

AFGHANISTAN

Training Midwives to Cope with a Health Worker Shortage

One of the biggest challenges for maternal and neonatal health around the world is the shortage of skilled health personnel. According to WHO, the world is facing a shortage of 4.3 million health workers, with every region except Europe showing a shortfall. This means there are not enough doctors, nurses or midwives to attend mothers at the most critical time for maternal health – during and immediately after delivery.

Studies have shown that countries need an average of 2.28 health-care professionals for every 1,000 people to achieve the basic level of coverage so that all births may be attended by a skilled professional. Yet 57 countries fall below this minimum threshold – 36 of them in sub-Saharan Africa. While the largest relative need for health workers is in sub-Saharan Africa, in absolute terms, the largest shortage of health workers is found in Asia.

Depending on the conditions in any one country, there are a variety of factors that cause the shortage of medical professionals. These may include violent conflict, the HIV/AIDS crisis, underinvestment in training and recruitment of personnel, weak incentives for health-care workers, low pay and high stress. In many instances migration cripples health services, as doctors and nurses in developing countries leave for cities or wealthier countries to earn a better living.

In Afghanistan, decades of conflict and instability have devastated the country's health infrastructure, with women in particular bearing the brunt of the shortage. As a consequence, maternal mortality rates in Afghanistan are among the highest in the world. With each new pregnancy, Afghan women face a 1 in 8 risk of dying from complications. Haemorrhage and obstructed labour are the most common causes of death (Bartlett et al 2002).

In rural parts of Afghanistan – where the shortage of female medical workers is extremely severe – the picture of maternal health is even grimmer. The proportion of maternal death ranges from 16 per cent in Kabul, the largest urban center, to 64 per cent in the rural Ragh district of Badakhshan.

The scarcity of access to quality maternal health care, knowledge about safe delivery practices and shortage of medical personnel are three factors that contribute to the staggering mortality rates in Afghanistan. Societal factors also undermine the health of mothers, including women's low social status, poverty, poor nutrition, and general lack of security. Furthermore, societal norms require

many women to be escorted outside the home by a male relative, thus restricting their mobility to access health facilities. Nine out of 10 rural women give birth at home without a skilled attendant or access to emergency obstetric care.

In a country where there is a strong cultural preference for women to be cared for by other women, the need for qualified female health workers to fill the void is particularly important to boost maternal health. Toward this end, UNICEF is collaborating with Afghanistan's Government and other local and international partners to strengthen and expand midwifery education through the Community Midwifery Education (CME) programme – an 18-month skills-based training programme with less stringent entry requirements.

Midwives can provide crucial care for the women of Afghanistan, where many health facilities have no female staff at all. An estimated 4,546 midwives are needed to cover 90 per cent of the country's pregnancies. In 2002, there were only 467 trained midwives in the entire country, and less than half of all health facilities had female medical personnel.

In 2008, there were 19 CME programmes, each with 20-25 trainees. Since 2002, this represents a marked increase in training capacity, when there were only seven training programmes in the entire country, and personnel. The number of midwives has increased from 467 in 2002 to 2,167 in 2008. The programme also targets rural areas where the medical personnel shortage is particularly severe. As a result, the percentage of health facilities with female medical workers has increased from 39 per cent in 2004 to 76 per cent in 2006. The number of births attended by medical workers has also risen, from around six per cent in 2003 to nearly 20 per cent in 2006.

In addition to the strengthening midwifery training, the partnership works to create policies securing the importance of the midwife's role to provide maternal and newborn care, support the establishment of a professional association for midwives, and develops initiatives to increase access to skilled care during childbirth.