Uzbekistan: Improving Maternal and Newborn Health on the Afghan Border

In the Karshi region of the Kashkandarya oblast, on Uzbekistan’s southern border with Afghanistan, rural health posts are not well equipped to care for expecting mothers and the rate of home births is increasing. When women do give birth in maternity homes, they stay an average of five to eight days after delivering, requiring family members to take time from income-generating activities to bring food, linens and other supplies. To improve the quality of care at rural health posts—and enable shorter postnatal hospital stays—PRIME II, in collaboration with the Ministry of Health and major medical and nursing/midwifery institutions, is developing competency-based maternal and child health learning packages for a variety of primary providers.

Addressing normal pregnancy and delivery and prevention of complications during pregnancy and childbirth, the packages are designed to standardize maternal and child health training by breaking down clinical skills and activities into essential steps. Each step is then analyzed to determine how it can be learned and performed most efficiently. From 10-12 September, PRIME conducted a stakeholders’ meeting in Tashkent, during which four working groups were formed to tailor learning packages to the specific needs of general practitioners, ob/gyns, perinatologists and nurses and midwives. Course schedules and outlines for each package have since been finalized and questionnaires, role-plays and demonstration activities are well along in development. After a final review with stakeholders in January 2003, pilot testing of the materials will begin in February.

Armenia: National Forum Signifies Shift in Policy Environment

In September, PRIME II and the Armenian Ministry of Health hosted the National Forum on Expanding Access and Increasing Quality of Reproductive and Child Health Care. The two-day meeting brought together more than 100 international and national experts to propose specific policy and programmatic actions to improve the health status of women and children. Among those recommendations were to reinforce reproductive health education in medical and nursing schools, expand the role of nurses and midwives in maternal health, link family planning to abortion services, and introduce adolescent-friendly services. Many participants suggested that the interdisciplinary and participatory format of the forum was innovative for Armenia, creating opportunities for broader dialogue on critical issues. The forum also represents an important step toward widespread recognition that current clinical practice in Armenia is in conflict with international standards and that official statistics have often distorted the true situation.
Armenia: Program Launched to Reduce Violence Against Women

Violence against women (VAW) is a serious public health concern in Armenia, with severe consequences that include negative reproductive health outcomes. As part of its global special initiative to develop tools and better practices that can be used in primary-level reproductive health care settings to address gender-based violence, PRIME II implemented a VAW readiness assessment in November at two health facilities in Yerevan and the northern regional capital of Gyumri. The assessment examined knowledge and attitudes of providers and clients related to VAW, the capability of facilities to implement sensitive and informed services for women experiencing violence, and the available community resources that could serve as referral points for providers. Next phases of the project include national advocacy events and a training and service support program in one of the pilot facilities.

Armenia: Baseline Assessment and Special Study Implemented

Over the past four months, PRIME II conducted a baseline assessment of reproductive health facilities in two Marzes (regions), Lori and Shirak, including a special study examining the effects of different performance factors for health workers delivering selected reproductive health services. Intended to inform PRIME’s future Performance Improvement interventions, the study used quantitative and qualitative methods to assess prenatal and postpartum/infant care among 349 health workers at 209 facilities. Findings will be presented to key stakeholders in December.

Regional: PRIME II Staff Expands

Leah Levin, MHS, joined PRIME II in August as the Chapel Hill-based regional coordinator for Europe and Eurasia. Levin brings five years of reproductive health experience in Eastern Europe and the former Soviet Union, and is fluent in Russian. Laura Khalatyan has served as translator in the Yerevan office since September. In November, Karine Baghadsarova began her position as regional coordinator in Lori Marz, where PRIME shares office space with the USAID-funded Armenia Social Transition Project. Dr. Larisa Agbabyan is serving as clinical training advisor in Uzbekistan, and often represents PRIME at regional meetings. Uzbekistan’s foremost authority on competency-based curriculum design and evaluation, Agbabyan is Deputy Director of the Samarkand Oblast Center for Women’s and Children’s Health and Associate Professor of Obstetrics and Gynecology at the Samarkand Medical Institute. She has certified over 300 clinicians as trainers of standardized competency-based training courses for family planning and reproductive health.

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