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Looking forward to renewing work in Yemen in 2003-2004, this Post summarizes PRIME's previous efforts in the country.

### Yemen: Health Context

Lack of access to quality reproductive health (RH) services continues to have a major impact on women's health in the Middle East and North Africa. In many countries this can be traced to the absence of a comprehensive national reproductive health policy.

The life expectancy for women in Yemen is 58 years, and the fertility rate is 7.6. There is an acute need for comprehensive local medical services among the country's widely dispersed population. Female RH providers are especially in demand, as cultural and religious traditions restrict males from offering many key RH services.

From 1996 to 1998, PRIME lent technical assistance to Yemen's Ministry of Public Health (MOPH) in designing and implementing a national program to expand a cadre of providers—community midwives (CMWs). Prior to the national program implementation, *murshidaats*, who lacked the CMWs' training, had been delivering RH care in many underserved areas. With funding from UNFPA, IntraHealth International (formerly IntraH) has continued to provide technical assistance to the MOPH since 1998. The PRIME/MOPH program built local training expertise and developed a course for young Yemeni women interested in becoming CMWs. Some of the 18-month pre-service program's graduates had trouble finding jobs, however, and lacked the resources to set up private practices on their own.

### Technical Interventions to Improve Provider Performance

To gauge the employment opportunity and performance issues faced by the CMWs, PRIME assisted the MOPH by using the Performance Improvement (PI) approach to conduct a Performance Needs Assessment (PNA) of the CMW program in four of Yemen's 17 governorates during 1999. Participants in the November 1999 stakeholders' workshop used a cost-benefit analysis to prioritize interventions to close the performance gaps. PRIME and the MOPH decided to focus their efforts on a performance support system based on improved supervision of the CMWs. Multiple interventions in two governorates—Lahej and Hajjah—were designed to:

- Provide regular supportive supervision linked to in-service learning
- Emphasize the elements of self-directed learning—self assessment, self study, paired learning and peer review
- Advocate for the licensing of CMWs
- Promote community acceptance of the CMWs through supervisory meetings, promotional materials and outreach activities.

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During 2000, PRIME collaborated with supervisors, CMWs, the MOPH, and Yemen's Higher Institute for Health Sciences (HIHS) to create governorate-specific strategies. The strategies focused on:

- Designing a performance support system that incorporates elements of supportive supervision, in-service training and a reward system
- Strengthening supervision and monitoring capacity of the health offices in the identified governorates
- Establishing linkages between the PHC units of the government and the community midwives
- Working with the health offices to improve the logistics of supplies to the community midwives
- Strengthening community outreach activities.

This effort resulted in the design of a monitoring framework, a job manual and tools for supervisors, three field-tested self-directed learning modules and a flipbook marketing tool for CMWs to use in their communities. A plan for licensing CMWs was also created.

To build relationships between CMWs and supervisors, five-day workshops involving 22 CMWs in Lahej and 18 in Hajjah were held in the two governorates in January 2001. A monitoring tool for supervisors was presented and the participants reached consensus on a supervision plan.

### PRIME II Adds a New Region

PRIME II has expanded the scope of its global efforts with the official launch of a new region, Middle East and North Africa (MENA). Doris Youngs, MPH, serves as the Chapel Hill-based Regional Program Coordinator for MENA. A seasoned health professional who has consulted and worked in a variety of public health settings, Youngs' work in project management, training, birth spacing, family planning, child survival and performance improvement has led to positions in Lebanon, Jordan and the US. She has worked extensively with USAID and collaborated with organizations such as WHO, World Bank, UNICEF, the Jordanian Ministry of Health, AED, Nour Al Hussien Foundation, the Childbirth Education Association and Save the Children. A graduate of the Department of Public Health at the American University of Beirut, she is fluent in Arabic and English.



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