

# Community Outreach Through WWCs

## Education Reaches Beyond Traditional Populations Served by Women's Wellness Centers

BY BARBARA RUBEN

While women wait for their appointments at Odessa's Women's Wellness Center (WWC), they watch video tapes or listen to lectures by nurses and physicians on topics ranging from preventing sexually transmitted diseases (STDs) to examining their breasts for lumps. Specialists in adolescent health from Tashkent's WWC visit high schools to teach one of the first sex education classes in Uzbekistan. And in Moldova, victims of domestic violence who once didn't know where to turn can visit a crisis center at the Dalila WWC or talk to counselors on a hot line. These are just some of the ways WWCs are reaching out to individuals beyond their walls and educating members of the communities they serve.

At each of the 12 WWCs sponsored by AIHA partnerships, women can receive pap smears, pre-natal healthcare, and screening for HIV, but these and other clinical services are only part of the centers' mission. A large part of their work focuses on helping women better understand how to prevent disease and take charge of their own reproductive health. Many centers reach out to women in rural areas who have had little access to education and healthcare tailored to their diverse needs. Some send specially trained staff to schools to teach teenagers about family planning, drug abuse, and other health issues in an effort to reduce high abortion rates, stem the sometimes exponentially growing number of AIDS cases, and help give adolescents a jump start on the lifestyle practices that will keep them healthier throughout adulthood. Other centers focus on helping women understand the changes they face through menopause and beyond, a period that has until recently received little attention from the medical community.

Using brochures, posters, videos, and support groups, WWC staff reach out to patients who visit their centers and distribute materials to oblast hospitals, remote feldsher stations, and even summer camps. Although the centers all have a common origin within an AIHA partnership, many have broadened their scope of support, and some programs are now sponsored by other non-governmental organizations (NGOs). The outreach efforts

of the three WWCs profiled below illustrate the diverse array of services the centers provide and how they are bringing communities together.

### Chisinau, Moldova

Domestic violence is nothing new in Moldova. But talking about it is. Over the past year, the Dalila WWC has operated a hot line to respond to women's concerns about abuse and provide counseling. Six months ago the center began working with a lawyer to help victims of domestic violence. In the coming year, Dalila hopes to open a crisis center and help with a new municipal shelter for battered women. The center has also produced a brochure called "The ABCs of Domestic Violence."

"Domestic violence is a big problem here due to cultural traditions that in some ways prohibit a woman from talking about violence to others outside the home," says Dr. Boris Gilca, the center's director. "We need more awareness campaigns, involvement by officials, and changes in legislation."

To help better understand how to reach out to and help battered women, the center worked with partners in Minneapolis, Minnesota, who linked them with Connect/US-Russia, a US NGO working to reduce domestic violence around the world. A 10-member multidisciplinary team from Chisinau spent two weeks in Minneapolis last September learning about the prevention of domestic violence and intervention techniques. Last January, the Moldovan team sponsored a national training conference for professionals from fields ranging from psychology and medicine to law.

Connect/US-Russia also invited Moldovan leaders, including First Lady Antonina Luchinschi and Chisinau Mayor Serafim Urechean, to visit Washington, D.C. and Minneapolis last June (see *Connections*, www.aiha.com, July 1999) to gather information about models of domestic violence intervention in the US.

In addition to its domestic violence program, Dalila provides a variety of other education and outreach services. The center sees about 50-60 patients per day, mainly from the surrounding Botanica district of Chisinau, as well as some from elsewhere in the city and country. "One of our primary activities is education, information and instruction in the domain of reproductive health," says Gilca. "Classes are





taught on the subjects of preventive medicine for a healthy lifestyle, contraception, family planning, and the prevention of STDs (including HIV/AIDS) and domestic violence.” As elsewhere in the NIS, the reported number of HIV cases in Moldova has skyrocketed over the past few years. In 1996, there were 55 cases; in the first six months of 1999 there were more than 900 reported, with nearly 60 percent of those infected between the ages of 20 and 29.

In collaboration with the Peace Corps, the WWC hosted educational seminars for adolescents both in Chisinau and rural areas. Between January and July 1999, 908 teens attended a seminar entitled “What Does it Mean to be an Adolescent?” The WWC has also printed several brochures, including ones on gynecological tests and procedures, vaginal and cervical infections, and STDs. In addition, they produced a brochure that includes a condom and information about the clinic’s services and other health resources. These materials have been distributed through family planning offices in Moldova.

Last November, the center launched a month-long campaign called ProHealth that included radio shows and educational seminars about reproductive health, gender equality, and

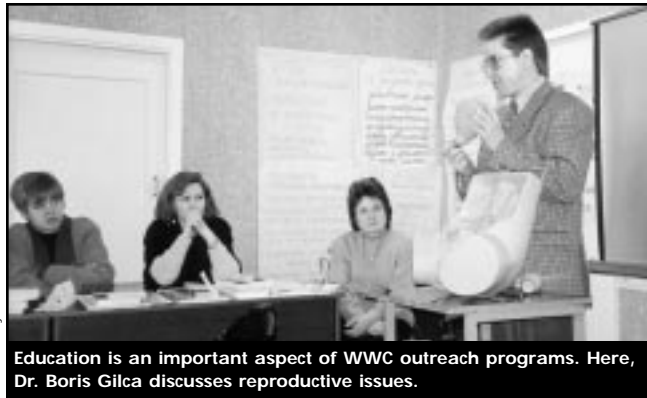


Photo courtesy of Chisinau WWC.

Education is an important aspect of WWC outreach programs. Here, Dr. Boris Gilca discusses reproductive issues.

the prevention of STDs and HIV among youth. The campaign was aimed at adolescents in high schools and universities as well as psychologists, health educators, healthcare providers, and the mass media. Because of the success of that campaign, the center plans a similar program this November.

In July, the NGO AVSC International, through a USAID award, gave the Dalila center a grant to run adolescent informational centers in Chisinau and Drochia, a rural area of the republic. In addition to educational work with adolescents, the center will train doctors and midwives on counseling teens and managing the information centers.

At the other end of the spectrum, Dalila is increasing its outreach to older women by offering classes about their changing health needs, from information about hormone replace-

ment therapy to diet and exercise. This fall, the center plans to begin a public awareness campaign for menopausal women sponsored with the help of Finland’s Orion Pharma.

“We can in part measure our success by our client satisfaction. They now come to us and share their problems more openly and willingly,” says Gilca. “In addition, women’s partners are now more and more interested in family and couples’ health. This concept of shared responsibility was unknown and unaccepted in Moldova; we’re glad that we can help change that.”

### Odessa, Ukraine

Like the staff at Dalila, the staff at the Odessa WWC, which is located at the Odessa Oblast Hospital and Polyclinic, have actively engaged the communities they serve, bringing hope for healthier lives to women in urban and rural areas.

Women in rural Ukraine do not have a higher incidence of breast cancer compared to women in Odessa, but they rarely seek treatment until the cancer is more advanced. In an effort to reach out to women in rural Ukraine, staff from Odessa’s WWC and its adjoining Breast Health Center plan to travel throughout the 26 rural rayons in Odessa Oblast to educate women on breast self-examination, mammography, and other tools that can catch breast cancer in its early stages.

The center is also teaching feldshers and midwives across the oblast about women’s health issues. So far, about 400 have been trained. In addition, the WWC plans to train one physician from each rayon, who will then train other doctors.

In a program that creates communities of women sharing common health concerns, the WWC has begun a series of support seminars linking women who are experiencing similar problems or conditions. For example, a woman who has had treatment for breast cancer can discuss her experience with newly diagnosed women. Programs are also under way in the areas of pregnancy and breast feeding, and the center plans to start groups for drug users and HIV patients.

“During these exchange programs, which take place every Saturday, women can talk in a relaxed atmosphere with a cup of tea or coffee,” explains WWC Director Dr. Svetlana Poshokova. “The emotional value of these meetings is high, and afterward the women tend to go home and talk to neighbors and family, thus increasing the number of women we reach.”

Because the center is housed in the Polyclinic, it also reaches the thousands of patients who visit the hospital. According to Poshokova, WWC staff talk with inpatients about breast cancer, family planning, and other topics, reaching many of the 18,000 women who go to the hospital each year. In addition, the center distributes brochures to patients on various women’s health topics.

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The center also uses mass media to get the message out about healthy lifestyles and disease prevention. They produce five-minute clips, which air on radio stations throughout Ukraine, on such topics as early detection of breast cancer, family planning, and STDs. They also produce a 10-minute segment for the weekly television show, "Health." In addition, the center aims to install TV sets on each floor of the hospital to show video clips for patients who are waiting for appointments.

The Odessa WWC also works to connect with the youth in their community, particularly on the topic of AIDS and other STDs. Southern Ukraine has one of the highest rates of HIV in the NIS. Until recently, the explosive growth of the disease was caused primarily by intravenous drug users sharing contaminated needles. Increasingly, however, infections have been sexually transmitted. In 1994, there were approximately 500 reported HIV-positive patients in Odessa. Today there are 10,000, about half of whom are women. About 300 HIV-positive women have given birth, mostly at Odessa Oblast Hospital.

To help combat these trends, staff from the center travel to schools to teach classes on safe sex and related topics. They also visit a nearby summer camp held from May through August for 1,000 young people from across Ukraine. "The camp is very important because we are talking about contraceptives and distributing condoms to young people all over Ukraine. They can then go home and tell their friends what they learned," explains Poshokova.

## Tashkent, Uzbekistan

According to Dr. Dilmurod Usupov, director of the Tashkent WWC, which is located at the Tashmi II Hospital, one of his center's key priorities is the promotion of a healthy lifestyle, especially for groups not traditionally served by women's health-care. "For many years, much attention has been paid to fertile-age women, while teenage girls and elderly women were somewhat excluded from coverage. Therefore, one of our main goals is to implement educational programs specifically addressing these age groups," he explains.

The center developed the city's first sexual education courses for teenagers, currently held at nearby schools in the Shaikhan-taur and Sabir Rakhimov districts of Tashkent. "Reaction has been positive because the adolescents have found the answers to many of the questions that interest them," Usupov says. "After the classes, many parents came to our center to be examined and to have their children examined."

Fran Jaeger, partnership coordinator and administrator of the perinatal center at the University of Illinois at Chicago (UIC) says that the classes represent a giant leap for Tashkent.

"In Uzbek culture there is little active education and outreach. It's a very family-oriented society. But the center realized that if they wanted to help a new generation, they had to get into education. This is very significant."

To address the other segment of the female population that Usupov says has been ignored, educational and clinical programs have been prepared for older women to prevent potential complications during menopause and to make them aware of hormone therapy and osteoporosis prevention. Because the WWC is part of a larger hospital, staff have requested that physicians and nurses refer patients to them. The center also offers classes for older women to improve their quality of life in general.

Through the AIHA partnership, UIC has provided the center with materials—including a film library and informational handouts—necessary to implement large-scale education programs. Since most of these materials are in English or Russian, the center hopes to translate them into Uzbek, making them accessible to a larger segment of the population.

This focus on disseminating women's health information reaches beyond the immediate community of Tashkent and its suburbs. The WWC also provides family planning assistance to medical care providers in the Republic of Karakalpakstan, as well as in the Syr-Darya, Fergana and Surkhan-Darya regions of Uzbekistan.

Closer to home, a sustainability grant from AIHA will help the partnership create a satellite facility in central Tashkent (the main WWC is located on the outer edge of the city). The new center will differ from the original by offering medical services on a fee-for-service basis.

Speaking on the overall accomplishments of the center, Usupov explains that "the staff of the WWC—physicians, obstetricians, nurses, and administrators—work as a single team to reach the common goal of a healthier generation by promoting a healthy lifestyle and changing adults' attitude toward both their own health and that of their children." He has no doubt that these changes in attitude will improve the overall quality of life of these patients' communities.

Because women make up at least 50 percent of the population in the countries served by AIHA WWCs, and because of the role women play in society as mothers and caretakers, women are in a unique position to influence the health of a nation at a grassroots level. By educating their patients and members of the community they serve, WWCs help encourage healthier, more responsible lifestyles.

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