



# IMPROVING THE QUALITY OF MIDWIFERY PRACTICE THROUGH ADVANCED MIDWIFERY AND WOMEN'S HEALTH EDUCATION

By

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# Aim of presentation

- To give you an overview of a Masters degree programme that was developed by ECSA HEIs with a view of improving MDG 5 and neonatal mortality (part of MDG 4); and the progress made so far
- This programme fits into the theme of “improving access to quality care to achieve the MDGs.”

# INTRODUCTION

- In 2006 the ECSACON in collaboration with the health section of the Commonwealth Secretariat, UCLAN, IGNOU and partners in the ECSCA initiated the development of a Masters in program in Midwifery and women's Health for the ECSCA region
- This was in response to the need for midwives identified by many commonwealth countries within the ECSCA region

# Introduction Cont'd

- The development of the programme was made possible because of financial support from Commonwealth Secretariat and the British Council
- ECSACON was the driving force behind the activities
- Thanks for their support

# Background information

## High maternal and neonatal mortality

- 585,000 women die each year from pregnancy and childbirth
- 99% occur in developing countries, particularly Africa (WHO, 2006)
- In developed countries, maternal mortality ratio averages around 21 maternal deaths per 100,000 live births.

## Background information Cont'd

- Ratio in developing countries – 440 per 100, 000
- The ratio is more acute in sub-Saharan Africa
- In some countries the ratio is over 800 per 100,000
- Chances of woman dying in from pregnancy-related causes in Africa is 1:16

# Background information cont'd

## Millennium Goals

- 5<sup>th</sup> millennium goal calls for improving maternal health
- Progress is assessed against the target of reducing maternal mortality ratio by  $\frac{3}{4}$  by 2015
- The target for the 5<sup>th</sup> goal is that 90% of births should be attended by skilled attendant by 2015 in regions where there are routinely available
- In Africa only 42% are attended by skilled personnel

# JUSTIFICATION FOR DEVELOPING THE PROGRAM

- Countries in the ECOSA region are very far from reaching this target due to shortage of midwives
- This situation could be improved by training more well qualified midwives
- Most of the countries in ECOSA region have no midwifery educators' programme



# JUSTIFICATION FOR DEVELOPING THE PROGRAM Cont'd

- In sub-Saharan Africa Midwives wishing to develop their professional skills have been forced to do so in developed countries
- This further compounds the problem of shortage of staff
- The ECSA region Masters programme is of international standard but at the same time it is tailored to meet the needs for the ECSA region and training will be within the region

# JUSTIFICATION FOR DEVELOPING THE PROGRAM Cont'd

- The goal of the program is to increase number of midwives in the ECSA region by increasing number of well qualified midwifery educators who will, in turn educate midwifery students.
- The plan is for countries to offer the program as long distance education for midwifery educators or by the traditional method.

# JUSTIFICATION FOR DEVELOPING THE PROGRAM Cont'd

- The program is designed to prepare advanced practitioners who will be expected to take a **leadership** role in midwifery and women's health care and influence policy, **perform evidence** –based care, **teach midwifery** and RH, critique and **conduct research** and be consultants
- Emphasis is in clinical specialisation
- A dissertation is a requirement in the programme and students will be encouraged to disseminate through conferences and publication

# Methodology

- The programme was developed through consultative meetings and workshops among ECOSA member countries in Malawi, India, Uganda, Kenya and South Africa.
- Representatives of HEIs who Participated were from Malawi, South Africa, Tanzania, Mauritius, Namibia, Zambia, Kenya, Uganda, Swaziland, and Seychelles
- The end product was a core curriculum based on shared goals to be adapted to suit each country's specific need.

# Methods/Approaches

- A variety of methods were used during the workshop:
  - Discussions
  - Group work
  - Group presentations
  - Plenary sessions

# Curriculum framework

## Modules (10)

1. Advanced Midwifery practice
2. Cultural and Political Perspective of Child birth
3. Educational approaches
4. Leadership and management
5. Research methodology and evidenced based practice.
6. Trends and issues in midwifery practice
7. Women's health and community midwifery
8. Strategic Communication
9. Family centred approach
10. Dissertation

# Common Principals

1. Be cross-national and transferable across borders
2. Increase number and capability of nurses/midwives in **teaching and clinical skills**
3. Be evidence based, adaptable and flexible
4. Permit cultural diversity and be politically acceptable
5. Include monitoring and evaluation mechanisms to assess effectiveness and impact
6. Meet prescribed standards (regional, national, international)

# Accreditation of the program

- Certification will be done by each participating University (offering the program)
- ECSACON will give a fellowship award.
- UCLAN will conduct and certify the Master of Science Degree programme for phase one (Capacity Building) and graduates will be eligible to the ECSACON fellowship award



# Challenges

- Funding for the programme is a major problem
- There is need for financial support and capacity building to support the programme
- Need for capacity building for some HEIs

# Progress so far

- The programme was developed in 2007 and launched in February of 2008 in Seychelles.
- So far Malawi is the only country that started the programme and is offering it as a full time programme.

UCLAN is offering the programme as distance education

- Zambia and Uganda are in the process of developing their own programmes

# The case of Malawi

- Ministry of Health through the Director of Nursing Services and the Director of Nursing Education were briefed about the programme and were supportive.
- They commended the program and we were assured of their support – including funding of students

# The case of Malawi Cont'd

- KCN adapted the curriculum to suit the Country's specific needs e.g. we added Health policy, planning and financing and pharmacology. Culture module does not stand out on its own, it is imbedded in the other modules e.g. advanced midwifery and women's health module. Bioethics is a separate module
- We consulted widely with stake holders so that they know about the programme and also for their input

# The case of Malawi Cont'd

- Wide consultation was essential to promote ownership by stake holders
- We circulated the curriculum to Ministry Health, Nurses and Midwives Council of Malawi, Director of SWAp in Malawi, other Nurse leaders and stake holders. There were also meetings held with key stakeholders
- At College level the document circulated to Principal, Deans and Heads of department

# The case of Malawi Cont'd

- After getting feedback from the stakeholders, the curriculum was completed and submitted to University wide Academic Courses and Academic planning Committee - Members are from 5 University Colleges to ensure that the programme fits the national standards
- Then the programme was submitted to Senate for approval.
- Approval was obtained in February 2008
- The programme was launched in a big way in May 2008.

# The case of MalawiCont'd

- Invited guests included the Minister of Health, Director of Nursing Services, Director of nursing Education, Director of SWAp, representatives from UNFPA, DFID, JHPIEGO, USAID, Principals and Deans from other University Colleges, UNICEF
- The programme commenced in 2008 and the students are in their 2<sup>nd</sup> year of study with 10 students.
- Six students are sponsored by MoH, 2 by USAID and 1 by a project. The programme is going on well

# The case of Malawi Cont'd

- Our appreciation goes to the Ministry of Health for their support
- They saw the need for the programme – and they particularly wanted clinical specialisation
- They are sponsoring most of the students -



# Conclusion

- To achieve MDG 5 – there is need for well trained Midwives to take leadership in Midwifery and Women's health practice
- To have well trained midwives we need well educated Midwifery Educators
- To achieve MDG 5 and reduce neonatal mortality the midwives be well informed in other RH issues such as family planning, Adolescent health, STIs and HIV, Gender issues, male engagement.
- Knowledge of Research is also important

# Conclusion

- This is what this Masters programme is offering.
- It is one of the major pathways to improving access to quality midwifery and women's health care to achieve MDG5 and part of MDG4.

# Conclusion

- THANK YOU FOR LISTENING