Women's Wellness Centers Fill Primary Care Role

By Julia Ross

For years, the unmet health needs of women in the NIS have resulted in high abortion rates, increasing numbers of high-risk pregnancies and untreated sexually-transmitted diseases. Scarce information about family planning methods and ineffective screening and educational programs for breast and cervical cancers are just a few of the factors that have contributed to the poor status of women's health in the region.

In an effort to reverse these trends, AIHA launched its Womens Wellness Center (WWC) initiative in the summer of 1997, with the goal of providing comprehensive, primary care and health education to teenage girls and women of all ages. Eighteen months later, 12 centers scattered throughout the NIS are making an impact on the lives of women by offering a range of needed services, including family planning counseling, cancer screening and education, perinatal care and healthy lifestyle promotion. Using a client-centered approach that incorporates multidisciplinary teams of physicians, nurses, midwives, psychologists and health educators, the centers are representative of an NIS primary care model that works, say partners who have participated in the initiative.

"For the first time, the concept of collaborative, integrated care is being used," said Richard Derman, MD, MPH, a professor of Obstetrics/Gynecology and Public Health at the University of Illinois-Chicago (UIC) who worked with partners in Tashkent, Uzbekistan to establish a WWC at Tashmi II Maternity Center. "In the past, it was a tertiary care system where someone would come in only if they had a problem. Now, the same doctors see the patients, nurses are actively involved in education and prevention is built into every single visit. This had not happened before in Tashkent."

In Central Asia, where birth rates remain relatively high compared to other NIS countries, the centers’ expanded reproductive health services are especially welcome. Tashkent's WWC, for example, fields about 540 patient visits per month, the majority of which are from married women in their 20's and 30's. While pregnancy tests and breast exams are among the most popular of the center’s services, older women are increasingly taking advantage of menopausal education and treatment--a unique offering for a clinic in this part of the world.

An emphasis on preventive care has also taken root in neighboring Almaty, Kazakhstan, where the WWC at Almaty Perinatal Center averages 360 patient visits per month. In August 1998, the center provided breast self-exam education to 135 patients, breastfeeding education to 86 patients and education on family planning methods to 80 patients. Additionally, 90 patients received breast exams and 71 received pap smears.

At Polyclinic Number 11 in Chisinau, Moldova, the "Dalila" Women’s Wellness Center has made prevention of unwanted pregnancies a priority. From mid-1997 to mid-1998, the abortion rate in Chisinau plummeted 30 percent--a change that the center contributed to through its commitment to reproductive health education and family planning counseling. About 65 percent of the center’s 788 monthly patient visits are from teenage girls, who accounted for half the city’s abortions prior to the WWC’s opening.

"Nowadays there is a critical situation in Moldova in reproductive health, which is characterized by high rates of unwanted pregnancy and abortion, insufficient use of modern contraception, and an increase in the number of sexually-transmitted diseases and AIDS, associated with inadequate sex education and often a lack of information,” said center director Boris Gilca, MD.
A new emphasis on confidentiality has made adolescent patients feel comfortable seeking treatment or information from the "Dalila" center, added Cheri Galbraith project coordinator for AIHA’s Chisinau-Minneapolis, Minnesota partnership.

“This is a whole new realm of care delivery for these areas, as I see it, where the patient is actually educated about their bodies and encouraged to take an active part in their own health,” she said. “We are trying to reeducate the population [in Moldova] to do preventive care rather than only see a physician when they have a health crisis, similar to what we are doing here in the US.”

According to Ludmila Huzul, WWC director at L’viv Railway Hospital in Ukraine, patients are embracing this new primary care approach. “During the first weeks the center was open [in June 1998], practically every patient sought help because of an existing health problem,” she noted. “But, currently, more than half of those who visit the center do not have any apparent complaints, and come only because they think it necessary to ‘monitor their health.’”