organizations and the Public Defender’s Department participated in the event. A New Years Day concert was performed by school children and students.

AIDS Candlelight Memorial Day. On May 18, an event dedicated to International AIDS Candlelight Memorial Day was traditionally held in Kutaisi central park. Almost all international organizations, local NGOs and the local government of Kutaisi joined to commemorate victims of AIDS and to recognize that Georgia is not exception in terms of HIV/AIDS threat.

Various youth activities such as tree planting, a community quilt, and a small stage performance were organized by HWG peer educators. Young karate masters promoted healthy lifestyle by performing karate tricks. A lot of IEC materials on HIV/AIDS prevention were distributed. The event was closed by a candle-lighting ceremony.

Celebrating International Anti-Drug Day. On June 26, in Kutaisi, HWG along with representatives of Local Government, international organizations, NGOs and a large number of students and passer-bys joined the global community to celebrate International Day Against Drug Abuse and Illicit Trafficking. This was the first attempt to celebrate the International Anti-Drug Day in Imereti Region. Event organizers agreed to maintain this tradition in the future.

Summer Camp Activity. Three different groups of peer educators participated in the summer camp activities this year in Kobuleti. 70 young leader girls from Imereti gathered to share peer education experience and challenges with each other. A special summer camp program for youth consisted of both educational and recreational activities. The education sessions on healthy lifestyle and reproductive health issues were held by peer leaders using modern interactive methodology and were accompanied by different kinds of sport, art

and intellectual competitions.

Unlike the previous summer camps, this year camp hosted IDP youths from Kodori and Tskinali. New topics such as conflict resolution and problem solving were added to the summer camp program.

Every year SC IEC team conducts HLS sessions in GLOW camps organized by Peace Corps. This summer visits were made to Telavi and Kobuleti. This is a great opportunity for SC to disseminate Healthy Lifestyle information among youths from different regions of Georgia.

Following the August tragic events, SC IEC team members, together with volunteer peer educators, packed and distributed 1600 food and hygiene parcels to new IDPs.

7.2 The Health HOTLINE

During the reporting period, the total number of incoming calls addressing the project topics was 12,157. Tables below show the age and gender distribution of respondents and a list of most frequently addressed topics. FP issues continue to lead this list with steadily increasing interest of mail population towards these issues.

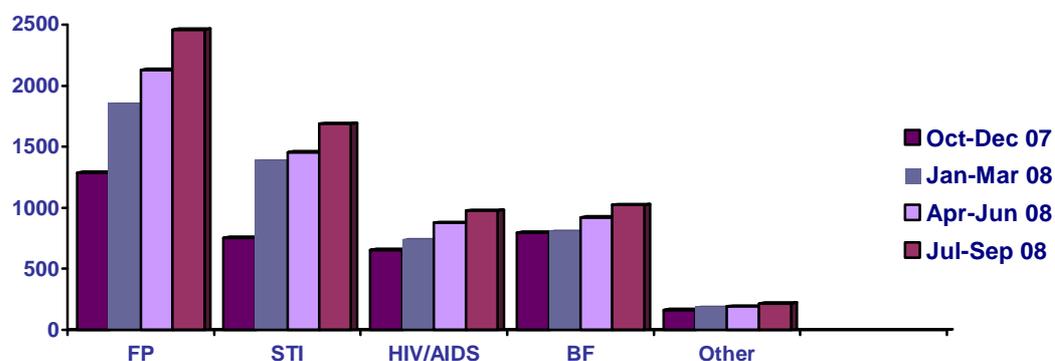
**Table 5: Hotline Calls by Gender and Age.
July-September, 2008**

	Male	Female
Age 1(15-17 years)	1634	2083
Age 2 (18- 49years)	1111	5067
Age 3 (49 –above)	585	1697
Total number	3310	8847

**Table 6: Most Frequently Addressed Topics
July-September, 2008**

Topic	# Of Times Mentioned
FP	7735
STI	5287
HIV/AIDS	3260
Breastfeeding	3556
Other	760

Figure 26. Counseling Topics by Quarter. October 2007-September, 2008



7.3 Breast Health Promotion and HERA's NGO Development Activities

In the beginning of this year (October 6), the third annual Breast Cancer Awareness Walk gathered over 1,000 people in Kutaisi, Imereti Region to increase public awareness of the importance of the breast cancer early detection methods. This event was organized by NGO HERA in collaboration with the JSI HWG, Save the Children and the Cancer Prevention Center, with co-sponsorship of Venus Insurance Company "IRAO". Incredible support was provided by the Peace Corps in organizing the event, as well as USAID and the US Embassy. For the second year, the First Lady of Georgia, Ms. Sandra Roelofs, the US Ambassador in Georgia, Mr. John Tefft and his wife, Ms. Mariella Tefft led the walk. The representatives of USAID, Georgian Parliament, the Susan G. Komen Breast Cancer Foundation, as well as the Deputy Mayor and Vice-governor of Kutaisi attended the event. The participants of the regional USAID health officers' meeting

also had an opportunity to join the BCW.

During the event various educational materials including those donated by Cancer Prevention Center, as well as T-shirts were distributed among participants; community nurse educators (CNEs) demonstrated the breast self-examination (BSE) technique using breast models.

The event had a big success arousing a huge interest of community, local government and mass-media. The event was aired by the different national and local TV channels and radio stations and highlighted in the newspapers articles.

This year HERA completed all planned trainings for PHC providers in Imereti Region. During the reporting period HERA provided 5 training courses for 109 PHC providers (family doctors, general practitioners, OB/GYNs and RH specialists) using the special breast health curricula, educational video materials, posters and special aids. Breast models with breast masses for teaching BSE and clinical breast examination (CBE) techniques were used in the practical part.

HERA continued to increase awareness of breast health and breast cancer early detection methods among the Imereti region population. A total of 158 women attended the five health fairs, organized by HERA in the following Imereti districts: Tskaltubo, Kharagauli, Khoni, Vani and Bagdadi. Reproductive health, breast health, promotion of breast cancer early detection methods were the major topics of mini-lectures provided by Community Nurse Educators. Video materials about the breast cancer early detection methods: BSE, CBE and mammography had been demonstrated as well.

During the follow-up visits to five districts of Imereti Region: Khoni, Bagdadi, Kharagauli, Vani and Tskhaltubo, HERA conducted a mini-survey among PHC providers regarding community's interest in breast health, BSE practice, CBE, breast mass detection, as well as referrals to Kutaisi Cancer Dispenser and Tbilisi National Cancer Center. During these visits more than 700 women were educated in breast health and in breast cancer early detection methods. About 165 women received CBE and 40 were referred to breast cancer specialists.

This year HERA expanded its geographic scope for action in Kvemo Kartli Region. Taking into account a multi-ethnic composition of Kvemo Kartli population, breast health curriculum, education materials, training questionnaires and other materials were translated into Russian. HERA developed and printed color posters for PHC centers as well.

Breast health promotion activities were conducted in Marneuli, Bolnisi, Gardabani, Tetrtskaro districts and Rustavi. A total of 110 doctors of different specialties (OB/GYN's, surgeons, general practitioners, family physicians and RH specialists) attended five breast health clinical trainings, held in Georgian and Russian languages. In the end of each training educational materials in both languages were distributed among the participants.

HERA facilitated various "Community Health Awareness" activities in secondary schools of the same districts in Kvemo Kartli region. Overall, 264 teachers attended the five health fairs, demonstrating a keen interest towards the topic. All health fair participants received breast health IEC materials.

Since April, HERA had been active in planning stages for the popular Breast Health Awareness Walk, which was planned to be held in Tbilisi on October 12, 2008. Event partners created a Breast Health Awareness Walk Planning Committee publishing a monthly newsletter. Fundraising had been a top priority in planning the event. To date the event sponsors include the International Women's Association, British Petroleum, HSBC Bank, Eurasia Fund, Insurance company "IRAO", and the American Jewish Joint Distribution Committee.

Due to the Russia-Georgia conflict, Race for the Cure had been postponed until May 10, 2009. The date of the event was agreed with all Race partners: Komen Foundation, JSI, National Cancer Screening Center, Reproductive Health Council, "Borjomi", JDC, Save the Children, and others. Race preparatory activities

will be resumed next year.

7.4 Social Marketing of Family Planning

This year McCann-Erickson Georgia, a local advertising and public relations firm, offered a New Communication Campaign with the overall goal to **maintain the contraception awareness and increase contraception consumption** with more aggressive approach - *Try the product!* (whereas the previous campaign was image and educational):

§ Concept - *New contraceptive methods - Selling Freedom to Women*

§ Basic slogan – *Contraception – the Modern Choice*

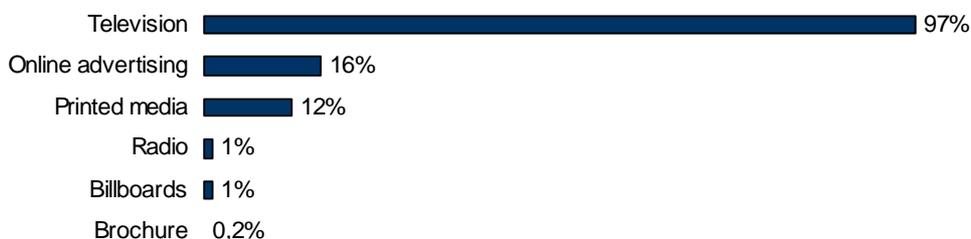
The concept of the new communication campaign, scenarios for two television spots, and designs for an education brochure were discussed and approved by Technical Advisory committee composed of the representatives of USAID, MOLHSA, HWG partners, relevant NGOs and two major contraceptive distributors in Georgia from the private sector. Advertising booklets were prepared in Georgian, Russian and Azerbaijani. Much appreciated assistance in preparation of the Azerbaijani version was provided by the USAID-funded ACQUIRE Project in Azerbaijan.

The second communication campaign was implemented during the period of November 2007- June 2008 and covered Tbilisi, Kakheti, Imereti and a new region - Kvemo Kartli. The following messages were delivered to the target audience - married women of reproductive age having at least one child: a) Young women desire happiness; b) Choose contraceptives correctly; c) Use contraception and be more peaceful; d) More information more protect; d) Use contraception; it isn't dangerous; e) Here are your benefits, try contraception; f) Release! Use contraception.

In February the second TV advertising campaign started on two TV channels – “Mze” and “Rustavi2”. Online advertisements also were incorporated into the six most popular websites. They appeared four million times! The HWG/JSI site is visited by about 0.13%-0.15% of all web visitors, which constitutes 6,000 people on average. Advertising in press also started in March in several periodic magazines. This included publishing an interview with the First Lady of Georgia about the family planning. The interview was recorded under the aegis of JSI. Advertising booklets were printed and distributed in all target regions.

The marketing and consulting company “ACT” conducted research in Kutaisi in July-September to assess the efficiency of contraceptives advertising campaign implemented by McCann Erickson Georgia.

According to the research results, more than two thirds of Kutaisi young population aged 18-25 had seen, read or heard the advertisement introducing modern contraceptive method at least once over the last six months. The overwhelming majority of population (97%) had seen the TV advertisement on contraception.



Despite the low proportion of people who had read the modern contraceptives' advertisements in printed media or seen them online, the highest satisfaction was reported for these information sources.

The reference-book “Clinical guide for modern contraceptives” was published and distributed along with the second round information material to the health care providers of target PHC facilities, women consultation

centers and maternity hospitals through logistics services.

This year JSI HWG signed a Memorandum of Understanding (MoU) with two private pharmaceutical companies -“Bayer Schering Pharma” representation in Georgia and “PSP-Richter” LTD. The signed documents reflect the parties’ readiness to cooperate with the MOLHSA in a mutual effort to support the Family Planning program in Georgia.

Within the frame of the MoU concluded with the ”Bayer Schering Pharma”, the number of visits were conducted to private medical facilities in Kakheti region (Telavi, Gurjaani) to discuss the ways of future collaboration.

7.5 JSI.ge Web Site and Web Site Promotion

The JSI.ge web site continues to be a popular source of information for both private individuals and health professionals. This year website underwent major interface redesign and new materials were prepared for publishing. Demand for health related information has grown rapidly especially among young internet enabled population.

The JSI HWG intern, Richard Wang had been assigned the responsibility to redesign and update the www.jsi.ge website with relevant content. In order to design an appropriate framework, the www.jsi.ge had to incorporate the end users’ needs and preferences while maintaining the mission of www.jsi.ge

To achieve all of the defined targets, past reports produced by HWG were reviewed. Current web structures and design employed by other companies in our industry were examined as well. The intern visited Kutaisi on two different occasions, gathering data and doing in-person interviews.

The new website, with updated content and a modified layout is already in beta-testing and currently live. With content up on all of the primary pages aside from Effective Perinatal Care, www.jsi.ge is 80% complete.

Future updates will include a separate page for the Breast Health Walk and a revamped team biography page.

7.6 Community Education and Client Advocacy in Mature Regions

HWG conducted a training session on “Contraception – the Modern Choice” for 50 internally displaced women of reproductive age at the Hotel “Abkhazia” in Tskaltubo. Over 50 women attended the training. Information booklets were distributed among participants. Following the session, 25 women were provided with free FP counseling and received contraceptives.

CIF continued to carry out informal meetings with reproductive age woman in Kakheti Region discussing various RH/FP issues. A new booklet provided by JSI HWG was presented during the community meetings in Kakheti villages.

CIF invited Azerbaijani speaking OB/GYN from Kvemo Kartli Region to conduct community meetings with women of Azerbaijanian ethnicity in Iormughanlo, Kabali and Karadjala. As a result of these meetings, there was 260% increase in condoms use and 340% increase in oral pills use in these three villages as compared to the previous quarter. This is a powerful testimonial to the benefits of face-to-face promotion in individuals’ native language and in a culturally sensitive way.

8. HEALTH REFORM

HWG believes that virtually all its activities contribute to Georgia's ambitious health reform agenda by providing models of well functioning health field programs, introducing innovative ideas, engaging the public and private sectors and by introducing evidence-based health care in a practical and usable way. Moreover, its health education efforts are an essential part of health reform that is not (yet) fully taken up by the Government or the private sector. This section describes specific activities that are more directly related to the ongoing health reform in the country.

HWG contributes in a low-key and quiet manner in seven areas of health reform: health financing (private insurance, government allocations, etc.); hospital reform (maternity center design); primary health care reform ("family practice"; programs for the poor); evidence-based medical practice (including pre-service education, quality of care, licensing and continuing education); public-private partnerships; and consumer education.

8.1 Collaboration with Government and Stakeholders on Supportive Supervision

Based on the thorough review of policy environment in the region the Europe and Eurasia Regional Family Planning Activity (EERFPA) program elaborated several recommendations for improving family planning policy environment and supportive supervision (SS) system on the primary health care level in Georgia. This system must ensure quality FP service provision, patient safety and confidentiality, good quality counseling, good logistics of supplies, effective management and professional development of service providers. Within the frame of ongoing health reforms, the supportive supervision initiative will target priority regions as well as collaborate with the senior staff at the MoLHSA and other major donor's (EU, GAVI/UNICEF, DFID) sponsored projects to lead into an evolving national supportive supervision system for primary health care program.

Senior family medicine and OB/GYN trainers and regional and national managers from the MOHLSA and health insurance programs (19 representatives in total) participated in four-day workshop to plan a supportive supervision system to be piloted in the national FP/RH program. Supported by two USAID programs—the HWG Project and EERFPA—the workshop took place in Batumi in February 11-14, 2008. Georgia is the first country implementing this regional effort. The lessons learned will contribute to national efforts as well as those of other countries.

The EERFPA provides TA and support to HWG in all steps of development, implementation, monitoring and fine-tuning of the SS system in Georgia. The workshop was a result of the collaborative efforts of multiple partners that contributed to refinement and finalization of Supportive Supervision (SS) Training package.

External supervisors, trained within the program, conducted the first training-workshop for internal Supportive Supervision/Continuous Quality Improvement (SS/CQI) teams on June 16 through 18, 2008. The training was held in Batumi for senior managers and clinical staff of Adjara and Imereti Regional Family Medicine Training Centers.

The first pilot external supportive supervision visits were conducted in Kutaisi and Batumi Family Medicine Training Centers, followed by internal SS/CQI team meetings in these facilities.

"We are lucky for being involved in this pilot project. Quality assurance, performance improvement and the public opinion always were our continuous concerns and this is definitely the best approach. The project connects us with our peer Family Medicine training Center. We have already implemented a few changes and it seems that it works; according to our client exit interviews patient satisfaction has been increased" - said Merab Kvitsaridze, the head-doctor of Kutaisi Family Medicine Regional Training Center.

The private health care organizations and insurance companies show the growing interest towards the supportive supervision tools. JSI HWG signed a Memorandum of Understanding with the National Association of Family Doctors and with Aldagi-BCI – “My Family Clinic”. This clinic will pilot Supportive Supervision System in its Tbilisi and Batumi facilities. Negotiations with another leader insurance company “Peoples’ Insurance” are under way.

8.2 Collaboration with Government and Stakeholders on Healthy Lifestyle (HLS) Training Curriculum

Technical Assistance. JSI HWG invited a curriculum design specialist from JSI/Romania, Daniela Iancu, to provide technical assistance in revision of the Healthy Lifestyle (HLS) Training Curriculum developed by the SC staff in collaboration with the Ministries of Education and Health of Georgia. In order to have a better understanding of the program activities, the consultant visited one of the target schools and attended the health education session conducted by peer educators.

Recommendations regarding the necessary changes, elaborated by international consultant, were presented at the meeting with JSI Georgia Deputy COP and Curriculum Development Committee members, including MOE representative, and HWG staff. Most of the changes were accepted and incorporated into the HLS training curriculum.

A Long Way from Ten Pilot Schools of Imereti to the Ministry of Education and Science of Georgia. HWG collaborated with the Ministries of Health and Education to prepare a “teaching packet” comprised of HLC lesson plans and teaching materials. This curriculum was further developed by international and local consultants from the Ministry of Labor, Health and Social Affairs (MLHSA) and the Ministry of Education and Science (MES) of Georgia and later was submitted to National Curriculum and Assessment Center for final approval. After five years of hard work, the Teachers’ Training Curriculum on Adolescents Reproductive Health & Healthy Lifestyles curriculum was accepted by the MESG! HWG program made a huge contribution to institutionalizing healthy lifestyle curriculums in schools across Georgia.

8.3 Reform of Pre-Service Training

HWG Program, in collaboration with the MoLHSA of Georgia, UNICEF and Tbilisi State Medical University (TSMU), is scaling-up its perinatal health care activities through the technical assistance in developing pre-service curriculum in compliance with evidence based clinical excellence and WHO-recommended approaches.

HWG in collaboration with UNICEF created EPC pre-service curriculum development experts’ group composed of four professors from the TSMU Department of OB/GYN – Dr. Nikoloz Kintraia (Full Professor, Head of Department), Dr.Tamar Antelava, Dr. Nino Machavariani and Dr. Paata Machavariani. The experts’s group, under the USAID funding, was sent for observation/experience exchange visit to University of California, San Francisco (UCSF) from February 24 to March 7, 2008. During the study tour participants visited various hospitals, medical school and other relevant institutions.

Throughout this year the experts’ group worked with international consultant to finalize the training materials (presentations, handouts and trainers/facilitators notes). Up to now, the group prepared six EPC modules that are sent to the international expert for final revision. Ready to use package of training materials include PowerPoint Presentation, facilitators notes, handouts for students and references for each module. After completion and adoption - modules will be used for sixth year students and residency program. Modules are based on the latest evidence-based approaches and WHO recommendations.

A Memorandum of Understanding (MoU) was signed between JSI HWG Program and the TSMU. Under this MoU, parties agreed on collaboration in preparing standardized regional FP Curricula for medical and nursing school students and for residency programs in Obstetrics/Gynecology and Family medicine.

EE Regional conference. The group of national experts on Family Planning Pre-service curriculum

development has been preparing for the EE Regional conference - “Academic Consultation on Strengthening Pre-Service Family Planning Teaching”, scheduled for October 22-24 in Tbilisi. The conference will be organized by USAID’s Europe and Eurasia Regional Family Planning Activity (Regional Activity) Program. The purpose of this meeting is to review existing status of pre-service education in family planning and to identify the areas for further improvement. Country teams from Armenia, Azerbaijan, Georgia and Kyrgyzstan will participate in the Conference.

8.4 Presentation to the RH Council

On February 20, HWG made a presentation to the RH Council on the results of EPC implementation. This followed by RH Council and MOLHSA representatives’ visit to selected HWG sites. The First Lady, Sandra Roelofs, who heads the Council, expressed support for the USAID-UNICEF efforts in EPC and interest in seeing it taken to every maternity in the country. Subsequently, during a state visit to Washington DC by the President, the First Lady and her delegation visited USAID/Washington and the JSI/Washington office to advocate for continuing MCH/FP resources for Georgia. High level support is essential to long term institutionalization of the EPC and FP/PHC reforms being made with USAID/HWG assistance.

8.5 Institutionalization of Family Planning and Antenatal Care in PHC Training

HWG is increasingly working with the PHC Training centers to incorporate its training modules into their ongoing training of PHC doctors and nurses. These centers are funded by other donors, such as the World Bank and the European Union. Gradually, evidence-based family planning and improved counseling, using the HWG curricula, is being spread to all PHC training centers. HWG also included PHC trainers in the “Infection Free Babies” training. PHC trainers have proven to be excellent candidates for supportive supervision and many of the PHC trainers now work with HWG on routine SS visits. This not only increases the effectiveness of HWG’s FP program in the field, it facilitates follow up of PHC trainers in sites where they have trained family doctors. Thus it is a “win-win” collaboration. PHC trainers regularly use the JSI.ge web site to download up-to-date materials on evidence-based MCH/FP.

8.6 Contraceptive Security Activities

Coordination between the donors. An agreement was reached by the MOLHSA, UNFPA, USAID and HWG on a close collaboration to build a unified contraceptive logistics information system (LMIS). This long held objective, delayed due to the various external factors including political, is a pivotal step in eventually developing a national logistics and family planning program. As per agreement, UNFPA will be responsible for contraceptives distribution to rayon level women consultation centers and maternity hospitals, whereas primary health care facilities will be supplied by JSI HWG.

A working group, composed of UNFPA and JSI/HWG staff members was established to implement MoLHSA decisions. The group will be housed in MoLHSA.

Intensive collaborative work had been conducted together with UNFPA for further refinement of the Channel Software to improve quality and reliability of data on contraceptives movement and inventory management.

HWG logistics advisor had a meeting with the Minister of the Labor, Health and Social Affairs of Georgia, Alexandre Kvitashvili. It was decided to organize a donor organizations’ meeting with participation of MOLHSA representative to discuss the details of future cooperation.

The final draft of the Memorandum of Understanding (MOU) between MoLHSA and donor organizations regarding the cooperation in a mutual effort to support the RH/FP program in Georgia was submitted to the USAID office for approval. A number of amendments were made in the document in accordance with USAID regulations. The approved version was then transferred to MoLHSA and UNFPA for father proceedings.

9. MONITORING, EVALUATION, SPECIAL STUDIES, PRESENTATIONS AND VISITS

This section describes a variety of activities that are aimed at documenting results and outcomes as well as how we “tell the story” of HWG work and impact.

9.1 Strategic planning workshop

The three-day workshop on strategic planning was organized in Kutaisi around the four major cross-cutting themes such as: 1. Results! 2. Legacy; 3. Sustainability; 4. Health Reform. HWG/JSI staff and the representatives of partner organizations: SC, Orthos, HERA, “CLARITAS XXI” and CIF, attended the workshop.

The new quarterly report format was introduced by M&E advisor to the workshop participants. The basic aspects of evidence: definition, levels and evidence-based approach in health care research and practice, were discussed during the special sessions. The final day was devoted to actual work planning.

8.1 EPC Cost-Impact Study and Women Lead Conference

The main purpose of this study is to estimate the impact of practicing effective perinatal care (EPC) for at least a year after training on the average maternal and newborn drug, supply, and test costs, as well as the overall cost, per delivery. The study was conducted at two HWG EPC sites, Kutaisi and Zestaponi Maternity Hospitals. SAS GLM procedure was used to model effects of EPC, hospital, and delivery type (vaginal vs. c-section) on total costs of drugs, supplies, and tests per delivery.

The first stage of EPC CIS analysis, using SAS GLM procedure, showed that the average overall delivery cost after EPC (\$25.79) was 16.8% lower than before (\$31.01) ($p < 0.0001$) adjusting for effects of hospital, delivery type, training/hospital interaction, training/delivery type interaction, hospital/delivery type interaction, and training/hospital/delivery type interaction. This moderate cost savings was due to large reductions in maternal drug costs (60.2%) and supply costs (78.2%) that were offset by a 61.6% increase in maternal test costs for vaginal deliveries ($p < 0.0001$) that could be attributable to introduction of mandatory HIV tests in 2007. The next stage of study will include analysis of impact of EPC interventions on a) average delivery cost excluding HIV tests and b) average costs of only drugs and supplies without the tests.

An abstract: **“Cost impact of modernizing delivery care in the Republic of Georgia: Assessment of delivery costs at two hospitals in Imereti Region before (2004) and after (2007) training health care providers and implementing effective perinatal care practices”**, submitted to APHA by Mariella C. Tefft, R.N., M.S., JSI HWG consultant, was accepted for poster presentation.

“Women Deliver” conference, London. In October 2007, at the Women Deliver Conference, JSI organized a panel on EPC implementation in the European Region. The Deputy Minister of Health of Georgia presented the results of EPC implementation in Georgia, as well as data on cost-effectiveness of these interventions. The data from Ukraine and Russia were presented by the Ukrainian and Russian presenters. JSI’s Senior Advisor, Dr. Nino Berdzuli chaired this panel.

9.2 Reproductive-Age Mortality Study (RAMOS)

HWG is conducting a RAMOS study in collaboration with the US Centers for Disease Control (CDC) in Atlanta and the National Center for Disease Control (NCDC) of MoLHSA of Georgia. In addition to providing important data on death of reproductive age women, this study is providing insights into specific problems and needs in health information systems (HIS) and vital events registry in Georgia. The scope of the RAMOS study widened in May when it was agreed by the RAMOS committee to investigate all of the

deaths of women of reproductive age in 2006 at the urging of the Minister of Health. Currently, our eligible n is 1210. All Civil Registry Death Documents and Medical Death Certificates, if both present, were matched and assigned the same RAMOS ID Number.

Intense efforts were made to finalize the RAMOS instrument. The family interview (Verbal Autopsy Questionnaire) was structured to contain 3 modules including 10 forms. Discussion of questionnaire content and training of 13 interviewers was conducted from July 18 to July 24 in NCDC. A pre-test of the questionnaire was conducted on July 23, 2008. Additional one-day refresh training was conducted for field interviewers in September to discuss the final version of RAMOS questionnaire. Plans were made to start the 'real' interviews in the beginning of October. CSPro programming of the data entry will be completed at the CDC in Atlanta, Georgia.

9.3 RH/MCH Study and Focus Group Discussions in Kvemo Kartli

In order to assess the reproductive health/family planning and maternal and child health care needs among women of reproductive age (WRA) including their health seeking behavior, as well as measure the changes following the program interventions, HWG and Co-Reform, in collaboration with CIF and NCDC, carried out a rapid community based survey in Kvemo Kartli region. The study aimed to provide a snapshot of women's reproductive health status and utilization of services with a special focus on ethnic minorities. For the same purpose, HWG conducted six Focus Group Discussions (FGDs) among 17 health care providers and 31 reproductive age women of Armenian ethnicity in Bolnisi, Saumiani and Nardevani villages. It is expected that both quantitative and qualitative research findings will provide more in-depth insight into the RH domains addressed in the 2005 Georgia Reproductive Health Survey.

9.4 Field Visits to HWG Project Sites

Visit of Investing in People Workshop participants. On October 5, 2007 HWG had an honor to receive Investing in People Workshop participants. The guests visited HWG one of the most successful EPC sites, Kutaisi Obstetric/Gynecological Hospital and Vartsikhe state ambulatory, HWG FP site, and attended youth theater performance in Kutaisi target school #32. The guests were impressed with enthusiasm and high performance level at all HWG sites.

Field Visit of Tamara Sirbiladze, CTO/ USAID Caucasus. In December, Tamar Sirbiladze, CTO/ USAID Caucasus, visited HWG Kutaisi office. She also visited new sites in Western Georgia: Sajavakho ambulatory and Parents' School at Kutaisi IDP Polyclinic in Imereti, Ureki ambulatory in Guria, and Maternal and Child Health Care Center and Family Medicine Regional Training Center in Batumi.

Visit of the Senior Advisor for HWG, JSI/Washington. Debra Kreutzer, the Senior Advisor for HWG, JSI/Washington visited HWG Program during March 30- April 11 period to carry out the annual client satisfaction assessment and assist with transition planning to a new COP (Kartlos Kankadze).

USAID MCH/FP Sector Assessment Team Meets With HWG. In April, a two-member external team conducted a sector assessment for USAID/Georgia. The experts, together with program CTO Tamara Sirbiladze visited JSI FP and EPC sites in Imereti, Ajara and Kakheti Regions, as well as Kutaisi secondary school #17. HWG's work received high praise.

9.5 Presentations and International Trainings

135th APHA Annual Meeting in Washington, DC. In November 2007, Nana Kvirtia, HWG/IEC officer, participated in the 135th Annual Meeting of the American Public Health Association in Washington, DC. She made oral presentation: "Reaching Youth via Reproductive Health Courses and Youth-Friendly Pharmacy Services" at the session "Adolescent Reproductive Health and Safer Sex".

136th APHA annual meeting & Exposition in San Diego. Nana Kvirtia, HWG/IEC officer, submitted another abstract "Reaching Youth via Reproductive Health Course in the Schools" to 136th APHA annual meeting & Exposition, scheduled for October 25-29, 2008 in San Diego. The abstract was accepted for oral presentation at the session "Curricular Trends in Reproductive Health Education for Youth".

Annual Training in “Adolescence and Adolescent’s Reproductive Health”. On November 5 through 16, Ketj Kajaia, HWG FP program coordinator, attended the 7th annual “Adolescence and Adolescent’s Reproductive Health” training, organized and funded by the International Children’s Center (ICC) in Ankara, Turkey. She made presentation on adolescents’ reproductive health and family planning in Georgia. The training was an excellent opportunity for participants to network and share the best practices with health professionals from different countries working on adolescents’ RH issues.

10th Congress of the European Society of Contraception. Ketj Kajaia also attended the 10th Congress of the European Society of Contraception in Prague, Czech Republic, held from April 30 through May 3, 2008. She made presentation: “Hormonal Contraception – Modern Choice of Community in Georgia.”

Visit to ACQUIRE Project Sites in Baku, Azerbaijan. On December 5 through 9, 2007, the HWG team including two health care providers from Gardabani and Marneuli, Kvemo Kartli Region: visited ACQUIRE project in Baku, Azerbaijan. The ACQUIRE Azerbaijan project is managed by EngenderHealth in partnership with ADRA, InteraHealth and Meridian Group International Inc. The HWG team visited the program sites and attended health education/community outreach activities (peer educators refresh/problem solving training and community education sessions). The ACQUIRE project team kindly provided their printing materials and job aids in Azerbaijani language to be used for community education activities in Kvemo Kartli and Kakheti regions.

SC IEC presentation for Peace Corps volunteers and their counterparts. On February 27, 2008 Ekaterine Kikatunidze was invited as a guest speaker at the one-day Life Skills /HIV/AIDS Education TOT for Peace Corps volunteers and their counterparts. SC’s poster and the Healthy Lifestyle brochure were acknowledged as the best IEC materials addressing youth problems. Peace Corps members decided to reproduce these materials for further distribution among their target communities.

CLARITAS XXI Policy Forum. On February 27, “CLARITAS XXI” organized a Policy Forum. Health care providers from Gldani-Nadzaladevi, Isani-Samgori and Vake-Saburtalo PHC centers, as well as representatives of JSI HWG Project and the pharmaceutical companies “Bayer Schering Pharma” and “Gedeon Richter” participated in the event. “CLARITAS XXI” shared with the audience the results of follow-up evaluation of FP trainings in Isani-Samgori district PHC centers, as well as the major outcomes of hotline services.

HERA at the US Embassy and USAID, Tbilisi, Georgia. HERA made a technical presentation on breast and cervical cancer for the local staff of the US Embassy and USAID in Tbilisi, Georgia. In addition, HERA facilitated a practical session on the breast self exam using the model breasts to demonstrate the method.

International Training Program: Reproductive and Sexual Health and Rights. Sweden. Malmo. Three medical representatives from Georgia: Dr. Irina Nikabadze, Clinical Trainings Assistant from JSI HWG, Dr. Kote Bochorishvili, Head of Obstetrics Department in Zestaponi Maternity Hospital, and Tamar Berdzuli, midwife from Kutaisi Maternity Hospital #2 participated in International Training Program “Reproductive and Sexual Health and Rights”, funded by SIDA, in Malmo, Sweden from February 17 to March 14. The four-week training, conducted by international trainers, was held in the Public Health Department of Lund University. In the end of the training the Georgian team presented a project: “Implementation of Active Management of the Third Stage of Labour in Kutaisi Maternity #2.” The group was led by Dr. Karen Odberg- Pettersson, Deputy Head of Public Health Department who made a follow-up visit to Georgia on June 16 through 18.

Youth Sexual and Reproductive Health Study Session in Strasbourg. Ekaterine Kikatunidze, SC, was invited to participate in the study session on “Improving Health of Young People in Europe Towards a Sexual Health Strategy” on July 6 through 12, 2008 in Strasbourg. The session was organized by You Act – European network of young people, in cooperation with The Council of Europe’s Directorate of Youth and Sport. The overall goal of the study session was to develop a European Youth Charter on Sexual and Reproductive Health and Rights (SRHR) based on the input, experience, needs and ideas of young people in Europe. 30 young people from 15 European countries participated in charter development process.

10. FAMILY PLANNING STATUTORY AND POLICY REQUIREMENTS

JSI HWG understands the importance of compliance with FP legislative and policy requirements.

TIAHRT requirements include:

- Client receives comprehensive counseling on FP and effective access to information on family planning choices and makes informed choice on the number and spacing of their children.
- Comprehensive information on contraceptive methods wall chart: “Do you know your family planning choices” is distributed to all program sites and placed on visible for clients place.
- Projects offer a broad range of methods directly and indirectly (by distributing USAID-donated contraceptives to the sites and through social marketing).
- No payment of incentives, bribes, gratuities, or financial reward provided to an individual in exchange for becoming a family planning acceptor, or
- To a program personnel for achieving a numerical target or quota of total number of births, number of family planning acceptors, or acceptors of a particular method of family planning.
- No denial of rights or benefits from program or provider side, as a consequence of an individual's decision not to accept family planning.
- FP acceptors are receiving comprehensible information on the health benefits and risks of the chosen method. This information is provided as counseling, posters, brochures, top shows, through hot line, etc.
- Tiahrt is considered carefully during the program Social Marketing campaign.
- Program is monitoring the compliance, and ready to report a single violation of above-mentioned requirements.

To ensure that the HWG program meets all policy and legislative requirements, JSI HWG program elaborated and signed a Memorandum of Understanding (MOU) with its target facilities. According to the MOU, the program sites are taking responsibilities to comply with all requirements including those related to abortion (Kemp-Kasten Amendment, Helms Amendment, Mexico City Policy). To date, 132 FP sites have signed the Memorandum.

ANNEXES

ANNEX #1: PHOTOS AND CAPTIONS

HWG has always believed in “telling the story” in pictures. Each picture describes an exciting event in this quarter and tells Who? When? Where? Which activity?



Ukrainian Trainers and Ukrainian mother in Zestaponi Maternity Hospital



Roman Savka provide Zestaponi staff with the short "on the job" training session on partograph use.



Interview with Mother. Zugdidi Maternity Hospital.



Happy father – Warm Chain. Batumi Maternity Hospital.



Rayon coordinators' training in Telavi.
May 2008.



UNFPA and HWG LMIS staff working on Channel software



FP TOT in Family Medicine Training Center.
HWG. Tbilisi



Practicing IUD insertion. FP training for
PHC providers



FP training in PHC center. Tbilisi



Community meeting with internally displaced
women of reproductive age. Tskaltubo



Workshop with the teachers of the secondary
school - "Contraception – modern choice"
Gvishtibi, Tskaltubo



FP Counseling for women of reproductive age.
Melekeduri ambulatory. Guria



Prof. Ketevan Nemsadze providing FP training for Family Physicians. Tbilisi CLARITAS XXI. December 2007



Trainer M. Beleshadze providing session on LAM. FP Training in Vake-Saburtalo PHC clinic. CLARITAS XXI



Training in FP. Representative of Bayer Schering Pharma distributes informational material on contraceptives. CLARITAS XXI. December 2007



Exit Interview with Mother. Follow-up evaluation of Isani-Samgori PHC centers. CLARITAS XXI



Policy Forum. Hotel "Dzveli Metekhi". CLARITAS XXI. February 27, 2008



Community meeting in Tsnori. CIF
October 2007



Group meeting in Gurjaani. CIF
February 2008



Community meeting in Kaloebi. CIF
July 2008



FP counseling in Ulianovka ambulatory.
March 2008



Teachers' Training in Imereti. SC





HWG the Most Innovative Program of the Year. Annual Awarding Ceremony. SC



Awarding Ceremony of 2008 Calendar Competition Winners. SC



Tamara Sirbiladze distributing the gifts to disabled children



New Year Celebration in Samtredia Boarding School



Paintings to Commemorate Victims of HIV/AIDS. SC



Volunteer Peer Educators are Packing Food for New IDPs. SC



Joining against Breast Cancer. HERA



BCW. Tamar Moseshvili, CNE, providing educational session in Registration area. HERA



PHC provider from Marneuli demonstrating BSE on breast model. HERA



Health Fair in Bolnisi school. HERA CNE talking about breast cancer signs



HERA Trainer, Lali Gvetadze, providing session on Mammography screening. PHC providers' Training in Rustavii.



Health Fair in Rustavi school. HERA

ANNEX # 2: SUCCESS STORIES

Whereas the narrative parts of this report and the charts and graphs tell what happened as a whole during the quarter, some of the best results come in terms of “success stories”. These more personal stories show clearly that the Project is having “people level impact” and that the work is paying off in terms of changing practices, values and improving the lives of people.

Health Education- The Right Choice

*Written by Richard Wang
JSI Intern*

Of the 100 participating secondary schools in the Healthy Lifestyle program, Public School #17 is not much different than its counterparts. With a student population of 450 students, it's about average in terms of student enrollment. What makes School #17 unique though is its active involvement in the Healthy Lifestyle program. The Healthy Lifestyle program, funded by USAID and implemented by John Snow Inc and Save the Children, provides a sorely needed source of accurate reproductive health and drug/alcohol abuse information. School #17's participation rate reached an unprecedented 80% of all available students at the high school in 2007. Twenty students from School #17 have gone through 2 additional days of training for certification in the Peer Leader component. To cement their special status, School #17 took home the 2nd place trophy in 2007's Sound Mind/Sound Body competition.

Located in the City of Kutaisi, Georgia's second largest city, School #17 joined the Healthy Lifestyle program in 2004. Led by four secondary school teachers, Nato Kuprava, Irina Burdjaliani, Tea Kutateladze and Eka Murusidze, the Healthy Lifestyle program has enjoyed tremendous success since its inception.

At many of the secondary schools, but especially at School #17, the Healthy Lifestyle program functions as an after school program. The four teachers, all of them uncompensated, stay after school for three hours each day, covering Healthy Lifestyle material. Since the students are actively involved, they have less time to pursue other harmful distractions such as drugs and gangs. Nato, a biologist by training, teaches reproductive health and sexually transmitted infections. Irina, who teaches foreign languages in the day, holds sessions in communication and sensitivity training.

Prior to the implementation of Healthy Lifestyle, teenagers in Georgia had few, if any, options for accurate reproductive health and substance abuse information. A ninth grader recently walked into an early marriage session hosted by Tea. The young lady had a crush on her boyfriend and thought she was ready for marriage. After the session and personal counseling, she decided it was in her best interest to delay the marriage. Thanks to Tea's relaxed, informal approach, the student is on course to graduate from high school.