

# Annual Report 2015

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## Executive Summary

The year 2015 was a year filled with changes and improvements at Clínica de Familia La Romana. By the end of the year, Clínica de Familia provided 46,383 services to a total of 8,524 clients and the Maternal-Infant Health Annex (MAMI, for its Spanish acronym) provided 16,998 services to 2,280 adolescent clients, for a total of 10,804 clients altogether. Clients with HIV represented 21% of clients, of which 7% were children younger than 18 years of age and 36 were pregnant, all of whose children tested negative for HIV. The Counseling Department successfully enrolled nearly all of the newly diagnosed clients with HIV in our HIV care and treatment program, thanks to a new system of providing HIV test results during the pre and posttest counselling session. The Social Work Department expanded its socioeconomic support beyond only clients with HIV and created a family support group for clients with HIV. The Community Health Promotion program successfully helped to re-enroll a large number of clients who are lost to follow-up compared to the year prior, doubled the number of families with their kitchen gardens and completed 2,547 home visits to those clients most in need. This year the clinic also hosted the eleventh annual Camp Hope and Joy where 78 HIV-positive children and adolescents attended. The Women's Health program reached 86 new clients more than in past periods, and the Men's Health Program performed 202% more consults (324) than in the first year of the program. In the laboratory, we proudly received the donation of a GeneXpert machine, which has allowed us to do both HIV viral load testing and tuberculosis testing. MAMI received 593 new pregnant adolescents and performed a total of 1,277 HIV tests. The Student Program received 53 students during the year, 17% of whom were Dominican, and also signed an agreement with the Technical Institute of Santo Domingo (INTEC) for medical students to do their community medicine rotations in Clínica de Familia. With the support of Columbia University, we initiated a research study of the prevalence of sexually transmitted infections (STIs) in key populations. There were also exciting changes on the leadership level this year, the existing Assistant Director was promoted to Research Director and a Medical Director and Program Director were hired.

## Message from the Executive Director

The year 2015 was a great year for Clínica de Familia, with many achievements to celebrate. With the donation of new equipment such as an X-ray machine, echocardiogram, electrocardiogram, MAPA and holter from the Japanese Embassy, we were able to expand the range of services that we offer, with the vision of improving the cost, quality, and efficiency of services for our clients. We also developed a new, strategic plan for the next five years. Some highlights from this year included the provision of mammography services in collaboration with the Office of the First Lady, the inauguration of new services with the participation of the Japanese Embassy, and a large event with youth for World AIDS Day in December. In 2015, we observed an increase in the number of clients coming to our health centers, the budget, and in the number of projects and programs we manage. Without a doubt, this growth is helping us reach our goal of better health for the families in the eastern region of the Dominican Republic.

Mina Halpern Lozada  
Executive Director



## Introduction

Clínica de Familia La Romana, located in La Romana, Dominican Republic, is a non-profit community clinic. It provides primary care services, various medical specialties, HIV care, family planning, imaging and laboratory services. Additionally, it has programs focused on specific populations, such as vertical transmission prevention for pregnant women with HIV, medical care and education for sex workers, a men's health program, and a separate site focused on adolescent care. The psychosocial services include social work services, psychology consults, counseling for HIV tests, adherence counseling, home visits by the community health promoters, support groups for people with HIV, summer camp for children with HIV, and HIV prevention in the bateyes (communities of sugarcane workers). Clínica de Familia is also dedicated to the professional development of international and Dominican students and residents. The vision of Clínica de Familia is to have a community where all families have access to health services in order to enjoy a good quality of life. The mission is to improve the health of families in the Eastern region of the Dominican Republic, including vulnerable people, through comprehensive health services, education, and research. We are committed to working with dedication, respect, confidentiality, empathy, and love.

## History of Clínica de Familia

Dr. Stephen W. Nicholas, a pediatrician who trained in New York, was the pioneer in providing medical care to children with HIV, starting in the 1980s, in Washington Heights and Harlem, New York. He realized there were many children with HIV in the Dominican Republic and in 1999 travelled to La Romana, Dominican Republic to better understand the problem. At that time, there were no medications available in the Dominican Republic to treat HIV. For this reason, Dr. Nicholas created the Columbia University IFAP Global Health Program, which

later became the first program in the Eastern Dominican Republic to prevent vertical transmission, treating pregnant women with HIV and their children. In 2004, IFAP collaborated with the MIR Foundation, the Adoratrices Sisters, and the Ministry of Public Health to establish a clinic providing family-centered HIV care, becoming one of the first health centers in the country to provide antiretroviral therapy to its HIV clients. What started as a program to prevent the vertical transmission of HIV from mother to child, very quickly expanded its mission from giving medical care and psychosocial support to women with HIV and their newborns to also including their families and other vulnerable populations. In 2008, MAMI opened, offering specialized services for adolescents, including prenatal care, family planning, gynecology, pediatrics, consults for young men and various sexual education programs in schools and in the community. Today, Clínica de Familia La Romana is an independent non-profit organization, recognized as a model of comprehensive health services in the Dominican Republic.



## **Clinical HIV Services**

### **Medical Team**

Clínica de Familia, registered as an official HIV clinic by the General Office of Sexually Transmitted Infection & AIDS Control, provides free antiretroviral therapy (which consists of a combination of medications to prevent viral reproduction) and care for clients with HIV. The medical personnel include seven general practitioners, two pediatricians, an internist, an obstetrician-gynecologist, an intern, two licensed nurses, and a nurse-interpreter.

### **Adult HIV Care**

In 2015, 208 new adult clients with HIV enrolled, of which 179 initiated antiretroviral therapy (ART). By the end of the year, there were a total of 1,798 active adult clients, 7% more than in 2014, of which 81.6% (1,409) were on ART. In 2015, there were 17,068 consults in the HIV program, an average of 1,422 consults per month.

In 2015, 33 clients with HIV passed away and 26 clients transferred care to other HIV clinics. The most common reason for transferring care was distance or moving to other locations (see Table 1).

All medical records are audited on a daily basis, in order to ensure the quality of the record itself and the quality of the care being provided. To facilitate the daily monitoring of records we created an electronic database.

In June 2015 an additional internal medical audit was performed of all HIV records with the purpose of identifying the clients who had not been to visits for over three months (this is considered lost to follow-up). In addition to identifying and working to reduce our clients' barriers to care, by the end of December, the clinic reached 22% of all clients who had been lost to follow-up since the beginning of the year.

### **Pediatric HIV Care**

The Department of Pediatrics offers medical consults to HIV-positive children, HIV-exposed newborns, and to HIV-affected children (who have family members with

HIV that receive care at Clínica de Familia). As of December 2015, the Department of Pediatrics had 138 clients with HIV enrolled, where 100% (138) were on ART, 11 of which started treatment during the year. There were no cases of clients lost to follow-up in 2015, but there was a death at the beginning of the year of an adolescent with poor medication adherence (see Table 1). There were 2,498 pediatric consults during the year.

In 2015 the Department of Pediatrics made important improvements in the areas of nutrition, growth, and development of the children enrolled in the program. The Pediatric Nutrition Program, implemented in 2014, expanded to 20 malnourished children. They established criteria to select families who would benefit from monthly food supplements and they created a document for caregivers to sign, agreeing to bring their children to their medical appointments, give them medications, vitamins, and vaccines as well as nutritional support.

### **Vertical Transmission Reduction Program**

The Vertical Transmission Reduction Program is a collaboration between Clínica de Familia La Romana and the provincial Ministry of Health hospital, Hospital Francisco A. Gonzalvo, aimed at preventing the transmission of HIV from pregnant women with HIV to their babies. In 2015, Clínica de Familia La Romana, Hospital Francisco A. Gonzalvo Hospital, and MAMI offered prenatal and post-partum care to HIV positive women and pediatric care for newborns and their siblings.

The program includes three HIV tests for pregnant mothers: a rapid test during their first prenatal visit, a second test three months after their initial visit, and a third test before giving birth. In 2015, 36 pregnant women from Clínica de Familia and MAMI gave birth, 16% less than in 2014, of which 100% were diagnosed through rapid testing of HIV antibodies before birth. Of the children in the program who were born in 2015, including a pair of twins, there were 36 negative HIV



tests, and one pending whose mother was in denial of her condition and refused to have her baby tested.

The program also includes home visits, adherence support, prophylaxis for the newborns in the program, and HIV testing for the newborn at six weeks and six months of age. In terms of educational interventions, baby showers were planned for pregnant seropositive mothers and the mothers of children exposed to HIV, with the goal of reducing the vertical transmission of HIV and infant mortality as well as improving mother-infant health. The baby showers included an educational talk about child care, family planning, and medication adherence. In 2015, there were eight baby showers; with a total of 32 participants (pregnant and new mothers were invited).

Personnel from the Vertical Transmission Reduction team include a program manager, a community health promoter who makes home visits, a coordinator, and a hospital-based counselor. They ensure the vertical transmission reduction protocol is followed with all of the pregnant women and new mothers in the program. The vertical transmission coordinator is a licensed nurse (who also works as a supervising nurse at Hospital Francisco A. Gonzalvo). The coordinator assists the doctor in prenatal visits at the clinic and reaches out to new mothers to encourage visit attendance.

The community health promoter makes contacts in the homes of clients of the program to determine their needs, invites them to baby showers, and ensures they come to visits. She had contact with 36 new mothers over this period. The program's hospital-based counsellor gives support to pregnant women, accompanying them to visits, as well as maintaining communication with the community health promoter and coordinator for any issue that may arise, any necessary information, and better monitoring for each of the clients. In 2015, an auxiliary nurse from the HIV clinic at Hospital Francisco A. Gonzalvo, joined the team in order to give even more personal support to the clients, also collaborating with the distribution of baby formula to newborns. We have had considerable improvement with receiving and distributing baby formula compared to prior years.

**Table 1. Summary of HIV Services, 2015**

<b>HIV Care Program</b>		<b>Vertical Transmission Program</b>		
<b>Indicator</b>	<b>Adults</b>	<b>Children</b>	<b>Indicator</b>	<b>N</b>
New clients	<b>208</b>	<b>8</b>	Women detected before labor who received ART	<b>36</b>
New clients on ART	<b>179</b>	<b>11</b>	Newborns who received AZT for 6 weeks (1 pair of twins)	<b>37</b>
Death	<b>32</b>	<b>1</b>	Women who received baby formula	<b>36</b>
Transfers	<b>26</b>	<b>0</b>	Women who received post-partum HIV care	<b>36</b>
Clients lost to follow-up	<b>202</b>	<b>0</b>		
Recovered clients	<b>147</b>	<b>0</b>		
Total active clients on ART	<b>1,409</b>	<b>138</b>		
Total active clients receiving follow-up	<b>316</b>	<b>0</b>		
Total active clients	<b>1,725</b>	<b>138</b>		
Total consults	<b>17,068</b>	<b>2,498</b>		



## HIV Psycho-Social Support Services

### Social Work

The Social Work Department is in charge of doing socioeconomic evaluations for new clients, which allows us to make equitable distributions of the available resources to benefit the most vulnerable clients. Until 2014, this service was exclusively for clients in the HIV program. In 2015 we decided to also include clients from different Clínica de Familia programs as well as participants from the Adoratrices Sisters' programs. The aforementioned clients were given exemptions and/or discounts for various services like imaging, medical consults, laboratory analyses and others, depending on the need of each client. In 2015, the department performed 183 new evaluations of HIV clients, 135 for general services, and 33 re-evaluations for clients who have not been evaluated during the previous year.

Transport assistance was one of the most solicited services from clients. This support is of the utmost importance because it prevents clients from missing their appointments due to lack of transport. This year, we have continued providing school transport so adolescent clients may attend school.

We have also provided rent support for clients at risk of becoming homeless and food donations for malnourished and/or fragile clients (immobile or bedbound) who are enrolled in the Community Health

Promotion program. Both dehydrated soup packets, donated by BRA-Dominicana/USAID, and pediatric nutrition packets, are provided to children who are underweight or undernourished. Offering this type of nutritional support permits us to reduce the negative impact of food insecurity in the lives of our clients and promote better adherence to their medications.

The Social Work Department continues to improve the support it is able to provide by strengthening relationships other institutions. In this sense, to better benefit clients, in 2015 they signed collaboration agreements with the Central Regional Diagnostic Imaging, Laboratories, and Dialysis (CERDIAL), the Institute of Dermatology and Skin Surgery, and with the Dominican Association of Rehabilitation. We also continue collaborating with the Patronato Benéfico Oriental, National Counseling for Childhood and Infancy (CONANI), the Ministry of Women's Gender Unit for Domestic Violence Cases and Nuestros Pequeños Hermanos, which allows us to connect children with special needs to the appropriate facilities. Through these collaborations, we also referred clients to different specialized services such as mammography, ophthalmology, gynecology, and different surgeries.

During the year we also accompanied and referred clients of Haitian origin to obtain personal identification documents in order to apply for temporary residence. Finally, we ended 2015 offering a gamut of services to 2,442 women and 1,074 men, totaling 3,516 services, 41% more than in 2014.

## Psychology and Counseling

The Psychology Department has two psychologists, who provide psychological support to all clinic clients whether they are children, adolescents or adults. In 2015, the department did 537 counseling sessions, 37% more than the year prior. Of these, 76% (361) belonged to the HIV program. In 2015, the department implemented new tools and forms to improve the quality of the counseling sessions, including new instruments to measure self-esteem and anxiety, among others.

Clínica de Familia offers counseling before and after each HIV test. In 2015, 5,126 HIV tests were performed and 4,733 results were discussed in post-counseling, including 273 positive results. A total of 393 results were not solicited by clients, 8% lower than in 2014 due to improved follow-up during the year and implementing immediate post-test counseling. There is one full-time counsellor, in addition to five trained staff who offer additional support when there is a large volume of clients.

The adherence counseling program is designed to ensure that each client understands the importance of good medication adherence and the importance of not missing any medical appointments. Every client who is going to initiate ART for the first time must attend adherence counseling sessions before beginning treatment and later return periodically to confirm adherence and receive support. The adherence counselors also counsel people who have had problems

with adherence or who have become lost to follow-up. They help them to identify barriers and/or limitations that impede medication adherence or coming to clinic in an effort to find solutions to the problems identified. This year, the department was able to hire a new counselor which has made it possible to offer better service for our clients.

## Batey Program

The Batey Program was implemented to reach the most vulnerable populations within the bateyes in La Romana through educational and prevention-focused activities for HIV and other STIs, performing rapid HIV tests with results provided to the participants and follow-up for people diagnosed with HIV.

This team is comprised of a coordinator, lab technician, two HIV counselors, a health promoter who specializes in re-enrolling patients who are lost to follow-up, and a driver. The team visited one batey per day, Monday through Friday, working to fulfill the goals established by CONAVIHSIDA, who financed the program culminating in March 2015 (see Table 2).

Aside from the work above, this program has allowed the team to reach a better understanding about HIV among batey residents, and the team has been able to refer clients who have been detected to be positive to the clinic.

Table 2. HIV Tests performed by population and location, 2015

Place	Population	Pre-HIV Test Counseling	Post HIV-Test Counseling	Negative results	%	Positive results	%
Clínica de Familia La Romana	Men	1,695	1,593	1,479	93%	114	7%
	Women (non-preg)	3,139	2,860	2,714	95%	146	5%
	Women (pregnant)	292	280	267	95%	13	5%
	<b>Total</b>	<b>5,126</b>	<b>4,733</b>	<b>4,460</b>	<b>94%</b>	<b>273</b>	<b>6%</b>
Batey Program	Men	711	711	707	99%	4	1%
	Women (non-preg)	1,212	1,204	1,196	99%	8	1%
	Women (pregnant)	58	58	56	97%	2	3%
	<b>Total</b>	<b>1,981</b>	<b>1,973</b>	<b>1,959</b>	<b>99%</b>	<b>14</b>	<b>1%</b>





## Community Health Promotion Program

Since the beginning of the Community Health Promotion Program in 2006, Clínica de Familia has been performing home visits for clients of the clinic's HIV program and their relatives, here in La Romana, bateyes, and other towns. The purpose of the program is to provide palliative care, promote adherence, offer counseling, educate, and make referrals.

In response to the needs of our clients, in the last quarter of 2015 a new support group for family members of people with HIV was formed with about 25 participants. The purpose of the group is to discuss themes related to the treatment, care, and support of people living with HIV at home with the purpose of improving the quality of life and health of our clients. The Community Health Promotion team also supports clients in their homes in their process to accept and disclose their HIV status to family members, and supports the adherence of clients. These visits are performed by the community health promoters, who are sometimes accompanied by doctors or a nurse specialized in the care of fragile clients.

Through the Gardening Program, created in 2014, 20 families had functioning kitchen gardens at their homes, with approximately 65 persons reached directly with the intervention. This program had been institutionalized and developed as the year progressed with four educational activities. Two of these activities were possible through the support of the Ministry of Agriculture which helped 13 families. The other two activities were imparted by the World Food Program where one member of each family participated in trainings on the creation, management and care of the gardens, advice regarding the use of recipes with food harvested and their importance as well as the benefits for the family. Also within the program, two home visits were completed with a representative from the Ministry of Agriculture, the first which reached all of the families and the second which targeted families in need of the tools, soil, and pots for planting seeds.

During 2015, the Community Health Promotion Program continued supporting the Social Work Department by distributing nutrition packets to clients in their homes, ranging from bedbound adults to pediatric clients, along with the referral and transfer of clients to external medical appointments.

For the year 2015, the community team offered services to 127 newly enrolled clients, performing a total of 2,547 visits within the bateyes and neighborhoods of La Romana, Higüey, and San Pedro, representing 64.8% more than in 2014. Of these visits, 285 visits were made to 186 clients who required palliative care (see Table 3).

**Table 3. Summary of Community Health Promotion Program, 2015**

<b>Indicator</b>	<b>No.</b>
New clients	<b>127</b>
Contact with subsequent clients	<b>2,190</b>
Contact with female clients	<b>1,267</b>
Contact with male clients	<b>580</b>
Contact with elderly clients	<b>226</b>
Contact with pediatric clients	<b>474</b>
Clients diagnosed with tuberculosis	<b>24</b>
Fragile clients	<b>186</b>
Contact with fragile clients	<b>285</b>
Total families reached	<b>916</b>

## Support Groups

For the year 2015 the Community Health Promotion Program, in coordination with the Psychology Department and the logistical support of the Social Work Department, there were 23 activities for the following HIV support groups: 11 for the adults living with HIV, nine for adolescents living with HIV, three for the family members of people living with HIV. In total, 377 clients participated.

Through these activities we seek to combat the marginalization that many people with HIV suffer and instead create solidarity so clients feel supported by people who are in a similar situation. The end goal is that each client can improve their emotional, physical and health in general. They touch on the following themes: family, medication adherence, HIV and STIs, disclosure of HIV status, and self-esteem, among other themes. Through these support groups there are also social activities to strengthen friendships, solidarity, and support within and outside of the group.

## Activities for children with HIV

### Camp Hope & Joy

In its eleventh year, Camp Hope & Joy had 34 children ages 6 to 10 years during its first week and 44 adolescents between 11 to 17 years of age during its second week.



Each group participated in fun activities involving sports, art and culture, nature, and life skills. The camp theme was “We Paint the World” and each activity and group focused on themes like diversity, countries across the globe, and social involvement.

The camp took place at the Mount of Transfiguration in Jarabacoa, with living quarters, activity rooms, ample green space, a recreational area, nutritious food, and a nearby river. The rooms for the campers were divided by age and sex.

The camp, coordinated by a four-person team of Clínica de Familia staff, had 33 volunteers who received various trainings and talks prior to camp. The participants partook in activities in different areas of the camp inspired by the camp values of love, respect, and safety. This year’s camp focused on promoting cultural diversity and learning about different countries around the world. Campers also had the opportunity to participate in community visits to the School of Art (Week 1) and the School of the Environment of Jarabacoa (Week 2).

Camp included several nighttime activities, including bonfires and plays. There was also a posthumous ceremony with a



small presentation to remember the life of our beloved camp director, Noemí Paniagua, who died in December 2014. In addition to encouraging self-esteem, self-confidence, and the well-being of each camper, each activity was coordinated based on the camp theme with a special emphasis on what it feels like to live in society and recognize that we are all part of a larger community.

During the farewell ceremony, in addition to the arts and crafts made by the campers, they also went home with two special gifts of appreciation, a DVD of photos and a Camp Hope & Joy 2015 T-shirt. As a final touch for each year, Clínica de Familia gave each camper a backpack with useful school supplies, and books.

## Social Events and Holiday Party

This year, the clinic organized a trip to the Archeological Museum of Altos de Chavón, where the younger children, ages 6 to 11 years, had the opportunity to learn



about indigenous Dominican culture and participate in creativity workshops where they could learn how to make cave paintings of the Tainos and ceramics of the era.

The adolescents enjoyed a beach day with games, laughter and fun in a healthy environment, giving both campers and counselors a break from their daily routines.



The annual holiday party closed the year in December with the goal of giving each child in the program a smile and a toy. During an all-day event, 31 kids enjoyed

games, food, and a surprise visit by the mascot of the Toros and the godmother of the La Romana baseball team, the Toros, making this an unforgettable day for the kids and their families.

## General Clinical Services

Clínica de Familia offers a variety of clinical services for the general public. These include primary care obstetrics and gynecology, pediatrics, diabetes care, cardiology, ultrasound services, and family planning (see Table 4). In September of this year, we received a donation from the Japanese Embassy of an X-ray machine which began functioning in November 2015 as well as ultrasound, echocardiogram, electrocardiogram, a holter monitor, and MAPA for continuous blood pressure monitoring. This year 6,726 clients of the general population came to various consults.

**Table 4. Summary of Selected General Clinical Services, 2015**

Indicator	No.
Ultrasound	3,750
Primary Care	2,087
Obstetrics and Gynecology	1,675
Cardiology	308
Diabetes Care	164
X-rays	59



## Family Planning

The Family Planning program was created in August 2011 to meet the family planning needs of our clients. The program also works to clarify doubts and taboos about certain methods and offers the most information possible so clients know which methods are available and decide which is the best fit for their health needs. The clinic offers various contraceptive methods low to no cost, depending on the method. The available methods include the pill, mini-pill, injectables, intrauterine device (IUD), sub-dermal implant (Implanon) and condoms. The program also offers emergency contraception pills.

This year we created a new family planning educational talk, which is facilitated in the clinic's waiting rooms, so that clients have a better understanding of each method. In 2015, the family planning nurse facilitated 67 educational talks for 1,684 clients and 3,686 clients came to family planning for services, of which 31% (1,147) were first time visits.

## Laboratory

In 2015, the laboratory attended to 13,343 clients for a variety of laboratory tests. Among the many tests offered were CD4 counts and viral loads (from December 2015 onward) with the GeneXpert machine. The most often requested tests in 2015 were complete blood counts, HIV, glucose levels, and syphilis. The number of HIV tests increased 55% in comparison to 2014. This year the laboratory received technical assistance from the General Office of STI & AIDS Control (DIGECITSS) and the Center for Disease Control (CDC).

## Pharmacy

The pharmacy at Clínica de Familia offers services to clinic clients and relies on medications donated by the Ministry of Public Health and other organizations, to supplement those bought by the clinic (general medications and those for the treatment of opportunistic infections as well as vitamins). The antiretroviral medications are donated by the Ministry of Public Health.

The purchase of the medications for clients of the HIV program is done in conjunction with the Social Work Department. We have both an electronic system and a manual system to track inventory. Among the most commonly solicited medications are medications essential for the treatment and prophylaxis of opportunistic infections, antiretroviral treatment, analgesics, and antibiotics. In 2015, the pharmacy experienced changes in its infrastructure and internal organization, giving it more space to store medications and supplies. We implemented the use of thermometers to regulate the temperatures of the refrigerators and the pharmacy itself. The pharmacy received technical assistance from the USAID APC project. In addition, due to a donation from the Ministry of Public Health, the clinic was able to resume the prophylactic treatment of tuberculosis with isoniazid for HIV clients.

## Research Department

In 2015 a Director of Research position was created, in order to oversee the various ongoing research projects at the clinic.

In May of 2015, the Clínica de Familia began the Prevalence of Sexually Transmitted Infections (STIs) in Key Populations study (EPIC) with the collaboration and funding of Columbia University. For the purposes of this study, 2,000 participants equally distributed throughout La Romana and Santo Domingo was divided into six key populations. The La Romana study population includes 200 pregnant adolescents, 200 men who have sex with men (MSM) and trans women, 200 batey residents, 200 female sex workers, and 200 HIV-positive persons.



Table 5. Rapid HIV tests performed in the EPIC study, by population, 2015

	Population	Pre-HIV test counseling	Post- HIV test counseling	Negative results	%	Positive results	%
EPIC Study	Men	0	0	0	0%	0	0%
	Women (non-preg)	148	110	146	99%	2	1%
	Women (pregnant)	58	27	58	0%	0	0%
	<b>Total</b>	<b>206</b>	<b>137</b>	<b>204</b>	<b>99%</b>	<b>2</b>	<b>1%</b>

For the EPIC study, participation is voluntary and consists of a questionnaire with questions ranging from the most general to the most private, with respect to the sexual lifestyle of the participants. It also includes specimen collection for oral, anal, and blood tests, Papanicolaou and vaginal swabs in addition to consults and treatment of possible STIs. These samples are sent to the United States, specifically the labs of Columbia University and BioReference Laboratory, where they are analyzed for a variety of STIs, such as human papilloma virus (HPV), HIV, syphilis, trichomonas, gonorrhea, chlamydia, herpes, hepatitis B and C.

As of December 2015 we have worked with three key populations, including 135 participants with HIV, 148 female sex workers, and 58 pregnant adolescents, noting abnormal Papanicolaou results and urea plasma and HPV as the most commonly detected STIs (see Table 5).

## Women's Health Program

This program provides specialized care for female sex workers, with a focus on the prevention and treatment of STIs. The team is made up of an inspector from the Ministry of Public Health, a program coordinator, and a health promoter; the last two are responsible for educating and recruiting clients directly from their places of work: clubs, bars, cabarets, and specific locations within the city. Every three months the clients voluntarily have HIV and syphilis testing. Whenever they present with symptoms consistent with STIs like trichomonas and chlamydia, they also undergo testing and treatment, when appropriate.

In 2015, 2,082 consults were performed, of which 603 were for new clients who represent 17% more clients reached than in 2014 as a result of reinforcing

recruitment. They diagnosed 325 STI cases which correspond to 16% of total clients seen. There were 117 Papanicolaou and 99 KOH tests (to detect trichomonas) for the clients of the program.

## Men's Health Program

The Men's Health Program in 2015 has focused on improving access to comprehensive services for male sex workers, the clients of sex workers, men who have sex with men (MSM), and transgender people. The program has worked to improve the quality of services offered to these populations in La Romana and reduce the stigma and discrimination they face in many public health centers. Even though the program has been structured to offer care to these key populations, the program is open to offering services to all men in need of specialized care, education, and the prevention of STIs and urologic diseases. In 2015, 191 clients of female sex workers, 430 MSM, and 17 trans were tested for HIV through the program. During 2015, we have had 94 MSM consults and 230 clients of female sex workers; 255 were first-time consults and 69 were follow-up visits (see Table 6).

During this year we have continued receiving financial support from USAID/APC/ADOPLAFAM, who covered the costs of the clinical services offered by the program for key populations, activities related to recruitment, and to the treatment of STIs. The program has collaborated in elaborating an antidiscrimination policy; including a poster in the waiting rooms where clients can see the institutional commitment we have made to eradicate all discriminatory practices towards the most vulnerable populations. We have also modified forms used by the program to improve the quality of data collection.



We had two focus groups with trans and MSM populations who have received services through the program in order to collect information on the scope of specialized health services offered through the program and to understand the level of satisfaction of their basic healthcare needs. The levels of satisfaction expressed by both groups were very high and they felt well attended and treated by our services and our providers. We also performed an evaluation of the program as part of a project by two Columbia University students to determine if the implementation and the services offered fulfill the program goals and then offer recommendations for improvement.

	<b>Total</b>
Total consults	<b>324</b>
Consults with MSM, trans	<b>94</b>
Consults with clients of female sex workers	<b>230</b>
First-time consults	<b>255</b>
Follow-up consults	<b>69</b>
# of condoms distributed	<b>28,731</b>
# of lubricants distributed	<b>5,257</b>

In 2015 we held seven workshops about who we are as Clínica de Familia, the services we offer, and promotion regarding the Men's Health program and STI prevention for the police and the military.

## **Maternal-Infant Health Annex (MAMI)**

MAMI makes up the adolescent unit of Hospital Francisco Gonzalvo, with the support of Clínica de Familia. During 2015, MAMI successfully continued its comprehensive sexual education program in the schools of La Romana and the bateyes, facilitating sessions on the reproductive system, family planning, sexually transmitted infections, HIV and discrimination, and the prevention of adolescent pregnancy, reaching 20% more students (2,813) than in 2014. With regard to consults, 2015 had an increase in the number of overall visits, an increase in the number of young men attending the Young Men's Clinic (76), and increases in the number of family planning visits by 9% (3,215) and pediatrics by 10.5% (1,076) (see Table 7).

In addition to the educational sessions with high school students in 2015, a few sessions were geared toward pre-adolescents. These were specifically



requested by the directors of a few schools and led to the creation of lesson plans for pre-adolescents, with the technical Assistance of Planned Parenthood of the Great Northwest and Hawaiian Islands.

The group of peer educators are made up of high school students who receive the sex education programming at their schools and demonstrate an interest in giving similar talks to their peers. They are trained for three months, participating in various activities and workshops. The peer educators helped facilitate the sexual education program in schools, participated in community marches for the prevention of adolescent pregnancy and helped facilitate sessions for peer educators in Caleta, among other activities. A few of the peer educators of 2015 participated in television programs sharing their testimonies, in theater skill development workshops, and in the Chica Latina Tour Conference of 2015. In June, two new groups formed, with a total of 40 peer educators. Both groups finished training in December and celebrated a joint graduation.

<b>Age</b>	<b>10 - 14</b>	<b>15 - 19</b>	<b>Total</b>
<b>Obstetrics</b>	212	3,293	<b>3,505</b>
<b>Psychology</b>	87	1,437	<b>1,524</b>
<b>Gynecology</b>	18	1,839	<b>1,857</b>
<b>Young Men's Clinic</b>	13	63	<b>76</b>
<b>Pediatrics</b>			<b>1,076</b>
<b>Family Planning</b>			<b>3,215</b>
<b>HIV Tests</b>			<b>1,277</b>
<b>TOTAL</b>			<b>6,630</b>



During 2015, MAMI also strengthened its community outreach program, organizing seven events in different sectors of La Romana and the bateyes. During these events, with the support of the peer educators, they offered education on the prevention of adolescent pregnancy, family planning, and the HIV/STI prevention. Free, rapid HIV tests were performed for those interested.

For the third consecutive year, MAMI joined with Clínica de Familia and the support of the



Ministry of Public Health and the Ministry of Education, to commemorate World AIDS Day on the first of December with an event in which students from five schools presented diverse themes related to HIV. The three best presentations from each category were awarded prizes. Approximately 100 people participated, including students, spectators, and guests. This culminated in the participation of young peer educators of the MAMI from Batey Guerrero with a theatrical presentation.

MAMI's family planning program has continued with multiple contraceptive methods available. One of the goals of family planning is to continue to increase the number of clients who have never been pregnant who request birth control methods. Furthermore, the family planning nurses have been able to refer many clients to gynecology, Papnicolaou and HIV testing. Postpartum family planning services were provided in the maternity ward of Hospital Francisco Gonzalvo. The adolescent clients in the postpartum program received follow-up at MAMI during their children's visits with the pediatrician.

Also during 2015, the pregnant adolescents continued receiving HIV testing during their prenatal visits at MAMI. The number of non-pregnant adolescents who

volunteered to have HIV testing has increased, principally thanks to internal referrals from gynecology, family planning, and the Young Men's Clinic.

## Student Program

In 2015, the student program received a total of 53 students and professionals in the health sciences, largely Americans (45). The number of Dominican students increased by 29% (9) from 2014. Medical students, nursing and public health, doctoral students, Dominican interns, American and Dominican residents, visitors and volunteers participated. The rotations of American students included participants from Columbia University (medicine, public health, and nursing), Northwestern University, the University of Michigan, the University of Texas–San Antonio, and the School of Nursing Hunter-Bellevue.

For the third consecutive time, two medical interns from the University of Santo Domingo Pedro Henríquez Ureña (UNPHU), and for the first time, two interns from the Technological Institute of Santo Domingo (INTEC) completed rotations in community medicine in Clínica de Familia. Also in 2014, the program received two university students for mentorship in global health research. Eight family medicine residents also visited the Clinic during the year accompanied by two Columbia University professors as well as two graduate volunteers from Vanderbilt University and Wellesley College.

Apart from clinical rotations and observations, students and residents undertook public health and/or research projects. Projects included evaluations of the Men's Health Program and Camp Hope & Joy, assistance with the Prevalence Study of STIs in Key Populations (EPIC), and the development of a local research ethics committee. Clínica de Familia continues to be part of a network of university institutions, whose goal is to better the quality and health of clients in the Dominican Republic.



## Quality Improvement

Clínica de Familia has nine different committees, each with specific goals and a commitment to improving the quality, efficiency, and safety of the clinic. Each committee is made up of a group of between 5 and 20 staff that work to achieve their goals through diverse activities, monthly meetings, and action plans.

**Committee for Excellence (CIPEX):** This committee aims to continually improve the quality of services offered, seeking solutions to problems that arise through action planning sessions. One of the initiatives of the quality improvement program was the creation and implementation of a REDCap database in February 2015 for the HIV counseling program, in order to improve data collection. Also during the first trimester of the year, the committee facilitated a process mapping exercise for the Psychology Department, in addition to the introduction of new instruments (clinical history for adults, adolescents and children, evaluations, and psychological interviews). In June 2015, the committee audited the HIV program and reviewed 1,516 records to evaluate some important medical criteria like the physical exam and date of last CD4 and viral load, in addition to clients lost to follow-up. Finally, in December, they implemented new tools for improvement called the “PDSA Cycle” (Plan, Do, Study, Act), identifying problems and possible changes in a single area and making adjustments for improvement. The same cycle was implemented as a pilot plan in HIV counseling with positive results.

**5S Committee:** This committee was created in September 2015, based on a Japanese model of quality improvement aimed at ensuring that every area and department is organized, clean, safe, and productive. During the last trimester of the year the 5S was applied to every exam room and office of the Clinic, achieving improved organization and efficiency.

**Committee for Industrial Safety:** Also created in September, this committee is aimed at monitoring, guiding, and instructing staff to correctly use the protective gear; maintain preventative measures, hygiene

and safety in order to prevent occupational risks. From September to December each department proceeded to inspect their area with the goal of creating an action plan to minimize the likelihood of work-related accidents.

**Women’s Health Program:** This multidisciplinary team works to offer appropriate and efficient services to orient clients, improve the quality of the services in the program, and agree upon solutions to problems identified within the Women’s Health program. During the year, the committee performed an evaluation and modification of the clinical history form of the Women’s Health program. In February, the program was audited with the objective of improving the organization of the medical records and lab results.

**Men’s Health Program:** This multidisciplinary team works to provide friendly, quality care to all men through a package of services offered in a safe space.

**Pediatrics:** This team works to increase inter-departmental communication and teamwork, searching for new ideas and solutions to problems, and offering follow-up, in order to improve the care and health of our pediatric clients.

**Family Planning:** This committee aims to improve the family planning services in relevant areas, working to fulfill the goal of reducing unplanned pregnancy and strengthening the knowledge of the multidisciplinary team.

**MAMI:** MAMI’s monthly meetings are aimed at sharing the month’s events with MAMI personnel, bringing up relevant information or resolutions to situations that have arisen, and recognizing the accomplishments of the staff. The goal is that all of the staff participates in improving the services and programs offered at MAMI.

**Committee for Narrative Medicine:** This committee was formed June 2015, creating a space to reduce the stress of staff at work and to reflect on different feelings and conditions of the human experience in order to identify and better understand each client’s situation through history, text, and creative works.





**Committee for Cultural Competency:** Established in March 2015, the purpose of this committee is to enable us to learn and understand other cultures to lessen the barriers of prejudice, stigma, discrimination, and racism among staff and clients.

**Social Committee:** This committee was created with the objective of having our staff participate in healthy activities outside of the work space, where they can let go of daily stress and have the opportunity to get to know each other better. To that effect, they organized various activities in 2015 like the cookie contest, group outings to Toros baseball games, karaoke night, and the annual holiday party in December, among others.

**Green Team:** This committee was formed in 2014 with the end goal of contributing to the protection and conservation of the environment through education and activities directed at reducing the impact of environmental contamination with respect to work, the community, and the home. In 2015 the Green Team contacted recycling companies and environmental organizations and spearheaded the clinic's recycling initiative to recycle all paper, cardboard, and used cartridges. Clinic staff also participated in World Beach Cleaning day.

**Leadership Team:** This team has the goal of evaluating and improving the function of Clínica de Familia from an administrative and programmatic perspective. This includes providing oversight of the institutional goals and the strategic plan, creating and maintaining a positive work environment, and finding solutions to human resource situations.

## Informatics

During 2015, the Informatics Department implemented important changes in the Clinic. In the first trimester they proceeded to restructure the internet network. Towards the end of the year, the Clinic acquired a new photocopier and the Pharmacy Department began using a new medication management system. The Informatics Department also redistributed security cameras and implemented a radio communication system for the

security personnel to ensure better vigilance of Clinic infrastructure, supplies, clients and personnel.

## Public Relations and Fundraising

The department was established in 2014 in order to publicize the services and accomplishments of the Clinic to the community. In 2015 this department created a new marketing plan, spearheaded a mammography event in collaboration with the Office of the First Lady, and implemented a survey of 263 people — including doctors, clients, and community members— to evaluate what additional services should be considered at the clinic. Lastly, the department assisted with the annual health fair, held in November, to celebrate the Month of the Family, where primary care, gynecology, and pediatric services were offered at half price.

With regard to advertising, the department created radio and television commercials, playing them throughout the year on multiple stations and television programs. Other promotional accomplishments of 2015 include sharing activities and services on our webpage and on Facebook, and publishing articles in national and local journals such as Zona E, Casa de Campo Living, Bayahibe News, and the Tren del Este, among others.



In the area of fundraising, it is important to mention the donation from the Japanese embassy which included new imaging equipment.

A pilot program was established to acquire donations from our clients during the months of November and December to be used by the Social Work Department for clients with HIV. In December we were able to launch a fundraising campaign on the Dominican platform Jompéame in order raise money for our children's holiday party.



## Administration and Human Resources

At the end of 2015, Clínica de Familia proceeded to modify its organizational structure, which resulted in separating the responsibilities of the Assistant Director in order to create three new positions: Medical Director, Program Director, and Research Director. By the close of the year, the Clinic had on 92 staff.

In an effort to improve the quality of administrative services, two new committees, industrial security and 5S, were created. A code of ethics was institutionalized, as was a policy on staff incentives, and the first steps were taken toward formulating a sexual harassment policy for the Clinic. Within the personnel training program, there were six training workshops on a variety of topics. The procedure manuals for each department were also completed.

## Accounting

The Accounting Department is in charge of controlling and administering the financial resources of Clínica de Familia to ensure the adequate and transparent use of funds for each program. This department consists of a comptroller and two accounting assistants.

According to the financial management of Clínica de Familia in 2015, there were stable sources of revenue (the majority of these were from donations and grants). The total amount of revenue was US\$1,498,148 and the total amount spent was US\$1,388,064 (see Table 8). The largest expenditure corresponded to payroll and supplies.

**Table 8. Financial Information**  
(values expressed in USD)

	<b>2014</b>	<b>2015</b>	<b>Increase</b>
Income	1,376,505	1,498,148	8.84%
Expenditure	1,281,311	1,388,064	8.33%
<b>Financial Sources</b>		<b>Income</b>	<b>Percentage</b>
National donations		115,170	7.7%
International donations & grants		1,039,812	69.4%
Self-generated income		343,165	22.9%
Government grants		---	---
<b>Total revenue 2015</b>		<b>1,498,148</b>	

