South-South Cooperation for Sexual and Reproductive Health and Reproductive Rights: Midwifery

Upgrading Midwifery Education Programme and Services -Sudan and Morocco

This case describes a learning and networking visit where key policy-makers and technical experts from Sudan learned from Morocco’s midwifery programme. The learning provided a guide for improvements of the Sudanese programme.

Issue

In Sudan, nearly three quarters or 72.3 per cent of birth deliveries occurred at home, and most of these were assisted by midwives. The country, however, lacked a skilled and competent cadre of midwives that meets the International Confederation of Midwives (ICM) global standards for midwifery education. The capacity of “community midwives,” in particular, was limited and, hence, was not capable of providing the full range of family planning services or any type of emergency obstetric care in the absence of medical professionals in the field. There were many gaps in the quality of care provided by midwives in villages, as well as in health facilities.

At 311 deaths per 100,000 live births, Sudan had a very high maternal mortality ratio, and it was higher for women living in rural areas and among poorer communities. The neonatal mortality rate was also high ranging from 34 to 47 per 1,000 births. Studies revealed that the majority of neonatal mortality occurred at home, where unskilled birth attendance was utilised. The Government of Sudan recognises that it was imperative to build local midwifery capacity to provide quality maternal and newborn health care services.

Towards a Solution

Aware of the need to ensure that midwives are available to provide skilled quality attendance, the Government of Sudan, with technical and financial support from UNFPA, embarked on a South-South cooperation initiative with Morocco to help build its midwifery education programme and services.

Sharing a similar culture with Sudan, Morocco was successful in improving maternal health in general and, more specifically, in delivering improved midwifery services. Sharing its experience with Sudanese counterparts through study tours, would be beneficial, especially in addressing the three pillars of the midwifery programme: education, regulation and association.

Thus, a team of technical experts and decision makers from Sudan, including representatives from the National Reproductive Health Programme, the Academy of Health Sciences, the Primary Health Care Expansion Project of the Ministry of Health and midwifery educational institutions, participated in exchange and learning visits to Morocco that included meetings with relevant departments in the Ministry of Health of Morocco, the Higher Institute for Nursing and Health Techniques,
the Maternity Hospital and the midwifery and family planning associations. The interactions between the countries involved many institutions.

Results

Following the exchange and learning visits to Morocco, the Ministry of Health of Sudan, with technical support from UNFPA, developed an action plan for strengthening the midwifery programme. A series of meetings were organised with policy makers in the Ministry of Health and Ministry of Higher Education to advocate for adopting the Moroccan model of midwifery education. The efforts succeeded, and a decision was made to discontinue the community midwife education programme and replace it with a professional education programme that follows the ICM global standards.

The learning visits covered various aspects of a midwifery programme, including educational institutions and curriculum, regulatory framework, work settings, quality assurance and supervision, practice standards, retention and motivation of midwives as well as organisation and activities of midwifery associations. Strategic and guiding documents on midwifery were shared by the Moroccan team with permission to use them to guide the development of similar programmes in Sudan. Furthermore, the two governments agreed to further strengthen their collaboration in midwifery and other health programmes.

A midwifery programme gap analysis was conducted and specific areas that need improvement have been identified. The Ministry of Health of Sudan mobilised resources from the Carter Center in addition to UNFPA resources to support the preparation of the new midwifery programme. A new midwifery curriculum was developed and four schools in different states of Sudan were selected and equipped to host the new programme, which was launched in September 2018. In addition, two universities have started a midwifery diploma programme.

Lessons Learned

Shared culture, values and norms between two collaborating countries, such as Sudan and Morocco, is important particularly in dealing with a sensitive issue relating to sexual and reproductive health. In addition, the support and commitment of top leadership are vital in building and strengthening local midwifery capacity that meets international standards and in the establishment of quality midwifery educational institutions.

Partners

Federal Ministry of Health, Sudan
Academy of Health Sciences, Sudan
Ministry of Health, Morocco
Mohammed VI University of Health Sciences, Morocco

Contacts

Yousra Abdelgabbar, UNFPA RH Programme Officer in Sudan (abdelgabbar@unfpa.org)
Lina Mousa, UNFPA Representative in Sudan (lmousa@unfpa.org)