

Southern Ethiopia Gwent Health Link. November 2011

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Midwife and Lactation Consultant. This was my first visit to Ethiopia with the Link but I have much experience of living and working in Ethiopia. I have worked with midwives and traditional birth attendants previously in rural and urban Ethiopia.

- My role in the Link was part of the midwifery teaching team. The first week teaching midwifery trainers and midwives and the second week teaching Health Extension Workers.
- My own objectives were to be part of a team delivering relevant education to Ethiopian health workers involved in teaching and caring for pregnant and newly delivered mothers. A focus on improving the delivery of service provision at grass roots level, ie with the HEW's, ultimately will have the most significant effect on mother's lives. As a community we are far off achieving the MDG's, specifically no. 5. Ethiopia has a maternal mortality rate of 720 per 100,000 births (2005) and many women give birth in rural areas without being attended by a skilled birth attendant. These objectives are linked to the Links objectives as the midwifery training focused on empowering midwifery trainers, midwives and health workers to improve the services they are delivering in their respective work places. The training involved many Ethiopian Health workers and therefore should be sustainable with ongoing support.
- Activities. Week 1. Hawassa referral hospital . Initially training midwifery trainers from each university in SNNPR. This training included how people learn, the benefits of using different teaching methods. Teaching innovative teaching methods including lots of group work and practical skills sessions to enable discussion to aid the learning process. Also covered was obstetric emergencies, managing normal labour effectively, breastfeeding and kangaroo care. Midwives joined towards the end of the week and the trainers had a chance to practice their new teaching skills. The midwives benefitted through learning more effective teaching methods to pass on to health extension workers and mothers in their care.
Week 2. Yirgalle, Halaba and Soddo. The second week was more informal and the teaching was for up to 110 Health Extension Workers in rural areas in 3 different locations. As the people delivering care to women in their homes and at Health posts, HEW's are vital in ensuring the health of women in their community's and a very important link in reducing maternal and child mortality in rural Ethiopia. The HEW's had differing levels of experience ranging from no deliveries to 31 deliveries at home and at the health posts. Some had experience of delivering twins and breech births in the women's homes. Some had attended the governments 1 month course aimed at Safe Delivery.
- The outcomes of the Midwifery Team's objectives were met in as much our teaching schedule was delivered as planned. The individual evaluations completed by the

Midwife trainers and the midwives showed that they felt the training had benefited them and identified new teaching methods and ideas for their lessons. (though I have not read all the evaluations) Regarding the HEW training there were some problems for the women coming at the wrong time and on the wrong day which meant they missed the whole training in some cases. This error was not due to the Link.

- Three key impressions from the visit are:
 1. A high level of theoretical knowledge by Ethiopian midwives but a difficulty in transferring that knowledge practically. Also a reluctance to care for women offering a woman centred approach; trainers and midwives feel unequipped and unsupported (managerially) to change the way they care for women.
 2. Health Extension workers are vital in improving the health outcomes of pregnant and newly delivered mothers and their baby's. I would like to see a stronger focus on training HEW's delivered at their place of work.
 3. Teaching equipment donated by the Link was essential to achieving successful outcomes for both the trainers, midwives and HEW's.

- Regarding next steps in delivering training for midwives and HEW's I feel the team should build on the current achievements. The training was very successful and improvements could be made with extra teaching resources such as dvd's and posters and other interactive means, and continued use of different teaching methods. I would like to see a continued focus aimed at encouraging midwives and carers to think differently in how they care for women. This applies to the trainers, midwives and HEW's. I would also like to see more training for HEW's as mentioned. I would also like to see a concentrated focus on enabling health workers to work more using their own initiative and to encourage them to feel they have 'ownership' of their work, their decisions and what that means for women in their care.

- Personally I benefited hugely from the visit. I love Ethiopia and the people and it was wonderful to be working with Ethiopian midwives again. I feel passionately about enabling health workers in Ethiopia to improve the maternal mortality rates in their country as much as possible given their reduced facilities and resources to hand. It was also lovely to get to know members from the Link and to work together delivering an effective programme under difficult circumstances. (at times!)