Expanding and Strengthening Midwifery Workforce in Ethiopia

Achievements, Lessons Learned, and the Way Forward

The HRH Project’s comprehensive interventions have contributed to government efforts to increase the number of qualified midwives. Ongoing investments should focus on strengthening the capacity of the Ethiopian Midwives Association (EMwA), clinical education, national licensing examinations and continuing professional development.

Goals and Objectives

The HRH Project – working in partnership with the Federal Ministry of Health (FMOH) – sought to increase the availability of qualified midwives. Specific objectives were to:

- Strengthen the capacity of EMwA,
- Improve the quality of midwifery education and the number of students graduating, and
- Strengthen continuing professional development, licensure, and regulation related to midwifery.

Need for Action

A shortage of midwives posed a serious obstacle to increasing skilled midwifery care in Ethiopia and, consequently, to improving maternal and newborn health outcomes. In response, the Government of Ethiopia invested in pre-service education to increase the availability of midwives - expanded direct entry diploma and degree programs, and introduced an accelerated midwifery training initiative. However, scaling up the production of midwives is not sufficient to improve maternal and newborn health outcomes; newly qualified midwives also must master essential knowledge, skills, and attitudes during their pre-service education. This presented a challenge in Ethiopia, given high student enrollments, a shortage of qualified faculty, resource constraints, and low caseloads and doubtful quality of care at clinical training sites. Professional associations can play a leadership role in addressing these types of problems, but the Ethiopian Midwives Association (EMwA) lacked the organizational capacity to do so.

Key Successes

- In just five years, the density of midwives nationwide has more than doubled: from 0.07 per 1,000 populations in 2012 to 0.17 per 1,000 in 2018.
- The Ethiopian Midwifery Association has increased its capacity to play a central and visible role in midwifery education, training and regulation.

To expand the midwifery workforce, the Government of Ethiopia sought technical and financial support from the USAID-funded and Jhpiego-led Strengthening Human Resources for Health (HRH) Project (2012 - 2019). The goal of the HRH Project is to improve health outcomes for all Ethiopians by supporting efforts of the Government by improving human resources management; increasing the availability of midwives, anesthetists, health extension workers, and other essential health cadres; improving quality of education and training of health workers; and generating evidence to inform HRH policies and programs.
Strategies and Interventions

Strengthening the organizational and technical capacity of EMwA. The HRH Project conducted two formal assessments and periodic desk reviews of EMwA’s capacity. Finance, management, and technical support staff were recruited, and training was offered in a variety of areas, including governance, communication, supervision, and monitoring and evaluation. With the support of the HRH Project, EMwA developed a five-year strategic plan, a monitoring and evaluation plan, a resource mobilization strategy, and a business plan. Three additional regional chapter offices were established to give the organization a presence in every region of the country, and a database was created to track practicing midwives across Ethiopia.

Recruiting and retaining capable midwifery students. Midwifery was not a top choice for students enrolling in health education institutions, because they did not appreciate the role of midwives beyond managing births. To generate demand for midwifery education and attract more capable students, in 2013 EMwA began promoting the profession in the community and in schools, using radio, television, booklets, and brochures. The HRH Project also supported the efforts of gender offices at health education institutions to retain midwifery students by offering financial and material aid to economically struggling students and recognizing top performing students.

Providing material and financial support to training institutions. New midwifery programs were opened at 11 health education institutions under the leadership of the FMOH and with the support of the HRH Project; together they enrolled more than 400 students each year. The Project provided books and other materials to both old and new programs, with a special focus on ensuring that all midwifery training institutions had functional, fully equipped skills development labs that allowed students to practice hands-on skills along with effective decision-making and communication. The Project also provided 13 vehicles to transport midwifery and other students to expanded clinical practice sites.

Strengthening teaching capacity. The HRH Project designed and conducted trainings for 2,716 instructors, skills lab assistants, and preceptors from public and private midwifery training programs; these focused both on technical and pedagogical knowledge and skills. EMwA also offered mentorship and coaching to teaching staff. Twelve senior midwife volunteers were assigned to provide classroom and clinical teaching at three universities and seven Regional Health Science Colleges (RHSCs) that had a critical shortage of midwifery faculty.
Improving the quality of midwifery education. With the support of the HRH Project, EMwA developed a battery of competency-based learning and assessment tools to standardize midwifery training and assure student competence. These included revised curricula for three midwifery training tracks, a student logbook and mentoring tool to track clinical skills proficiency, and a national assessment tool to measure student competency. Innovative teaching and learning approaches, such as problem-based learning (PBL), were introduced to motivate students, improve problem solving skills and retention of learning, and reduce overcrowding in the classroom. EMwA also facilitated networking and consultative meetings for all midwifery teaching institutions, which created an opportunity – especially for newly established programs – to share experiences and best practices.

Assuring the competence of practicing midwives. The HRH Project supported the establishment of a continuing professional development (CPD) unit at EMwA by furnishing an office and training course developers in instructional design. In response to gaps in pre-service education identified by a task analysis study, EMwA developed a series of four conventional and one online CPD course; all have been submitted to the FMOH for approval. In April 2016, the EMwA CPD coordinator collaborated with the Health[e]Foundation on a blended e-learning course for 300 midwives that combined self-study with face-to-face training; another 150 midwives are currently enrolled. EMwA also disseminates technical updates and program learning at its annual general assembly, which attracts hundreds of midwives from all regions of Ethiopia.

Strengthening the regulatory system for midwifery practice. The HRH Project supported the efforts of EMwA, the FMOH, and regulatory bodies to develop National Accreditation and Quality Improvement Standards for midwifery training. The project also helped establish a national licensure examination to ensure the competency of midwifery graduates before they enter the workforce. EMwA has supplemented these efforts by producing documents that define the standards and scope of midwifery care practice.

Results and Lessons Learned

Stakeholder involvement contributed to the success of the HRH Project. Involving stakeholders in the planning process is indispensable in recognizing priorities, placing government in the driver’s seat, and thereby ensuring sustainability of project interventions. However, the duplication of effort by various stakeholders (for example, in developing training courses for instructors) contributed to inefficient use of financial and human resources. When multiple partners engage in similar interventions, it is important to have systems in place to ensure that their efforts are complementary, use resources efficiently, and maximize impacts.

EMwA has greater capacity to sustain project activities, but some challenges persist. With support from the HRH Project, EMwA has been able to play a significant role in the national effort to strengthen pre-service education, improve practice, and establish a regulatory system for midwifery. The organization now has the capacity to take responsibility for activities launched by the HRH Project and ensure their long-term sustainability. For example, EMwA will continue to provide CPD courses, helping midwives fulfill requirements for license renewal while also generating income for the Association. However, challenges remain in program management, leadership, and documentation, which are exacerbated by staff turnover.

The production of midwives has increased. The number of midwifery training programs increased from 41 to 52 over the course of the HRH Project. Although the number of active programs has now dropped to 48, a total of 15,552 midwives have graduated in the last six years (Figure 1), meeting the demands of the health sector. At the same time, the number of universities offering a master’s degree in midwifery rose from 1 to 5.

Figure 1. Annually Graduating Students from a Midwifery Program in Ethiopia, 2013-2018

In just six years, the density of midwives nationwide has doubled.
Student retention and achievement has improved at midwifery training programs. Efforts to support female students have increased retention. The dropout rate across all midwifery programs in Ethiopia declined from 5.13% in 2014 to 1.56% in 2018, (Figure 2). At the same time, the competence of graduating midwifery students improved significantly; average scores in objective structured clinical examination (OSCE) rose significantly from 51.8% in 2013 to 56.6% in 2016.

The density of midwives has increased. The increasing number of students graduating from midwifery training programs in Ethiopia have swelled the ranks of practicing midwives. In just six years, the density of midwives nationwide has more than doubled: from 0.07 per 1,000 population in 2012 to 0.17 per 1,000 in 2018 (Figure 3).

Next Steps

1. Continue building the capacity of EMwA: Further support is needed to strengthen documentation and establish information backup systems at EMwA, both to ensure that data are accurate and consistent and to prevent information loss during staff turnover.

2. Strengthen the capacity of regulatory bodies: Regulatory bodies must be able to implement existing guidelines and develop additional guidelines in order to improve the quality of midwifery health services.

3. Encourage regulatory bodies to engage with EMwA for licensing midwives: CPD is an integral component of any system to license and re-license health professionals. Therefore, regulators should work closely with EMwA’s CPD unit to make sure that practicing midwives meet licensing requirements for continuing education.

4. Revisit strategies to improve the quality of instruction in midwifery education: Motivation should be a focus along with knowledge and skills, and interventions should be directed at instructors on campus as well as preceptors at clinical practice sites.

5. Support implementation of management guidelines for skills development labs: Skills development labs are an essential element in clinical education for students, and they require both training and material support to maximize their effectiveness.

This program learning brief was prepared by the Ethiopian Midwives Association and Mintwab Gelagay and reviewed by Dr. Tegbar Yigzaw, Dr. Sharon Kibwana, and Adrian Kols.

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