

## PDQ Application in Georgia: Towards improving STI/HIV services in target urban centers in Georgia

In 2002, Save the Children applied the “Defining Quality process” of the PDQ methodology as a pilot initiative in targeted urban areas of Georgia, particularly Tblisi and Batumi, within the “STI/HIV Prevention” (SHIP) project. The complete version of the PDQ methodology was not used due to the nature of the project and its’ targets. This project is being implemented in partnership with the City Health Offices of Tblisi and Batumi, and local NGOs. The project initially targeted Female Sex Workers (FSWs) and other high-risk groups, Health Care Providers (HCPs), and the STI/VCT clinics, which are also called “Healthy Cabinets”. The high-risk groups include FSWs, men who have sex with men, youth, and vulnerable groups such as street children, victims of trafficking, survivors of rape and some pregnant women living in extreme poverty. This pilot initiative, presently still ongoing, is proving to be a first of its’ kind in Georgia.

### Goal

The goal of the SHIP project is to reduce the rate of transmission of STI/HIV in targeted urban locations of Georgia.

### Objective

- Improving the availability, access, and quality of health care and counseling services provided to STI/HIV high-risk groups.
- Improving Health Care Provider job satisfaction

### Description

Meetings were held separately with FSWs and HCPs to explore their ideas regarding health services. With FSWs, sets of focus group discussions were held, whereas with HCPs, focus group discussions were held as well as in-depth interviews. The focus group discussions with FSWs, and the focus groups discussions and in-depth interviews with HCPs revealed fundamental themes and issues on quality STI/HIV services such as a lack of trust, affordability of services and variation in the cost of services, lack of information and the need for outreach and services for other vulnerable populations like street children. The findings were presented by SC to its’ partners in the SHIP project, to help them improve their services and outreach activities. The main issues were



discussed and reflecting on the partners’ current practices and services. Each partner was then asked to review the issues and develop specific actions to address them. Afterwards, the SHIP project solicited evaluations from FSWs and HCPs using various methods to monitor improvements made by the SHIP partners in their STI/HIV services.

### Results

The following are the actions and steps undertaken by the SHIP partners to address the main issues identified, and the outcome that resulted from these actions:

- Preliminary findings show that there is improvement in access to information and increase in the awareness of target population.
- VCT was introduced and incorporated into clinics’ services.
- The SHIP project was able to provide matching funds to rehabilitate the Healthy Cabinet in Batumi, although it was not included in the plans at the start. The PDQ findings helped the project realize how important the conditions of health facilities are not only to the target groups but also to the healthcare providers.
- The care philosophy for Healthy Cabinets was developed. This clarifies client-centered strategies and includes transparently listing all services offered for free in order to improve interpersonal relations between clients and health providers, and to avoid misunderstanding on any treatment-related costs.
- Clients now receive some services free of charge, including testing for HIV and STIs.

- A new type of anonymous user-friendly services for high-risk groups have been developed, applied and was proven successful.
- This SHIP model of anonymous, user-friendly services for high-risk groups was presented to stakeholders in Georgia. Due to the success of this model used in the project, it was adopted by other projects such as Global Fund project. In addition, many government health officials have pledged to maintain services of the Healthy Cabinets after the SHIP project ends.

## Challenges and Lessons Learned

- The SHIP project has limited funds to ensure that enough and adequate equipment, supplies, drugs are available.
- One of the impacting issues mentioned by the health care providers is lack of pay (the staff has not been paid for several months already) and the economic situation is not likely to improve.
- Georgia has different medical standards than those of WHO, and even if the SHIP project succeeds in using protocols based on best practices, there is strong conservatism among Health providers in using the STI Institute standards, which is not proving to be as effective for diagnosis and treatment.
- The sustainability of the STI services for high-risk groups is challenging. After the SHIP project ends, the authorities may not prioritize high-risk groups despite the project's efforts on advocacy.



\*This monograph is a product of Save the Children/CORE Group's joint Technical Advisory Group on Partnership Defined Quality.