Process Evaluation and Quality Assessment in Family Planning Services in Rosario, Argentina.

Marcelo R. Raffagnini, MD
Hospital Dr. Roque Saenz Peña.
Secretaria de Salud Pública de la Municipalidad de la Ciudad de Rosario

Tutor: Villar José. Department of Reproductive Health and Research, Family and Community Health Cluster, WHO

WHO/GFMER/IAMANEH
Postgraduate Training Course in Reproductive Health
Geneva 2004
Preferred methods for impact assessment in family planning:

- Experimental Studies (Randomised trials)
- Quasi-experiments (non randomised)
- Observational Studies
Objectives
General aim:

- To evaluate the effects of a new component included into the Responsible Procreation Program (RPP) directed towards the promotion, prevention and assistance in reproductive health, on a selected group of women at « high risk », in terms of their behaviors regarding the acceptance of the program, as well as their sociocultural and migratory characteristics, conceptions and practices related to sexuality and reproductive health.
Specific aims (1)

• 1. To analyze the effects of “Reproductive Health Counselling” as a new strategy to improve the inclusion into the program of a selected group of women at “high risk”, carried out at two Municipal Maternity‘s Hospitals, in the gynaecology services of Hospitals Sáenz Peña, Carrasco, Alberdi and Vilela, Martin Maternity and in Primary Health Care Centers.
Specific aims (2)

2. To analyze the behaviors of a selected group of women defined at high risk, included into the RPP, regarding:

- contraceptive methods choice,
- place of assistance,
- appointment of the citations,
- level of satisfaction with the service provided,
- reasons for drop-out.
Methods
Methods

A.- Study Population

- women post abortion
- women post partum (4 or + children, or diseases complicating pregnancy outcomes)
- HIV/AIDS
- adolescents (less than 20 years old)
Methods

B.- Methodology

- selected cases: 300 post partum/abortion - 450 adolescents;
- informed consent procedure;
- structured interview (questionnaire)
- counselling activities
- follow up and counselling reinforcement
- last interview regarding quality of care
Methods

B.- Methodology

• selected cases: 300 post partum/abortion - 450 adolescents;
• informed consent procedure;
• structured interview (questionnaire)
• counselling activities
• follow up and counselling reinforcement
• last interview regarding quality of care
Structured interview (questionnaire)

• To inquire knowledge of sexual and reproductive health, prevention of STD, about RPP and available services, contraceptives options.

• To identify information sources to improve knowledge

• To report characteristics or RPP, services and options that it offers

• To investigate advantages or barriers for access to services
Methods

B.- Methodology

• selected cases: 300 post partum/abortion - 450 adolescents;
• informed consent procedure;
• structured interview (questionnaire)
• counselling activities
• follow up and counselling reinforcement
• last interview regarding quality of care
Counselling activities

- Women who have not acceded to RPP after two months from the first contact
- Women who adopted a contraceptive method, and did not perform the medical control or did not get the monthly provision.
Methods

B.- Methodology

- selected cases: 300 post partum-abortion
  - 450 adolescents;
- informed consent procedure;
- structured interview (questionnaire)
- counselling activities
- follow up and counselling reinforcement
- last interview regarding quality of care
Methods

C.- ORGANIZATION
WORK GROUP

RESEARCHERS

FIELD COORDINATOR

MANAGEMENT TEAM MEMBER
DISTRICT # 1

MANAGEMENT TEAM MEMBER
DISTRICT # 2

MANAGEMENT TEAM MEMBER
DISTRICT # 3

MANAGEMENT TEAM MEMBER
DISTRICT # 4

MANAGEMENT TEAM MEMBER
DISTRICT # 5
Work Group

- To elaborate the basic protocol;
- To implement the new record system use;
- To elaborate the questionnaires;
- To specify Health Promoters procedures and responsibilities;
- To qualify and to supervise Health Promoters actions;
- To establish counselling and interviews procedure guidelines.
Methods: D.- Analysis Plan

Two analytical lines are defined:

- 1st to understand women behavior in relation with the RPP, that they remained or left the program and their satisfaction with the received care.

- 2nd line is effects measurement of «Counselling» strategy. (the general information produced by services months previous to study period, will be take as comparison reference.)
Results:

- “do communities with a stronger family planning program presence, tend to have higher contraceptive prevalence rates and lower fertility rates than those with lesser program presence?”
THANK YOU