# Partnership Modalities for Private-Sector Engagement on LA/PMs

Cindi R. Cisek

Meridian Group International, Inc.

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Managing Partner: EngenderHealth; Associated Partners: FHI 360; Futures Institute; Johns Hopkins Bloomberg School of Public Health Center for Communication Programs; Meridian Group International, Inc.; Population Council





# **Trends around Public-Private Partnerships**

- Public-private partnerships are powerful tool for leveraging resources and expertise to achieve greater impact and sustainability.
- Workplace programs are well documented in literature for HIV and FP as key public-private partnerships.
- Companies are broadening their commitment beyond workplace safety and labor law compliance to a more comprehensive focus on employee health and well-being.
- Several global initiatives are focusing on introducing systemic changes to health and RH/FP in workplace initiatives.





# Why Invest in Workplace Initiatives?

- Urbanization and globalization there are more young people in the workforce.
- Workers lack access to general health & FP/RH services.
- Women make up 70–80% of workforce in apparel, footwear, electronics, and toy industries, many in 18-26 age range.
- Workplace also reaches men also who have limited access to RH/FP information and services.









# **Our Experience with Workplace Models for LA/PMs**

### India



### **Tanzania**



# Bangladesh

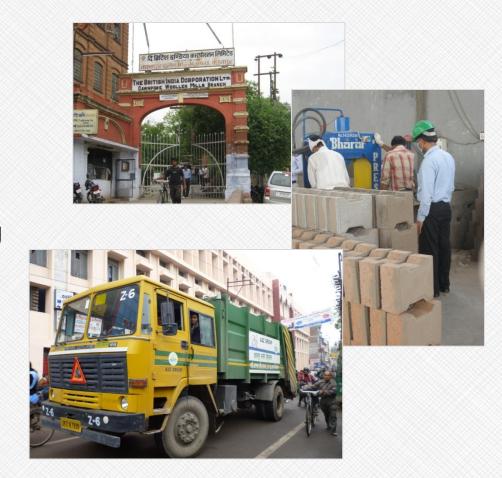






# India: Piloting LA/PMs through Workplace

- Small and medium-sized industries were recruited from various sectors—10 companies and 5,000 employees.
- Employers committed to provide information and education on-site and during working hours.
- Referrals for services were made to nearby government and NGO clinics.







# **Key Workplace Interventions**

### 1. Health talks

 One-hour orientation sessions for employees on FP during normal working hours

### Health desks

 On-site health desk for 3–4 hours that employees can approach at their leisure

### Print materials

LA/PM posters, standees, and leaflet

# 4. Health coordinator training

Orientation on FP, with focus on LA/PMs, interpersonal communication skills

### Referral sites

Public and private facilities offering LA/PMs within geographic catchment areas of industries









# **LA/PM Print Materials**





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के लिये महिलायें नियत समय पर रोज लेती हैं।



### परिवार नियोजन के दीर्घकालीन अस्थाई उपाय

आई.यू.डी.

आई.यू.डी. एक छोटा, नरम प्लास्टिक का बना उपाय होता है जो कि किसी प्रशिवित स्वास्थवर्मी द्वारा महिला के गर्भाशय के अन्दर डाला जाता है। यह उन महिलाओं के लिये पूरी तरह सुरक्षित तथा उपयुक्त गर्मनिरोधक है जो अपने बच्चों में अन्तर चाहती हैं या लम्बे समय तक अगला बच्चा नहीं चाहती है या और बच्चा नहीं चाहती।

- यह सुरक्षित और बहुत प्रमावी है। • इसे कम या अधिक समय के लिये भी प्रयोग किया जा सकता है। यह दो प्रकार के उपलब्ध हैं - एक 10 सालों तक प्रभावी है व दूसरा 5 सालों तक।
- इसे किसी भी समय हटाया जा सकता है तथा महिलाएं इसे हटाने के बाद पुनः गर्भ धारण कर सकती
- आई.यू.डी. लगवाने से पति-पत्नी के यौन सम्बन्धों पर कोई प्रभाव नहीं पडता। उन्हें वीन सम्बन्धों के दौरान अनवारे सर्व की विल्ला के बरीए वही आनन्द मिलता है जो पहले मिलता

### परिवार नियोजन के स्थाई उपाय

रुवाई तरीकं उन महिलाओं व पुरुषों के लिये हैं जो और बच्चा नहीं चाहते।

### महिला के लिये स्थाई उपाय : महिला नसबन्दी

महिला नसबन्दी एक सरल प्रक्रिया है जिसे प्रशिक्षत विकित्सक द्वारा किया जाता है। इसमें अण्डे ले जाने वाली नालियों को बन्द कर दिया जाता है।

- यह गर्भ को रोकने का एक स्थाई तथा बहुत ही प्रभावी उपाय है।
- यह महिला के वज़न तथा शारीरिक ताकत को किसी तरह ते प्रमायित नहीं करता। महिला पहले की ही तरह पुरत दुरुरत रहती है। महिला पहले की हा तरह पुरत पुरुरत रहती है। महिला परवन्दी के बाद पर जाकर 48 धण्टे तक आराम करें परन्तु भारी या ताकत वाला काम 7 दिन बाद ही करें।
- महिला नसबन्दी से पति-पत्नी के यौन सम्बन्धों पर कोई भी प्रभाव नहीं पड़ता। उन्हें यौन सम्बन्धों के दौरान अनुवाहे गर्भ की विन्ता के बगैर वहीं आनन्द मिलता है जो पहले मिलता था।
- पुरुष्क को लिये स्थाई उपाय : एन.एस.वी प्रश्तका की प्रक्रिया बहुत ही सरत है पिसने गुरून से जाने बाती नती को बंद कर शिया जाता है। प्रतिमा के आये पर्श्य पर सम्प्रकी शर्वा पर जा सकता है। इससे पुरुषों की योग इधाओं पर्श्व का स्थान नहीं चता तावा पीयं स्थानन भी सामान्य बना स्वता है।
- इससे पुरुषों में शारीरिक कमजोरी भी नहीं आती है। एन एस.मी. के बाद घर जाकर आराम कर सकते हैं या रोज़ के एराजाः क बाद घर आकर जाराम कर सकत ह या रोज के हरूके काम कर सकते हैं। परन्तु भारी या ताकत वाला काम 48 घण्टे बाद ही करें। साइकिल या रिक्शा चलाना 7 दिनों बाद हुठ करें।
- एन एस.वी से पति—पत्नी के बीन सम्बन्धों पर कोई भी प्रभाव नहीं पढ़ता है। उन्हें यीन सम्बन्धों के दौरान अनवाहे गर्भ की विन्ता के बगैर वहीं आनन्द मिलता है जो पहले मिलता
- एन.एस.वी. के बाद 3 महीनों तक कन्डोम या अन्य गर्भ निरोधक का इस्तमाल आवश्यक है।





# **Key Results**

- Visibility and awareness of FP in workplace was high; 95% of respondents had heard about the FP health talks.
- Participation in health talks was also high; 83% had attended one or more health talks.
- Health talks encourage partner communication—85% who attended had talked with spouse recently about FP.
- FP users transitioned to LA/PMs; 77% of pill users and 71% of condom users switched to LA/PMs.









# **Key Lessons Learned**

- Reaching men and women at their worksite (with employer endorsement) provides additional credibility to FP messages.
- Industrial workers' profile is well-suited for LA/PMs, in that most are married with children.
- Industries had varying degrees of commitment to the project. Industry "champions" tended to be larger industries with dedicated corporate social responsibility programs.
- Company health coordinators were key for program's long-term sustainability.





# **Tanzania: Using LA/PM Peer Educators**

- Medium-sized industries were recruited from various sectors in Arusha and Dar es Salaam.
- Employers committed to 3-day training for peer educators and on-site information sessions.
- Integrated district health teams provided on-site services.
- Referrals for services were made to nearby government and NGO clinics.









# **Key Interventions**

# 1. Peer educator training

 Three-day training for selected employees on FP & LA/PMs during normal working hours

### 2. Print materials

LA/PM posters and leaflets

## 3. Outreach services & referral sites

- On-site outreach services facilitated by district health team
- Government and NGO facilities offering LA/PMs within geographic catchment areas of industries

# 4. Follow-up with peer educators

 On-site facilitative supervision for education sessions









# **Key Results**

- RH/FP information and services available to 6,000 employees;120 peer educators were trained.
- Peer educators were highly motivated; they reached more than 1,300 workers with FP information in first 6 months.
- Demand for FP services is strong.
- A strong relationship between district health teams and companies was established.









# **Bangladesh: Linking with Workplace Advocates**

- Signed MOU with Bangladesh Garment Manufacturer's Export Association (BGMEA) to integrate FP services into their hospital and clinic network.
- Trained BGMEA providers on LA/PMs.
- Facilitated certification for BGMEA clinics to get MOH FP commodities.
- Linked with other NGOs advocating for workplace wellness.











# **Key Conclusions**

- Employers understand the key benefits of RH/FP for their workers and for the company's overall productivity.
- LA/PMs can be successfully integrated to workplace models, through both on-site services and referrals to nearby clinics.
- Models are evolving toward increased upfront commitment and investment by employers and sustainable linkages for services.
- Linkages with businesses and advocacy organizations are key to ensuring systemic changes in workplace policies.







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