



**July - December 2002**  
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### **Cordero Presents at FLASOG**

Dr. Milton Cordero, Reproductive Health Specialist at PRIME II's Latin America and the Caribbean regional office, has been an active participant in the efforts of the Latin American Federation of Societies of Obstetrics and Gynecology (FLASOG). A non-profit organization that brings together scientific societies and associations dedicated to obstetrics and gynecology, FLASOG promotes scientific, ethical and social progress in the field and fosters an environment for information exchange among OB-GYN specialists and professionals from related disciplines. Cordero is currently serving as president of the Obstetrics and Gynecology Society of the Dominican Republic, making him the country's top representative within FLASOG.



Dr. Milton Cordero during an interview.

An invited professor at the XVII FLASOG Congress, "Bodas de Oro," held in Santa Cruz, Bolivia, from October 20-25, 2002, Cordero gave three presentations. Two dealt with recent advancements in contraception, while the third, "Non-medical Consequences of Induced Abortion: The Hidden Face of Tragedy," focused on violence against women.

As a member of FLASOG's Latin American Committee on Sexual and Reproductive Rights, Cordero also participated in a seminar conducted by the group to analyze the current situation regarding violence against women in the region and develop a proposal to advocate for women's sexual and reproductive rights. This committee represents a logical coordination point between PRIME II's activities in the region and those of the Pan American Health Organization (PAHO)/World Health Organization (WHO) and the International Federation of Obstetrics and Gynecology. Additionally, Cordero is working to introduce the USAID Maximizing Access and Quality (MAQ) Initiative as a strategy within the quality-of-care activities sponsored by FLASOG.

As a result, the MAQ philosophy has the potential to reach approximately 5,000 physicians who are members of FLASOG and other related professional societies including perinatology, pediatrics and human reproduction groups. On the policy level, MAQ may be introduced through FLASOG's participation this year in a meeting sponsored by PAHO/WHO to discuss a regional strategy for the reduction of maternal mortality. PRIME II's extensive collaboration with FLASOG should further improve quality of care in reproductive health services in the Latin American/Caribbean region.



Laura Murray, Manager of Community Projects for PRIME II's LAC office, with children in the Dominican Republic.

### **Dominican Republic CDQ Project Exceeds Goals**

The USAID/PRIME II collaboration to provide technical assistance to the Dominican family planning organization ADOPLAFAM has achieved results that exceed the project's goals.

The Consumer-Driven Quality (CDQ) philosophy that PRIME II is using for the project is based on understanding the consumer's vision of quality family planning and reproductive health services and using that vision to improve the performance of primary providers. Before CDQ activities were implemented, only 28% of clients were paying for services at Centro Diagnostico, a clinic that ADOPLAFAM opened in October 2001 to reach underserved communities on the outskirts of Santo Domingo. Eight months later, 83% of clients were paying for their own services, exceeding ADOPLAFAM's goal of 70%. Monthly income increased from 22,646 pesos in January 2002 to 43,209 pesos in August 2002, helping to ensure the clinic's financial sustainability.

In response to requests gathered during CDQ activities, the clinic has added two gynecologists, a cardiologist and two psychologists to its staff, installed curtains for privacy in examination rooms, and purchased an electric generator that allows vaccines to be refrigerated, enabling the clinic to offer free vaccinations.

### **Paraguay Staff Evaluates National Reproductive Health Plan**

In November 2002, the PRIME II Paraguay team made an important presentation on the major findings of the Evaluation of the National Reproductive Health Plan 1997-2001 to the National Reproductive Health Council, a major policy body presided by the Minister of Health (MOH). For Paraguay and most of Latin America this constituted a landmark event, marking one of the few instances when the implementation of a national reproductive health plan has been comprehensively evaluated. The presentation was the culmination of nine months of research by PRIME II staff and consultants in collaboration with the MOH, UNFPA, CEPEP and the USAID Mission.

The PRIME team examined documentary evidence generated during the five-year period of the Plan. The team interviewed policy makers, health sector managers and health providers and held focus groups with service clients of different gender and age groups. In all, 144 interviews, 45 health facility observations and 20 focus groups were conducted in five different geographic regions representing the social and cultural diversity of the country.

The results included positive feedback on the active and visible participation of the private and NGO sectors in the distribution of contraceptive methods as well as the promotion of RH programs. The evaluation information helped PRIME, in conjunction with the other groups, develop a comprehensive evaluation strategy and recommendations for the next National Reproductive Health Plan. PRIME will help to assemble the next plan beginning in the Spring of 2003.

**USAID**



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