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International Cooperation: Strengthening Midwifery in Central Asia

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Abstract:
Even 25 years after their independence, the Central Asian States (Kyrgyzstan / Tajikistan / Uzbekistan) are facing enormous challenges in the health system. Several years ago it became obvious that the MDG 4 and 5 would not be fully achieved. This led to an increased support of the health systems of the concerned countries by Germany’s International Cooperation. The GIZ Regional Health Programme in Central Asia placed great emphasis upon increasing the number of births attended by health professionals, including midwives. The strengthening of midwifery as a model of a sustainable maternal and child health relies on a broad based programme including education, regulation and association. The mutual contact among the midwives in the Region and their collaboration with international partners received equal attention and support. The foundation of national midwifery associations, their membership in the ICM and the continuing further training in all relevant areas of practical midwifery knowledge and science are proof of a successful implementation of this international collaboration.

Key Words: Central Asia, GIZ Regional Health Programme, Midwifery Services

Background:
The Central Asian states – Kyrgyzstan, Tadjikistan, and Uzbekistan - are fairly unknown, not only in western countries but also in many Asian countries, where the societies, as well as their health care systems, are facing some similar challenges. Since independence, in the early 1990s, the Soviet structures were hardly adapted to today's demands. The limited financial and human resources have led to stagnation in maternal and child health, and the MDG 4 and 5 goals, set in 2000, could not be achieved1.
The expansion of quality midwifery services could contribute to better maternal and newborn health outcomes in Central Asia, but some fundamental challenges still need to be overcome. Under the existing legal frameworks midwives are not regarded as autonomous professionals with the authority to oversee women with normal physiological pregnancies and births. Midwifery services in this region are dominated by physicians and the standing of midwives within the health system is low. The quality of midwifery education is compromised due to lack of clear standards; an emphasis on theoretical, rather than practical training; physician-led instruction; and a limited technical resource base. Particularly in rural areas, where midwives are often the only skilled personnel available to attend births, these deficits in education and training, along with other factors such as inadequate infrastructure and a weak patient referral system, contribute to poor maternal and neonatal outcomes. Finally, there are not yet strong professional associations which can effectively advocate for policy changes and better working conditions for midwives.

**International Cooperation:**

The Regional Programme Health in Central Asia, commissioned by the German Federal Ministry for Economic Cooperation and Development (BMZ) and implemented by GIZ GmbH (German International Cooperation), aims to improve the quality of sexual and reproductive health in Kyrgyzstan, Tajikistan, and Uzbekistan by strengthening the countries’ healthcare systems. Working in partnership with the ministries of health, youth, social development, and education, as well as civil society organisations, the programme develops the capacity of medical and non-medical professionals, strengthens medical accreditation, improves quality management, and promotes public awareness about reproductive health. Strengthening midwifery and cooperation with the midwifery associations has been one of the priorities.

The GIZ Regional Programme Health in Central Asia has placed great emphasis upon increasing the number of births attended by health professionals, including midwives. It was Germany’s contribution to the Muskoka Initiative on Maternal, Newborn and Child Health, which was launched at the 2010 G8 summit in Canada. To this end, the programme has worked closely with government partners, medical training institutions (both pre-service and continuing education), midwives associations, and other development partners to strengthen midwives’ competencies, to bring about changes in the legal framework governing midwives’ practice, and to foster strong professional associations to represent the interests of midwives.

**Education and Capacity Building:**

The programme “Health in Central Asia” has supported measures to introduce and improve core midwifery competencies, in line with recommendations from the International Confederation of Midwives (ICM) and the World Health Organization (WHO). In cooperation with its partners, GIZ
coordinated a series of training programmes on the management of women with postpartum haemorrhage, neonatal resuscitation techniques, and essential newborn care. These sessions, that reached more than 3,000 midwives, anesthesiologists, neonatologists and neonatal nurses from maternity hospitals in all three countries, built the capacity of interdisciplinary teams of health workers to implement simple, life-saving procedures for two of the most common causes of maternal and neonatal deaths. The trainings were based on the curricula *Helping Mothers Survive*, *Helping Babies Breathe*, and *Essential Care for Every Baby*, and focused on building practical skills that could be institutionalised in clinical settings.

The programme has also supported several measures to strengthen the institutional capacity of midwives, associations in Kyrgyzstan and Tajikistan. Since 2014, a development worker, who is a midwifery expert, has been advising the Kyrgyz Midwifery Association on its structure, performance, and approach to advocating midwifery. On the basis of a rapid assessment, an organisational development process is now underway and a business plan has been developed.

With support from GIZ, the first-ever regional gathering of Central Asian midwives took place in Kyrgyzstan, in September 2014, directly following the launch of UNFPA’s *State of the World’s Midwifery Report*. Focused on encouraging and building linkages between young midwives associations, the three-day conference, entitled ‘The Role of Midwives Associations in Improving Women’s Reproductive Health’, attracted 70 participants from Kyrgyzstan, Tajikistan, and Uzbekistan, as well as delegations from Bangladesh, Estonia, Germany, and Pakistan. Experts from the ICM introduced the participants to the Member Association Capacity Tool (MACAT), an assessment framework which helps midwives associations to define essential activities for their growth and development, and guides them in the development of country-level action plans.

To encourage linkages between midwives associations in Central Asia and those in other countries, the Regional Programme Health in Central Asia supported the participation of four midwives from Kyrgyzstan, Tajikistan, and Uzbekistan in the ICM’s 30th congress in Prague, in June, 2014. The midwives associations of Kyrgyzstan and Tajikistan became members of ICM in 2015, an important step for the ongoing sharing of international experience.

In late 2014, the programme organised a comprehensive two-week study tour to Germany and Estonia for a delegation of Central Asian midwifery experts. During visits to clinics and a birth house, the delegation observed how midwives practice as independent professionals responsible for women having physiological births. They learned about approaches to midwifery education in the two countries, including how midwifery students are taught to transfer theoretical knowledge to practical situations, and
how midwifery training can be provided at an advanced level in academic institutions. Meetings with the German Midwifery Association (DHV)\(^9\) and its Estonian counterpart “Eesti Ämmaemand”\(^10\) provided the study tour participants with the opportunity to learn about the structure, roles, and activities of established midwives associations. Finally, the delegation had the opportunity to see how midwives in Germany are involved in the provision of social care to vulnerable families, an emerging role for midwives in many countries, and one with great potential in Central Asia.

GIZ has also facilitated the translation of the ICM core documents pertaining to the three pillars of midwifery – education, regulation, and association – to support the dissemination of international midwifery concepts and standards in the Central Asian region. Key resources, including midwife competencies, ethical standards, and the MACAT tool, are now available in Russian.

**Main Achievements:**

- Midwives are increasingly recognised as fully-qualified professionals and have more authority to manage physiological pregnancies and deliveries.
- More than 1,300 midwives now have improved core competencies, as a result of practical training on evidence-based approaches, for preventing and treating postpartum bleeding, the use of neonatal resuscitation techniques, and essential newborn care.
- Newly established midwives associations in Kyrgyzstan and Tajikistan are now members of the International Confederation of Midwives and are benefitting from contact with midwifery associations in other countries.
- The successful study tour to Estonia and Germany has brought practical examples of advanced midwifery education and practice to Central Asia, including, for example, the adoption of a new tool for evaluating the practical skills of midwifery students in Uzbekistan.
- As a result of capacity building support for midwives associations in Kyrgyzstan and Tajikistan, including training on the MACAT organisational assessment tool, the organisations are now better equipped to advocate for the professional interests of midwives in the region and for quality midwifery services, which directly improve maternal and child health.

**Commitment for the Future:**

German Development Cooperation will continue to support the health sector in Kyrgyzstan and Tajikistan, with a focus on maternal and child health, following the completion of the Regional Programme Health in Central Asia in December 2015.
References


