

## Frontiers in Reproductive Health (FRONTIERS) Program

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**Frontiers in Reproductive Health (FRONTIERS)** is a global program that uses operations research (OR) in family planning and reproductive health to test alternative approaches to service delivery for the purpose of improving delivery systems and/or influencing related policies. FRONTIERS is active in 29 countries worldwide supporting innovative research and the utilization of these results on topics including access to services, contraceptive options, cost and sustainability, gender and empowerment, postabortion care, quality of care, sexually transmitted infections and HIV/AIDS, and youth. FRONTIERS also focuses on fostering the capacity within developing country institutions to both produce and use operations research. Partner institutions are Family Health International and Tulane University School of Public Health and Tropical Medicine. FRONTIERS is funded by the United States Agency for International Development (USAID). See <http://www.popcouncil.org/frontiers/>

The Population Council is an international, nonprofit, nongovernmental organization that seeks to improve the well-being and reproductive health of current and future generations around the world and to help achieve a humane, equitable, and sustainable balance between people and resources.

### Books & Conference Reports

- *Designing HIV/AIDS Intervention Studies: An Operations Research Handbook*. Fisher and Foreit, 2002  
<http://www.popcouncil.org/pdfs/horizons/orhivaidshndbk.pdf>
- *Anti-Trafficking Programs in South Asia: Appropriate Activities, Indicators and Evaluation Methodologies*. Huntington, 45 pp., 2002. [http://www.popcouncil.org/pdfs/rr/anti\\_trafficking\\_asia.pdf](http://www.popcouncil.org/pdfs/rr/anti_trafficking_asia.pdf)
- *Frontiers Capacity Building: An Overview*. 10 pp., 2002.  
[http://www.popcouncil.org/pdfs/frontiers/Capacity\\_Bldg/cboverview.pdf](http://www.popcouncil.org/pdfs/frontiers/Capacity_Bldg/cboverview.pdf)
- *Willingness to Pay Surveys for Setting Prices for Reproductive Health Products and Services: A User's Manual*. Foreit and Foreit, 63 pp., 2001.  
[http://www.popcouncil.org/pdfs/frontiers/Capacity\\_Bldg/WTP\\_Manual.pdf](http://www.popcouncil.org/pdfs/frontiers/Capacity_Bldg/WTP_Manual.pdf) and in Spanish  
[http://www.popcouncil.org/pdfs/frontiers/Capacity\\_Bldg/WTP\\_Manual.pdf](http://www.popcouncil.org/pdfs/frontiers/Capacity_Bldg/WTP_Manual.pdf)
- *Postabortion Care: Lessons in Operations Research*. Huntington & Piet-Pelon, eds., 218 pp., 1999.  
[http://www.popcouncil.org/pdfs/pac\\_lessons.pdf](http://www.popcouncil.org/pdfs/pac_lessons.pdf)
- *Reproductive Tract Infections: A Set of Fact Sheets*. 1999.  
<http://www.popcouncil.org/pdfs/rtifactsheets.pdf> and in Spanish  
[http://www.popcouncil.org/rhfp/hojas\\_informativas/portada.html](http://www.popcouncil.org/rhfp/hojas_informativas/portada.html)
- *Strengthening Reproductive Health Services in Africa through Operations Research*. Africa OR/TA Project II. 130 pp., 1999.
- *Family Planning Operations Research: A Book of Readings*. Foreit and Frejka, eds., 398 pp., 1998.
- *Handbook for Family Planning Operations Research Design*. Fisher et al., 77 pp., 1998.

### Publications by Region and Country

#### **Africa**

**Bénin - Target Men to Increase Use of Health Services**— In rural Bénin men control household resources and make most decisions regarding childbearing and use of health services. Programs to improve maternal and child health should educate community members on the need to invest in health care and seek prompt treatment for

illness. Reproductive health programs should also educate men about family planning and address women's concerns about contraceptive side effects. (ORS #18)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/ORSum18.pdf>

**Burkina Faso - *Upgrading Postabortion Care Benefits Patients and Providers*** – Training hospital staff to improve emergency medical care for women with miscarriages and unsafe abortions leads to better patient care, shorter hospital stays, lower costs, and increased contraceptive use. Local anesthesia is essential for pain control. Physicians trained to provide postabortion care have trained other medical teams in Burkina Faso as well as in Senegal, Guinea and Haiti. Health officials from other West African countries have expressed interest in PAC training. (ORS #3) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum3.pdf>

**Burkina Faso and Mali - *Female Genital Cutting Harms Women's Health*** – Women in Burkina Faso and Mali who have had their genitals cut are more likely to have gynecological and obstetrical problems, including bleeding, internal scarring, vaginal narrowing, and complications during childbirth. More severe cutting increases a woman's risk of other reproductive health problems. (ORS #10)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum10.pdf>

**Ghana - *Community Workers Can Communicate Messages for STI and HIV/AIDS Effectively*** –

Community-based distribution programs in Ghana have shown that contraceptive distributors can also provide education on sexually transmitted infections, including HIV/AIDS, and maternal and child health. Overall, however, performance of CBD agents remains low. CBD programs can be improved by establishment of national standards and guidelines, better record-keeping, and more compensation for agents. (ORS #21)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/ORSum21.pdf>

**Kenya - *Community Sensitization Must Precede Alternative Coming-of-Age Rite*** – Where cultural support for female circumcision is weakening, communities are more likely to accept sensitization messages encouraging abandonment of the practice and to participate in an alternative coming-of-age ceremony for girls that does not involve genital cutting. However, such alternative ceremonies must be preceded by extensive sensitization that changes attitudes and must be tailored to fit cultural norms for rite of passage. (ORS #27)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum27.pdf>

**Kenya - *Offer Family Planning on Hospital Wards*** – The most effective way to ensure that women being treated for incomplete abortion obtain family planning is to offer information and services in hospital gynecological wards, this study concluded. Having ward staff provide contraceptives on the ward is more convenient than having regular family planning providers visit the ward or having patients go to a separate clinic. Findings from this study have been key in informing the expansion plan for PAC in Kenya. (ORS #5)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum5.pdf>

**Kenya - *Identifying RTIs Remains Problematic: Prevention Is Essential*** – More than half of the family planning and antenatal clinic clients in Nakuru, Kenya had one or more reproductive tract infections (RTIs). Roughly one-third of these infections were sexually transmitted. Using syndromic management algorithms based on the woman's reported symptoms, providers correctly classified only 5 to 16 percent of women who later tested positive with laboratory results. Given the limitations of syndromic management, programs need to stress prevention of sexually transmitted infections (STIs). (ORS #9)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum9.pdf>

**Kenya - *On-Site Antenatal Syphilis Services Are Cost-Effective*** – An on-site model that provides antenatal clients with same-day screening and treatment for syphilis resulted in higher treatment rates for positive clients and their partners at an affordable cost to the system. Services could be sustained by training all nurses in syphilis screening and treatment, and ensuring a steady supply of essential supplies for testing and treatment. (ORS #22) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/ORSum22.pdf>

**Mali - *FGC Excisors Persist Despite Entreaties*** – Programs to persuade traditional practitioners to discontinue the practice of Female Genital Cutting (FGC) are ineffective. Interventions must address the demand for FGC rather than focusing on the supply. (ORS #2) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum2.pdf>

**Mali - *Empower Health Workers to Advocate against Female Genital Cutting*** – Health providers are an important potential resource in campaigns to eradicate female genital cutting (FGC), but a concerted effort is needed to ensure that they can become effective behavior change agents. After a three- day training course, providers' knowledge about FGC increased, but few of them counseled their clients about FGC. (ORS #11)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum11.pdf>

**Senegal - Train More Providers in Postabortion Care** – Improving postabortion care (PAC) services benefits patients and reduces costs. Providing PAC services can result in shorter hospital stays, decreased patient costs, better communication between providers and patients, and increased acceptance of contraceptive use by women treated for abortion or miscarriage. Local anesthesia is needed for pain control. (ORS #4)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum4.pdf>

**South Africa - Who Uses Youth Centers and Why?** – Less than one-third of local youth have ever visited the youth centers in this study area of South Africa. More than half of the youth center visitors were sexually experienced, but visiting a center had little discernible effect on reproductive health knowledge or safer sexual behavior. Youth want friendly, non-judgmental providers. Youth-only facilities and young providers are less important to them. (ORS #23) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum23.pdf>

**South Africa - Providers Should Encourage Sexually Active Youth To Use Condoms** – Many sexually active young people in South Africa are knowledgeable about the sexual transmission of HIV/AIDS, but they do not use condoms consistently. Service providers can do more to promote condom use among youth by placing condom dispensers in private places. Service providers should counsel youth on correct condom use and safer sexual practices. (ORS #24) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum24.pdf>

**Zambia - Peer Educators Can Promote Safer Sex Behaviors** – Two interventions – condom distribution by peer educators and small business loans to youth aged 14-19 – led to safer sexual practices among adolescents in peri-urban communities. Both program participants and their peers reported an increase in abstinence and monogamy and a decrease in sexually transmitted infections. Youth in the intervention areas were better informed about ways to prevent HIV/AIDS than those in the control group. However, the interventions did not lead to greater use of contraception or condoms for dual protection. (ORS #17)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/ORSum17.pdf>

**Zimbabwe - RTI Screening Methods for Women Are Not Cost-effective** – Existing methods for screening reproductive tract infections among family planning clients are not cost-effective: laboratory tests are too costly, and syndromic case management often leads to missed infections and unnecessary treatment. Health programs should continue to emphasize preventive measures—changing individual behavior and promoting condom use. (ORS #1) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum1.pdf>

**Zimbabwe - CBD Roles Modified to Address Zimbabwe's HIV/AIDS Crisis** – A review of the Zimbabwe National Family Planning Council's community-based distribution program revealed a need to reorient the program to fit the country's changing reproductive health needs—specifically the country's growing HIV/AIDS crisis. The organization incorporated the study findings in a pilot program to improve organizational efficiency while focusing agents' efforts on the HIV/AIDS crisis. (ORS #29)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum29.pdf>

## **Asia/Near East**

**Egypt - Family Planning Providers Should Encourage Clients to Discuss Sexual Problems** –

Both clients and providers welcomed the inclusion of discussions on sexuality during family planning counseling. Providers who were trained in sexuality counseling were more likely to discuss sexual matters with clients. Clients preferred to have the provider initiate the discussion. (ORS #7)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum7.pdf>

**Egypt - Expand Access to Postabortion Care** – Training providers and introducing a case management protocol led to improved postabortion care at ten government and teaching hospitals in Egypt. Patients reported shorter waits and greater satisfaction with the medical services they received. Physicians adopted treatment methods associated with lower complications and provided more health-related information to patients. (ORS #12)

<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum12.pdf>

**Egypt - NGOs Need to Join Forces to End FGC** – Fifteen Egyptian non-governmental organizations are actively involved in programs to eradicate the practice of female genital cutting. To make these programs more effective, NGOs should form coalitions, engage in advocacy, train activists in communication skills, and evaluate the impact of their programs. (ORS #14) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum14.pdf>

**Egypt - Encourage Journalists to Cover Reproductive Health** – After Egyptian print journalists attended a series of briefings on reproductive health issues, their reporting of these issues improved. Health agencies can improve coverage of reproductive health issues by providing a regular flow of accurate information to a broad range of journalists. (ORS #15) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum15.pdf>

**Indonesia - Coordinated Studies Are Needed to Assess Trends**– Longitudinal studies with consistent indicators and representative study populations are needed to identify changes in maternal and child health indicators. (ORS #8) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum8.pdf>

**Indonesia - Train Journalists to Write about Reproductive Health** – After Indonesian journalists received background information and training on reproductive health issues, the quality of their coverage improved. However, continued efforts are needed to provide media representatives with ideas for news stories and feature articles and training in use of research findings. (ORS #16)  
<http://www.popcouncil.org/pdfs/frontiers/orsummaries/ORsum16.pdf>

**South Asia - Clarify Goals and Expand the Reach of Anti-Trafficking Programs**– Laws to eliminate human trafficking in South Asia should uphold international covenants and human rights standards to ensure that both citizens and non-citizens receive humane treatment. Programs to oppose trafficking should develop clear objectives and indicators to demonstrate success and point out directions for future operations. (ORS #28)  
<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum28.pdf>

**West Bank and Gaza - Stress the Importance and Cost-Effectiveness of Postpartum Care**– Palestinian women have access to antenatal and postpartum care as well as family planning services, although few women seek postpartum services. Both clients and health care providers have limited knowledge about reproductive health (RH). RH services could be improved by the provision of standardized protocols for RH care in primary health care clinics and pre- and in-service training for providers. (ORS #20)  
<http://www.popcouncil.org/pdfs/frontiers/orsummaries/ORSum20.pdf>

## **Latin America**

**Ecuador - Use Commercial Marketing to Increase Sustainability** – An analysis of CEMOPLAF's product marketing program found that net revenue is the best measure of sales performance, since it takes product costs into account. Sales agents in large cities had the largest sales and generated most of the profits, whereas sales agents in smaller cities had lower sales volume. Program managers should set up a routine financial analysis system so that they can monitor product sales, profits, and unit costs for sound decisionmaking. (ORS #19) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/ORSum19.pdf>

**Honduras- Postpartum and Postabortion Patients Want Family Planning** – When providers at five Honduran hospitals were trained to provide family planning counseling and methods to postpartum and postabortion women, the proportion of women receiving this information doubled, and the proportion who received a method tripled. The intervention, a scale-up of a previous operations research project, will be expanded to five more hospitals. (ORS #25) <http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum25.pdf>

**Honduras - Marketing New Reproductive Health Services Is Cost-Effective** – At six rural health centers in Honduras, the use of ten-minute talks and leaflets to advertise the availability of IUD insertions, DMPA injections, and Pap smears increased use of the services at an affordable cost. The marketing efforts will be expanded to clinics where nurse auxiliaries have been trained to provide these services. (ORS #26)  
<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum26.pdf>

**Peru - Managers Must Monitor Quality of Care Regularly**– Family planning providers at Peru's government health facilities conform to national care guidelines in that more than 90 percent of them treat their clients respectfully and offer them a wide choice of contraceptive options. Nevertheless, the majority of providers could further improve the quality of care by giving clients more information about correct use and possible side effects of their chosen method and by screening for contraindications. A 100 percent quality standard ought to be established to avoid violation of individual reproductive rights. (ORS #6)  
<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum6.pdf>

**Peru - Tell Clients How to Use Their Chosen Method** – Family planning providers in Peru need to focus more closely on giving clients relevant information on their chosen method and asking key questions in order to make the most efficient use of the time available for client counseling. (ORS #13)  
<http://www.popcouncil.org/pdfs/frontiers/orsummaries/orsum13.pdf>

## **Interregional**

**Interregional - Using Men as Community-based Distributors of Condoms** – The HIV/AIDS epidemic has led program managers to seek approaches to family planning (FP) that will also help combat HIV/AIDS and other sexually transmitted infections (STIs). These approaches include use of simplified STI diagnosis and treatment protocols and promotion of male and female condoms. One aspect of condom promotion that is receiving increased attention is the idea of adding men to community-based distribution (CBD) programs in order to increase the use of condoms as dual protection against STIs and pregnancy. (PB #2)  
Summary: [http://www.popcouncil.org/pdfs/frontiers/pbriefs/male\\_CBD\\_sum.pdf](http://www.popcouncil.org/pdfs/frontiers/pbriefs/male_CBD_sum.pdf)  
Full brief: [http://www.popcouncil.org/pdfs/frontiers/pbriefs/male\\_CBDs\\_brf.pdf](http://www.popcouncil.org/pdfs/frontiers/pbriefs/male_CBDs_brf.pdf)

**Interregional - Meeting Women's Health Care Needs After Abortion** – Women who seek emergency treatment for abortion complications – bleeding, infection and injuries to the reproductive tract system – should be a priority group for reproductive health care programs. These women often receive poor-quality services that do not address their multiple health needs. They may be discharged without counseling on postoperative recuperation, family planning, or other reproductive health issues. (PB #1)  
Summary: [http://www.popcouncil.org/pdfs/frontiers/pbriefs/pop\\_coun\\_summary\\_sept2000.pdf](http://www.popcouncil.org/pdfs/frontiers/pbriefs/pop_coun_summary_sept2000.pdf)  
Full brief: [http://www.popcouncil.org/pdfs/frontiers/pbriefs/Program\\_Briefs\\_1001900.pdf](http://www.popcouncil.org/pdfs/frontiers/pbriefs/Program_Briefs_1001900.pdf)

## **FRONTIERS Collaboration on Quality of Care**

**New Perspectives on Quality of Care.** Population Reference Bureau/MEASURE Communications and Population Council/FRONTIERS. 2002.

- “Overview of Quality of Care in Reproductive Health: Definitions and Measurements of Quality,” Creel, Sass and Yinger, 2002. No. 1 <http://www.popcouncil.org/pdfs/frontiers/QOC/QOC-Overview.pdf>
- “Client-Centered Quality: Clients’ Perspectives and Barriers to Receiving Care,” Creel, Sass, and Yinger, 2002. No. 2 <http://www.popcouncil.org/pdfs/frontiers/QOC/QOC-clients.pdf>
- “Providers and Quality of Care,” Lantis, Green, and Joyce, 2002. No. 3 <http://www.popcouncil.org/pdfs/frontiers/QOC/QOC-providers.pdf>
- “Best Practices in Client-Provider Interactions in Reproductive Health Services: A Review of the Literature,” Murphy, 2002. <http://www.popcouncil.org/pdfs/frontiers/QOC/QOC-LitReview.pdf>

## **FRONTIERS CD-ROM**

**Frontiers in Reproductive Health Electronic Library 1990-99.**

Started in 1998, FRONTIERS builds on three previous Population Council operations research and technical assistance projects funded by USAID. This CD-ROM represents an electronic archive of materials produced by three regional projects that conducted more than 370 studies that used operations research to improve the quality, availability, and sustainability of family planning and reproductive health care services. This CD-ROM includes final reports, workshop reports, OR summaries, policy briefs, surveys, other special reports, and photographs.

## **Ordering**

To obtain any of these publications free of charge, please email your request to [FRONTIERS@pcdc.org](mailto:FRONTIERS@pcdc.org). Additionally, you may send a written request to: FRONTIERS Program, Population Council  
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All requests should include your name, address, phone number and email as well as a list of the publications (including quantities) being ordered. If you have any additional questions, please contact [FRONTIERS@pcdc.org](mailto:FRONTIERS@pcdc.org).

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