
Marie Stopes Timor-Leste

An overview—2016



Mission: Children by Choice, Not Chance

Vision: A world in which every birth is wanted

Marie Stopes Timor-Leste (MSTL) has been working in Timor-Leste since 2006, specialising in providing quality, comprehensive sexual and reproductive health information and services. MSTL works in partnership with the Ministry of Health, and with support from the Australian Embassy in Timor-Leste.

Clinical Services:

MSTL has a family health clinic in Dili, and 11 outreach teams working in Dili, Bobanaro, Baucau, Viqueque, Lautem, Ermera, Ainaro, Oecusse, Aileu, Liquica and Manufahi. MSTL also has mobile tents that can be used to provide services in remote and hard to reach locations.

The MSTL clinical team is comprised of highly competent and experienced nurses, midwives and doctors, who provide:

- Comprehensive family planning counselling and services,
- Antenatal care services
- Postnatal care services
- Sexually transmitted infection testing and treatment (including HIV and Syphilis testing)
- Infertility counselling
- Circumcision
- Sexual and reproductive health information and counselling (including information on menstruation)



Photo: MSTL midwives and MoH midwives provide education and services inside a mobile MSTL tent.



Providing services to families in remote and hard to reach locations:

Almeida and his wife Maria wake-up at 4 a.m. to begin the three hour walk to the nearest Community Health Centre (CHC). They live in arid Cailaco where basic necessities like water, education and healthcare remain difficult to access for many.

On arrival, they are met by a highly skilled Marie Stopes Timor-Leste (MSTL) outreach team consisting of a midwife, nurse, community educator and driver. The team work side by side with service providers from the Ministry of Health to offer comprehensive family planning counselling and service provision, where previously only short term methods were available.

Almeida and Maria received family planning counselling from the MSTL midwife about all available methods of contraception, both natural and modern, so that they could make an informed decision about which method was right for them. They chose a contraceptive implant, because they knew it would provide them with five years of protection from unintended pregnancies, without have to make regular journeys to the CHC.

As a farmer and father of six children, Almeida was encouraged by other men in his community to support his wife's use of family planning. Myths about the possible side effects of family planning and its impacts on future fertility, as well as culture and traditional factors, mean that some men in Timor-Leste are hesitant about their wives using family planning.

"I have had six children and my wife's last delivery was complicated. I realised that our children are still small and we live far away from a health facility, so if we don't use a family planning method to space our children, we may face difficulties in the future."

Despite Almeida and Maria never having the opportunity to attend school themselves, Almeida's dream is that all of his children will be able to finish school; a dream that is closer now that he and Maria are able to plan the size and spacing of their family.

Family Planning Services:

Women and couples use family planning to:

- have healthier pregnancies
- help time and space births
- achieve their desired family size

To make informed decisions about the method a woman or couple want to use, all MSTL clients receive quality, comprehensive family planning counselling before receiving a family planning service. This includes learning about all available options, both natural and modern, so clients can make informed decisions about the method they want to use.

This counselling is essential, as family planning methods have different effectiveness, benefits and disadvantages. Individuals need to be informed and empowered to make the decision that is best for them.



Photo: An MSTL midwife provides comprehensive family planning counselling to a family; an MSTL family planning board showing different methods including short-term methods, long-term methods and natural methods (fertility beads and lactational amenorrhea method).

Education and Community Engagement:

MSTL has a team of experienced educators who work with communities and organisations to increase knowledge and understanding of sexual and reproductive health and access to services.

MSTL educators provide education services within all districts in which MSTL is currently working.

Education sessions are tailored to the audience so that they are age-appropriate and responsive to the needs of the audience. MSTL are able to provide quality comprehensive education sessions about the following topics:

- Puberty and adolescence (including menstruation)
- Fertility
- Family planning
- STI (including HIV)
- ANC and PNC services
- Sexual and reproductive health

Gender Equality:

Sexual and reproductive health is not a female-only health issue. It is essential to engage and involve men in sexual and reproductive health education and access to services, to ensure families and communities are healthy².

MSTL actively encourages couples to come and access services together, and has a male-engagement strategy to increase male-access to SRH information and services.

Photo: MSTL provides education, counselling and services to both men and women, encouraging families to talk about health and family planning.



² Wallace, H.J. et al, Reproductive Health Decision-Making in Municipio Viqueque, Baucau, Ermera and Dili, Marie Stopes Timor-Leste, 2016.

Young People:

Timor-Leste has one of the youngest populations in the world, with young people (aged 10 – 24 years) comprising 32.5% of the total population.

Many young people have limited understanding of sexuality and reproductive health, resulting in poor health outcomes, including high adolescent fertility rates (estimated at 48 births per 1,000 women aged 15-19³). Only 1 in 10 (9.6%) adolescent girls have correct knowledge about their fertile period and accurate knowledge about ways HIV can/cannot be transmitted are low^{4,5}.

In response, MSTL has a national youth hotline 'Liña Foin-Sa'e' that is open Monday to Friday, 8.30am – 7pm. It is staffed by experienced male and female operators. Young people have free access to this hotline for information about love, healthy relationships and other reproductive health information. About 65,000 calls have been made to the hotline since 2011, with more than 50% of calls made by young men.

Common information young people are asking about on the hotline include information about puberty and menstruation, HIV and STIs, and relationships. It is a free-call for Timor Telecom clients: 800 1001 and Telemor clients: 7878 7878.

Photo: Liña Foin-Sa'e operates with support from Timor-Telecom and Telemor, enabling the service to be free for all of their clients.



Domin lolos hanesan ne'e, ka?

Gratuita ba kliente
TimorTelecom 800 1001
Telemor 7676 7676

Atende segunda to'o Sesta, 8.30 - dader to'o tuku 7 lokraik

Liga ami!

MARIE STOPES TIMOR-LESTE **Australian Aid** **telemor** **Liña Foin-sa'e**

Photo: Liña Foin-Sa'e is staffed by professional male and female operators.



³Adolescent Fertility Rates, Available online at: <http://data.worldbank.org/indicator/SP.ADO.TFRT>

⁴UNESCO, A situation-response analysis of the education sector's response to HIV, drugs and sexual health in Timor-Leste 2012

⁵National Statistics Directorate, Ministry of Finance, Timor-Leste, and ICF Macro, 2010, Demographic and Health Survey 2009-2010, Dili, Timor-Leste.

Reaching the underserved:

MSTL outreach teams work directly in support of municipality health services and MoH staff in areas where there is a shortage of competent or available MoH service providers. Often through travelling to remote and hard-to-reach areas, we are able to provide free of charge, client-centred, confidential and non-judgemental, choice-focused family planning education and services to underserved communities. Our outreach services include comprehensive family planning counselling and services, with methods provided depending on the demands of the client. Other sexual and reproductive health services are delivered through joint service delivery at Community Health Centres, Health Posts and Referral Hospitals.

In addition to outreach, MSTL provides heavily subsidised sexual and reproductive health services to women in Dili through the MSTL family health clinic. Here, women are able to access a greater range of services than through MSTL outreach teams, including STI diagnosis and treatment, HIV and syphilis testing, and general medical consultations. While these services come at a small cost to the client, they are the most affordable private SRH services in Dili. Every dollar made at the clinic is fully invested in outreach services, therefore MSTL remains a 100% not-for-profit organisation.

MSTL actively partners with other organisations to ensure all women and men have access to quality sexual and reproductive health services, including those with disability. MSTL has a disability co-ordinator working in the MSTL support office, and has a positive working relationship with the national Disabled Persons Organisation Rae Hadomi Timor Leste (RHTO). Our Clinic has been assessed by RHTO for its accessibility for disabled persons, and includes wheelchair friendly access and toilet facilities.



Photo: MSTL teams often travel long distances in difficult conditions to reach the communities we serve.

Capacity Building:

MSTL currently has two capacity building projects:

1. MSTL works in partnership with the Royal Australasian College of Surgeons (RACS) to provide 2-monthly rotations to Junior Doctors as a Year 2 component of the Post-Graduate family medicine program (FMP). The trainee doctors spend two months working with competent MSTL midwives at the Dili Clinic and Dili outreach team to gain experience with comprehensive family planning counselling, family planning services and STI testing and treatment.
2. MSTL conducts a family planning coaching pilot project with MoH midwives in Ainaro. Trained MSTL midwives coach MoH midwives in comprehensive family planning counselling as well as implant and IUD insertion and removal. The coaching pilot also includes supporting municipality head midwives, District Public Health Officers – Saúde Maternal Infantil (DPHO-SMI), to conduct effective family planning supportive supervision visits to the MoH midwives.

Photo: Junior doctors spend 2-month rotations shadowing an experienced MSTL midwife to learn about comprehensive family planning counselling and service provision, STI testing and treatment and ANC care.



Working in Partnership:

Sexual and reproductive health, especially family planning, is important for individuals, families, communities and the entire nation.

As family planning specialists, MSTL recognises this and has positive and productive working relationships with many organisations and communities. This includes working with Government, non-government organisations, health organisations, Universities and schools, Community leaders and the corporate sector.

Working in partnership with the MoH, MSTL also provides regular ad-hoc support to the MoH by supporting transport needs, sterilisation of equipment at CHCs, financial and logistical support to MoH meetings and workshops, Technical support for FUAT, support for immunisation campaigns (including the use of MSTL tents), technical support with district database data collection, provide technical support in infection prevention techniques.

Photo: MSTL staff together with the Bishop of Dili Diocese, Dom Virgilio Do Carmo Da Silva, in June 2016.



Data Monitoring, Evaluation and Reporting:

MSTL follows global MSI standards in data collection, monitoring and analysis. This includes an electronic data information system (CLIC) to manage service data. This system is audited monthly and yearly for quality, ensuring that MSTL service data is managed ethically, effectively and is correct.

External evaluations and audits are also regularly conducted to ensure clinical quality and program effectiveness.

MSTL provides regular reports directly to the MoH in a number of ways, using the MoH data reporting templates (as requested by MoH):

- All outreach teams work in partnership with CHC teams, directly inputting results into the MoH family planning client register book. This is done on location at Hospital, CHC and Health Posts with a MoH midwife).
- MSTL Dili clinic results are shared monthly to the District Public Health Officers – Saude Maternal Infantil (DPHO-SMI) of District Health Service (DHS).
- Quarterly results of all MSTL data are shared through reports and presentations to the Director of the DHS, the MoH department of SMI (Ministry of Health Director of Maternal and Child Health Department, Dr Triana Oliveria, and Family Planning focal point, Aurea Celina da Cruz), all CHC managers, and DPHO-SMI.
- MSTL strategic plans are shared with the National Director of Public Health within the Ministry of Health, the National Director of Partnership within the Ministry of Health and the Ministry of Health Family Planning focal point.
- Annual reports (to MoH department of SMI and all other stakeholders in Timor-Leste).
- As requested.

MSTL sits on the MoH BCC working group, ensuring all printed BCC resources have been approved by the group before use.

MSTL is a member of the National Pastoral Advocacy working group, supporting in the promotion of the Ovulation Billings Method and other natural family planning methods.



Photo: MSTL service providers contribute to MoH systems and data collection, regularly reporting back on results.

Client Feedback:

MSTL gathers regular client feedback to ensure clients are satisfied with the services they receive, and to identify ways in which to improve service provision. Both quantitative and qualitative research techniques are used to collect data, including:

- Client feedback books
- An anonymous client call-back line
- An anonymous feedback box in the Dili clinic
- Bi-ennial, National Client Exit Interviews (CEI)

In 2014, most clients interviewed in the CEI (98.50%; N = 267 clients) reported that the service they received met or exceeded their expectations, with 99.6% reporting that they would return for another service in the future. Qualitative feedback received included:

'I will continue to come here in the future because I want to decide when I have children (participant number 2730009)'

'I would recommend this facility to my friends because family planning helps improve women and children's health (participant number 2530017)'

'The nurses are experienced and provide good information – I am satisfied with the services I received today (participant number 2360035)'

'I would recommend MSI to my friends because it's important to know about family planning (participant number 2440001)'



Photo: MSTL values its clients and collects regular feedback to ensure we are meeting their needs by providing them with high-quality client-friendly services.

Quality Assurance:

MSTL guarantees the provision of high quality services through robust quality assurance standards.

All MSTL clinical staff hold relevant National accreditations to provide the services they deliver. The MSTL Clinical Services team also provide rigorous ongoing training to all new and existing staff, to ensure all clinical staff meet national MoH and global MSI quality standards before they are able to provide services to clients.

Assessments of clinical quality are conducted internally on a regular basis and clinical services are externally assessed annually by an MSI Regional Medical Advisor, who measures services against international standards. MSTL continues to achieve excellent scores for clinical quality of family planning services. In 2015, MSTL also introduced clearer guidelines on clinical incident management and investigations.

Research:

MSTL is dedicated to making informed programmatic decisions, and adding to the National evidence base on sexual and reproductive health through targeted, ethical, client-focused research. With ethical approval and support from INS and other relevant ethics committees, MSTL has led several research projects in Timor-Leste, including:

- Menzies School of Health Research, Marie Stopes International Timor Leste, 2014, Perceptions of Family Planning in Viqueque & Dili (Timor-Leste), Darwin, Australia.
- Wallace, H.J. et al, Reproductive Health Decision-Making in Municipio Viqueque, Baucau, Ermera and Dili, Marie Stopes Timor-Leste, 2016.

MSTL also regularly contributes and participates in other research projects, including the recent 'midwives against violence' research project by UNTL and La Trobe University.

For more information or a copy of the MSTL research reports, please contact:

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Photo: research ensures we can make evidence-based program decisions that increase our impact for the women of Timor-Leste.

Why is access to family planning so important?

Family planning is an essential component in reducing maternal mortality rates and improving safe motherhood practices. It is a core building block in achieving safe motherhood. Increasing access to comprehensive family planning information and services is an essential part in reducing the high rates of Maternal Mortality Timor-Leste is currently faced with.

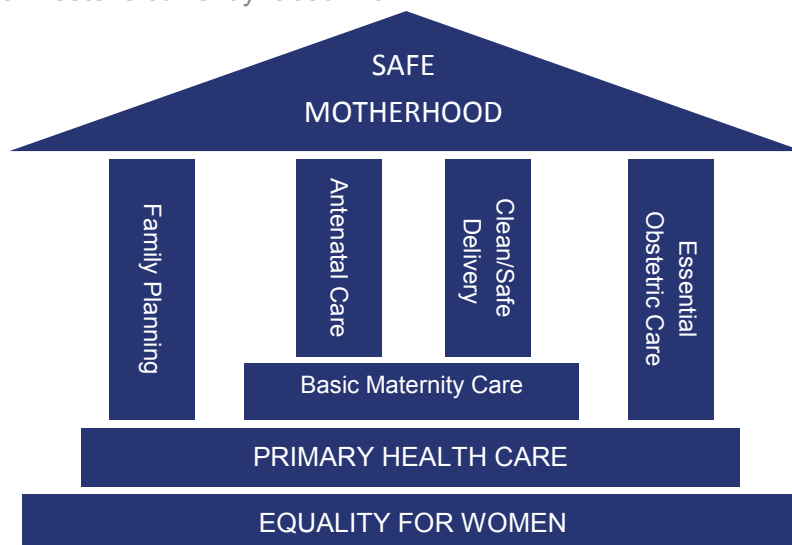


Image: Family Planning is an essential component in ensuring safe motherhood and reducing maternal mortality.

Family planning has well-documented health benefits for mothers, new-borns, families and communities. Pregnancies that occur too early or too late in a woman's life, or that are spaced too closely, negatively affect maternal health and increase the risk of prematurity and low birth weight⁶.

On average, desired family size is one child less than actual family size, and 70% of married women want to delay or limit childbearing. Consequently, one in three Timorese women has an unmet need for family planning⁷.

The ability to delay and space childbearing is also crucial to women's social and economic advancement. Women's ability to obtain and effectively use contraceptives has a positive impact on their education and workforce participation, as well as on subsequent outcomes related to income, family stability, mental health and happiness, and children's well-being.

Family planning has been identified as one of the two most productive investments for human development in addition to trade liberalization. Every \$1 spent on access to contraception saves \$120 in social spending. This provides benefits to the whole community.

The mission and vision of MSTL highlights how MSTL is dedicated to universal access to quality health care, gender equality and the empowerment of women. These values of universality, gender equality and women's empowerment are also seen throughout much of the 2030 Agenda for Sustainable Development and the subsequent Sustainable Development Goals (SDG's), allowing Marie Stopes Timor-Leste to provide a significant contribution to the progress of these goals in Timor-Leste.

⁶ Guttmacher Institute, Testimony of Guttmacher Institute, submitted to the Committee on Preventive Services for Women, Institute of Medicine, 2011, <<http://www.guttmacher.org/pubs/CPSW-testimony.pdf>>, accessed June 8, 2016.

⁷ Timor-Leste Demographic and Health Survey 2009-2010

Service Statistics January 2016 to June 2016:

Comprehensive Family Planning counselling was provided to over 6,000 clients.

The number of family planning services provided:

Method:	Number:
Injectable	3295
Implant insertion	2057
Implant removal	458
IUD insertion	399
IUD removal	106
Kolar	19
Oral contraceptive pill	952

Other sexual and reproductive health services provided:

Services:	Number:
Pregnancy test	1293
Infertility counselling	182
Circumcision	22
Tetanus Vaccine	84
Safe motherhood services (ANC and PNC)	567
STI services (including Syphilis and HIV VCCT)	832
General health services	424

Number of people reached through education sessions:

People:	Number:
Female	21,980
Male	7251
Total	29,231

Total number of calls to Liña Foin-Sa'e:

Calls:	Number:
Total	11,194

For further information or enquiries please contact:

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