

EVIDENCE AND ACTION

GOOD PRACTICES on Strengthening Midwifery Services to Avert Maternal and Newborn Deaths

Bangladesh

Intensified Efforts to Reduce Maternal Death through Education and Development of a New Cadre of Professional Midwives

The largest and most densely populated of the least developed countries, maternal mortality in Bangladesh has been declining since the 1990s. The increase in female education and the deployment of family planning services have brought advances in women's health and the country is making rapid progress towards achieving MDG 5.

Attendance at birth by skilled personnel, however, is still low at 18 per cent in relation to the estimated 3 million births per year. In addition, there are gaps in the delivery of essential reproductive, maternal and neonatal health interventions at various levels of the healthcare system.

Midwives as a separate professional cadre did not exist until 2010 and it is an area that is being developed through two midwifery programmes: (a) a six-month certificate in midwifery programme for nurse-midwives and (b) a three-year direct-entry diploma midwifery programme.

The Government of Bangladesh, with support from UNFPA (United Nations Population Fund) and WHO, has committed to double the percentage of births attended by a skilled health professional by 2015 by developing, educating and certifying a new cadre of professional midwives.



Implementation Strategies



Cognizant of the need to intensify efforts to ensure that midwives are available to provide quality skilled attendance, the Government, with technical and financial support from UNFPA and WHO, has embarked on a programme to scale up midwifery education and post 3,000 midwives nationwide by 2015 as its pledge to the UN Secretary General's *Every Woman Every Child Strategy*.

- A six-month advanced midwifery education programme was launched in August 2010, specifically designed for existing nurse-midwives to train them to meet international International Confederation of Midwives' standards. The first batch started in three nursing institutes and later this was scaled to 20 training sites.
- To address the severe lack of qualified midwives, a more sustainable, long-term three-year direct entry diploma midwifery programme was launched in December 2012 nationwide.
- To ensure high quality midwifery education, faculty members have been regularly trained over the last two years. More training for trainers is underway to meet the demand for qualified teachers in the three year midwifery programme.

Progress and Results

Over the last three years, progress has been achieved in terms of the number of students graduating from the six-month midwifery programme.

In 2010, 138 participants attended the six month training-of-trainers courses; more than 500 women completed the trainers programme in 2011 and 2012 and nearly 200 enrolled in 2013. The three-year direct entry programme has enrolled 525 students who are expected to finish in 2015 (see chart). As a result, Bangladesh is building a cadre of trained midwifery tutors who can support the new three-year direct-entry midwifery programme.

Some 6,500 Bangladeshi high school graduates applied for the three-year direct entry programme in 2013.

To ensure that midwifery education is in line and consistent with the national health sector programme, members of the Bangladesh Midwifery Society are actively participating in human resource planning with the Government of Bangladesh in focusing on maternal and newborn health care services.

Number of midwifery teachers trained, graduates and students in the six-month programme and students in the three-year direct entry programme (2010-2013)



Lessons Learned

- The support and commitment in reducing maternal mortality by top leadership, such as the Prime Minister of Bangladesh, has been vital in promoting national efforts to train and increase the number of skilled and competent midwives to achieve MDGs 4 and 5.
- One priority for human resources for maternal and newborn health is to develop a deployment plan of the educated midwives and strengthen regulation to ensure 24/7 quality midwifery services in all health facilities. This requires a strong body of experienced midwives to act as tutors and supervisors.
- International support to develop a robust and sustainable workforce by scaling up midwifery education is essential, especially in countries like Bangladesh. The establishment of midwifery training institutions and posting of two full-time dedicated international UNFPA midwifery advisers, for instance, has contributed towards strengthening local midwifery capacity and in coordinating activities at various levels.

Partners

Ministry of Health and Family Welfare, Bangladesh Nursing and Midwifery Council, Directorate of Nursing Services, Bangladesh Midwifery Society, Swedish International Development Cooperation Agency (SIDA), Die Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), International Confederation of Midwives, White Ribbon Alliance, Auckland University of Technology, WHO and the UNFPA Bangladesh Country Office.

Acknowledgments and Further Information

This case study was produced in collaboration with UNFPA Technical Division, Programme Division and the Bangladesh Country Office with inputs from the following experts and consultant: Arthur Erken, Anna af Ugglas Nygren, Michaela Michel-Schuldt, Rene Desiderio (Fordham University Institute of International Humanitarian Affairs) and Geeta Lal.

For more information about this practice, please contact: bangladesh@unfpa.org

Photograph cover: © UNFPA. Photograph Interior panels: © Jhpiego/ACCESS-FP



United Nations Population Fund
Programme Division
605 Third Avenue
New York, NY 10158
www.unfpa.org