

ATSEDE CLINIC

Midwives on the Move: Home-Based
Midwifery Assessments
July 2020 – December 2021

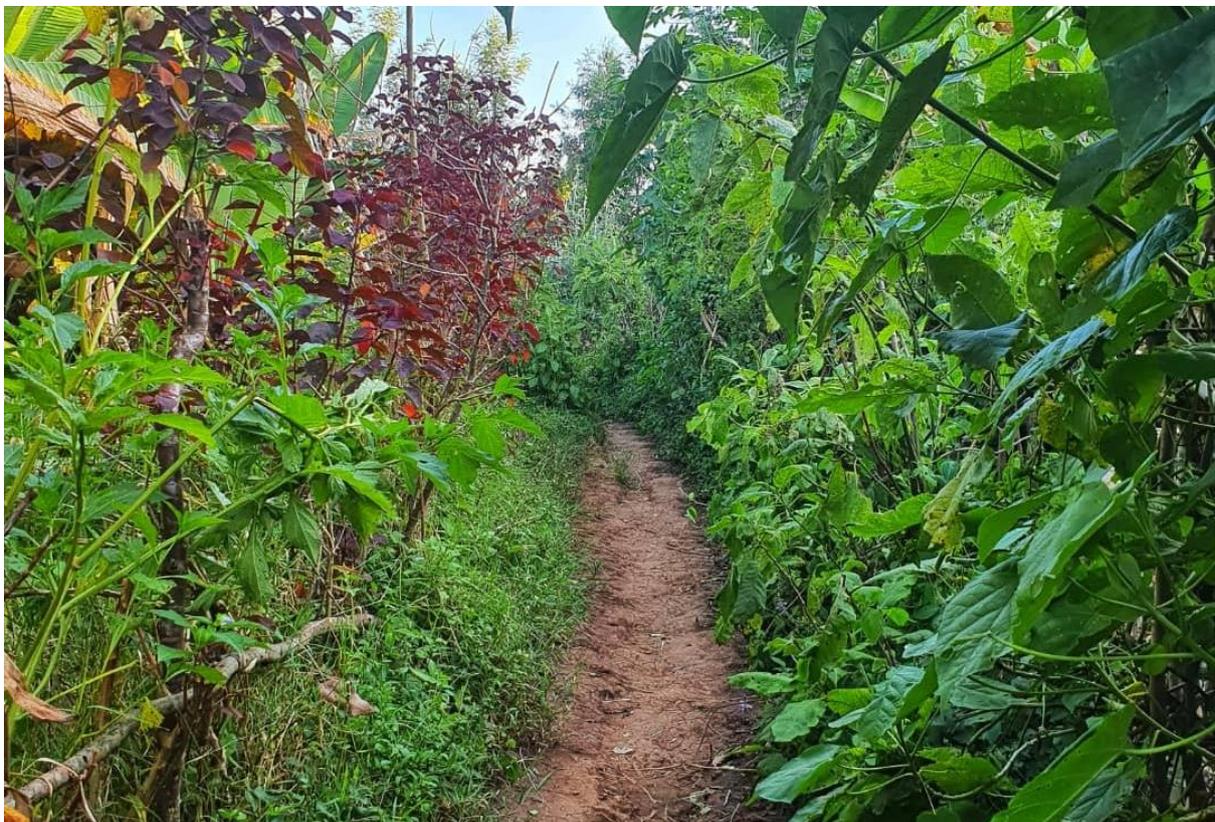


Midwives on the Move

Project Aims

This project aims to combat the relatively low attendance at antenatal appointments for women across the Clinic catchment area, particularly in the more rural parts. Whilst it is recommended that women see a midwife four times in their pregnancy, in reality, the actual attendance is far lower. Household and financial pressures, along with the distances between the villages and health facilities, mean women may only have one or two appointments. The key to high quality antenatal care is the regular assessment of the condition of a woman and her baby throughout a pregnancy. Deviations from the woman's own physiological normal is as important an indication of the state of a pregnancy as deviation from the widely accepted normal values. Complications that may result in morbidity or mortality may be missed if a woman is only seen once in her pregnancy, and confidential disclosures are also far less likely to be made without relationships built over time.

The Midwives on the Move provides a means of increasing uptake of antenatal assessments by encouraging women to accept home visits from the Clinic midwives. This will allow midwives to carry out four comprehensive antenatal assessments in the women's own homes, a place where they are comfortable. As well as identifying any physiological challenges, it is also far more likely that psychological difficulties will be disclosed by women.



Attendance

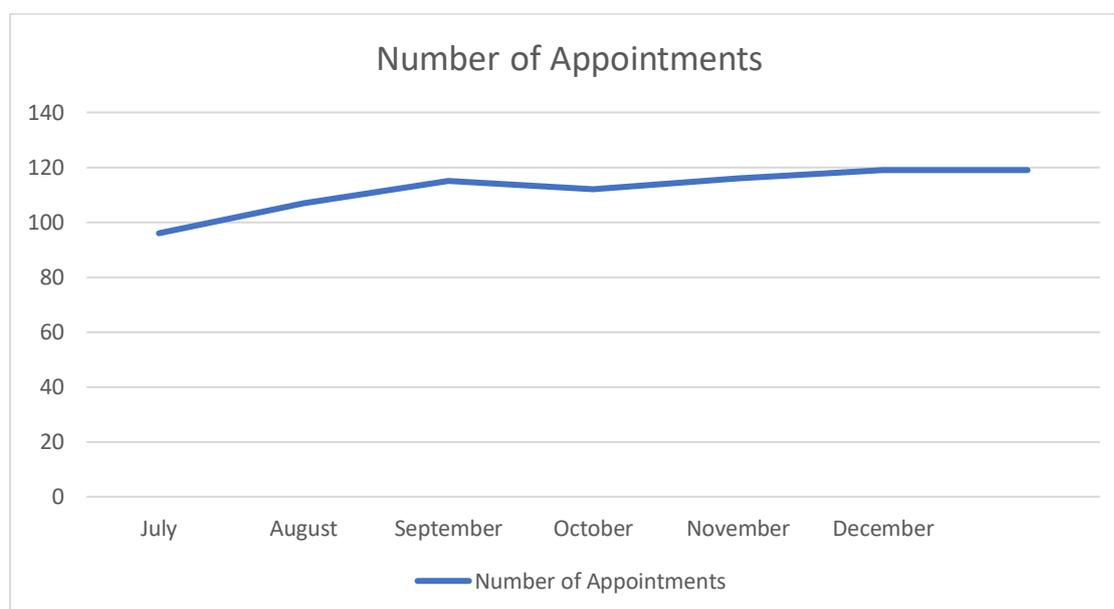
It was initially planned that there would be 120 appointment slots available for women each month, with Clinic midwives working 3 days a week, and visiting 10 women a day. This was the case for the first month, however following discussions with the midwives, it was decided that the care provided could be better if the appointments were spread out over 6 days of the week, just in the morning. The midwives reported that 10 appointments a day, with the considerable travelling time in between houses, left times spent with each women a bit tight. As a result, they had to cancel appointments each day, which is far from ideal.

The Clinic responded accordingly, changing the schedule. With fewer appointments each day, it was also possible to group these more effectively according to geography, so reducing the travelling time for the midwives

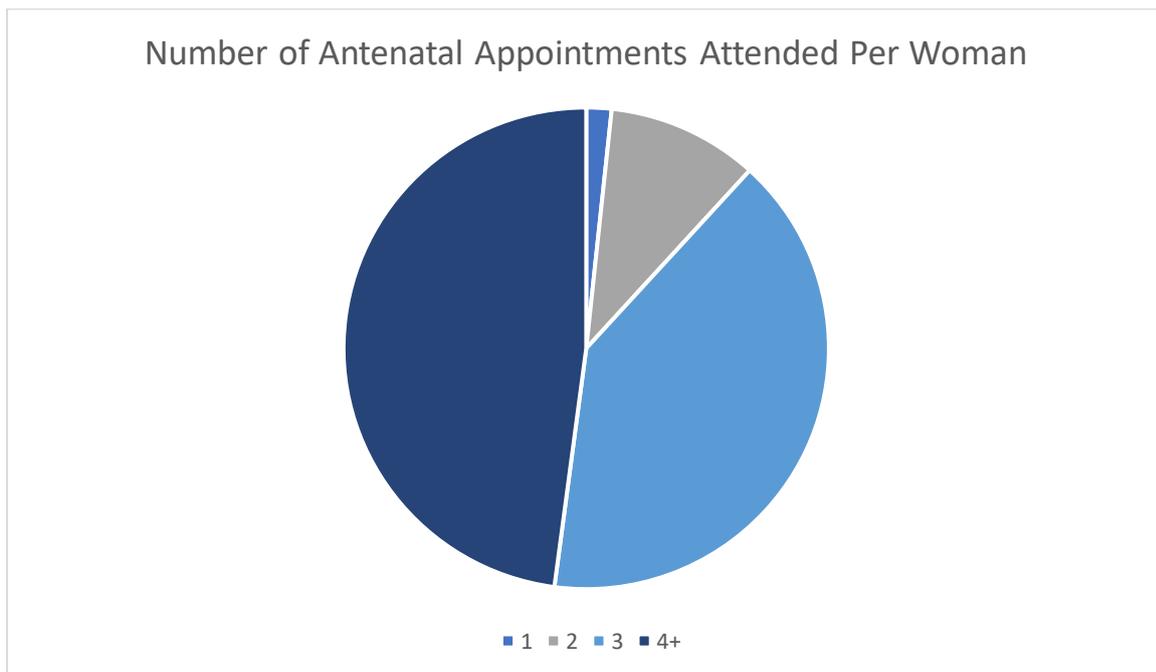
An example visitation schedule for one week in the subsequent five months looked like this (*names changed to protect anonymity):

Time	Name
8:00 am – 8:45am	Kalkidan G3P2, 24/40, US
9:00 am – 9:45 am	Birtukan G1P0, 32/40
10:00 am – 10:45am	Jamila G6P6, 12/40, initial assessment, bloods, urine, US
11:00 am – 11:45 am	Aster G3P2, 38/40, US
12:00 noon – 12:45 pm	Akila G7P5, 40/40, US

In the first six months of this project, numbers of appointments was as follows:



The first month was expected to be less than the subsequent five months given the difficulties the midwives faced with the restricted windows of time, but we were delighted that the midwives were working almost at capacity between September 2020 and December 2020. Whilst the numbers of appointments attended by the midwives is accurate, this doesn't represent the number of women seen, as some women were seen four times over the initial six months. It was a central part of the aims of the project that women would be seen *regularly* throughout their pregnancy, and to this end, the Clinic midwives were delighted when so many women completed their full antenatal care schedule as part of the Midwives on the Move programme. The following chart demonstrates outcomes in terms of this aim:



As can be clearly seen, the overwhelming majority of women attended either 3 or 4+ antenatal appointments. There were only a handful of women who had only 1 appointment. This was for a variety of reasons, including the following:

- ❖ 73% of women receiving only one appointment joined the programme late in their pregnancy (i.e. after 36 weeks pregnancy, it isn't unexpected that only one appointment is given for 38 weeks, and then the woman may go on to deliver before the next at 40 weeks)
- ❖ 14% of women receiving only one appointment were classified as high risk and unsuitable for midwife-led antenatal care, so advised to attend hospital instead
- ❖ 7% of women receiving only one appointment did not wish to continue with the Midwives on the Move programme, instead opting to attend appointments at the Clinic
- ❖ 3% of women receiving only one appointment were admitted to the referral hospital's Maternity Waiting Area
- ❖ 1% of women receiving only one appointment relocated in the middle of the first six months, so their antenatal care took place elsewhere
- ❖ 1% of women receiving only one appointment miscarried before the second appointment
- ❖ 1% of women receiving only one appointment delivered extremely pre-term at 23 weeks, so only received the initial appointment

Monitoring and Evaluation

The Clinic was particularly pleased with the reports of high numbers of women receiving three or more appointments over the first six months of the project. This was considered an indication of the success of the programme.

A further highlight was the number of women who, after joining the programme exclusively for their antenatal care, and initially intending to deliver at the referral hospitals, chose instead to birth at the Clinic. This was a reflection of a better understanding of birth choices, reflecting the work of the midwives in empowering women to take charge of their bodies and their births, and ideal central to the work of the Clinic.

A more thorough monitoring and evaluation will take place at the end of the pilot year, as part of the consideration as to whether to incorporate the programme into the Clinic's portfolio.

Feedback

Feedback has been overwhelmingly positive from the women receiving antenatal appointments. The comments given most frequently were as follows:

- ❖ Easier and more convenient than arranging to visit a health facility
- ❖ Felt less like a clinical appointment, and far more family-centred
- ❖ Women were surprised at how much the wider family enjoyed each appointment
- ❖ Felt easier to discuss problems from the safety of their own home



Case Study

Aklila



Aklila joined the Midwives on the Move programme when she was 28 weeks pregnant with her sixth child. She had previously delivered a boy at the Clinic, and had also experienced a miscarriage, managed at the Clinic.

She received visits from the Clinic midwives in October 2020 (at 28 weeks), November 2020 (at 32 weeks), and December 2021 (at 35 weeks), before going on to deliver her daughter at the Clinic in January 2021.

Aklila has five children at home and is a merchant at the local market, selling fruit.

Namasaganalehu, thank you, to the midwives for coming to my house and looking after me and my baby so well. Being in my house, and not having to worry about money or time for my pregnancy visits made everything so much easier, and I was so much happier. It was also amazing to see my older children understand more about pregnancy. My daughters now want to be midwives, and work at the Clinic! The midwives who came were meske, so sweet and kind and gentle. It wasn't like a hospital appointment at all. I could ask whatever I wanted, and I didn't feel stupid or like I was wasting anyone's time. It was a very good experience. And I am happy that I would also deliver my baby at the Clinic. Thank you, Atsede, and thank you, Indie. I am very happy.

Aklila, Zebider, Gubrye
