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MEETING ON TRAINING IN REPRODUCTIVE HEALTH FOR CCEE/NIS

Report on a WHO Meeting

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ABSTRACT

Responding to the needs for training in reproductive health, European public health training programmes have been increasingly offering training to participants from countries of central and eastern Europe/newly independent states of the former Soviet Union (CCEE/NIS). The WHO Regional Office for Europe convened a meeting to identify ways to better coordinate and cooperate in efforts made by the various schools, institutions and organizations with courses in reproductive health. After an overview of the current situation in reproductive health in CCEE/NIS (including the epidemiology of sexually transmitted diseases and HIV/AIDS) and a summary of the relevant research activities in the Region, participants presented their training programmes and discussed training objectives for the future. Two working groups were formed to address clinical/research and management/behavioural training needs, respectively. Finally, the participants drew conclusions and made recommendations on ways to better coordinate training activities and facilitate twinning arrangements between relevant organizations, calling for coordination by WHO and the establishment of a clearing-house based in the WHO Regional Office for Europe. Governments, donors and individuals were called upon to support and advocate reproductive health programmes and services.

Keywords

FAMILY PLANNING
REPRODUCTION
HEALTH
EDUCATION
CCEE
NIS

CONTENTS

INTRODUCTION

During the past few years the need to improve reproductive health care in the countries of central and eastern Europe (CCEE) and the newly independent states of the former USSR (NIS) has become evident to many international organizations, nongovernmental organizations, universities and schools of public health.

To address this need, the training activities of schools of public health in Europe have increasingly been directed at postgraduate students and professionals from CCEE/NIS. This has applied particularly to training in the areas of reproductive health and family planning. The emergence of many and varied training programmes was an impetus to gather together representatives of various training institutions.

In order to better coordinate and cooperate in these efforts, a Meeting on Training in Reproductive Health for CCEE/NIS was organized by the WHO Regional Office for Europe. It was attended by representatives of eight European schools of public health and other institutions offering courses in reproductive health.

Participants were directors or course coordinators from the London School of Hygiene and Tropical Medicine, the University of Exeter, the University of Debrecen, the University of Geneva, the University of Uppsala, the Baltic School of Public Health, the German Agency for Technical Cooperation (GTZ) and the International Planned Parenthood Federation (IPPF). The background documents and the participants are listed in Annexes 1 and 2, respectively. Ms M. Collumbien, Dr E. Ketting and Dr G. Nachtigal co-chaired the meeting. Ms P. Owen served as Rapporteur.

The main aims of the meeting were to:

- review the training orientation, course content and activities of the participating institutions and organizations;
- address aspects of reproductive health which may not be adequately covered by existing courses;
- address the recruitment of course participants; and

- identify appropriate evaluation mechanisms of the impact of courses in CCEE/NIS.

PRESENTATIONS

Presentations were made on:

- the current situation in CCEE/NIS in reproductive health and family planning as reflected in fertility rates, contraceptive prevalence, abortion incidence and maternal mortality statistics;
- the current situation of sexually transmitted diseases (STDs) as reflected in epidemiological studies, with particular attention to the incidence of HIV/AIDS;
- the course content, orientation and activities of each of the participating institutions.

Reproductive health in CCEE/NIS

There are approximately 98 million fertile women in the European Region, yet the fertility rate is not high by global standards. Although this alone may not raise cause for concern, closer inspection of reproductive health services and contraceptive prevalence in Europe reveals significant differences among countries.

Owing to the lack of appropriate contraceptives and counselling services, abortion remains the principal means of fertility regulation in the CCEE/NIS, sometimes equalling the number of live births, and in some cases even exceeding this by two or three times. The widespread use of abortion may have negative health consequences that are revealed in the epidemiology of maternal mortality. Induced abortion may be responsible for more widespread chronic disability such as pelvic inflammatory disease and secondary infertility. Few data exist concerning the long-term side effects of induced abortion. A further area of concern is the limited choice of contraceptives available in most CCEE/NIS.

Priorities with respect to assistance to CCEE/NIS had been identified in the areas of:

- contraceptive supplies
- gynaecological equipment
- training in quality of care in abortion services
- pre- and post-abortion counselling
- information, education and communication programmes
- data processing and analysis
- services for adolescents.

Priorities in information, education and communication concern:

- mass media programmes
- client information materials
- sex education curricula
- counselling skills training.

AIDS in CCEE/NIS

Based on the latest statistics compiled by WHO's Global Programme on AIDS, there are currently 4.5 million AIDS cases globally. Sexual transmission reportedly accounted for 70–80% of the cases of HIV infection. At present in NIS, there are approximately only 2000 cases of AIDS. There is concern that an increase in sexually transmitted diseases in the CCEE/NIS will lead to an increase in HIV transmission in these countries. An increase in the incidence of STDs has been noted in such countries as Belarus, Republic of Moldova and Ukraine. A similar trend exists in the Baltic states which have experienced an increase in cases of syphilis and chlamydia infection. Despite the overall increase in STD incidence, HIV incidence has so far remained stable in CCEE/NIS.

Given the apparent low incidence of HIV transmission in the Region, mobilizing support and resources for education activities on

HIV prevention will be difficult and will most likely not be seen as a priority by countries. This must be acknowledged and addressed in the development and implementation of sex education and HIV/STD prevention programmes.

WHO headquarters

The research and development activities of the WHO co-sponsored Special Programme of Research, Development & Research Training in Human Reproduction (HRP) were discussed. Specifically, HRP's current and future roles in reproductive health research issues were highlighted. Global research concerns of reproductive health are addressed through the establishment of multicentre research sites and collaboration centres. The importance to CCEE/NIS of research with scientists and working groups coordinating and designing projects of particular concern to their region was stressed. General support for these activities is provided by HRP through the promotion and granting of research fellowships and provision of technical assistance. In order to facilitate the implementation of research projects by trainees returning to their country, re-entry research grants are available.

Course curricula and orientation

The content of courses on reproductive health of the participating institutions varied from biomedical research and clinical training for doctors and midwives to programme development and management of reproductive health services and training for volunteer organizations in the operation of nongovernmental programmes.

Although there are some similarities in course content among the various training institutions, the training programmes collectively address a variety of topics and target groups. With respect to the recruitment of participants for these courses, it was noted that there had been some professionals from CCEE/NIS taking part in several training programmes of different organizations. It was recommended that information on participants' qualifications and previous course attendance be centralized in order to assist appropriate recruitment in the future.

DISCUSSION

Following a general discussion, the participants concluded that in order to improve efficacy it was necessary to define training objectives more clearly before addressing coordination and cooperation of training programmes with respect to content, methodology and target groups.

Consequently, training objectives were identified as:

- upgrading technical skills (including clinical, research counselling, management, advocacy) with attention to fostering empathy in trainers;
- developing new approaches (participatory, improved interpersonal skills, quality of care, community-based) with the aim of enhancing the application and dissemination of the skills which are acquired and ensuring equitable distribution of services.

To better focus the activities of the meeting to produce specific recommendations, two working groups were formed to look at the issues of clinical services/research training needs and management training needs, respectively. The working group discussions were framed around the following questions:

(a) which training needs exist?

(b) which training needs are not yet covered?

(c) which lessons were learnt from past experience in providing training courses?

(d) which strategies of cooperation and coordination among training institutions are suggested for the future?

Clinical services/research training needs

Contraception

The working group addressing clinical and research training needs recommended that emphasis be placed on improving knowledge of

contraceptives, especially in view of widespread myths and misunderstandings of methods, complications and effectiveness. Additional areas to be addressed regarding contraceptive knowledge include risk assessment and the provision of appropriate counselling services.

The working group identified ethical concerns in the areas of contraceptive quality assurance, counselling, clients' rights and the politics of contraception (e.g. priority choices, target groups, prescription practice).

The economics of contraception should be included in training programmes to highlight the cost of various reproductive health services and to raise awareness about equity in the distribution of these services.

Age-specific concerns

Adolescents are a particularly vulnerable group that require appropriate reproductive health information. Training programmes for professionals in clinical/research practice should emphasize reproductive health issues of importance to adolescents such as abortion, post-coital contraception, healthy sexuality, sexual abuse and sexually transmitted diseases.

Areas particularly relevant to adult reproductive health include birth spacing, breastfeeding, abortion, cervical cancer, breast cancer and hormone replacement therapy. Training should also address the differential needs of pre-menopausal and post-menopausal women.

Reproductive services

Training related to abortion should include education on different techniques, the management of complications and methods of pre- and post-abortion counselling. Other areas important to discussions of fertility regulation include the prevention of STDs, andrology and infertility management.

Training in general reproductive health services, including ultrasound, laparoscopy, IUD insertion and clinic visits, is essential. However, training should be commensurate to the resources available to programme participants in their country. Training that is specific to reproductive health research methods should include

courses on biomedical research, psychosocial research, acceptability studies and operational research.

Target groups

In order for training programmes to best address the specific needs of different professions, the size of target groups and the proportion of the population that would be feasible to reach should be determined. Groups of professionals that ought to be targeted by clinical reproductive health training programmes were identified as obstetricians/gynaecologists, midwives, general practitioners and pharmacists.

Assessment of needs

The working group suggested that a common methodology of needs assessment that can be applied in-country be developed. This would allow countries to take initiative in assessing their own needs and as a result experience a sense of ownership in the assessment process.

Management training

Training needs

Before the provision of appropriate management training in the area of reproductive health is possible, an assessment of training needs of individuals occupying managerial positions must be carried out. As needs vary widely between organizations, governments and individuals, coordination of training programmes is crucial to ensure that concerns are adequately addressed by training programmes.

It was further noted that there is a particular need for short management and project development training packages, following the logical framework approach. Organizations such as GTZ or the British Overseas Development Administration (ODA) have extensive experience in this type of training and are in a good position to offer it in countries.

The group identified the need for additional topics to be included in training programmes. Specifically, courses focusing on adolescent reproductive health programmes and the production of materials on information, education and communication were

mentioned. Additional areas highlighted for expansion in the training programmes were interpersonal communication, especially in the training of those who train medical personnel; managerial training with emphasis on the logical framework approach; and the psychological aspects of reproductive health.

Course logistics

The length of training courses and the time commitment required of participants were discussed. Particularly with respect to individuals in leading managerial positions in health services or health administration, the length of courses is a crucial issue – many employees cannot remain absent from their jobs for more than two weeks. Consultancies of international experts to countries may be the most appropriate training for this target group. Another suggestion for reducing the time requirements of participants is the development of well defined short training modules, which could be developed in cooperation between the various training institutions.

The most effective and appropriate implementation of training courses was discussed. A review of the cost-efficiency and the impact of external training versus in-country training with international consultants or a mixture of national and international consultants was suggested. A sequence of international training of leading professionals and trainers, followed by national training provided by these with the assistance of international consultants may be the most effective way to reach large numbers of professionals.

Recruitment of course participants

It was noted that university professors and sexologists have not been explicitly targeted by training courses. As both groups are influential in setting norms and standards in reproductive health and reproductive health training, these professionals ought to be reached in the recruitment efforts.

On the issue of the selection of candidates for courses, it was suggested that candidates receive questionnaires requesting information on previous courses they have attended; course organizers should also try to exchange information.

Teaching language

Language was discussed as a crucial issue in determining who participates in training programmes. By providing courses only in English or French, training institutions in western Europe reach only a small group of professionals. The feasibility of conducting training courses in-country, in the local language should be examined more closely. In order to increase the availability of training to CCEE/NIS professionals, several schools are considering offering their courses in Russian in one of the Russian-speaking countries.

Materials

It was concluded that there is an urgent need for training materials of international standard available in local languages. Furthermore, the local production of information, education and communication materials should be encouraged if continuity of efforts can be assured by financial support, perhaps by donor agencies.

Assessment of needs

The working group suggested that a common methodology of needs assessment that can be applied in-country be developed. This would allow countries to take initiative in assessing their own needs and, as a result, experience a sense of ownership in the assessment process.

Advocacy

The working group agreed that IPPF is in a unique position to provide advocacy training to women's groups, nongovernmental organizations, professional organizations, journalists and teachers. The participation of officials in the ministries of health of CCEE/NIS in training programmes was cited as vital to raising the awareness of reproductive health issues.

CONCLUSIONS

1. More and more professionals from CCEE/NIS are attending training courses in reproductive health and family planning offered by European schools of public health. This trend has

created an urgent need for cooperation and coordination among the training institutions to ensure that the training needs of the Region are adequately addressed.

2. Re-entry grants, administered by WHO headquarters, were discussed as a means to assist trained individuals with implementing reproductive health research projects in their own countries, thereby increasing the opportunities for individuals trained out of country to become "agents of change" in-country.

3. Increasing the awareness of reproductive health issues on the political agendas of CCEE/NIS was suggested as a priority. Involving women's groups, nongovernmental organizations, health institutions, universities, and individuals in the western as well as in the eastern European countries in fund-raising and education efforts may facilitate the process of setting priorities.

4. The training provided by various institutions was done in response to felt needs by countries and sponsors, but in a limited and non-coordinated fashion. The need for coordinated and collaborative research and training projects in the form of twinning arrangements was therefore emphasized. The representatives of the institutions participating in the meeting agreed to explore institutional linkages between their centres and other relevant organizations in the CCEE/NIS for sustainable long-term partnerships.

5. None of the objectives can be achieved unless the countries concerned, the international community, nongovernmental organizations and individuals commit themselves to supporting and advocating reproductive health programmes and services.

RECOMMENDATIONS

1. WHO should draw the attention of governments in the countries concerned and international agencies to the urgent need

for a concerted effort to provide training in reproductive health to the CCEE/NIS.

2. To support the sustainability of training programmes, training institutions should promote twinning arrangements between training, health, research and nongovernmental institutions, and explore possibilities of networking with other institutions active in the field.

3. To maximize the impact of the training provided, and to develop sustainable training programmes, a clearing-house for training activities in reproductive health should be established, preferably at the Regional Office.

   The tasks of the clearing-house would be:

   - to facilitate and coordinate training needs assessments for CCEE/NIS;
   - to create a database of existing training curricula and institutions;
   - to create a database of trainees;
   - to promote twinning arrangements between centres (hospitals, universities) in eastern and western Europe and in-country consultancies;
   - to follow up on training in countries;
   - to promote training courses; and
   - to raise funds to cover future training needs.

4. A proposal to cover the costs of the clearing-house (US $500 000 for two years, including a project coordinator and an administrator/secretary) should be submitted to various potential donors.

5. To measure the impact of training activities, appropriate training impact indicators should be defined.

6. The updating of the WHO/UNFPA document *Reproductive health and family planning in CCEE/NIS* could serve as one monitoring instrument for the longer-term impact of training.

7. The next meeting should take place at the time of establishment of the clearing-house or, should this project not receive funding earlier, in June 1996.

Annex 1

LIST OF BACKGROUND DOCUMENTS

Course curriculum	Netherlands School of Public Health
Course curriculum	University of Exeter
Course curriculum	Nordic School of Public Health
Course curriculum	London School of Hygiene and Tropical Medicine
Course curriculum	IPPF/GTZ joint course on Population and Development
Course curriculum	University of Debrecen
Course curriculum	University of Uppsala
Course curriculum	University of Geneva

Entre Nous, the European Family Planning Magazine, 25, 26–27 (1994), 28–29 (1995). United Nations Population Fund, Division for Arab States and Europe, and WHO Regional Office for Europe, Copenhagen.

Family planning and reproductive health in CCEE/NIS. United Nations Population Fund, Division for Arab States and Europe, and WHO Regional Office for Europe, Copenhagen, 1995.

Annex 2

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TARGET 16

HEALTHY LIVING

By the year 2000, there should be continuous efforts in all Member States to actively promote and support healthy patterns of living through balanced nutrition, appropriate physical activity, healthy sexuality, good stress management and other aspects of positive health behaviour.