American International Health Alliance Technical Program Brief

Women's Health

Context

In many countries around the world, women and girls are disadvantaged by deeply rooted social, cultural, and economic factors that too often lead to discrimination and hinder access to critical healthcare services.

Many complex factors, including unequal gender power relationships, lack of opportunities for education and well-paid jobs, and the threat of physical, sexual, and emotional violence combine to prevent women and girls from accessing a full range of quality health services. Poverty, too, is a major barrier to healthcare access — one that disproportionately affects women and girls.

As a result, women and girls are extremely vulnerable to infectious diseases, including sexually transmitted infections (STIs) and HIV. In sub-Saharan Africa alone, girls and young women account for 71 percent of all new HIV infections and are gravely affected by human papilloma virus (HPV) infection — the world's most common STI and a leading cause of cervical cancer. Cervical cancer, along with breast cancer, are two of the most common cancers that affect women. With both, early detection is key to keeping women alive and healthy, yet each year nearly a million women around the globe die from these cancers, the vast majority live in low- and middle-income countries where screening, prevention, and treatment are almost non-existent, and where vaccination against HPV needs to take hold, according to the World Health Organization (WHO).

Every day, some 830 women die from preventable causes related to pregnancy and childbirth with 99 percent of these deaths occurring in developing countries. Along with reproductive health, violence against women, mental and behavioral health issues, and non-communicable diseases all represent a grave concern for women and girls. According to he Maternal Health Task Force at the Harvard Chan School, about 18 million women die from non-communicable diseases each year, again with the overwhelming burden of these deaths assumed by low- and middle-income countries, and one out of every three women under the age of 50 has experienced intimate partner violence or non-partner sexual violence.

As countries work to attain the UN Sustainable Development Goals, greater investment to support access to client-centered health and social services for women and girls is critical. Health systems strengthening efforts, including targeted training of health and allied workers is needed to underpin this access and ensure a healthy future for women and girls around the world.

AIHA Response

AIHA has more than 26 years of experience working in close collaboration with governments and healthcare institutions around the globe to build sustainable institutional and human resource capacity to provide client-centered women's health and wellness services. In the years following the collapse of the former Soviet Union, the already incomplete and fragmented healthcare services that previously existed for women eroded further, leaving huge gaps in coverage for many of the nearly 180 million women living in this region. At that time, there were abundant challenges related to women's health in the region, including a reported 70 percent rise in breast cancer cases in Ukraine compared to the previous two decades, limited access to contraception making abortion the primary method of birth control in many countries, and more than 50,000 women hospitalized each year as a result of intimate partner violence (IPV), with some 15,000 deaths attributed to this violence against women annually.

In an effort to provide accessible, comprehensive services to women throughout their lifespan, AIHA worked with local stakeholders to develop a model intervention that culminated in the creation of a network of Women's Wellness Centers (WWCs) in more than 30 communities throughout Eurasia. Collectively, WWCs provided care to 500,000 annually.

Designed to bridge the fragmentation of services that traditionally characterized women's healthcare in these regions, WWCs provide a client-oriented approach to primary care by offering services that specifically address women's health needs from adolescence to post-menopause through a combination of health promotion, education, early diagnosis, treatment, and follow-up care.

Each WWC, whether located in a partner hospital or a freestanding clinic, uses a common model that emphasizes comprehensive clinical services and cost-effective health promotion and disease prevention strategies. For the first time, women in Eurasia were able to visit a single place to seek treatment and advice on health-related matters ranging from cancer, cardiovascular disease, and diabetes to family planning, maternal care, behavioral health, and menopause.

WWCs empower women through programs that teach the value of good health and the importance of taking charge of their own well-being by adopting healthier lifestyles, performing monthly breast self-examinations, and avoiding situations that put them at greater risk. WWCs often opted to place special emphasis on programs that addressed a particular area of need in the community they served. In Ukraine, for example, where breast cancer rates were rapidly increasing, WWCs in Kyiv, L'viv, and Odessa placed special focus on breast cancer screening and care, offering both clinical services and psycho-social support.

AIHA's Women's Health Program

was designed to help low- and middle-income countries address the health and wellness issues facing women of all ages through a comprehensive, client-centered approach to health promotion, patient education, early diagnosis, treatment, and follow-up care.

AIHA began the process of developing our women's health model in 1997, bringing together key medical professionals, educators, and policymakers to form the Women's Health Task Force. Members of the Task Force participated in a series of workshops and meetings to build consensus on priorities and approaches for attaining universal goals such as reducing the number of unintended pregnancies, screening for diseases ranging from diabetes to breast cancer, and educating patients on healthy lifestyles. The Task Force also worked to formulate a women's wellness program and create a model for WWCs that provide access to a wide range of clinical services and educational outreach programs.

Since then, AIHA has drawn upon the strengths of this comprehensive model to support other women's health projects in Eurasia and other parts of the world, including sub-Saharan Africa. Many AIHA WWCs remain operational today, a full decade or more after funding for the project ceased.

Selected Program Results

- In Chisinau, Moldova, the WWC offered comprehensive services to victims of IPV by drawing from a multidisciplinary team of professionals that includes psychologists, attorneys, police officers, and social workers.
- The WWC in Kutaisi, Georgia, established health committees in more than 40 area schools and 10 colleges as part AIHA's Women's Health Program was designed to help low- and middle-income countries address the health and wellness issues facing women of all ages through a comprehensive, client-centered approach to health promotion, patient education, early diagnosis, treatment, and follow-up care. Staff at the Center also created a television

program addressing issues such as maternal care, breast feeding, reproductive health, HIV/AIDS prevention, and healthy lifestyles.

- The Breast Health Centers in Kyiv, L'viv, and Odessa, Ukraine, provided breast health services to more than 26,000 women annually.
- Each quarter, some 750 people participated in educational courses on childbirth and prenatal health, exercise during pregnancy, and newborn massage offered by WWCs in Essentuki, Dubna, Moscow, and St. Petersburg, Russia.

- Based on the success of the WWC in Odessa, Ukraine, staff there created a community-based clinic to provide HIV care and treatment to women and their partners thus combating the severe stigma and discrimination that resulted from seeking care at a dedicated AIDS Center. This project also led to the creation of a model PMTCT training center in this high-burden port city.
- The Yerevan WWC ushered in many positive changes in Armenia, including state-of-the-art breast and cervical cancer diagnosis and treatment. They also initiated nationwide awareness raising campaigns, including the first Breast Cancer Walk, the annual October celebration of Breast Cancer Awareness Month, and mobile screening vans that brought diagnosis and patient education to rural parts of the country.
- AIHA's OB/GYN partnership in Ethiopia, implemented through our PEPFAR-supported HIV/AIDS Twinning Center Program, has established a cervical cancer screening program at St. Paul's Hospital Millennium Medical College in Addis Ababa. This program provides comprehensive screening, diagnosis, and treatment services, along with patient education and outreach.
- Many of AIHA's Women's Health partners in Eurasia established telephone hotlines to educate girls and young women about human trafficking, as well as to provide services and support to victims.

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