INDIA

India and Sweden in cooperation for safer childbirth

Maternal mortality levels are high in India. The Academy for Nursing Studies and Women's Empowerment Research Studies, (ANSWERS), is partnering with the Karolinska Institute in Solna, outside Stockholm, to reduce maternal mortality rates by raising Indian midwives' expertise and status.

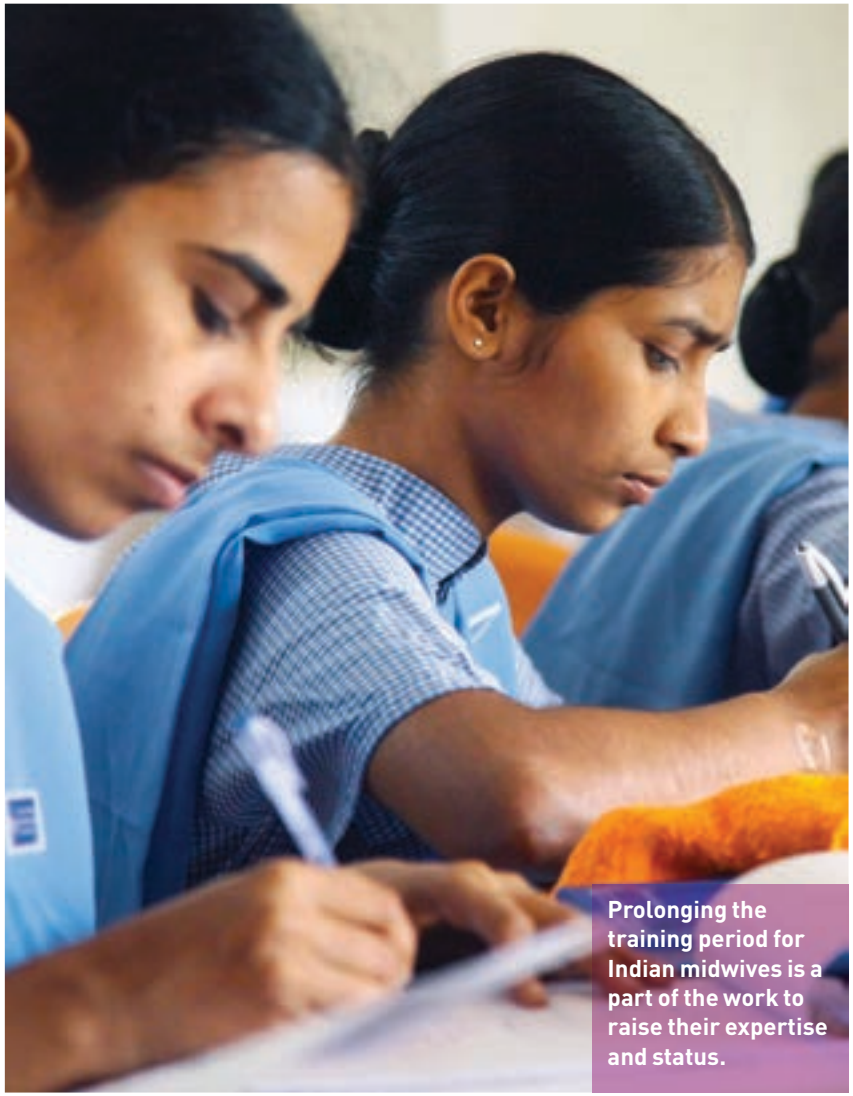
"The Indian middle class is growing, but there are still women living in conditions of poverty in rural areas. They need to survive their pregnancies and deliveries," says Kyllike Christensson, Professor of Reproductive and Perinatal Health.

Kyllike Christenson works at the Karolinska Institute and works together with the Indian partner, ANSWERS, on "The Midwife Strengthening Project" to get women from impoverished environments in India to choose to give birth in hospital. She explains that women generally do not want to give birth with professional support because they lack trust in healthcare personnel and because of insufficient quality.

"It may not be clean and instruments and medicines may be lacking. But it could also be the case that staff are not pleasant," says Dr Prakasamma, relating the criticism.

She is leading the efforts at ANSWERS and emphasizes the importance of so many actors being involved in the project. In addition to the Karolinska Institute and ANSWERS, the Indian Institute of Management-Ahmedabad (IIM-A), the Society of Midwives in India, and Uppsala University and the Swedish Association of Midwives are also involved. The project has been conducted in five states in India for three years.

"This project has tried to bring about a change in how women receive services in public hospitals, especially the labour rooms in public hospitals, and how nurse midwives respond to



Prolonging the training period for Indian midwives is a part of the work to raise their expertise and status.

PHOTO: ISMAIL SHEIKH

women in a skilled, safe and sensitive manner," says Dr Prakasamma.

Training in this area forms part of the project. It is also important that the midwives learn to give women in childbirth information and to cooperate with them to achieve optimum care. Two qualified Swedish midwives have visited to work on raising competence. Together with Indian colleagues, they have visited public healthcare institutions to adapt these to meet women's needs.

Auxiliary Nurse Midwife (ANM) Punyamma works both out in the field and at the Primary Health Center in Munipally. She has witnessed considerable improvement over the five years she has worked there:

"If we compare the facilities over five years, they have improved a lot. Training also helped a lot. Antenatal mothers are satisfied with our services and most of them are coming to the Primary Health Center (PHC) for delivery," she says.

Childbirth in hospital has also increased in the Medak District where the project has operated.

"Before the intervention of ANSWERS and the midwifery training, our government deliveries were as low as 22-23 per cent. Now we have reached the 54 per cent delivery goal in government institutes. In the next couple of years, we are planning to reach up to 75-80 per cent capacity in government institutes, so maternal and child health will be improved," says Dr Rangareddy, who is responsible for healthcare and medical care in the Medak District, with 68 PHC units and 536 subcenters.

Childbirth in hospital has increased in the Medak District where the project has operated.

PHOTO: ISMAIL SHEIKH

"We feel proud when the mothers appreciate our services."
/PUNYAMMA, AUXILIARY NURSE MIDWIFE

Women have begun to gain trust in the healthcare system when treated with expertise and sensitivity. And the midwives have gained greater professional pride and self-confidence.

"We feel proud when the mothers appreciate our services," says Punyamma.

The partnership will continue. For example, two PhD dissertations will be produced at the Karolinska Institute and Uppsala University by Indian researchers for ANSWERS and the Indian Institute of Management-Ahmedabad under Swedish supervision. The research questions addressed by the two dissertation projects are taken directly from the project and will then be used for further development.

THE FACTS

PARTNERS

Karolinska Institute, Swedish Association of Midwives, Uppsala University, Academy of Nursing Studies and Women Empowerment Research Studies (ANSWERS), Indian Institute of Management-Ahmedabad (IIM-A), and Society of Midwives India (SOMI).

The project has been conducted in five states in India; Dewas (Madhya Pradesh), Khammam (Andhra Pradesh), North 24 Parganas (West Bengal), Sabarkantha (Gujarat) and Samastipur (Bihar) for three years.

COST

10,179,702 SEK

TIMEFRAME

2010–2013

RESULTS

- Active advocacy has strengthened midwives' competence and capacity in India with the training period of Auxiliary Nursing Midwife (ANM) being extended from 18 months to 24.
- A curriculum and guide for midwifery teachers has been developed and distributed to the schools.
- Several states have earmarked funds for the building and remodelling of labour rooms.
- Childbirth in hospital has also increased in the Medak District where the project has operated – from about 23 per cent to 54 per cent of women giving birth with professional support.
- The research questions addressed by two dissertation projects are taken directly from the project and will then be used for further development of the operations and the exchange between India and Sweden.

Art. no.: sida61658en, urn:nbn:se:Sida-61658en Print: Edita 2013