

Preventing Cervical Cancer in Central America



4/16/2013

Dining For Women
Program Completion Report

PINCC Grant Report: El Salvador 2010-2011 Campaign and 2011-2012 Central America Community Outreach and Education (COE) Project:

Program Goals

There were two programs supported by the Dining for Women grant, *El Salvador 2010-2011 Campaign* and the *Central America 2011-2012 Community Outreach and Education (COE) Project*. Each program was designed to achieve its own projected outcome.

A. El Salvador 2010-2011 Campaign

In El Salvador, from 2007 until 2010, PINCC had trained 31 nurses and doctors who now serve 11 cervical cancer screening programs/clinics. The goals for the 2010-2011 El Salvador Campaigns under the Dining for Women grant were:

- Train an additional 20 doctors/nurses to total 51; by developing medical capacity, enable the expansion of the number of sites providing cervical cancer screening.
- Support those trained by PINCC to be able to train others.
- Work with the Ministry of Health, as requested, to create and build national capacity.

B. Community Outreach and Education Project

- Develop a curriculum for teaching community health workers serving semi-literate women in El Salvador and Nicaragua about cervical cancer, its causes, symptoms, silent development and prevention by cervical screening and treatment.
- Develop and produce specific tools: flip charts, diagrams, posters, and engagement strategies to provide to community health workers.
- Field test tools and curriculum in our village/ town sites.
- Train 2 to 8 community health workers in each site; accompany them to implement and evaluate program.
- Use Knowledge-Attitude-Behavioral Assessment survey for target populations (Nurses, counselors, community health workers and community women). Adjust materials and training from observation and feedback.

Findings and Overall Outcomes

A. El Salvador 2010-2011 Campaign Outcome

PINCC has succeeded more than we had hoped in El Salvador. Cooperation with Ministry of Health (MINSAL) doctors in implementing the Train the Trainer program has resulted in over 60 medical staff being trained by the end of 2011!

On November 7-12, 2010 PINCC worked with three El Salvador Ministry of Health clinics. We trained 28 healthcare providers, examined 357 women, and treated 27 women for precancerous cervical dysplasia.

On June 13-17, 2011 PINCC began or continued training of 30 healthcare providers, examined 337 women, and treated 38 women for precancerous cervical lesions. We also trained 5 doctors in our new Train the Trainers program. This program is training doctors to teach their colleagues VIA, cryo, and LEEP, using PINCC's protocols.

During our October/November 2011 campaign, the PINCC team and MINSA trainees examined 236 women and treated 29 women for cervical dysplasia. The 5 previously trained "Train the Trainer" doctors utilized their skills, and brought 15 doctors and nurses they had trained to be proctored as trainers by the PINCC team.

In 2012 these trainers began teaching another 30 medical staff from outlying clinics and hospitals with PINCC proctoring, extending the network of cervical screening and treatment.

Since PINCC's 2010-2011 campaign, PINCC has helped establish a fully operational cervical cancer screening and prevention system in the San Salvador Metropolitan Region in El Salvador, run by MINSA. This system is capable of giving training and support to the public health clinics throughout the country.



EL SALVADOR MINISTRY OF HEALTH DIRECTOR THANKS
PINCC BOARD PRESIDENT DEBORAH SHEFLER JUNE 2011

During the training period 2010-2012, PINCC also donated 2 LEEP generators, instruments and supplies, and 6 cryotherapy sets, equipping 6 centers in the Metropolitan Region for treatment of dysplasia. We also equipped a training center with air conditioning for future classes. See attached map for centers where PINCC trained.

The Train the Trainer program is highly effective and in high demand. The cervical cancer treatment hospital in San Salvador has reported a decreasing number of advanced cervical cancer cases by the end of 2012; this data will be published in 2013. We have plans to return to El Salvador in November, to re-evaluate the Train the Trainer program in the Metropolitan Region for quality control, and to begin a cervical cancer prevention training program with MINSA in a mountain region of the Northeast.

Community Outreach and Education Project

Launched May 2011 thanks to Dining for Women, PINCC developed its Community Outreach and Education program (COE). Our MPH Interns and other volunteers developed surveys for three groups of people: community women, community healthcare workers, and nurses. After evaluating gaps in knowledge about cervical cancer, PINCC used this information to prepare targeted educational material to give to health outreach workers, for reaching the frequently semi-literate audience. Our 2-volume set

of flipbooks have culturally relevant drawings, communicating many lessons in pictures, with text lessons for the instructors in Spanish. We began training Community health workers in Nicaragua and El Salvador on our October/ November 2011 Latin America campaign, and presented them with the colorful laminated books, designed to withstand the humid, rainy conditions under which they work. They received them with great enthusiasm!



HEALTH CARE WORKER HOLDS HER FLIPBOOK AFTER AN EDUCATIONAL PUPPETSHOW FOR THE LOCAL WOMEN.

In El Salvador on PINCC's May/June 2012 trip, the health educators found creative ways to reach the women in their community. With the aid of their flipbooks the community workers created a puppet show to teach the women about their bodies, the importance of cervical cancer screening, and what to expect during their office visit.

In both Nicaragua and El Salvador all of the community health workers we previously trained came back to meet with our Program Director to relay their experience with the flipbooks, discuss how they had been utilized, when and where they used the

books and the reaction from the women. During these oral interviews the community health care workers relayed that the women they taught found the flipbooks useful, the information interesting, and asked the community health workers a lot of questions. All of these are good signs that the books are needed! These oral interviews along with written suggestions of improvement will be used to assess the effects and the importance of the flipbooks.

Lessons Learned

In El Salvador, the most important lesson was effectively running a Train the Trainers program. Specifically, we found it best to separate the train the trainer (TOT) candidates from the new trainees for initial training lectures, so we could emphasize teaching techniques. We found using situational skits to be very useful, as well as having TOT members prepare lessons, then use group feedback. We developed larger posters for teaching larger groups, including more labels with anatomy or pathology to help them communicate, and distributed our slides and flash-cards as well as teaching manuals.

COE Lessons: We found the health care educators are effective teachers, but don't have formal clinical training, so we emphasized anatomy and physiology in training classes. We learned from their experience in getting women to relax and enjoy the teaching with jokes, puppets, and songs. They also gave us feedback on cultural specifics for their population, which we will incorporate in our upcoming second editions. We have provided access to the digital flipbooks in several languages to 8 other organizations; we are collaborating with Hesperian Books to enable an on-line distribution.

Organizational Structure: All of PINCC's employees, the Executive Director, and Development Director reflect our commitment to women's empowerment and diversity, as they are all women, of

diverse ethnic origins, ages and sexual orientations. Its Board of Directors is the same, consisting of 10 women and 2 men.

Next Steps: PINCC is working on expanding to bring training to additional sites and countries who have asked for our help. We hope to add native trainers in each country or region, enabling more rapid development and certification of sites. In 2013, PINCC will begin training in Cameroon, our first West African site.

Comments: PINCC is largely volunteer-fueled, so that less than 20% of our budget is spent on administrative overhead and fundraising. We use each contributed dollar as wisely as possible to provide maximum effect in needy communities. To this end, we stay in low-cost facilities, eat local food, and do not provide expenses for officials to attend our campaigns. Each trip takes maximum advantage of needed travel by training at several sites over several weeks.

Message to DFW Members and Donors

Because of DFW's generous donors, PINCC has empowered a network of doctors and nurses who were overwhelmed with the task of screening and preventing cervical cancer, despite having a Pap system available in their public health centers. By teaching a cost- and time-efficient, single-visit method of finding and eliminating the cancer in its pre-invasive stages, we gave them the tools to save thousands of lives. We wish each of you could see the relief and gratitude in women's faces as they leave knowing they are safe from this terrible disease. If you could see the pride and joy of the medical staff, who now have the tools to help their communities, you would know how important DFW's contribution is. Your caring has made such a difference for the women and families of El Salvador and Nicaragua!

Sustainability and Impact Summary

El Salvador and Nicaragua are countries struggling with the lack of resources to offer quality medical care to its people. PINCC was able to give cervical cancer screening and treatment to 1091 women during our 4 weeks of training from May 2010 to May 2012, and the 60 trained doctors and nurses have reported over 9,000 women screened and treated during this time. The early treatment of precancerous dysplasias has saved about 1,000 women from developing invasive cancer, using the affordable screening and treatment options PINCC provided. The trainers we empowered will be able to multiply this impact three-fold over the next 2 years, developing an ever-increasing network of education and efficient, quality public health intervention in El Salvador and Nicaragua. PINCC will continue to work in countries, helping their Ministries of Health to reach communities in rural and poor areas where the education, training and equipment are most needed, and preventing the unnecessary loss of so many women's lives.

Budget: See Attached