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NOVA
INNOVATIONS IN SUPPORT
OF REPRODUCTIVE HEALTH

Quarterly Report April – June 2007: 3rd Quarter FY07

This Project NOVA Quarterly Report describes the results of NOVA’s programmatic activities during the period of April 1 – June 30, 2007. Project NOVA is in full-scale implementation of all marz-level and national-level interventions in Armenia in accordance with its Statement of Work.

AREA 1: Improve RH/FP/MCH Performance of Select Networks

Tangible Result: Providers’ knowledge and skills improved

- From April – June, eighteen training courses using the newly-developed Comprehensive Maternal and Child Health (MCH) training package were conducted for a total of 312 practicing obstetrician/gynecologists, neonatologists, pediatricians, anesthesiologists, nurses, including pediatric nurses, and midwives from project-supported facilities. All training courses were based on an interactive learning and teaching methodology in which participants actively participated in the presentations and discussions. The participants also had an opportunity to practice their newly acquired clinical skills on anatomical manikins. Pre- and post-tests were used to measure the effectiveness of these training events. On average, as a result of the training courses, knowledge of its participants increased by 36% from 54% at baseline to 90% at the end of the training.

Training Courses Conducted by Project NOVA During April – June 2007

Training Course	Network	Number of participants	Training Dates	Pre-test	Post-test	Knowledge Change
Newborn Care and Resuscitation	Armavir	19	April 3 – 5	44%	81%	37% ↑
Antenatal and Postpartum Care	Sisian	18	April 9 – 13	73%	85%	12% ↑
Infant Care	Vedi	22	April 16 – 20	52%	85%	33% ↑
Infection Prevention	Talin	21	April 17 – 19	62%	86%	24% ↑
Antenatal and Postpartum Care	Vedi	17	April 23 – 27	48%	84%	36% ↑
Infant Care	Armavir	19	May 1 – 5	63%	96%	33% ↑
Antenatal and Postpartum Care	Talin	18	May 7 – 11	50%	92%	42% ↑
Emergency Obstetric Care	Sisian	15	May 21 – 25	65%	88%	23% ↑
Newborn care and Resuscitation	Vayk	12	May 22 – 24	44%	87%	43% ↑
Infection Prevention	Vedi	29	May 29 – 31	50%	96%	46% ↑
Infant Care	Armavir	18	May 29 – June 2	64%	96%	32% ↑
Antenatal and Postpartum	Armavir	17	June 4 – 8	51%	90%	39% ↑

Training Course	Network	Number of participants	Training Dates	Pre-test	Post-test	Knowledge Change
Care						
Infant Care	Sisian	13	June 4 – 8	65%	86%	21% ↑
Newborn care and Resuscitation	Sisian	13	June 6 – 8	44%	91%	47% ↑
Infection Prevention	Vedi	14	June 5 – 6	40%	95%	55% ↑
Infection Prevention	Vayk	20	June 12 – 14	47%	94%	47% ↑
Emergency Obstetric Care	Vedi	16	June 18 - 22	62%	92%	30% ↑
Infection Prevention	Talin	11	June 25 - 26	44%	98%	54% ↑
TOTAL		312		54%	90%	36% ↑

**Overall Knowledge Increase Among Healthcare Workers Following Project NOVA Training Courses
Disaggregated by Technical Areas and Networks**

Training Course	Vedi	Talin	Armavir	Vayk	Sisian
Newborn Care and Resuscitation	TBD*	TBD*	37% ↑	43% ↑	47% ↑
Antenatal and Postpartum Care	36% ↑	42% ↑	39% ↑	TBD*	12% ↑
Infant Care	33% ↑	TBD*	32%, 33% ↑	TBD*	21% ↑
Infection Prevention	46%, 55% ↑	24%, 54% ↑	TBD*	47% ↑	TBD*
Emergency Obstetric Care	30% ↑	TBD*	TBD*	TBD*	23% ↑

* Scheduled for next quarter

- Fourteen representatives, including officials from the Ministry of Health (MOH) and marz-level health departments, practicing obstetrician-gynecologists and one member of Project NOVA’s staff, Dr. Karen Adamyan, traveled to Lithuania from May 14 – 18 for the Emergency Obstetric Care (EmOC) Study Tour organized by AED (through the USAID|FORECAST Human and Institutional Development Capacity Project) in close collaboration with Project NOVA. The overall goal of the training was to learn about the successful international experiences of organizing, financing and delivering emergency obstetric care. The purpose of this training was to prepare practicing physicians, health administrators and national level decision-makers for competency-based training interventions in EmOC, as well as establish an enabling political environment for the development and institutionalization of the rational emergency obstetric care system that addresses “three delays” in emergency obstetrics. After the study tour, participants developed an Armenia-specific EmOC action plan to introduce necessary changes in the delivery of emergency obstetric care in Armenia.
- Project NOVA, in collaboration with the USAID|FORECAST Project, is planning a U.S. study tour on the expanded role of nurses for October 2007. In May, Project NOVA staff conceptualized this study tour for a small group of participants to learn about successful international experiences regarding the expanded role of nurses in primary healthcare service delivery where nurses practice autonomously with minimal supervision using a holistic approach to care. The purpose of this training is to:
 - Contribute to the establishment of an enabling political environment by promoting an expanded role of nurses in primary health care, especially at health posts and ambulatories;

- Strengthen the existing basic and continuing education system by enabling nurses to provide an appropriate constellation of high-quality services, and
 - Improve service delivery at the primary healthcare level through the use of an expanded role of nurses, especially in the areas of maternal and child health, a higher utilization of primary health care services and a greater client satisfaction.
- The training session on the integration of gender into maternal and child health services for rural nurses was finalized and translated into Armenian. It is now incorporated into the existing Safe Motherhood Clinical Skills Training Package for rural nurses under Module 7: Working with Your Community. The purpose of this training piece is to raise general awareness of gender-related issues and domestic violence among rural community nurses.

Tangible Result: Higher level sites equipped and renovated

- In May, the project initiated the procurement of medical equipment and supplies for maternal and child healthcare services from five project-supported networks for higher level facilities (hospitals/maternalities, polyclinics and women's consultations). PROMTEST, which is a local supplier, has been selected for putting together a package of 48 items within a 3 month period starting mid May.
- In June, adult and infant scales, glucometers and test strips arrived from the US to equip 102 health posts in target networks. The local procurement of an additional 11 items for health posts will continue after the finalization of the bidding process initiated in May. Once Project NOVA's renovation of the selected health posts is completed, it will start the distribution of medical equipment and supplies to both health posts and higher level facilities. Project NOVA plans to do this from October – November 2007.

Tangible Result: Training capacity strengthened

- A childbirth simulator, a Zoe gynecological model, a labor and delivery model, a breast self-exam simulator, and an IV training arm were delivered to all project-supported clinical training sites in Vedi, Armavir, Talin, Vayk and Sisian networks.
- A total of 28 regional trainers from five project supported networks were identified for future Safe Motherhood Clinical Skills training courses for rural community nurses that will be initiated in September 2007.
- A number of peer reviews were received in regard to NOVA's pre-service training curriculum for the pilot project scheduled to be initiated in September 2007. The panel of peer reviewers was comprised of leading local experts in the field of maternal and child health. Most peer reviewers found the content of the course applicable and appropriate for the state pre-service curriculum for nurses and midwives and highlighted the importance of a performance-based approach during pre-service training suggested by NOVA. All technical and editorial comments were taken into consideration and incorporated into the final version of the pre-service training curriculum, which was submitted to the MOH and sought approval for the pilot project at the Gyumri Medical College.

AREA 2: Strengthen Management and Supervision of RH/FP/MCH Services

Tangible Result: Quality improvement system at higher level sites introduced

- In collaboration with marz health departments, the Marz Advisory Boards (MAB) were established within each network. Members of the MAB include representatives from marz health departments, Marzpetaran, NOVA-supported higher level healthcare facilities, relevant international organizations, and Project NOVA staff. In June, MAB meetings were conducted in Syunik, Armavir and Ararat marzes. During these meetings, the following issues were discussed: past and upcoming trainings of health care providers, establishment and functioning of Quality Assurance Teams, collaboration with other international NGOs working in the same marz/network, progress made and future plans under the terms of the Community Partnership for Health (CPH) initiative.
- Based on predefined selection criteria, Quality Assurance Teams (QATs) have been established and members identified at five higher level facilities: Talin Hospital, Vayk Medical Union, Sisian Hospital, Vedi Maternity and Armavir Hospital.

Health Care Facility	Quality Improvement Team Members	
Talin Hospital	Tsolak Khachatryan	Head of ob/gyn department
	Ruzanna Muradyan	Ob/gyn
	Valentina Gasparyan	Neonatologist
	Anahit Mnacakanyan	Midwife
	Susanna Hairapetyan	Midwife
Vayk Medical Union	Robert Aslanyan	Head Physician
	Nune Petrosyan	Neonatologist
	Metaxya Hovhannisyan	Head of ob/gyn department
	Fenya Stepanyan	Midwife
	Gayane Petrosyan	Ob/gyn
Sisian Hospital	Gohar Arakelyan	Head of ob/gyn department
	Vardush Tevanyan	Deputy Head Physician
	Lusine Soghomonyan	Pediatrics nurse
	Arpine Torosyan	Head nurse
	Anahit Danielyan	Midwife
Vedi Maternity	Vachik Matevosyan	Head doctor
	Karine Sargsyan	Ob/gyn
	Varsik Samvelyan	Ob/gyn
	Astghik Melikyan	Neonatologist
	Kristine Bazikyan	Midwife
Armavir Hospital	Nshan Gevorgyan	Head doctor
	Mziya Danielbek	Head of ob/gyn department
	Ruzanna Khachatryan	Neonatologist
	Meri Osipova	Ob/gyn
	Zhanna Khachatryan	Midwife

- Project NOVA with technical support from IntraHealth headquarters developed a Trainer's Guide *Making Quality Real* for training of quality assurance facilitators. The training took

place from May 16 – 18 in Yerevan for 21 members of the newly established Quality Assurance Teams, as well as representatives from PHCR and Children of Armenia Fund.

- Following the training, first quality assurance exercises were conducted at five higher level facilities. The QATs, with the technical support of Project NOVA, conducted self-assessments of their facility using a refined self-assessment questionnaire specifically designed around the provision of quality maternal and child health services at secondary level facilities. During this exercise, QATs revealed existing problems and developed corresponding problem-solving action plans.

AREA 3: Improve RH/MCH Policy Formulation and Implementation

Tangible Result: RH/FP/MCH policies reviewed

- The Health Post Review Report was finalized and submitted to USAID/Armenia for review and approval.
- As per the request of the Ministry of Health, Project NOVA has contributed to the development of the National Reproductive Health Strategy and Program of 2008-2015. Both the Strategy and Program were finalized and submitted to the Government of Armenia for approval in June.

Tangible Result: Evidence based RH/FP/MCH service delivery promoted

- Pursuant to the establishment of the Armenian-language peer-review Journal of Obstetrics, Gynecology, Perinatology and Neonatology, all paperwork required for the registration of the Journal was submitted to and registered by the Ministry of Justice in June.
- Project NOVA revised the format of its monthly newsletter to incorporate plain summaries of the Cochrane Reviews. This quarter the following information was shared in the newsletter: updates on resuscitation of infants at birth, antibiotic prophylaxis for intrauterine contraceptive device insertion, and early versus delayed umbilical cord clamping in preterm infants. All evidence-based medicine updates along with relevant links are available on the Project NOVA website (www.nova.am) in both English and Armenian.

Tangible Result: Best practices and messages documented and disseminated

- During this quarter, NOVA developed a new *Success Story* on the achievements of the Project NOVA Group of National Trainers who are ready to expand their expertise beyond the project's activities.
- Project NOVA distributed three monthly electronic newsletters to over 135 individuals from local and international organizations, as well as mailed several hard copies to health departments of target marzes. The newsletters highlighted project activities in developing health education materials for providers and clients, reports, maps and posters, which are found on the project's website under the user-friendly page of Resources. The newsletters also focused on NOVA's first training on newborn care in Armavir hospital; initiating

Quality Assurance activities and organizing training for QA facilitators with the participation of the QA team members from target marzes; and organizing an Emergency Obstetric Care study tour to Lithuania for the MOH and target marzes health department representatives, and OB/GYNs. The three newsletters also included the evidence-based medicine updates presented above.

- Project NOVA continues to publicize its work both within Armenia and internationally:
 - Gohar Panajyan, Project NOVA Performance Improvement Team Leader, traveled to Washington, D.C. to attend the Global Health Council's Conference and to present the poster "Obstetricians and Gynecologists Together for Better Family Planning Services," outlining the results of the Ijevan Family Planning study.
 - Gohar Panajyan, Gohar Jerbashian, Zara Mkrtchyan, Lilit Hovakimyan, and Harutyun Shahumyan conducted oral presentations at the Second International Medical Congress of Armenia, which took place at the Marriott Hotel in Yerevan, Armenia from June 28 – 30. The PowerPoint presentations used during the oral presentations are posted on the Project NOVA website under Resources.
 - Harutyun Shahumyan, MIS Officer, submitted an abstract on *GIS Capabilities in the Health Sector: the Experience of Project NOVA in Armenia*, to the American Public Health Association, which has been accepted as a poster presentation for the 135th Annual Meeting scheduled for November 3-7, 2007 in Washington, D.C.
 - Communications Officer Marine Vardanyan's abstract, *Communicating Policy through Local Media: Raising Awareness of Healthcare Reforms in Rural Armenia*, submitted to the American Public Health Association for presentation at the 135th Annual Meeting has been wait-listed.
 - Communications Officer Marine Vardanyan's abstract *Role of Communications in Community Outreach on Health Issues* submitted to the COMET 2007: Communication, Medicine and Ethics was accepted for presentation. However, the project does not have financial resources to support her participation in the conference and will look for alternative funding sources.
- A number of health education materials were designed, approved by the MOH and produced during this reporting quarter in order to raise overall awareness among the rural Armenian population on key maternal and child health issues:

Health Education Material	Status					
	Developed	Translated	Designed	Pretested	Printed	Disseminated
Basic Benefits Package Poster for MCH Services	X	X	X	-	1,200	X
Basic Benefits Package Booklet for MCH Services	X	X	X	-	4,000	X
Postpartum and Infant Care Booklet <i>Ten Things Women Need to Know after Having a Baby</i>	X	X	X	X	10,000	X (partially)
Antenatal Care Booklet <i>Antenatal Care and Healthy Pregnancy</i>	X	X	X	-	5,000	X (partially)
Postabortion Care Booklet <i>The Future is in Your Hands</i>	X	X	X	X	5,000	
All-methods Family Planning Booklet <i>Do you Know your Contraceptive Options?</i>	X	X	X			

Tangible result: Knowledge management capacity improved

- During April-June, a few adjustments were done in the monitoring and evaluation database to support M&E follow-up data entry and analysis for Gegharkunik and Kotayk marzes.
- An interactive map of Armenia was developed using Alta4 ImageMapper software. The map was integrated into the Project website.
- MIS Officer Harutyun Shahumyan participated in the International Conference on GIS in Public Health in New Orleans (USA). The conference program touched on subjects ranging from public policy and health advocacy to models, methods and spatial data infrastructure applied in different health sectors. Knowledge gained during this conference will further enhance overall application of GIS by Project NOVA, as well as guide project staff on how to effectively prepare and conduct GIS Training for the health officials from the MOH and other stakeholder agencies.
- Several useful tools were explored and some of them were added to the Project website. In particular, an interactive map, a calendar and a newsletter subscription form were developed and installed. The site has been updated on a periodic basis. All newly developed training packages, health education booklets, posters, leaflets, as well as other information materials (monthly news and success stories) were posted on the project website (www.nova.am).
- MIS officer Harutyun Shahumyan met with Mr. Sergey Khachatryan (Director, HPIU/WB) and discussed future collaboration in the field of GIS. Several GIS layers were defined to be

shared with HPIU as a contribution to the WB Project on Mapping of Health Care Delivery Networks in the Marzes of the Republic of Armenia.

AREA 4: Increase Consumer Demand for High Quality RH/FP/MCH Services through Community Education and Mobilization, Renovation and Equipping of Facilities

Tangible result: Better informed and mobilized community in RH/FP/MCH

- Orientation training on community mobilization and specific aspects of the Partnership Defined Quality (PDQ) and CPH methodology was conducted in April for the newly hired Community Mobilizers, along with eleven staff from four partner NGOs from new project-supported marzes. A one-day training event was facilitated by Deborah Fagan, an independent consultant for Save the Children. At the end of the training, its participants learned about core principles of PDQ methodology and practical approaches on working with communities.
- Following the orientation training, PHC activities were initiated in a total of fifty rural communities: 18 – in the Talin network, 12 – in the Armavir network, 8 – in the Vayk network and 12 – in the Sisian network. By the end of this quarter:
 - Community assessments were completed in all 50 communities and the following major problems common for all communities were revealed:
 - Poor physical conditions of health posts;
 - Inadequate relationship between health posts and supervisory healthcare facilities (polyclinics and ambulatories): physicians from supervisory health facilities do not visit health posts on a regular basis, there is no established partnership between health posts and supervisory facilities, and poor systems of referrals and counter-referrals;
 - Poor awareness regarding maternal and child health issues among rural populations;
 - Lack of information regarding free of charge state-guaranteed primary health care services.
 - Health Action Groups (HAGs) were established in all 50 communities: members of the HAGs usually consist of the village mayor, community nurse, school principle, representatives of Avagani Council, physician from supervisory facility, young mothers and housewives.
 - First and second community meetings took place in all 50 communities: active community members discussed health-related issues in their communities, as well as suggested possible solutions and actions for these issues.
 - Action plans have been developed in all 50 communities: action plan items include the problems revealed during the needs assessment stage.
 - Implementation budgets for the rejuvenation of select health posts were developed for 11

communities of the Armavir network, 16 communities of the Talin network, 4 communities of the Vayk Network, and 8 communities in Sisian.

Community	Population size	Assessment conducted	HAG established	1 st meeting conducted	2 nd meeting conducted	Action plan developed	Budget finalized
Armavir Network							
Aigeshat	2,050	X	X	X	X	X	X
Haykavan	1,550	X	X	X	X	X	
Lukashin	2,463	X	X	X	X	X	X
Nor Amasia	1,060	X	X	X	X	X	X
Djrashen	950	X	X	X	X	X	X
Nor Kesarya	1,770	X	X	X	X	X	X
Yeraskhahun	1,728	X	X	X	X	X	X
Artashar	1,141	X	X	X	X	X	X
Yeghegnut	2,188	X	X	X	X	X	X
Araks	1,690	X	X	X	X	X	X
Arazap	1,725	X	X	X	X	X	X
Nor Armavir	1,060	X	X	X	X	X	X
Talin Network							
Akunk	835	X	X	X	X	X	X
Areg	1,007	X	X	X	X	X	
Ashnak	1,450	X	X	X	X	X	X
Dashtadem	716	X	X	X	X	X	X
Davtashen	804	X	X	X	X	X	X
Karmrashen	650	X	X	X	X	X	X
Katnaghbyur	1,583	X	X	X	X	X	X
Nor Artik	612	X	X	X	X	X	X
Shgharshik	570	X	X	X	X	X	X
Vosketas	614	X	X	X	X	X	X
Yeghnik	550	X	X	X	X	X	X
Zarindja	720	X	X	X	X	X	X
Agarak	1,140	X	X	X	X	X	
Kakavadzor	1,200	X	X	X	X	X	X
Nerkin Sasunashen	1,110	X	X	X	X	X	X
Partizak	347	X	X	X	X	X	X
Verin Sasunashen	368	X	X	X	X	X	X
Garnahovit	557	X	X	X	X	X	X
Sisian Network							
Shaki	1588	X	X	X	X	X	
Uits	404	X	X	X	X	X	
Akhlatyan	519	X	X	X	X	X	X
Tolors	450	X	X	X	X	X	X
Salvard	450	X	X	X	X	X	X
Sarnakunk	540	X	X	X	X	X	
Tsg huk	449	X	X	X	X	X	X

Community	Population size	Assessment conducted	HAG established	1 st meeting conducted	2 nd meeting conducted	Action plan developed	Budget finalized
Moutsk	380	X	X	X	X	X	
Shamb	416	X	X	X	X	X	X
Aghitu	529	X	X	X	X	X	X
Noravan	531	X	X	X	X	X	X
Vorotan	300	X	X	X	X	X	X
Vayk Network							
Arin	247	X	X	X	X	X	X
Artavan	420	X	X	X	X	X	
Azatek	650	X	X	X	X	X	X
Gndevaz	1,012	X	X	X	X	X	X
Herher	817	X	X	X	X	X	
Karmrashen	288	X	X	X	X	X	
Saravan	280	X	X	X	X	X	X
Nor Aznaberd	175	X	X	X	X	X	
Ararat Network							
Dashtagar	656						
Goravan	2,764						
Sisavan	2,326						
Vanashen	2,614						
Yeghegnavan	1,830						
Landjanist	230						
Shaghap	1,024						
Nor Ughi	900						
Vedi Vine Factory	650						
Urtsalanj	171						
Paruyr Sevak	577						
Yeraskhavan	713						

- The existing community data collection tool was revisited and redesigned to assess community involvement in MCH services using NOVA’s Quality Assurance framework and updated scoring system. The new Community Involvement in Health Care Services tool will serve as a continuous self assessment instrument to be used by the members of the community and the Community Mobilizers through the end of the project. The first self-assessment exercises were conducted in all 50 communities during HAG’s meetings, and consecutive data will be entered into the project’s MIS database next quarter.
- On May 30, Project NOVA held a meeting for the Village Mayors from the Talin network where the Community Partnership for Health initiative was implemented. The meeting was attended by Dr. Taniel Poghosyan, Head of Aragatsotn Health Department, Dr. Tamara Gevorgyan, Acting Director of the Talin Hospital, 13 Village Mayors, 3 representatives from a local partner NGO called “Forum of Non Government and Non-Trade Organizations of Aragatsotn” and Project NOVA staff. The participants discussed on-going community activities and existing questions and problems related to the improvement of health post

infrastructure. Support was ensured by the local authorities, health department and supervisory health facilities for the upcoming joint activities.

Research, Monitoring and Evaluation

- The end-line assessment of project activities in Gegharkunik and Kotayk marzes was conducted from April 2 - 18. Fourteen clinical and social data collectors participated in the end-line facility assessment. Data entry and cleaning was completed in June. Over the next quarter, the project will analyze findings of the assessment and prepare a comparison report on Project NOVA activities in Kotayk, Gegharkunik, Shirak, Syunik and Lori marzes conducted during the first two years of the project implementation.
- In June, Project NOVA completed data analysis and prepared a baseline report for five project-supported networks. Following USAID/Armenia approval, the report will be translated into Armenian and disseminated among marz-level and national counterparts over the next quarter.
- Under the terms of the Gyumri Medical College pre-service training curriculum pilot, the project conducted a baseline assessment of the knowledge and skills of the 3rd and 4th year nursing and midwife students. The assessment was conducted at the Gyumri Medical College using previously developed knowledge evaluation questionnaires and clinical skills checklists in basic obstetric and infant care. The results of the assessment will be analyzed and presented over the next month and will be compared with similar data collected next year following the end of the pilot initiative.
- The Family Planning Compliance (FPC) Monitoring Plan has been developed by Project NOVA in response to USAID's requirements regarding the use of federal funds for family planning activities. This comes after a family planning compliance workshop in Armenia organized by USAID/Washington in May. The purpose of the FPC monitoring plan is to identify any instances where Project NOVA trained providers or Project NOVA-supported sites have any violations of FPC requirements. According to the plan, family planning compliance monitoring will be incorporated into routine Project NOVA training follow-up/monitoring visits and data collection. According to the FPC monitoring plan, the first FPC monitoring visits will take place in the next fiscal year.
- At the request of the mission, an FPC monitoring trip was undertaken by Project NOVA staff, USAID/Washington and USAID/Armenia to Ijevan MCH Center on May 23 to visit the healthcare facility and to meet with healthcare providers offering family planning services. Family planning compliance violations were not observed or reported.
- From May – June, Project NOVA conducted data collection for the small-scale research on the availability of contraceptive commodities. A total of 46 pharmacies in the project-supported networks were visited. Data entry, analyses and preparation of the report will be completed next quarter. The study was conducted in collaboration with American University of Armenia (AUA) MPH program as part of the Project NOVA internship program.

- Under the terms of NOVA’s QA initiative, research protocols and a semi-structured interview guide were developed to explore the client’s experience, expectations and perceptions of quality MCH services at five QA sites. Qualitative in-depth interviews with women were initiated in June and are scheduled to be completed in July 2007. A total of 20 – 30 women are expected to be interviewed by the end of the study. Findings from the study will be shared with the members of the Quality Assurance Teams and other interested parties and will be available in both English and Armenian. This study is also being conducted in collaboration with AUA’s MPH program as part of the Project NOVA internship program.
- During this reporting period, the project contributed to the majority of project indicators either directly or indirectly. The project made significant progress on the PMP by contributing to the following project indicators:
 - ~ Number of healthcare providers trained in RH/FP/MCH and other project-supported areas disaggregated by sex;
 - ~ Number of sites at project-supported marzes with established QIT;
 - ~ Number of policy documents reviewed;
 - ~ Number of NOVA monthly news and success stories produced and disseminated;
 - ~ Number of professional publications, presentations and posters at international, national and regional RH/FP/MCH conferences;
 - ~ Number of client and provider materials developed, produced and disseminated;
 - ~ Number of Health Action Groups with developed Action Plans in support of RH/FP/MCH services in project-supported communities.

Implementation Progress for Q3 FY07								
NOVA Progress Indicators	FY05 ACTUAL (A)	FY06 ACTUAL (B)	FY07 TARGET (C)	FY07 ACTUAL (D)				Project- today TOTAL E=A+B+D
				Q1	Q2	Q3	Q4	
Number of people trained in maternal and child health	229	259	200	51 ¹	25 ²	217 ³		781
Women	N/A ⁴	N/A	N/A	51	20	199		
Men	N/A	N/A	N/A	0	5	18		
Number of people trained in reproductive health and family planning	46	50	20	15 ⁵	0	0		111
Women	37	41	N/A	13	0	0		91
Men	9	9	N/A	2	0	0		20
Number of providers completed Management/Supportive Supervision training	45	38						83

¹ SMCS Module 8 Expanded Role of Midwives (38 participants); Instructional Design (13 participants)

² Orientation for National Trainers and Experts

³ ANC/PPC, EmOC, IC and NC training as part of Comprehensive MCH Training Package

⁴ Information on sex of participants of the clinical training sites’ trainings is not available

⁵ TOT in RH/MCH (15 participants)

Implementation Progress for Q3 FY07								
NOVA Progress Indicators	FY05 ACTUAL (A)	FY06 ACTUAL (B)	FY07 TARGET (C)	FY07 ACTUAL (D)				Project- today TOTAL E=A+B+D
				Q1	Q2	Q3	Q4	
Number of people trained in other project-supported areas (e.g. QI, IP, gender, etc.)	123 ⁶	153 ⁷	100	0	0	116 ⁸		392
Women	115	143	N/A	0	0	109		367
Men	8	10	N/A	0	0	7		25
Number of facilities to which basic equipment and supplies were distributed	105	73	0	0	0	0		178
Number of new RH/FP/MCH training curricula/packages developed and introduced	1	2	4	0	2 ⁹	0		5
Number of sites at project-supported marzes with project NOVA support	6	6	5	0	0	0		12
Number of policy documents reviewed/prepared	2	2	2	1	0	2 ¹⁰		7
Number of professional publications, presentations and posters at international, national and regional conferences	8	4	4	5	0	6 ¹¹		23
Number of new approaches successfully introduced	0	1	1	0	0	0		1
Number of Health Posts rehabilitated	30	30	6 ¹²	6	0	0		66
Number of higher level facilities rehabilitated	N/A	N/A	0	0	1	0		1
Number of Health Action Groups established	30	36 ¹³	56 ¹⁴	6 ¹⁵	5	45		122
Number of follow-up Action Plans developed			0	0	0	0		0
Number of clinical training sites established	6	6	5	0	6	0		18
Number of health talks conducted by Health Post Nurses	600	423	TBD	107	0	0		1,130

Management, Collaboration, and Coordination

- **Progress on Annual Workplan:** Project NOVA successfully accomplished all activities planned for the 3rd Quarter in the Annual Workplan. See the updated Annual Workplan report for the status of each activity.

⁶ IP training only

⁷ IP and gender sensitization training courses

⁸ IP training (95 participants) and Making Quality Real Workshop (21 participants)

⁹ Comprehensive Maternal and Child Health Training Package, and pre-service nursing/midwifery training curriculum

¹⁰ Health Post Review Technical Report, and National Reproductive Health Strategy and Program

¹¹ 5 Presentations at 2IMCA and 1 presentation at Global Health Conference

¹² Includes 6 seed grants to in Tavush and Shirak

¹³ Includes 30 HAGs in Gegharkunik and Kotayk and 6 HAGs established in Lory under seed grants component

¹⁴ Includes 50 HAGs in communities of NOVA year 3-5 marzes and 6 HAGs in Tavush and Shirak under seed grants component

¹⁵ Includes 6 HAGs in Tavush and Shirak under seed grants component

- **Collaboration and coordination with MOH:** This reporting quarter Project NOVA, along with PHCR and World Vision and the 1st Deputy Minister of the MOH, attended two meetings organized by USAID/Armenia and one introductory meeting with the new Minister of Health.
- **Human resources update:** Zara Mkrtychyan was promoted to Senior Research, Monitoring and Evaluation Officer, effective April 15; Karen Adamyan was promoted to Maternal Health Specialist, effective May 15.
- **Corporate visits and program support:** Sara Lewis Espada, Senior Program Manager for IntraHealth International, traveled to Armenia from April 21 – May 5 to provide programmatic oversight to Project NOVA and to facilitate a staff development workshop on the Learning for Performance (LFP) methodology.
- **Staff development:**
 - On May 2, eight project staff, along with PHCR and local counterparts from the National Institute of Health, Basic Medical College and Yerevan State Medical University, attended a one-day workshop on the IntraHealth LFP methodology. The objectives of the workshop were to assess strengths and problem areas in a given training scenario; identify the steps of the LFP methodology; describe how selected LFP tools can be used to guide users through the LFP process; and practice using several tools in the LFP toolkit and identify how the tools could be used in respective training programs. Participants used two scenarios throughout the day to internalize the LFP methodology and learn how they could apply it to real-life situations. During the discussions, participants raised interesting points about a variety of issues outside the control of the project or training institutes, such as the lack of clear job descriptions for some providers or the lack of authority to perform certain skills even after providers are trained in new areas of skills and knowledge.
 - Gohar Panajyan, FP/RH/MCH Performance Improvement Team Leader, participated in the Global Health Council's 34th Annual Conference held from May 29-June 1 in Washington, D.C., where she delivered a poster presentation on the partnership of pediatricians and gynecologists for increasing family planning referrals and utilization. The topic of the 34th GHC Conference was: "Partnerships: Partnering for Better Health". During her trip to the USA, Dr. Panajyan also visited EMG's headquarters in Arlington, Virginia, as well as IntraHealth International's headquarters in Chapel Hill, North Carolina. During her visit to IntraHealth, Dr. Panajyan was debriefed on IH's programs with key program staff. Also, she delivered a presentation on Project NOVA's current activities and the FP pilot study results that she presented at GHC.
 - Marianna Hakobyan traveled to Chapel Hill, North Carolina, USA from June 18 – 22 to participate in the Training and Learning Technical Exchange and Update Workshop. The purpose of this workshop brought together IntraHealth's training and learning field staff for skill-building, sharing best practices and planning for continuous strengthening of IntraHealth's training and learning strategies, systems, tools, and interventions in the

field.

- Iren Sargsyan, Community Mobilization Team Leader, traveled to Millwood, Virginia, USA from May 21-25 to participate in the Health Program Learning Group (PLG) Meeting organized by Save the Children's headquarters.
- **Coordination with other international projects in Armenia:** Project NOVA continues to collaborate with other international projects and organizations in Armenia to capitalize on their technical expertise, maximize the use of human and financial resources and avoid duplication of efforts.
 - From April 23-24, project staff attended the WHO Workshop on the Introduction of Evidence Based Medicine (EBM) Principles in Practice and Education of Healthcare Professionals.
 - From April 13-15, project staff and representatives of local NGOs took part in the Counterpart International Conference on The Role of NGOs in the Public Policy Process Conference 2007 conducted under the auspices of USAID/CASP.
 - In April and June, project staff contributed to the work of the International Working Group on Gender Issues organized by OSCE.
 - Project NOVA provided the health education booklet *Ten Things Women Need to Know After Having a Baby* to World Vision, the Wellness Center and PHCR.
 - Project staff contributed to the regional workshop on the Partnership Defined Quality (PDQ) methodology organized by Save the Children/Armenia. The workshop took place from April 2-4 in Armenia for a total of 15 participants from Tajikistan, Georgia, West Bank/Gaza and Armenia. The purpose of the workshop was to share successes, lessons learned and tools developed in PDQ experiences across the region, and to learn directly from Armenia's PDQ implementation experience, as well as to learn what it means to go to scale in PDQ.
 - Project NOVA had a series of meetings with PHCR and USAID on Quality Assurance issues. Project NOVA shared its previous experience in quality improvement in Lori, Shirak, Tavush, Gegharkunik and Kotayk marzes as well as introduced the revised tools and modified approach for Armavir, Aragatsotn, Ararat, Syunik and Vayots Dzor marzes.

Obstacles and Measures Undertaken to Address Them

- Parliamentary elections delayed implementation of some project activities, including Community Partnership for Health activities and Marz Advisory Board Meetings. The schedule of activities was adjusted, but in spite of it all project activities planned for this quarter were completed on time.
- Results of assessments and community meetings at eight Vayk rural communities revealed that overall health posts do not need major repair, though, almost all of them are functioning without running water and operational sewage systems. Project staff learned that major problems exist due to the lack of an established relationship between rural health posts and Vayk Medical Union and the co-existence of the health insurance scheme implemented by

the local branch of the Support to Community NGO under the auspices of OXFAM revolving insurance/drug fund. According to the results of the assessments, it appears that only 20% of all community members, those covered by the OXFAM health insurance fund, receive health care services altogether, whereas the rest of the rural community is left unattended. Routine visits to rural communities by supervising physicians are rarely conducted for community members that are not part of the OXFAM health insurance. A follow-up meeting was scheduled with OXFAM to come up with the best solution to address this issue.

Upcoming Major Activities

- Roll-out training activities using Comprehensive MCH Training Package in five new marzes
- Initiation of the Gyumri pre-service nursing/midwifery training curriculum pilot
- Regional TOT for Safe Motherhood Clinical Skills training
- Initiation of the Safe Motherhood Clinical Skills training for Health Post nurses
- Development of the Counseling for Reproductive Health Training Package
- TOT in Counseling for Reproductive Health Services
- Marz Advisory Board meetings in all five selected marz networks
- Design of the 1st JObGPN issue
- Production of family planning health education brochures
- GIS training
- Initiation of action plan's implementation at CPH Health Posts