

# Strengthening quality midwifery education



## WHO Meeting Report July 25–26 2016

In support of

Global Strategy for Women's, Children's and Adolescents' Health 2016–30

Global Strategy for Human Resources for Health: Workforce 2030



World Health  
Organization



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# Contents

Executive Summary	1
Strengthening Quality Midwifery Education	3
Background	3
Purpose of meeting	4
Objectives	4
Day One	5
1.1 Introduction	5
1.2 Meeting objectives and setting the scene	5
1.3 Setting the scene for the next 15 years: A series of “Sparks Talks”	5
1.4 Summary of key points from “Sparks Talks” and setting the scene	9
1.5 Group work activity: Where are we now? Opportunities and challenges	9
1.6 Plenary Feedback	9
1.7 Where do we want to go? Optimising opportunities and meeting challenges over the next 15 years	13
1.8 Key issues arising	13
Day Two	16
2.1 Do we have a collective vision for strengthening midwifery education?	16
2.2 How do we monitor and evaluate progress in the vision identified?	17
2.3 Midwifery Education and the Global Midwifery Advocacy Strategy	18
2.4 Who can deliver the change we want to See	19
2.5 What could collective action and unified voices look like?	21
Next Steps on strengthening Quality Midwifery Education	22
Urgent actions	22
Longer term actions	22
References	23

Annex I: Concept Note	24
Annex II. Agenda	27
Annex III. List of participants	29
Annex IV. Group Work Questions	32

# Executive Summary

## Strengthening quality of care, the SDGs and midwifery education

The purpose of this two-day meeting, convened by WHO at the University of Dundee, was to bring partners together to hold the first global conversation in the new SDG era on how we can strengthen midwifery education to improve quality of care for women, newborns and their families.

## SDG 3: Supporting implementation of two complementary global strategies

Recognising the unique opportunity to continue to strengthen existing achievements throughout the 15-year period of the SDGs, the meeting participants focussed on two complementary strategies which set out ambitious objectives and actions to ensure women, newborns and their families not only survive, but thrive and transform. These are the **Global Strategy for Women's, Newborn's and Adolescents' Health 2016–30** (1) and **The Global Strategy for Human Resources for Health: Workforce 2030** (2). Improving quality of care (QoC) is critical to achieving the objectives of both these global strategies.

## Increasing evidence that inadequate midwifery education is resulting in poor QoC

The meeting was convened in the context of increasing evidence to indicate that a consistent barrier to the provision of quality midwifery care is inadequate midwifery education, often reduced to a matter of weeks without qualified faculty and lacking in practical application (3). There are potential links between poor education, poor clinical care and mistreatment of women in facilities (3). The State of the World's Midwifery Report (SOWMy) 2014 (4) notes that of the 73 countries from which data were gathered, only four countries have the workforce numbers to provide the care needed by women in their reproductive years, and by newborns. In response to these gaps and barriers, Bharj et al (2016) (5) set out a new "agenda" to improve the quality of midwifery education. The evidence and the new "agenda" justify the focus on development of a new, collective, global, 15-year approach to action on midwifery education.

## Objectives

The **objectives** of the meeting were threefold:

- i. to draft a coherent approach through which to strengthen evidence-based midwifery education,
- ii. to review existing monitoring and evaluation frameworks for quality midwifery education,
- iii. to agree a collective division of roles and responsibilities on how best to implement, monitor and evaluate the above.

The meeting was facilitated using a highly active and participatory methodology. Everyone played their part.

**Outcome of the consultation: 5 urgent actions agreed**, with responsibilities allocated:

- i. **A “Global Platform for Action”** to be established (with a steering committee/ steering group for midwifery education, name tbc), with potential for regional and country platforms to follow: WHO to coordinate collective action.
- ii. **A “Global Strengthening Midwifery Education Action Plan 2016–30”, to include monitoring and evaluation to be drawn up:** Stakeholders of the Platform for Action to take the lead.
- iii. **Global mapping** of two key areas:
  - **Mapping of midwives educated to International Confederation of Midwives (ICM) Midwifery competencies**, to be based on the ICM definition of a midwife and the ICM essential competencies for basic midwifery practice: *To be determined with ICM.*
  - **Mapping of existing education materials** amongst partners, with potential for developing a global midwifery education toolkit: *Jhpiego and University of Manchester to initiate action.*
- iv. **Evidence based ICM updated competencies** to be drawn up (in process) to ensure alignment with the evidence from the Lancet Series on Midwifery and the two global strategies mentioned above: *WHO, University of Dundee and TBD with ICM.*
- v. **Leadership roles and responsibilities** for key partners at global, regional and country levels to be clarified to support a collective, unified midwifery position and voice: *UNFPA to coordinate collective action.*

Participants agreed on **5 longer term** actions:

- vi. **Research evidence and dissemination:** develop a synthesis of available and on-going research and evidence on midwifery education to guide investment at all levels. Develop a system for easy dissemination and access, such as a Maternal and Newborn Education Resource System (MANERS).
- vii. **Advocacy:** ensure midwifery education is part of the emerging WRA-WHO-ICM Global Midwifery Advocacy Strategy, and link advocacy on education to other ongoing advocacy platforms.
- viii. **Human rights based approach:** further develop a rights-based approach to drive improvements in midwifery education.
- ix. **Economic analysis of midwifery-led care:** develop an economic analysis of midwifery –led care to strengthen the evidence for investment in education.

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