



JSI RESEARCH & TRAINING INSTITUTE

ROMANIAN FAMILY HEALTH INITIATIVE

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Line Item 1 – Romania Expanded Integrated Reproductive Health Initiative

Line Item 2 – Family Planning/Reproductive Health for Poor Urban and Rural Roma Women

Line Item 3 – Post Partum/Post-Abortion Care

Line Item 5 – Avian Influenza Activities

Line Item 6 – Enhancing Sustainability of NGOs and Continuing Support to the National AIDS Campaign

Narrative Quarterly Report

January to March 2007

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INTRODUCTION

This report constitutes the twenty-second quarterly report of the *Romanian Family Health Initiative* (RFHI) project, the sixth report for the program component entitled, “Post-Partum, Post Abortion Care Project” and updates on “Emergency Relief and Avian Influenza Activities.” The new component, “Enhancing the Sustainability of NGOs and Continuing Support to the National AIDS Campaign,” began during June 2006, and this report includes the third full scale reporting on this component.

This report documents activities during the second quarter of FY 2007 (January 2007-March 2007) under the above RFHI components. The project's major accomplishments during the quarter follow, as well as a description of all of the activities related to the implementation of the RFHI project. The format of this report correlates to the annual work plan (approved by USAID/Romania for the fiscal year) in order to better monitor project progress. Information in this report has been provided by JSI staff and the primary RFHI partners (SECS, PSI, YfY, ARAS, EEIRH and UNOPA) through their quarterly reports and end-of-project reports submitted to the Romanian office of JSI Research & Training Institute, Inc.

RFHI HIGHLIGHTS AND MAJOR ACHIEVEMENTS

During the last quarter the RFHI focused on developing end-of-project products including ‘lessons learned’ from the completed components to enable local partners to up-take the legacy of the project.

Please find below an illustrative listing of several highlights and major achievements accomplished during this reporting period:

- The dissemination conference of the Roma component was held. The package of Roma project materials was disseminated and can be used to replicate the Roma Health Mediator (RHM) reproductive health training initiative in other settings. The materials in this package include the cultural sensitivity materials for health professionals and the RHM assessment report.
- The dissemination conference for the ‘Urban Poor’ component took place and presented the experiences of developing local partnerships as well as plans for future partnerships.
- The first automated Logistics Management Information System (LMIS) in Romania, InterCON 1.0, for the reporting of free contraceptives was officially launched by PMU/MOPH and is in operation nation-wide.

In parallel, during the past quarter, the RFHI continued to implement project components that are still in operation including the following:

- Avian Influenza- related activities were implemented as planned with the exception of developing the National Preparedness Plan. The project prepared all technical background information for the Plan, but the nomination of the Intersectorial Commission to finalize the plan is pending the political decision of MOPH.
- The PAC/PP component is being implemented very successfully, and more than 50 hospitals have begun to offer FP services for PAC/PP clients.
- Despite delays in previous quarters, the Sustainability Component activities are proceeding in accordance with the work plan, and all delayed activities are back on schedule.

LINE ITEM 1 – ROMANIA EXPANDED INTEGRATED REPRODUCTIVE HEALTH INITIATIVE

IR 3. INCREASE ACCESS TO QUALITY INTEGRATED SERVICES

DEVELOP INNOVATIVE MODELS TO IMPROVE ACCESSIBILITY AND UTILIZATION OF RH SERVICES FOR PEOPLE WITH SPECIAL NEEDS

Support and facilitate STI and HIV/AIDS interventions

Develop technical paper to outline results of VCT services

The analysis of descriptive statistics from the VCT client database was completed. An analysis of factors contributing to risk reduction plan adherence continued and will be finalized next quarter as well as the final draft of the report.

Increase early detection of breast and cervical cancer

Develop technical paper to outline results of the Cervical Cancer Prevention Model and RCS final report

From October 2003 – September 2006, The Romanian Cancer Society implemented breast and cervical cancer prevention and early detection programs as a part of the RFHI. The programs targeted underprivileged and rural women of all ethnicities between the ages of 25-65.

The main objectives of the projects were:

- to inform and educate women aged between 25 and 65
- to train general practitioners (GPs) to improve their theoretical and practical skills related to early detection of breast and cervical cancers, including performance of Pap smear examinations
- to obtain the consensus of stakeholders on the standards for screening using the models agreed upon by the European Union (EU)
- to provide, for eligible women, free mammograms at the Institute for Oncology Cluj

The project involved 209 information-education-communication (IEC) activities in 116 villages and 9 cities with 9,015 participants from four districts. The IEC activities were enhanced by the involvement of 94 GPs.

101 FDs from Cluj and Satu Mare districts participated in theoretical and practical training courses, and monitoring for diagnosed conditions as well as the volume of referrals for follow-up have greatly improved.

The Pap smear and breast examination activities were carried out in 115 villages and 9 cities out of the four districts included in the project. There have been 13,402 women tested, 91% of whom were tested for the first time in their lives. Out of the women who participated, 83% were given breast exams, and 260 were referred for free mammograms.

The program set up a partnership model among public institutions to create a forum between the scientific community and civil society. It managed to gather local support by establishing committees of community leaders and fostering collaboration between them. These innovative partnerships yielded remarkable results, since the project reached a population never before exposed to basic prevention services. An impressive number of under-privileged women benefited from free Pap testing and more importantly, became aware of the existence and importance of cervical cancer early detection and prevention.

Cervical Cancer prevention project closes leaving a strong partnership model in place between the scientific community and civil society

LINE ITEM 2 – FAMILY PLANNING/REPRODUCTIVE HEALTH for POOR URBAN and RURAL ROMA WOMEN

IR 2. IMPROVED ALLOCATION, MOBILIZATION AND USE OF SOCIAL SECTOR RESOURCES (MANAGEMENT)

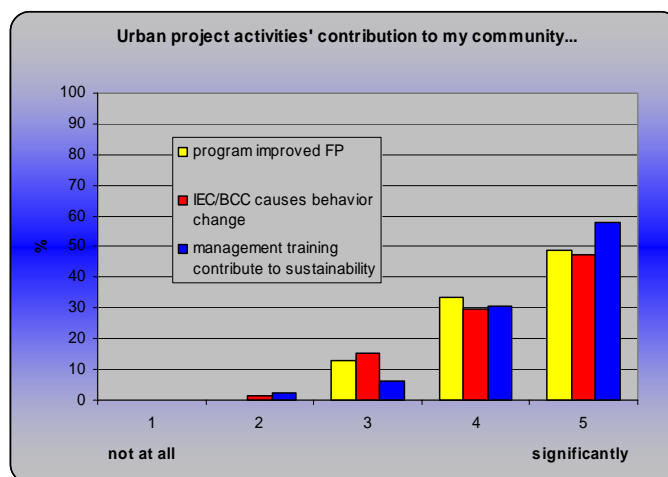
IMPROVE THE OVERALL MANAGEMENT OF RH SERVICES

Support local mechanisms in the 11 cities to increase access of poor women to FP/RH services

Organize a close-out event for the Urban project

The conference to commemorate the conclusion of the Romanian Family Health Initiative's support to the RH project in the eleven largest cities in Romania was evaluated by participants as a success. The conference occurred on January 30-31, 2007 at the Novotel in Bucharest, Romania and was attended by over 250 professionals including those from the health, education, law enforcement, social services, and public administration sectors from the eleven cities and beyond.

Participants were very excited to learn about the Urban project as well as to share their experiences with others including perceptions about the success of the project at the local level. The opportunity for building inter-personal and inter-institutional relationships was also praised. According to participants, they will use the information from the conference mostly for planning activities (designing a project, organizing similar activities to those from the project) as well as in everyday activities.



The aspects of the Urban project were evaluated very favorably by the conference attendees. When asked about the project components the largest proportion of respondents agreed that IEC/BCC activities significantly contributed/ will contribute to behavior change in their community, the program significantly improved/will improve access to family planning in their city, and that the management training for the LCGs significantly contributed/will contribute to the project's sustainability.

The main results of the Urban project presented during the conference were:

- Improved cross-sector communication and pooled resources across health and social sectors, resulting in more cost-effective use of available services
- Increased awareness of local stakeholders and partners about health inequalities and population needs, facilitating a more coherent strategy to tackle local priorities for vulnerable populations
- New entities (NGOs, police, social services) were exposed for the first time to RH issues and started allocating resources and providing integrated information and/or services for FP/RH

- ▼ Sustainable local action plans for future activities were developed by each LCG
- ▼ Over 500 doctors and nurses were trained in FP counseling, and 1,100 social workers attended sessions on providing information about the benefits of FP
- ▼ More than 110,000 beneficiaries attended information sessions, and almost half of a million women were exposed to the “True women” mini-series broadcast on local TV stations

Urban Project hosts participant driven close out event highlighting the 110,000 beneficiaries reached through IEC sessions and the establishment of sustainable local partnerships

Develop case study on Urban project implementation in selected cities

The case study is being developed and will be completed by the end of the project.

IR 3. INCREASE ACCESS TO QUALITY INTEGRATED SERVICES

DEVELOP INNOVATIVE MODELS TO IMPROVE ACCESSIBILITY AND THE UTILIZATION OF RH SERVICES FOR PEOPLE WITH SPECIAL NEEDS

Design and implement project to increase access of Roma communities to RH services

Organize a dissemination event for the Roma project

The dissemination conference took place on January 23, 2007, and it shared the results of “Increasing Roma communities’ access to FP/RH services.” The main activities of the project were presented including the Roma Health Mediator (RHM) trainings, FD workshops, IEC materials, and an assessment of the RHM Program. In addition to disseminating the results, another conference objective was to present how RHMs work to the non-RHM participants with an emphasis on the necessity of permanent and strong support for RHMs.

A new booklet was developed specifically for the conference “Thoughts for my colleagues, the RHMs...” which is a collection of essays written by RHMs about work in their communities. The purpose of this publication was to strengthen and encourage the RHMs in continuing the high level of quality of their work and to stimulate the exchange of experiences. 300 copies of the booklet were printed and distributed to the RHMs.

Approximately 90 people participated in the conference including RFHI partner organizations, trainers, RHMs, DPHA inspectors, representatives from MOPH, USAID, national and international NGOs, and other governmental institutions.



The reproductive health materials, including the training manual and participants’ manual, were reviewed and completed after incorporating the results of training workshops and follow-up meetings with RHM trainers and master trainers. A CD containing this package of materials was disseminated at the conference.

Roma Health Project reproductive health package

Develop and distribute culturally appropriate IEC materials and develop guidelines for best practices for working with Roma populations

IEC materials have been distributed to the DHPAs for delivery to each RHM trained in RH. The mailing of the materials was accompanied by a letter urging RHMs to compliment materials distribution with education sessions in their communities to maximize the impact of the IEC materials

The cultural sensitivity manual for FDs working with Roma populations “Introduction to the diversity of Roma culture” was developed and will be distributed once translation into Romanian is complete.

Conduct assessment of RHM program

The assessment of the RHM Program was completed and presented during the Roma project dissemination conference. The participants commented and made recommendations for the report, and these will be added to the final document to be printed and distributed to all decision-makers and partners involved in the development of the RHM Program in Romania.

LINE ITEM 3 –POST-PARTUM/POST-ABORTION CARE

IR 2. IMPROVE MOBILIZATION, ALLOCATION AND USE OF SOCIAL SECTOR RESOURCES

IMPROVE MOBILIZATION AND ALLOCATION OF HEALTH SECTOR RESOURCES

Improve the Managerial Capacity of RH services at the national and local level

Strengthen MOH consultative committees for planning and implementing RH key components

LMIS/Contraceptive Security Working Group

As discussed during the past meetings of the technical consultative working group on LMIS/Contraceptive Security, the key objective for strengthening the role of this technical body is formal recognition from MOPH. To establish formal recognition a Minister of Public Health Order¹ was drafted by JSI R&T but was not issued because of changes in the leadership at MOPH. Originally, issuing the Order was principally agreed upon with the former director of the National Agency for Programs (NAP) at MOPH. The process of issuing the Order will be reintroduced when a new NAP director is in place.

JSI R&T provided MOPH with TA for preparing the necessary documents for district re-supplies in January. It was necessary for JSI to take the lead with this activity because ANP/MOPH and MCHI/PMU were hindered by the transition of personnel and management.

Increase the level of contraceptive security

Implement LMIS for distribution of contraceptives at facility level

During the reporting period, JSI R&T worked closely with SECS to update the central electronic database of free contraceptives brands available at all levels of the logistics system. A revision of its coding system was conducted. This database is of critical importance for ensuring accurate reporting of contraceptives stocks and consumptions during the transition to the new web-based system for reporting of free contraceptives, InterCON 1.0.

The budget for implementing InterCON and providing TA to PMU/MOPH during the start-up period was approved and included in the RFHI work plan for fiscal year 2006-2007 under the PAC/PP component. This application will consolidate data from all free-of-charge contraceptives providers including hospital-based providers.

A technical working group consisting of specialists from SECS, PMU and JSI was established to coordinate the launch of InterCON. Planning meetings were held with stakeholders,² and IMCC/PMU formally notified all DPHAs about their responsibilities during the system launch phase. SECS sent DPHAs detailed instructions and electronic templates in an effort to standardize data entry, and in collaboration with PMU, began extensive communication

Rigorous data quality checks took place to prepare the new Web-based tool for automated recording of free contraceptives

¹ A Minister of Public Health Order is a regulatory document which addresses activities or creates new institutions, etc. within the MOPH.

² Stakeholders include management of the NAP with MOPH, manager of the Institute of Mother and Child Care, and the coordinator of PMU/IMCC.

with all DPHAs in March. Rigorous data quality checks were conducted to ensure data consistency across districts' electronic datasets to be imported into InterCON and the standard quarterly reports submitted to the PMU. Once the first InterCON-compiled national dataset is compiled in Mid-May including data from the pre-InterCON LMIS, DPHAs will start using InterCON for regular reporting on consumptions and stocks on free of charge contraceptives.

A powerful server and the necessary software were purchased by SECS, and a web domain was purchased (www.inter-con.ro) for hosting the application. The application was installed on this server and is functional.

Design LMIS for PAC/PP facilities according to action plans

JSI R&T and SECS staff conducted a field visit to Fodor Hospital in Cluj-Napoca to assess local specificities regarding the clients, products and information flows as well other aspects to consider when developing the LMIS module for the PAC/PP project. With similar goals in mind, a field visit was also made to the District Reference FP Clinic in Cluj, and contacts were established with SECS regional staff. Existing data collection and reporting instruments used by the national LMIS were tested for utility in the PAC/PP facilities.

PAC/PP LMIS being developed with input from district level professionals

Technical meetings and consultations were held with DPHA staff involved with the FP program in Cluj to ensure integration of the PAC/PP LMIS into the district LMIS for free contraceptives.

Following these visits, progress has been made in designing the LMIS model for PAC/PP facilities interested in distributing free contraceptives in addition to other FP related services.

Draft logistics procedures manual and conduct review with stakeholders

Activities to finalize the “Guidelines for the Family Planning Logistic Management Information System” continued this quarter. The majority of the document is finalized, but printing has been postponed until the updated fact sheet from USAID’s DELIVER II project is available at the end of March. The DELIVER fact sheet is the basis for some of the guidelines, so delaying printing will allow for a completely up-to-date document. Because of the added time until printing, JSI R&T has involved more professionals in the revision process to increase the value of the guidelines for PAC/PP facilities that distribute free contraceptives.

Update annual contraceptives forecast

At the request of MOPH, JSI provided technical input for preparing the 2007 budget allocations for public procurements of free contraceptives and LMIS forms.

Based on the latest LMIS reports from January, the short-term contraceptive consumption forecasts previously prepared and presented to the Contraceptive Security Technical Working Group were revised and updated. The latest quarterly forecasts revision took into account the number of providers trained in 2006, the impact of the newer RFHI components (RFHI Urban and PAC/PP), and quantities available from USAID and UNFPA donations.

Technical suggestions on the estimated quantities of products to be procured in the future and their estimated costs were provided to the NAP/MOPH and the General Directorate of Policies, Strategies, and Quality Management within MOPH³.

Draft and finalize contraceptive security plan with partners in MOPH and PMU

Background research for preparing the best outline of the contraceptive security plan to support MOPH in ensuring sustainability of the family planning program in Romania was conducted. The draft outline of the document was prepared, and the main chapters of the document are under development. The final draft of this document, whose main beneficiary is MOPH, should be discussed with all key stakeholders over the next quarter to ensure a consensus and its finalization before the closure of project activities.

MOPH finalized details for the 2007 National FP Program and earmarked funds for contraceptives procurements

An effective contraceptive security plan for Romania, built to support RFHI sustainability, must be sensitive to the changes in the policy environment which impact FP services provision and/or their management. Therefore, some insights on the most recent developments with MOPH and NHIH are included below.

Significant changes regarding the content and regulatory mechanisms for the implementation of the National Programs occurred this year. For the first time, a Governmental Ordinance endorsed by the Prime Minister created a new framework for collaboration between MOPH and NHIH, and it stipulates the key elements for the National Health Programs implementation (e.g. budgetary, managerial, institutional responsibilities, etc). Subsequently, MOPH and NHIH have promoted a joint Order to regulate the new structure of their 2007 national health programs (preventive, curative or palliative). Recent changes delayed the development of the legal framework to regulate the 2007 National Health Program which began only by mid-quarter. The most significant modification impacting the family planning program is the fact that all preventive interventions, such as FP services, were grouped into a unique National Program for Prevention run by MOPH.

Previous changes within the MOPH structure placed the newly created Agency for National Health Programs in the leading position for managing national health programs, while the former GDMA⁴/MOPH kept its main role in drafting the 2007 National Program of the MOPH. At the request of MOPH, JSI has provided technical input for the key elements of family planning related interventions under the National Prevention Program (objectives and activities, monitoring indicators and estimated budgets for these activities, including procurements of free contraceptives and LMIS forms).

During the 2006 NP3 Conference, MOPH officials expressed the intention to ensure payment of FP services under the new 2007 national programs and to ensure continuity of the activities during the forthcoming year. Despite this commitment, payment of family doctors is still not covered under the 2007 National Program for Prevention (Sub-program 1.3, Objective 1). Meanwhile, the former management of the NHIH did not include Methodological Norms of the 2007 Framework Contract or any mention to payment for GPs providing FP services (per-capita under the basic insurance package, and fee-per-service for the non-uninsured). A similar situation was encountered in 2002, but it was corrected following intense advocacy activities.

³ Formerly known as the General Directorate for Medical Assistance

⁴ General Directorate for Medical Assistance (GDMA). New official name is General Directorate for Policies, Strategies and Quality Management in Health

Because of the high turn-over of staff employed with MOPH and NHIH, policy consistency was overlooked. In February 2007, NHIH posted a memo on its website (Nota de fundamentare) proposing a correction of the Methodological Norms of the 2007 Framework Contract. During the next month, the inter-institutional consultations held within the NHIH were apparently favorable for re-inclusion of FP services in the 2007 Framework Contract for primary care providers. JSI has advocated for a favorable environment for FP service provision with MOPH and NHID. The Framework Contract revision process has stagnated through the end of March; progress will continue to be closely monitored by JSI R&T.

Provide TA to MOPH/PMU in organizing and monitoring contraceptives distribution

At the request of MOPH, TA was provided for revising the specific objectives and activities as well as the set of indicators for the NFPP in 2007.

To increase the technical capacity of PMU and NAP in organizing and monitoring contraceptives distribution, consistent and sustained TA was provided by SECS under JSI R&T leadership during the quarter. Several technical meetings were organized to help the new PMU management uptake NFPP responsibilities including those related to the LMIS and the management of supplies. Knowledge and skills were transferred to new PMU staff through on-the-job training.

JSI R&T supported PMU in centralizing the October-December quarterly consumption and stocks reported by DPHAs and in creating NFPP-specific monitoring indicators. All LMIS data reported to PMU was subjected to standard quality checks, and suggestions for ensuring quality of reporting by DPHAs were made whenever necessary. Aggregated, 2006 family planning indicators were also calculated with TA from JSI R&T.

The district re-supply was conducted at the beginning of January, and in less than three weeks, all 42 DPHAs had retrieved the contraceptive products from the central warehouse in Bucharest. This effort indicates, once more, the strong commitment of local level managers to the program.

RFHI had the opportunity to access condoms available for donation to MOPH's FP Program and other Romanian NGOs, on behalf of USAID. JSI R&T established the overall quantities which could be absorbed in Romania and prepared a draft proposal submitted to USAID requesting 2.7 million condoms worth approximately \$130,000. The condoms will become available during the next quarter, and local administrative procedures have begun in preparation for accepting the donation.

*New USAID donation of
2.7 million condoms for
MOPH's FP Program
and other Romanian
NGOs*

Delivery began of the revised LMIS forms to the 42 DPHAs with MOPH-requested support from JSI. The new forms contain detailed information regarding the filling-in process and have already been presented to local level staff in December 2006 during the LMIS training sessions. JSI will continue to provide TA to PMU, as necessary, to ensure the proper use of the forms.

IR 3. INCREASE ACCESS TO QUALITY INTEGRATED SERVICES

DEVELOP INNOVATIVE MODELS TO IMPROVE ACCESSIBILITY AND THE UTILIZATION OF RH SERVICES FOR PEOPLE WITH SPECIAL NEEDS

Design and implement post-abortion contraception pilot program

Conduct research to identify risk factors for repeat abortions

During the reporting quarter, JSI R&T supported the EEIRH through a series of conferences calls regarding three research components: an assessment of RFHI program impact, an investigation of the phenomenon of repeat abortion, and a cost analysis of abortion-related complications.

These research initiatives were enhanced and there has been progress in each of the three areas.

The assessment of the program impact progressed substantially. Despite difficulties in collecting detailed and retrospective statistical data from sources such as the MOPH Center for Health Statistics, all of the information is now compiled and data analysis has begun. Data, provided by JSI R&T, on quantity of free contraceptives supplied under the National Family Planning Program (NFPP) was consolidated in addition to consumption data and the number of doctors and nurses trained in FP under RFHI. The methodology for the assessment was finalized and an outline for the final report was developed. The report will be finalized by the end of April.

Data collection began for research on repeat abortions

Background research on abortion-related complications was completed during the quarter, and the final version of the methodology, including sampling plans and data collection instruments, was submitted in January. Before data collection began in March, site visits were conducted in the study facilities to establish contacts with the local DPHA decision-makers and agreements with the hospitals concerning the data collection. At this time, interviewers to administer the data collection tool were also selected. Data collection and entry began in March.

A literature review for the research on cost-analysis of abortion-related complications continued in order to address the complexity of the issue. An outline for the final research report was developed. Data on abortion complications and health care spending was compiled (this investigation will not involve primary data collection) and will be analyzed in the upcoming quarter to finalize the cost model.

Design and implement post-abortion and post partum contraception program in 11 districts and Bucharest

Assess legislation/review the regulatory framework to assure PAC/PP services

Through a constant collaboration between JSI R&T and MOPH, public health facilities where abortions are performed were officially included in the national program for free contraceptive distribution. This provides not only a legal legitimacy to PAC/PP contraception, but it is also a key element for the future sustainability of post-abortion family planning services (including information, counseling, and access to contraceptives).

Implement action plans in project facilities

Five Steering Committee and two SECS team meetings were held in order to discuss project implementation in selected facilities. Based on the Steering Committee decisions, the SECS

Implementation plan highlights

Evaluation of the medical facilities achieved 100%

Develop implementation plans achieved 100%

Training of the medical staff for conducting info sessions achieved 98%

Total number of exposed women to reproductive health messages in this quarter 27,303

implementation team met in January to establish the activities for the remaining months of the project. One priority area was to strengthen the linkage between the hospital-level interventions and the services available at the community level.

Additionally, each Regional SECS Coordinator has developed a work plan for February-June and a detailed activities plan for March and April. The work plans were discussed with the JSI R&T team and include:

- Disseminate of PAC/PP messages at the community level through the FDs trained and not trained in FP, community nurses, social workers and others trained under the Urban Component
- Organization of basic FP courses to increase access to FP services in identified districts
- Introducing the provision of FP counseling in facilities which have no FP services available by training nurses and doctors in FP
- Follow-up trainings implemented for nurses to reinforce PAC/PP FP skills
- Two follow-up sessions organized for topics such as combined pills, progesterone-only pills, injectables, and IUDs targeting medical staff who participated in FP basic info sessions called “contraception for all”

The evaluation process of the medical facilities included in the PAC/PP project was completed, and the implementation of the action plans was achieved, reaching almost half of the established indicator (47,513 women exposed to reproductive health messages). The training activities for conducting information sessions for post abortion and post partum women for the medical staff were completed in 98% of the selected facilities (in 51 hospitals out of 52).

The main activities during the quarter were:

- situation analysis conducted in one location
- reports of the situation analysis developed for two locations (total number of locations with situation assessment reports: 52)
- final drafts of the three facility-level reports finalized in three locations
- intervention plans in nine facilities finalized increasing the total number facilities with final intervention plans to 52
- two types of posters and calendars on post abortion and post partum fertility, separately, developed as well as one leaflet for post abortion women
- 40 facilities added to the total number providing post abortion and post partum women with FP messages, increasing the total number of participating facilities to 51

- ▶ 16 prenatal care sessions organized for 93 FDs in Cluj, and 14 sessions organized for 124 FDs in Prahova
- ▶ District Commission for Women, Child and Family Health (DCWCFH) meeting organized in Dolj
- ▶ Availability of IEC materials ensured for the selected facilities

The total number of post abortion and postpartum women exposed to PAC/PP messages is collected on a monthly basis. The data are usually obtained from DPHAs, and there are two districts where the data are available after the 25th of the following month.

During the quarter, 27,303 women were exposed to FP messages through the project.

The total number of women exposed to FP messages during the last two quarters is 47,513 (almost 50% of the total indicator of the project).

At the end of March 2007, JSI R&T and two SECS representatives made a field trip to Cluj district to assess the barriers in establishing new FP service distribution points in maternities which have no FP clinic. The LMIS was adapted to include these maternities in the National FP network, and this process is discussed in a previous section of this report.

Produce and distribute IEC materials for project facilities

During this quarter two types of posters, two types of pocket calendars, and one leaflet were developed with PAC/PP-specific messages.

A distribution list has been developed, and the requested number of IEC materials has been sent to each facility. SECS Coordinators supported each facility to distribute the IEC materials, and in a few locations, the manager of the hospital asked that the posters to be laminated. These posters, a total of 300, will be laminated and sent to the hospitals.

To ensure continuity of reproductive health and PAC/PP contraception messages at all levels of the health system, IEC materials were distributed at meetings with various professionals that have contacts with the target population. IEC materials were distributed during:

- ▶ 24 professional meetings with 290 rural and urban FDs trained in FP basic on a territorial basis in selected hospitals from four districts
- ▶ one professional meeting with 72 urban FDs that were not trained
- ▶ nine meetings with social workers from communities linked with the selected hospitals for presenting PAC/PP project and key PAC/PP messages in four districts
- ▶ three meetings with community nurses from communities linked with the selected hospitals for presenting PAC/PP project and key PAC/PP messages in three districts

Conduct supervision visits in project sites

During this quarter a total number of 71 supervision visits were conducted in all selected districts. The objectives of these visits were:

- ▶ To finalize/refine the intervention plans
- ▶ To support the distribution of IEC materials
- ▶ To participate in informative sessions with post abortion and post partum women

Support the upgrade of FP cabinets in the 11 districts to create a client-friendly environment

The material needs of the FP cabinets were assessed and were verified by SECS. JSI R&T created a data base and a mechanism for fulfilling the requests, and the process of central and local procurement of the materials was initiated.

IMPROVE THE PROFESSIONAL SKILLS OF THE RH SERVICE PROVIDERS

Increase the number and capacity of FP/RH service providers

Train service providers in PAC/PP contraception

During this quarter health facilities staff benefited from:

- ▼ a seminar on contraception and counseling up-dates for 52 FP Doctors from the hospitals selected by the project.

Hospital staff trained in PAC/PP

Updates in contraception for 52 FP doctors

“Contraception for all” for 1070 nurses, 253 auxiliary staff

Training for providing info sessions for 640 nurses, 15 FP doctors

Basic training in FP for 47 nurses

- ▼ 34 basic FP informative sessions called “Contraception for all” for 1,070 nurses and 235 auxiliary staff from eight facilities in five districts and Bucharest
- ▼ 17 training sessions for 640 nurses and 15 doctors from 43 facilities in eight districts and Bucharest in leading info sessions for post abortion and postpartum women

- ▼ two FP basic courses in Cluj and Bihor for 47 nurses working in the selected hospitals

In order to ensure the safety net for women leaving medical facilities after delivery or abortion in places where services were not available, eight FP basic courses in seven districts for 78 FDs, two Ob/Gyn, 74 FDs, and 23 community nurses were implemented at the community level.

*Community level safety net for women leaving medical facilities:
Basic training in FP for 78 FD's, two ObGyns, 74 nurses, and 23 community nurses*

PAC-PP pilot project in Cluj, Bihor, Timis districts

The PAC/PP pilot program in Cluj, Bihor, and Timis works with professional communities and civil societies groups to empower them to provide, support and advocate for FP/RH at the community level. The pilot worked through BCC networks developed under the Urban RFHI program in three districts: Cluj, Bihor, Timis). Through outreach workers, the poor urban population's RH needs were assessed including those related to PAC/PP. Next, the pilot began to increase their access to FP services through:

- ▼ working with FDs to promote PAC/PP messages to their clients
- ▼ organizing three BCC group meetings to present the PAC/PP project followed by discussions and proposals from group members

Local health authorities in Timis will implement IEC campaign in rural areas using JSI R&T/SECS materials, and social services from City Hall in every district will organize meetings to empower social workers. In Bihor, a new NGO which works with mothers and pregnant women became a new and very active member and helped to create a link between communities and nurses from a hospital in Oradea.

PAC/PP Project for Roma women in Cluj district rural areas

In this quarter a draft description of the PAP/PP pilot for Roma women in Cluj district was developed, and implementation will begin in April.

Train professionals involved in the PAC project in the 11 districts and Bucharest in HIV/AIDS risk reduction and pre/post testing and counseling

A contract was signed with ARAS, a partner organization of the RFHI, to implement HIV and STI prevention trainings for health personnel. This activity will complement the services provided to post partum and post abortion women in maternity wards through the PAC/PP component.

*Train medical staff
in HIV and STI
prevention in
PAC/PP locations*

The objectives proposed within this contract are:

- To train the health personnel, mainly nurses, working in facilities participating in the PAC/PP program to provide information about HIV, AIDS, and STI prevention, as well as referrals to testing centers. To reach pregnant and post partum women with MTCT prevention messages.
- To improve the current practices related to HIV testing and counseling by adapting the training curriculum for health professionals working with post abortion and post partum women, implementing 24 training workshops for over 400 health professionals in PAC/PP facilities.

LINE ITEM 5 – DISASTER RELIEF AND AVIAN INFLUENZA ACTIVITIES

IR 5. SUPPORT GOR EFFORTS TO ENSURE APPROPRIATE RESPONSES TO PUBLIC HEALTH EMERGENCIES

Design national inter-sector AI plan and train mid-level professionals

During the quarter, two multi-sectorial working meetings were organized in partnership with the Romanian Red Cross (RRC) and funded by UNDP. The first meeting took place on March 5th, and included a brief presentation of the current successes, challenges and lessons learned during AI outbreaks in Romania. Communication and coordination issues between key governmental institutions were a particularly strong focus of the meeting. The General Inspectorate for Emergency Situations (GIES) highlighted the existence of the legislative framework in Romania and the need for it to be tailored to the specific situation of a public health threat, while MOPH contended that plans do exist for the health, veterinary, and, agriculture sectors. The plans touted by MOPH need to be integrated and balanced with other sectors, and JSI R&T and RRC will insure TA for the integration process.

The second meeting took place on March 15th and was hosted by the Institute of Public Health in Bucharest. It focused on using a WHO/PAHO assessment tool to assess Romania's preparedness for an influenza pandemic. The assessment tool is an effective way to initiate a review of Romania's current response structure and identifies areas in need of improvement. This sparked discussions about the level of Romania's preparedness, and the working group completed the assessment. The assessment results suggest that MOPH should lead an official national working group of experts. The highlights discussed here were also presented during the meeting of the National Committee for Emergency Situations.

***WHO/PAHO
assessment tool for
AI preparedness
implemented***

Design, publish and disseminate IEC materials to increase awareness related to avian influenza

During the quarter a series of posters and brochures were developed with input from FDs for use by FDs. The materials will be distributed following approval from MOPH and mayors' offices from villages, cities and municipalities. Messages include hand washing, how to cover one's mouth and nose when sneezing or coughing, and the importance of vaccinations.



Plastic thermometer strip featuring flu prevention methods

The strategy of focusing on more general flu prevention messages instead of AI-specific messages continued through the development of innovative IEC tools.

Plastic thermometer strips featuring flu prevention methods have been approved and are ready to be distributed. This product meant for home monitoring of febrile illnesses dons messages such as the importance of an annual flu vaccine, washing hands, and visiting a physician if fever persists. The product will be distributed through family doctors from the sentinel districts.

Train key health personal and veterinarians in epidemiology and surveillance

The WHO guide on AI laboratory samples collection and transport was translated and adapted for Romania and was sent to MOPH for feedback. This guide will be distributed to all laboratory staff, as well as health personnel involved in collecting and transporting AI samples.

Design training packages for various health professionals

For each professional category involved in AI-related training, unique materials were developed by teams of Romanian experts. The materials combine internationally produced materials and documents with a Romanian national context and focus on the link between seasonal flu and a flu pandemic.

Conduct training sessions with district level infectious disease and Emergency Medical staff

A hands-on training will be organized during next quarter hosted by the National Institute of Infectious Diseases “Matei Bals” in Bucharest. The content was developed by a team of Romanian experts and will include information about up-to-date treatment as well as key information on surveillance and epidemiology, universal precautions, and personal protective equipment (PPE).

Conduct training sessions for FDs at district level

During this quarter JSI, in partnership with MOPH, began a training initiative “Avian influenza, seasonal influenza, and pandemic preparedness” for family doctors involved in the influenza sentinel surveillance system.



Avian Influenza FD training in Ploiesti, March 7

The sentinel surveillance system covers 19 districts in Romania (Arges, Bacau, Bihor, Brasov, Braila, Calarasi, Constanta, Cluj, Dolj, Galati, Hunedoara, Iasi, Mures, Prahova, Sibiu, Suceava, Timis, Tulcea, Bucuresti).

The first two training courses took place in Bucarest and Ploiesti and involved 47 FDs and 28 nurses and were approved by the National College of Physicians and Order of Nurses and Midwives. The training objectives included:

- ▶ to provide all medical staff involved in the surveillance system with a standard package of updated information regarding influenza, avian influenza, and the risk of a pandemic
- ▶ to illustrate the role of family doctors within a sentinel system
- ▶ to improve the communication between experts and institutions involved in the sentinel system



Sentinel districts (purple) and regional centers for AI (stars)

In addition to training materials, all participants received PPE donated by USAID as well as training on the use of PPE.

The objectives of the course were fully achieved. According to the results of the evaluations, the courses were very well received by the majority of the participants as useful and well organized. The participants expressed the need:

- ▶ to receive the specific laws and guidelines combined into one package
- ▶ to receive guidelines and protocols regarding field investigation (avian influenza outbreaks and other epidemics)
- ▶ to be informed and trained on a regular basis (about influenza, vaccination and other communicable diseases)
- ▶ to organise similar courses for nurses, emergency and ambulatory care staff
- ▶ to develop more information/education activities for the general population

Implement infection control and medical response procedures for health facilities

Personal protective equipment procurement and training

Procurement procedures began and will be finalized next quarter for masks and gloves to be distributed through FDs and emergency medicine staff (especially ambulances). A checklist for PPE use will be developed, printed and distributed during next quarter to accompany the PPE use training session for FDs and nurses.

LINE ITEM 6 –ENHANCING SUSTAINABILITY OF NGOS AND CONTINUING SUPPORT TO THE NATIONAL AIDS CAMPAIGN

IR 2. IMPROVE MOBILIZATION, ALLOCATION AND USE OF SOCIAL SECTOR RESOURCES (MANAGEMENT)

IMPROVE THE OVERALL MANAGEMENT OF RH SERVICES

Understanding the funding environment: assessing legal regulatory opportunities and barriers to accessing public sector financing and European Union (EU) structural funds

Identify current or potential government funding for reproductive health and disseminate to RFHI and NGO partners through workshops

During this quarter, preparations began for the organization of the workshop “Strengthen the Capacity of Romanian NGOs Working in the RH Field to Access EU Funds.” The workshop will take place between May 8-10 and will be facilitated by consultants from the German Foundation for World Population (DSW). The objectives of the training will be:

- ▼ To present to the participants, RFHI partner NGOs and JSI staff, the EU funding opportunities
- ▼ To facilitate the networking and information sharing between NGOs and authorities responsible for managing EU funds in Romania
- ▼ To provide training in writing proposals for accessing EU funds

Ultimately, the workshop will increase the capacity of RFHI partner NGOs to access EU and other local and international funds.

Promote strategic partnerships with established European organizations and provide TA

As described in a previous report, JSI R&T consultants attended a workshop in Brussels with WelcomeEurope. Since the workshop, JSI R&T organized the “Accessing EU Funds” workshop led by the consultants, from January 17-19. The two consultants, from SEF Foundation in Iasi and GRADO, led the training of 25 participants from JSI R&T and NGO partners. The agenda included a presentation of EU institutions and programs, project proposal writing, reporting terms, management of partnerships, and implementation and monitoring of activities. One of the most important goals of the training was to present opportunities for networking to identify funding and potential partners for future activities.

“Accessing EU Funds” workshop led by JSI R&T consultants

Build basic business and management skills to support implementation of sustainability plans and future operations for SECS

Conduct market research, market plan and marketing materials for each clinic

Marketing plan for SECS clinics and rebranding of SECS

SECS contracted a PR agency in order to achieve marketing and rebranding goals. The agency made following observations:

- ▼ not all existing materials communicate a consistent messages

- ▼ message not tailored to characteristics of the target population
- ▼ communication materials have inappropriate format/layout for the target population (i.e. annual report)

The main goal will be to increase notoriety for the SECS brand and to create profit for its clinics. They also decided that the traditional logo of SECS, Didi, should remain, as it is friendly and easy to remember.

Recommended colors for the brand were red and orange. Tools analyzed by the agency were: SECS websites (www.secs.ro and www.sexdex.ro) and key materials such as annual reports and flyers and posters to promote the programs.

SECS hires PR agency to improve marketing of SECS brand and clinics

The PR agency recommended building unity in communication materials through:

- ▼ development of a set of rules for all corporate brand communication materials (fonts, colors)
- ▼ tailoring messages to the target population

The agency proposed that communication materials for partners, a press folder, a template PowerPoint for SECS presentations, and annual reports of activity be developed under the agency's consultancy.

Regarding the SECS clinics, SECS clinics can only create a profit if the target population and potential clients recognize the SECS brand. The agency recommended a combined media and PR campaign at the local level, since a central level campaign exceeded budgetary constraints. The campaign should promote the idea that SECS clinics are a specialized and reliable source of information, and the target population should be invited to visit the clinics during a press release presenting key information about each clinic.

Several meetings took place with the PR agency in order to develop this promotion strategy for the clinics, including branding them and producing promotional materials. It was decided through these meetings to have the PR agency design a promotion strategy based on local events in four cities (Bucharest, Cluj, Tg. Mures and Constanta).

Develop business plan for clinics and implement plan

Documentation activities took place during the quarter. A draft plan was developed for Bucharest but has not yet been finalized.

Provide assistance in building more effective governance

Board composition, constitution, and SOW revision

A lawyer was hired, and, after several meetings with Senior Management team, he began working on the review of the SECS Constitution in order to identify the most appropriate amendments able to support SECS. He will finalize the process at the beginning of April 2007, and the proposed constitution will be submitted for the approval of the General Assembly.

SECS selects board of directors and first board meeting scheduled for May 2007

During the quarter, separate meetings and conversations took place with former Board members to assess their willingness to be members of the SECS Strategy Consultative Committee.

Individual meetings with each of the members of the new Board took place to inform them about the organization, the challenges, and the type of support SECS will need from the Board.⁵ The first meeting of the Board is planned for May 2007.

Organizational structure

As recommended by a JSI international consultant's evaluation report, an external candidate was not selected for the position of clinic coordinator. The responsibilities will be assigned to a headquarters staff member to eliminate transition time for adjustment to the functioning of SECS. Thus the clinics' coordination was assigned to Miss Roxana Jiboteanu, who left SECS immediately after her nomination, in February 2007 for another place of work. Consequently, the clinics' coordination position was assigned to Dr. Adriana Melnic (Cluj Regional Coordinator), who, although outside of the headquarters location, brings experience and competency in service provision and clinic management. A detailed implementation plan for this position is under development.

The changes in the clinics' coordination (and the needed time to take over such a complex process, especially during a period of time focused on renovations) are the main cause of delay in the implementation of the clinics' sustainability plans.

In order to increase its institutional capacity SECS staff has been exposed to several training sessions in areas covering competencies in program and project management:

- ▶ TOT training organized by the National Center for Postgraduate Training of Medical Staff in "Management of FP programs" which was developed with USAID/JSI R&T support
- ▶ "Accessing EU Funds" workshop organized by USAID/JSI R&T
- ▶ Education for Development workshop organized by The Foundation for Civil Society Development (FDSC) and Trialog. The agenda included a presentation of expertise in Great Britain (led by OXFAM) and the identification of main objectives and activities for the platform in Romania

Develop investment plan and other income generating activities

SECS concentrated resources in this area to identify best-suited companies for technical assistance and/or collaboration as well as in training its staff in areas of expertise related to EU funds accession.

SECS has contacted several consulting agencies/firms for developing project proposals. During February, SECS decided to work with Deloitte and Touche to develop project proposals, mainly funded by the EU. After signing the contract in March, Deloitte

⁵ Board members include: Aurora Liiceanu (President), Ionut Sibian, Bogdan Marinescu, Loredana Stan, Magdalena Cirstoiu, Cristian Vasile, Daniela Draghici

representatives have started evaluating the institutional capacity of SECS and identifying strong and weak points and main resources. A meeting with SECS staff will take place in April to discuss main areas of interest for project development. By the end of May 2007 the company will present SECS with main areas of interest for grant writing. Also by the end of May, SECS and Deloitte will propose the precise intervention areas for which grant proposals will be written to access structural funds (which will be available during the third Quarter of 2007).

Strengthen the organization of other RFHI partners

Identify potential donors in Europe, prepare funding proposals, and cultivate new donors

SECS participated in two workshops for funding from the Phare2005 program. During this workshop, SECS learned that in order to access Trans border funds from EU, SECS needs to have legally registered offices in local areas where programs will be implemented. Thus, a local NGO in Botosani (which qualifies for both Republic of Moldavia and Ukraine projects) was contacted, and SECS officially applied for a working space on their premises. The lawyer is processing the legal registration of a SECS branch in Botosani.

SECS also participated in the FOND General Assembly, as a member, to discuss agenda items such as politics of proximity. SECS also joined various FOND working groups. The FP Association in the Republic of Moldavia also expressed interest in a partnership with SECS, and a meeting took place with a Eurostep representative to encourage new EU states to access funds for development.

Develop and implement fund raising strategy

SECS attended a fundraising techniques workshop organized in March by FDSC.

IR 4. CITIZENS BETTER INFORMED ABOUT SOCIAL SERVICES, RIGHTS AND RESPONSIBILITIES

AWARENESS AND BEHAVIOR CHANGE OF POPULATION

Coordinate/participate in mass media campaigns and events

Produce and launch short videos with HIV and AIDS messages

As a result of funding constraints the planned TV production was replaced by the development of 20 four-five minute video spots featuring HIV and AIDS messages. Alin, a winner of the 2006 WAD photo contest developed the spots which will be enhanced by testimonials from youth public personalities such as singers and DJs from a youth TV station (Kiss TV). The spots will air in early May.

Support UNOPA efforts to increase its capacity to advocate for PLWHA

A contract with UNOPA was signed for a project to monitor and protect the rights of PLWHA. UNOPA member organizations were selected to participate based on interest, experience and quality of previous monitoring reports submitted to UNOPA. The methodology for the monitoring activity was completed in February, and an interview tool was developed. The 16 member organizations selected for the monitoring activity began the implementation in February and conducted 287 interviews with PLWHA from 15 districts and Bucharest.

The monitoring was complimented by services for the participants. People of different ages, socio economic status, and educational backgrounds were targeted. In cases of suspicion of rights violations the authorities were contacted, and information activities targeted those recently diagnosed.

Internal improvements in UNOPA's management occurred in January when the Board met to discuss Board internal rules, an integral part of the UNOPA Procedure Manual. These internal documents have been circulated among member organizations for feedback.

Support follow-up photo campaign for PLWHA

Similar to ongoing activities since 2002, the campaign in 2006/2007 has several components for addressing stigma and prevention. As a result of the success and popularity of the 2006 photo contest, a second contest will be organized during the next quarter. UNOPA will assume the role of organizer, and JSI R&T will have only an advisory role. This transfer of authority will ensure the sustainability of complex public events for HIV and AIDS.

Second photo contest for PLWHA scheduled to be larger than the first

This year's event will be larger than the last. A larger invitation list than in the previous contest will be developed and sent nationwide to PLWHA. The contest will have two sections: photos and photo stories (includes a series of photos presented together). The slogan of this year's contest is "A Day in My Life." Potential competitors will have access to a workshop on communicating anti-discrimination messages and on photo techniques. Ten prizes will be offered. US Embassy, USAID, and other public and private institutions will be involved throughout the contest, and a set of guidelines will be developed during the next quarter.

Provide TA to the CCM for the GFATM

JSI R&T/Romania was selected by the Country Coordination Mechanism (CCM) of the Global Fund (GFATM) to be part of the Technical Commission to evaluate Romania's proposal for Round 6 funds for TB and HIV and AIDS programs. JSI R&T evaluated more than 90 proposals, and the results are reported on the website of the Global Fund.

RFHI PROGRAM MANAGEMENT

FINANCIAL REPORTING

RFHI’s total expenditures as of March 2007 are in accordance with the planned figures for this date. Expenditures as well as the projections are closely monitored to make sure the allocation of funds will follow the planned expenditures, and all the funds will be properly spent until the end of each project component.

To increase **cost effectiveness**, market research was completed to determine the best quality/price for goods and services purchased. In this quarter as well as in the previous quarters savings were gained by decreasing travel and accommodation expenses, organizing trainings/meetings regionally and using the existing infrastructure of RFHI partners whenever possible to avoid additional rental costs.

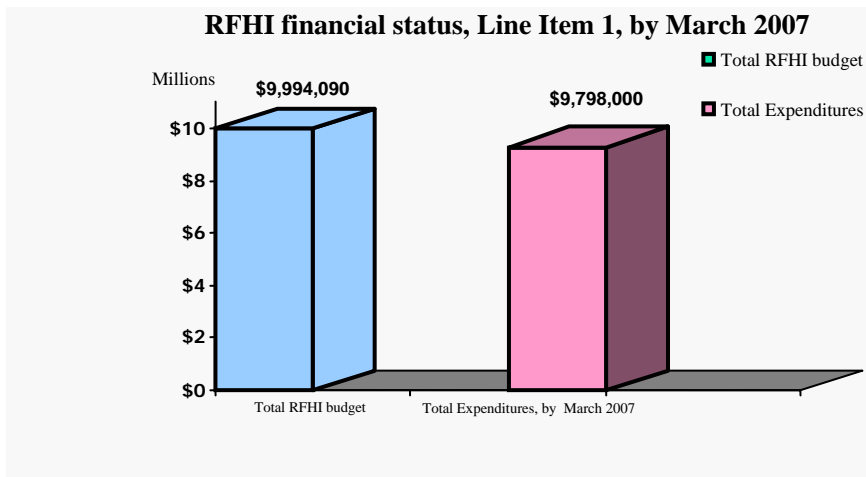
While some project components have already achieved their expected results and were closed-out, others are in different phases of implementation. The different stages of activity implementation have a direct effect on budget spending, as is illustrated in the following paragraphs.

VAT Reimbursement

Quarterly submissions for VAT reimbursement were sent to the Ministry of Foreign Affairs and Financial Administration, according to the Bilateral Agreement between the United States and Romania and procedures applicable to foreign institutions operating in Romania. In this quarter the financial audit for the quarter October – December 2007 took place and JSI’s VAT reimbursement request was approved.

Line Item 1

Expenditures during the quarter were closely monitored to ensure that they were in accordance with projected budget allocations. This quarter, a total of \$9,798,000 was expended (see graph below):

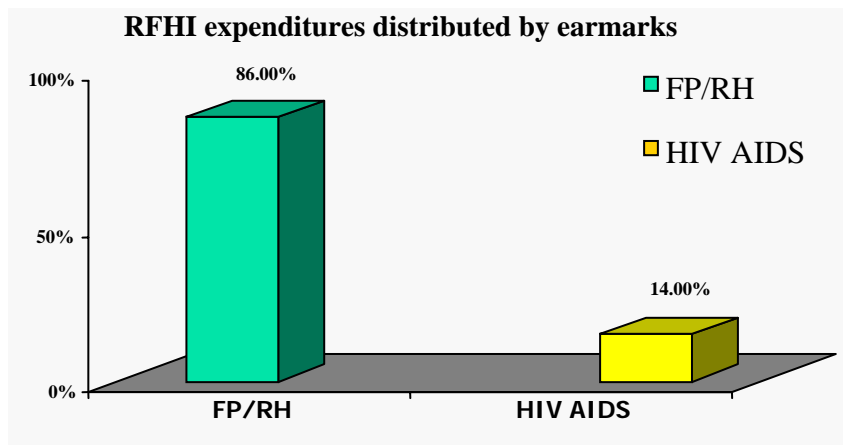


The remaining funds are planned for the following:

- Activities related with contraceptives security plan and LMIS in parallel with the provision of contraceptives in PAC/PP services
- **Close out of program activities related to line item 1 (dissemination conference, reports)**
- JSI's operation costs for Oct-Dec 2007

Expenditures for Line Item 1 were made according to the following distribution:

- **\$8,429,744 for RH (86%)**
- **\$1,368,256 for HIV/AIDS (14%)**



Line Item 2

In this quarter activities **Urban Poor and Roma Women** component ended its activities; Total expenses at the end of this quarter were in amount of \$3,492,000.

Line Item 3

The level of expenditures and accruals in this quarter increased for the **PAC/PP** component, as activities levels increased significantly. Expenditures were in the amount of **\$2,133,000** and were spent according to the following distribution: **\$2,001,000** was allocated to **FP/RH** and **\$134,000** was allocated to **HIV/AIDS** activities.

Line item 5

In this quarter RFHI coordinated avian influenza activities, ensuring that they were in accordance with the budget allocations. The total expenses and accruals for the **Avian Influenza** component were in the amount of **\$526,000**.

Line item 6

The level of expenditure for this quarter for the NGO sustainability component was slightly behind schedule. This was a result of the main beneficiary's preoccupation with close-out activities and the implementation of the PAC/PP component. The timeline for the LI6 activities was adjusted to guarantee that all planned activities will be performed and the budget spent accordingly. During this quarter the HIV/AIDS and NGO sustainability activities were implemented, ensuring an increase of expenditures, totaling \$511,400.

ADDITIONAL ACTIVITIES

Communicate and disseminate research findings at the national, regional and international level, with emphasis on utilization of results

Banking on Health research and roundtable

On February 15, 2007, JSI R&T hosted the roundtable “Financing and Training Needs of Small Scale Health Care Providers and Distributors in Romania.” The half-day meeting was facilitated by the consultants of the USAID-funded Banking on Health (BOH) project and its purpose was to present the BOH national research findings on family doctors and other private health care providers and distributors. The 24 participants included representatives of family doctors’ associations, the National Health Insurance House (NHIH), MOPH, NGOs active with training and supporting family doctors, banks and microfinance organizations, and donors.

The research was conducted from July – December 2006, and the breadth and depth is unique and particularly timely for FDs in Romania. The realities, problems, and hopes reflected in the findings will inform the primary health care reform process, particularly the contract between doctors and the NHIH. The research includes findings on: characteristics of family doctors and their practices, impact of the NHIH contract, financial standing of practices, financial standing including reinvestment, plans for business growth, impediments to improving their practices, and outlook on accessing financing.

Some of the research results confirmed the outstanding work of the Project. According to the survey, 52% of FDs provide FP counseling and an average of 22 FP client visits per month. In addition to FP counseling, family doctors provide condoms (45%), pills (43%), and injectables (31%) as well as counseling on IUDs (27%), tubal ligation (6%), and vasectomy (1%). This 52% correlates almost exactly with the percentage trained by the RFHI project in family planning. FDs in rural areas receive twice as many FP visits than those in urban areas. In focus groups and interviews doctors indicated concern that the supply of MOPH-provided FP products may end in the future, which would adversely affect their patients and practices.

Additionally, the vast majority (95%) of the family doctors plan to expand their businesses.

The research also informs the future of family planning products distribution after USAID funding ends, and MOPH assumes full responsibility for budgeting and distribution.

The full report of the meeting is currently under development and will be available in May.

Conference attendance

Health education in Romanian Schools National Conference, Eforie Nord, February 21-23, 2007

The Ministry of Education in partnership with MOPH/ PMU and Youth for Youth Foundation, under the Global Fund grant, organized the conference, and JSI R&T staff attended. Topics included: AI-related materials use in schools as well as World AIDS Day (WAD) commemorations in several districts in partnership with NGOs. A CD addressing food safety was presented to the teachers, and this may have created an opportunity for further collaboration for organizing a future event focused on food safety.

Sharing best practices and tools in addressing the sexual and reproductive health and rights (SRHR) of Roma, Bratislava, March 28-29

The two-day conference was organized by the IPPF (International Planned Parenthood Federation). The JSI R&T Roma health project (trainings, IEC materials, cultural workshops and manual, equipments for RHMs, etc.) was presented by the project coordinator with an RHM in two parallel group discussions called “Social and cultural issues in working with Roma minorities and Mediators.” The JSI products were well-received, especially by those organizations which work with Romanian Roma people in the outskirts of Paris and Dublin.

MAJOR ACTIVITIES PLANNED FOR NEXT QUARTER

- Host a study tour of a delegation from Ukraine, focusing mainly on LMIS and IEC/BCC in family planning – May 20-26
- Attend the Global Health Conference and present two posters, one on cervical cancer and the second one on AI in Washington, DC May 29- June 1
- Implementing the PAC/PP Roma component “Promoting birth spacing in Roma communities”
- Final version of the LMIS for PAC/PP project will be available for further implementation
- Automated LMIS reporting based on the InterCON software will become fully operational nation-wide
- The RFHI proposal for the National Contraceptive Security Plan for Romanian Family Planning Program will be prepared and available for consultation with and consensus building among stakeholders of the program.
- Print and disseminate Community Nurses Assessment Report
- Broadcast the AIDS programs on Kiss TV starting with May 2007
- Organize the second photo contest on AIDS related issues, focusing on combating stigma and discrimination that PLWHA face
- Attend a conference organized by Close to You in Iasi on May 30 on combating discrimination towards PLWHA
- Training of infectious diseases staff from the nine Regional Centers on AI and flu pandemic: April 24-26 at National Institute “Matei Bals”
- Organized a Workshop on EU funds accession on May 8 - 10, in Bucharest, at the Hilton facilitated by DSW
- SECS will finalize all protocols and manuals for clinic sustainability
- Workshop for professors of FP at medical faculties in Romania facilitated by Dr. Bob Hatcher and Dr. Carrie Zwiak
- Support LCG in Dolj to prepare the FP summer school for medical students

Table 1: List of acronyms

AI	– Avian Influenza
ANP	– Agency for National Programs
APHA	– American Association of Public Health
ARAS	– Romanian Association Against AIDS
BCC	– Behavior Change Communication
BOH	– Banking on Health
CHPS	– Center for Health Policies and Services
COC	– Combined Oral Contraceptives
COP	– College of Physicians
CSW	– Commercial Sex Workers
CYP	– Couple Years of Protection
DCWCFH	– District Commission for Women, Child and Family Health
DPHA	– District Public Health Authority
DSW	– World Population Development Foundation
DV	– Domestic Violence
DVC	– Dermato - Venerology Commission
DVH	– Department of Veterinary Health
EEIRH	– East European Institute for Reproductive Health
EOP	– End of Project
EU	– European Union
FD	– Family Doctor
FDSC	– Federation for the Development of Civil Society
FP	– Family Planning
GDMA	– General Directorate of Medical Assistance
GDP	– General Directorate of Penitentiaries
GDPH	– General Directorate of Public Health and State Inspection
GIES	– General Inspectorate for Emergency Situations
IDU	– Injecting Drug Users
IEC	– Information-Education-Communication
IPC	– Interpersonal communication
IPH	– Institute of Public Health
IPPF	– International Planned Parenthood Federation
IUD	– Intra Uterine Device
IUHPE	– International Union for Health Promotion and Education
JSI R&T	– JSI Research and Training Institute, Inc.
LCG	– Local Coordination Group
LMIS	– Logistic Management Information System
M&E	– Monitoring and Evaluation
MCHI	– Maternal and Child Health Institute
MESRE	– Mobile Emergency for Resuscitation and Extrication
MLSPF	– Ministry of Labor, Social Protection and Family
MND	– Ministry of National Defense
MOAI	– Ministry of Administration and Interior
MOPH	– Ministry of Public Health
MOT	– Ministry of Transportation
MOU	– Memorandum of Understanding
MSM	– Men having sex with men
NACPA	– National Authority for Children Protection and Adoption
NCHPP	– National Center for Health Promotion and Programs
NCPT	– National Center for Postgraduate Training
NGO	– Non Governmental Organization
NHIH	– National Health Insurance House
NIRDH	– National Institute for Research and Development in Health
NP1	– National Program 1
NP2	– National Program 2
NP3	– National Program 3
NVAFS	– National Veterinary Authority and Food Safety
OAMR	– Order of Nurses and Midwives in Romania
PAC	– Post-abortion Contraception
PLWHA	– People living with HIV or AIDS
PMU	– Program Management Unit
POP	– Progestin Only Pills
PPE	– Personal Protective Equipment
PSI	– Population Services International
RFHI	– Romanian Family Health Initiative
RH	– Reproductive Health
SECS	– Society for Education on Contraception and Sexuality
STI	– Sexual Transmitted Infections
TA	– Technical Assistance

TOT	–	Training of Trainers
UNDP	–	United Nations Development Programs
UNFPA	–	United Nations Population Fund
UNICEF	–	Directorate of Family and Social Assistance
USAID	–	United States Agency for International Development
VCT	–	Voluntary Counseling and Testing
WHO	–	World Health Organization
YFY	–	Youth for Youth
WAD	–	World AIDS Day