**Philippines: Dual Protection Outreach for Adolescents**

In collaboration with PATH/Philippines’ AIDS Surveillance and Education Project (ASEP), PRIME II uses its technical leadership in Integrating Consumer Perspectives (ICP) to improve access to family planning and reproductive health (FP/RH) services for adolescents. Central to the ICP approach is helping primary providers better understand the wants, needs and preferences of adolescents, including prostitutes who are at high risk of HIV/AIDS, STIs and unintended pregnancy. PRIME’s work supports Community Health Outreach Workers (CHOWs) and Peer Educators (PEs) in designing strategies to provide youth-centered FP/RH services that focus on increasing the availability of condoms and other FP methods and educating adolescents about dual protection.

Through focus groups with adolescent prostitutes and their adolescent clients or partners, PRIME identified several areas where ICP could make an impact. Because unmarried adolescents are barred from receiving oral contraceptives at government clinics, PRIME works with ASEP NGOs to improve referral systems between government and NGO clinics. The private clinics can provide contraceptive methods to adolescents or refer them to a youth-friendly pharmacist. PRIME has also developed a set of FP/RH educational materials for CHOWs and PEs to distribute to adolescent prostitutes. The materials include the locations of youth-friendly facilities where adolescents can access condoms and other FP methods. While adolescent prostitutes reached through the project have increased condom usage with clients to prevent HIV/AIDS and STIs, thus far they have not similarly increased condom usage with regular partners.

**Bangladesh: Final Project Review of the Health and Population Sector Programme**

PRIME II’s assistance to the Ministry of Health and Family Welfare (MOHFW)’s Health and Population Sector Programme (HPSP) ended in June 2003. The final project review team found that PRIME made tremendous contributions to the HPSP’s implementation of the national in-service training strategy for the government of Bangladesh’s essential services package. The team also reported that PRIME’s development of national training standards helped establish uniform training quality throughout the country.

PRIME staff assisted the Technical Training Unit of the MOHFW in a nationwide training of 45,000 providers. In order to plan and track the training, PRIME developed a national-level Training Management Information System. Other PRIME assistance included budgeting and writing of a variety of Ministry reports and planning documents.
As documented in the review team’s End Term Survey, successes of the national in-service training program achieved with technical support from PRIME II include:

- 100% of training personnel received and used the national training guidelines
- Community providers’ knowledge level increased 53%
- Funds flow issues for training decreased by 33%
- Use of training follow-up findings to solve performance problems increased from 44% to 68%
- The percentage of providers observed performing to standard increased from 10% to 35%
- Most (77%) of the providers were aware of their job descriptions, compared to 43% at the baseline.

India: Exciting Results on Home-Based Interventions for Maternal and Neonatal Health

Based on results from PRIME II’s work in Uttar Pradesh, a team of evaluators has recommended that the Community Partnerships for Safe Motherhood (CPSM) model be replicated in other low-resource settings where people have access to referral facilities. The CPSM approach is an innovative strategy to promote basic maternal and neonatal life-saving interventions within the home and community. CPSM focuses on reducing delays in transport to referral units where life-threatening complications can be managed and increasing use of postpartum and postabortion family planning. Pregnant women and their caregivers are trained in Home-Based Life Saving Skills (HBLSS), empowering them to recognize and respond to obstetric and neonatal emergencies.

Several encouraging indicators from the Uttar Pradesh project, which ended in 2002, confirm the efficacy of the CPSM approach. Evaluators found that use of tetanus toxoid jumped from 37% to 86% among women who received HBLSS training. Iron folate use also rose from 1% at baseline to 35%. Breastfeeding within one hour of birth increased from 2% of women to 76%. Use of any modern method of postpartum family planning increased from 14% to 81%.

The project was implemented by PRIME II in partnership with Shramik Bharti, a local NGO, and PRIME supporting institution the American College of Nurse-Midwives (ACNM) in a rural area adjacent to the city of Kanpur.