In Jordan, 54% of women seek family planning care from private sector providers (JPFHS 2009). Globally, research has shown that women seek private providers because they believe they offer shorter waiting times, clean facilities, respect for privacy and high quality services. However, private providers in Jordan fall outside of the supervision purview of the Ministry of Health and are not subject to any systematic licensure or quality assessment body to guarantee the quality of the services they provide.

The Private Sector Project for Women’s Health (PSP) in Jordan has developed an integrated approach to improve the quality of family planning and reproductive health care services offered and it has successfully changed private providers’ behaviors.

Changing behaviors and improving quality of family planning and reproductive health care in Jordan is crucial, because despite research showing that 86% of women agree that modern contraceptive methods are more effective than “traditional” methods (e.g., withdrawal, periodic abstinence), the modern contraceptive prevalence rate is only 42%. A recent survey showed that less than half of women believe oral contraceptives are safe. The 2009 Jordan Population and Family Health Survey (JPFHS) confirmed that modern contraceptive prevalence rates and fertility rates have remained just above 40% and just under 4 children per woman (3.8 in 2009) over the past decade.

Provider attitudes and behavior reflect some reasons why these rates have remained intransigent. Some physicians for example are reluctant to prescribe modern family planning methods such as combined oral contraceptives (COCs) or intra-uterine devices (IUDs) to younger married women, as they fear they could harm their fertility. Pharmacists are important frontline providers yet they lack training on how to explain side effects and contraindications of different forms of contraceptives. Persistently high discontinuation rates for hormonal contraceptives (pills and injectables) in particular indicate a need for improved counseling.

Another key reproductive health issue for Jordan is breast cancer. While incidence rates are similar to those in other parts of the world, the median age of women afflicted by cancer is younger – 45 as opposed to 65 – and only 30% of cases are identified during early stages.

The EQuiPP approach aims to improve three key elements of behavior change – 1) Knowledge, 2) Attitudes and 3) Practices – through classroom and clinical training, the use of evidence based medicine and detailing, and a quality assurance certification process. Providers are encouraged to participate in the activities in order to get Continuing Medical Education (CME) credits (see box on page 4), to develop networks and to get peer input into their practices, and to receive referrals and additional publicity to increase their clientele.
To address these factors, PSP partnered with Bayer Schering Pharma to introduce Evidence Based Medicine (EBM), which integrates research evidence with clinical expertise and patient values to improve patient care and the client-provider interaction. PSP has used Critically Appraised Topics (CATs), which are validated concise summaries of the best available research evidence, as a tool to address the side effect and health concerns that present barriers to the use and continuation of modern contraceptives, particularly hormonal methods, as well as to present evidence on their non-contraceptive benefits. The introduction of research evidence into the contraceptive debate presents a viable alternative to the heretofore reliance on anecdotal experience and medical opinion. PSP launched its EBM initiative by conducting a session on COCs with industry partner Bayer Schering Pharma (BSP), a major supplier and marketer of oral contraceptive pills. BSP invited OB-GYN specialists while PSP Jordan invited general practitioners. At each session, a lecture was given on EBM and the CATs were presented. Physicians had the opportunity to discuss with each other the contents of the CATs and their current beliefs, practices and concerns about COCs. During the session, EBM trainers encouraged physicians to change the way that they present information during counseling with patients—that is to present the science rather than the clinician’s own experience—and to present the patient with options rather than a personal recommendation.

To complement the lectures and training, a PSP Jordan medical representative periodically visited providers to discuss the CATs and their content. In-class training topics include:

- Basic Contraceptive Technology
- Advanced Contraceptive Technology
- Hypertensive Disorder with Pregnancy
- Bleeding During Pregnancy
- Diabetes Mellitus with Pregnancy
- Abnormal Uterine Bleeding
- Cervical Cancer
- Violence Against Women (gender-based violence)
- Thromboembolism during pregnancy
- Pre-term/post-date labor

**Identifying Private Providers in Jordan**

PSP targets all private providers who care for women’s reproductive health in the country. This includes general practitioners and specialists in private clinics, centers and hospitals, as well as physicians working for non-profit organizations (NGOs) - such as the Jordan Association for Family Planning and Protection (JAFPP) or the Institute for Family Health (IFH) - and UNWRA and other international agencies and organizations working with refugee populations in Jordan. PSP Jordan has developed a four-pronged approach to identify and engage these private providers.
The private physicians come to the orientation workshops on their day off and to evening sessions to discuss: i) problems and performance gaps; ii) ways to solve them; and iii) help each other close the gaps. The foundation of this process is standardized clinical guidelines, which are based on best practices endorsed by the World Health Organization, International Planned Parenthood Federation and the United States Centers for Disease Control and Prevention. These guidelines have also been reviewed and approved by a committee of leading physicians in Jordan.

There are three certification tracks:

1. Families Planning for Specific Medical Conditions – providers are certified in IUD insertion and family planning counseling with an emphasis on patients presenting with conditions that contraindicate specific methods.

2. Clinical Breast Exam – providers are certified in clinical breast examination.

3. Reproductive Tract Infections/Sexually Transmitted Infections – providers are certified in implementation of pap smears and wet mounts, and are assessed in knowledge of related statistics.

For each track, providers are instructed on the certification process during a classroom education session and then they receive training on models in clinical skill training labs. The PSP Jordan Quality Assurance and Medical Advisor visits each provider to assess his/her counseling skills as relevant. Providers are given two chances to succeed, and during the assessment visits the Quality Assurance and Medical Advisor take the time to discuss with the providers any remaining gaps or mistakes.

Following successful completion of the Quality Assurance and Certification Program (QACP), certified doctors are recognized in a public ceremony. PSP Jordan also publishes their names in local newspapers. The certification and the Jordan Medical Council’s endorsement as well as publicity in the newspaper motivate private physicians to participate in the program as a form of marketing for their clinics. Furthermore, the QACP emphasizes certifying female private general practitioners, obstetrician/gynecologists or family practitioners who provide family planning and reproductive health care services to women referred by the PSP outreach efforts. Criteria for selection include meeting quality assurance requirements and providing services for agreed pricing. In return, PSP provides them with contraceptive supplies, preference in CME courses and access to loans and business training.

**Quality Assurance and Certification:** Busy physicians working in private practice were very interested in learning new skills as well as having their practice reviewed and certified as a way of showing to their community that they are providing quality services.
Evidence of Change

More than 1,500 providers have participated in one or more PSP training programs. PSP Jordan has awarded Quality Assurance Certificates to 307 doctors for family planning (FP), 180 doctors for clinical breast examination, 110 doctors in reproductive tract and sexually transmitted infections, and 150 for FP for specific conditions. In addition, approximately 300 physicians are visited per quarter, a technique that has created an atmosphere of trust and comfort, encouraging providers’ further participation in PSP training activities and acceptance of evidence-based information.

Across the board, physicians are improving the services that they provide to women in Jordan. They are more confidently counseling patients in modern family planning methods, making physical improvements to their clinics, and using better standards of practice based on clinical guidelines received during the training programs.

In July 2009, PSP undertook a mystery clinic received during the training programs. Overall, the study revealed that private physicians were largely complying with the guidance provided to them through the certification process. For example, 97 percent of them addressed rumors or misconceptions regarding FP methods and 93 percent counseled patients in a private area. However, there are still areas for improvement:

- Some doctors prescribed COCs when they were contraindicated, and only 70% asked the patient to describe her reproductive plans.
- Similarly, PSP conducted a qualitative research study in February of 2009 of physicians who participated in the Quality Assurance and certification programs. The study found that PSP programs have helped them to self-identify weaknesses in their clinical and management skills and these providers remain interested in improving these skills. As a result, providers are making financial investments to improve their clinics (painting, purchasing new equipment) and have improved infection prevention practices and breast and cervical cancer screening practices (clinical breast exams, referrals for mammograms and pap smears).

In order to ensure the sustainability of the EQuIPP activities, PSP has partnered with two Jordanian institutions - the JMC and the General Practitioners’ Society. As a CME requirement system is established over time, the JMC will continue to support training programs in Jordan. The General Practitioners’ Society is now working with PSP to begin designing and implementing training programs.

PSP project strives to improve the health status of all Jordanian women. The project uses an integrated approach to increase demand for modern contraceptive methods and related women’s health services such as breast and cervical cancer and domestic violence against women. At the same time, the PSP project endeavors to increase the quality and availability of family planning and reproductive health services through the private sector.

For more information on the PSP project, please go to http://www.psp-one.com/section/taskorders/psp_jordan