

Clinical Training for ASUH Midwives

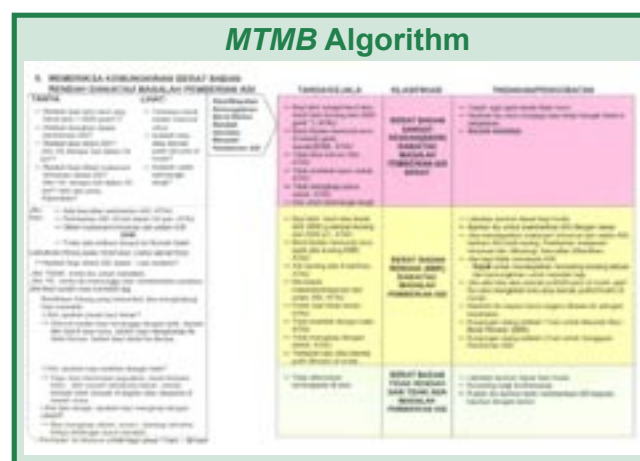
Managing Young Infants Ages 1 Day to 2 Months

Midwives are central to the ASUH program's aim to improve the health and nutrition of infants in Indonesia. ASUH focuses on increasing the reach and quality of services provided during a government-mandated home visit in the first week of life. Prior to ASUH, the principal training midwives had received in newborn care was given during their preservice training and limited to managing the newborn in the first several hours after delivery. A formal observational assessment of the skills needed during the home visit confirmed midwives' own assessments of their need for better clinical knowledge and skills for managing newborns. In response, ASUH clinical training was designed to improve midwives' neonatal care and increase their ability to make appropriate and timely referrals to nearby physicians.

Curriculum and Materials

Building on the Integrated Management of Childhood Illness (IMCI) model, a multi-partner ASUH team designed a four-day curriculum (Integrated Management of Young Infants Manajemen Terpadu Bayi Muda, *MTBM*) covering clinical management of healthy as well as ill newborns. The ASUH design team ensured broad acceptance of the curriculum and training materials by involving representatives of the national and provincial Ministry of Health (MOH) and Indonesian professional organizations of pediatricians, midwives, and obstetrician-gynecologists as well as the Program for Appropriate Technology in Health (PATH), World Health Organization (WHO), Maternal and Neonatal Health (MNH) program, and United States Agency for International Development (USAID). Official MOH certification of the ASUH training meant participants were awarded one continuing education credit for completing the facilitators' or the midwives' training.

Through an algorithm and supporting materials, *MTBM* training aims to guide community-level providers (e.g., midwives) in a systematic examination to accurately classify newborns and infants up to two months of age for immediate referral, treatment in place with follow-up, or supportive counseling only. Training includes procedures to stabilize the baby prior to and during referral. The algorithm includes eight topics: convulsions, breathing disturbances, hypothermia, bacterial infection, jaundice, digestive tract disturbances, diarrhea, and low birth weight and feeding problems. Assessing the newborn on each topic allows the midwife to advise the mother on potentially necessary care and guides the midwife in counseling on breastfeeding. Each trainee keeps a book containing the algorithm and treatment summary, a book of supplemental readings, and a pad of examination recording forms received during training.



Training and Follow-Up Supervision

To the standard didactic approach used in most clinical training, ASUH added opportunities for participatory discussion in order to build on and strengthen participants' experiences with the topics. Training included two days of theory and knowledge plus two days of actual examination, classification, and management of newborns in clinics and hospitals set up as practicum sites. Twenty-four master trainers trained 34 district-level physicians and assisting midwives as trainers in East Java and 40 in West Java, who then trained 1,541 midwives and their supervisors in the four ASUH districts. As part of strengthening referral sites, community health center *Puskesmas* directors were also trained in managing the referred infants.

A specially developed one-page checklist was used to standardize supervision of village midwives during group problem-solving discussions held at routine meetings at community health centers and during direct observations of their home visits. Supervisors used positive techniques learned in an earlier ASUH training.

What people say about *MTBM*

"This is a really good and useful training, not just for the village midwives and supervisors but also for me. It has improved my knowledge and skills in *MTBM*, and then improved my services to young infants in my Health Center and in my private clinic."

MTBM Facilitator and Community Health Center Director, Blitar

"I feel more confident now to give services to young infants since I know the standard for treatment."

Midwife, Puskesmas Puncu, Kediri

"With the training method used in the Citra Diri and *MTBM* training, the material became easy to understand, easy to remember, and wasn't boring."

Qualitative Evaluation Team

Results

With the algorithm, the examination and counseling take 45 to 60 minutes. Pre/post-training tests showed an increase in knowledge of the elements of the *MTBM* approach. In addition, direct observations before and three months after training showed improved adherence to the examination algorithm and to filling out the needed forms. Sentinel surveys showed that home visits also increased after *MTBM* training (from 53 percent to 70 percent of infants) as did hepatitis B birth dose immunization (from 45 percent to 62 percent), a result of the integrated ASUH interventions for communities and district health managers as well as for providers.

Replication and Sustainability

Curriculum and materials developed by the ASUH multi-partner team are filling a critical gap in guidelines for child health services—the management of newborns. The classification tool is appropriate for nurses as well as midwives. ASUH's training and mentoring of provincial- and district-level trainers has increased the sustainability of this intervention, and this cadre of experienced trainers has already begun replicating *MTBM* training with Government of Indonesia and other funding sources, including village midwives in three East Java districts, health center directors in two East Java districts, and trainers from 20 West Java districts.

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