BEST PRACTICES: Training the Future: the Value of Incorporating Neonatal Resuscitation Trainings into Midwifery Education

Introduction

A GEHIP initiated and funded programme has trained 66 final year midwifery students on critical newborn care skills prior to their deployment in the workforce.

The practice of training local practitioners in the ability to effectively teach neonatal resuscitation (NR) skills is crucial for the successful and sustainable training of future student midwives.

In the months of May and June, 2012, a training conducted in the Upper East Region focused on this issue. Support for these activities was provided by a medical student of the Columbia University College of Physicians and Surgeons, Anthony Anagnostou, and the GEHIP project. This training initiative ensured that all midwives in the GEHIP implementing districts (Bongo, Builsa and Garu Tempane) were trained in the ‘Helping Babies Breathe’ (HBB) curriculum of neonatal resuscitation.

The initiative utilized national facilitators for conducting the trainings. This included Dr. Nana Okai Brako of the Ridge Regional Hospital of Accra and Mrs. Serwah Amoah of the Komfo Anokye Teaching Hospital (KATH). In total, 11 health workers from the Upper East Region were initially selected and trained as local trainers for the other midwives within the three GEHIP districts. In addition to the GEHIP districts, 2 trainers from the midwifery training school (MTS), based in Bolgatanga, were also invited to participate, with hopes to cater to any future neonatal resuscitation training (NRT) needs they may be encountered. However, their involvement with the GEHIP NRT resulted in some unanticipated benefits. Soon after their initial instruction, the midwifery training school adopted this instruction into their curriculum. From November 13 through 16, 2012, a total of 66 midwifery candidates were trained in neonatal resuscitation skills, in preparation for their joining of the workforce as skilled birth attendants.
**What was the Motivation?**

The Ghana Essential Health Intervention Project prioritized the training of students from both its intervention districts and the other districts in the Upper East Region on neonatal resuscitation prior to their deployment. The midwifery final year students are only a month away from graduating (December 2012) and joining their colleague midwives in the field. As Emmanuel Tibil, a tutor at the MTS and a trainer of NR, noted, “...they are the immediate future midwives which require that they are equipped with the neonatal resuscitation skills to be used at their facilities to help reduce the pre-term morbidity and mortality”. Madam Rebecca Puganga, also a tutor and a NR trainer further adds that,

“...with this training, they will be better equipped to manage newborns with complications especially asphyxia and preterm (issues). Once they have completed very soon, the skill will be fresh and can easily be used. Another thing is that, being in the health facilities, they can teach other staff and students of the institution that will be sent to such facilities in the future to acquire the skills. Together they will help reduce neonatal deaths from asphyxia, infection, and preterm (issues) which will contribute to the reduction of neonatal deaths and under-5 mortality”

**The availability of training materials**

A special package of ‘mama natalie’ (resuscitation training equipment) was provided to the Bolgatanga midwifery training school for continued instruction and its future sustainability. This was an important step that will contribute to the success of the training provided at the midwifery school. Mdm. Rebecca described the importance of “...the mannequin for resuscitation, as it was available for me to practice and get it perfect. The training materials were also made available for me to practice later.” The ability of trainers to continue to practice made it easier to remain prepared for the facilitation of the future trainings to other students. Although guided by training materials, the facilitators exhibited an excellent retention of knowledge gained during the formal regional trainings, which was made evident during their practical exercises adopted during the midwifery training.

**The quality of facilitation**

The quality and impact of the resuscitation training was seen in the high average scores attained by the students after the pre-test. Trainers blended the knowledge from the NR Regional training and their teaching experience and achieved impressive results in the training.

Table 1: Pre-test and Post-test results from the NRT
The findings indicated that higher average post-test scores were found for students having completed the NR training.

**Expectations of Training?**

The Upper East Region, according to statistics, has achieved the Millennium Development Goal (MDG) 4 already, largely through increases in supervised deliveries. However, more is required of skilled birth attendants in completely reducing home deliveries in order to avoid the birth complications associated it.

Madam Rebecca explained that, “...these students will put into practice the skills they have acquired during this training,... pass it on to others and improve the care of newborns to reduce neonatal mortalities and morbidities in the region and to contribute to the achievement of MDG 4.” Appreciating the relevance of the training, Samata, a student midwife, shared this, “...if I graduate and join my other colleagues in the field, I will really implement what I have learnt today, especially examining the baby within the first minute, which is the golden minute because that is the time we need to assess the baby especially everything with the colour”

Delivery data across the GEHIP districts indicate that, there have been reduced neonatal deaths. At health facilities, midwives are quick to share the success stories of many asphyxiated newborns that were immediately resuscitated and how low birth weight children received the simple Kangaroo mother care to improve neonatal health. It is envisaged that, the NRT coupled with the emergency referral pilot in the Bongo district and the free referral for pregnant women and children under five years in the other 2 districts (Buiisa and Garu Tempane), will reduce the numbers of neonatal deaths caused by asphyxia and Sepsis.

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