

WEBINAR **SERIES**



**Promoting
health throughout
the life-course
during the
COVID-19
pandemic**

WEBINAR-11: OPTIONS TO MAINTAIN ESSENTIAL HEALTH SERVICES DURING COVID-19

**Midwives! Their contribution to
maintain coverage of SRH service**



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Agenda

- Midwifery scope of practice in Bangladesh
- Effects of COVID-19 to demand of essential health services and midwifery services
- How midwives made sure essential SRH services were still maintained during COVID-19
- Support from the professional association to midwives
- Administrative/policy changes that affected midwives during COVID-19 pandemic
- Challenges

Midwifery scope of practice in Bangladesh

- First batch of diploma midwives were deployed in 2018.
- Midwifery services includes all reproductive health care services, i.e.: awareness building, preconception care, antenatal care, postnatal care, family planning, normal delivery, gender based violence management, adolescent, mother & neonatal health services etc.
- Midwives are deployed in the Upazila (sub-district) level in the upazila health complexes and they are providing BEmONC services to the people.
- Midwives also provide post-partum, post abortion family planning services (PPFP).



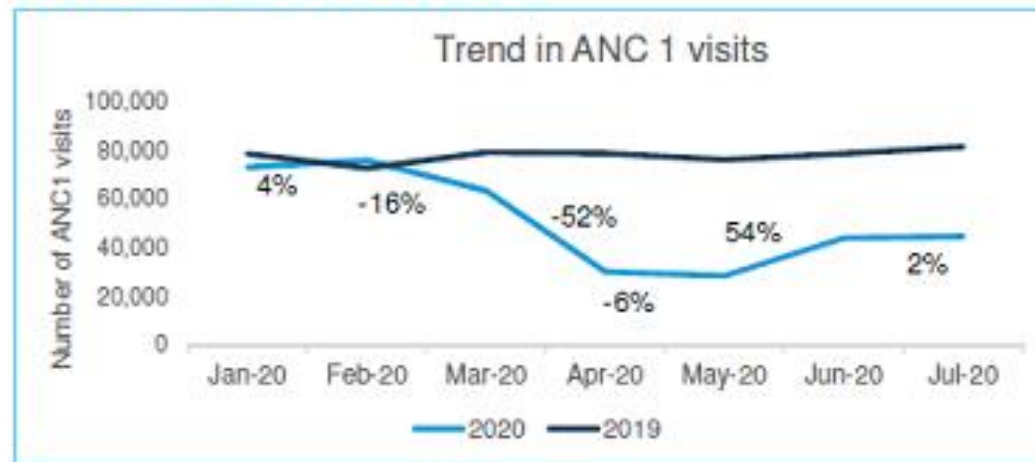
Midwifery scope of practice in Bangladesh



- Public sector: 1149 midwives are working in 342 UpHCs and 25 union sub-centres (approx. 4 midwives working in each UpHCs).
- Private sector: Midwives are working in different area with private projects as well from other NGOs, international organizations where there is demand of midwives in this COVID-19 situation like BRAC, OGSB, RTMi, MSF, IOM.
- Midwives are providing SRH services in the Cox's Bazar camps for refugees even in this pandemic situation.

Effect of COVID-19 to essential SRH services

ANC-1 services



World Health
Organization

Bangladesh

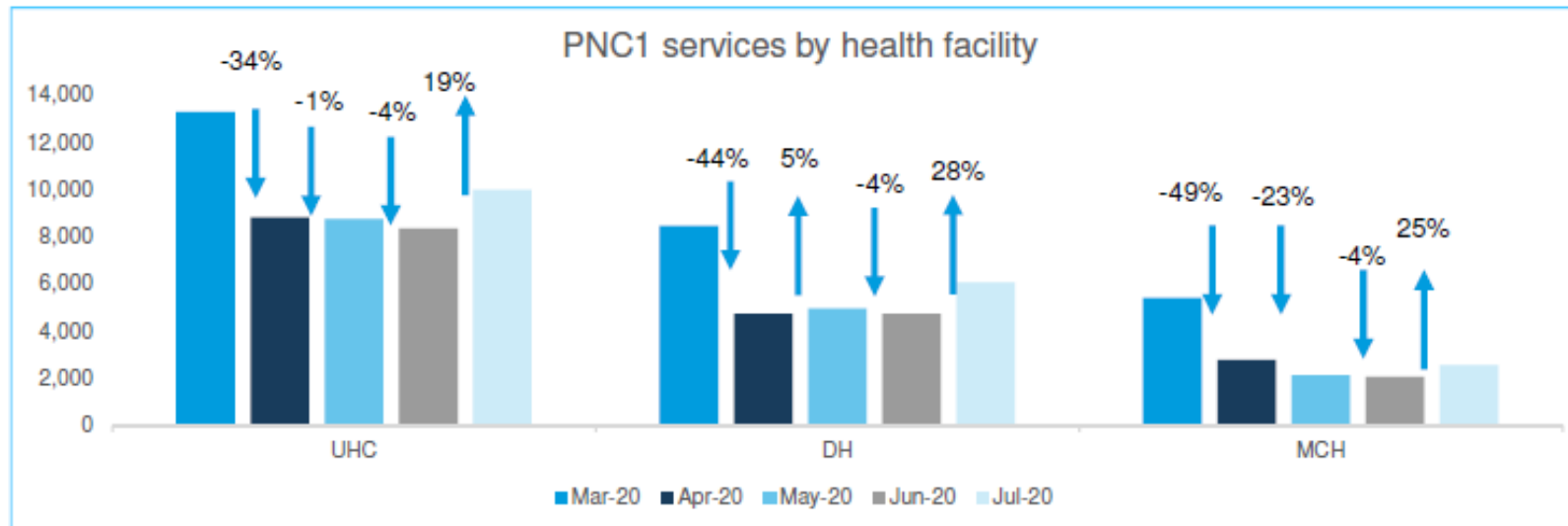
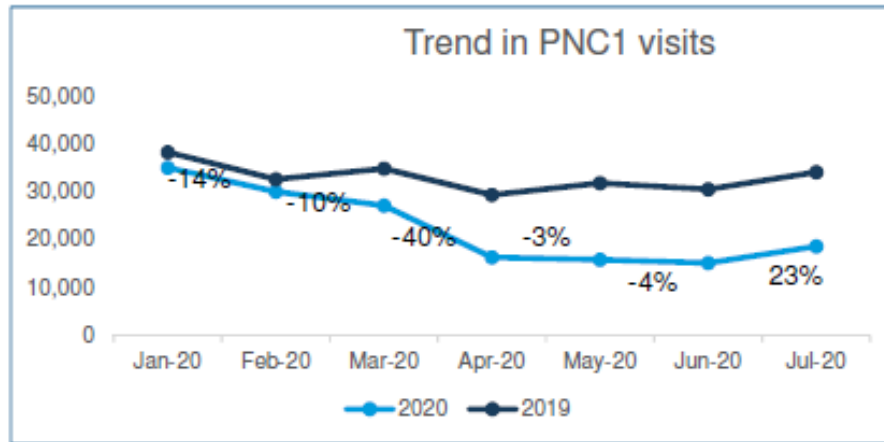
Source: DHIS2- data analysis by health systems team, WCO, Bangladesh



Effect of COVID-19 to essential SRH services



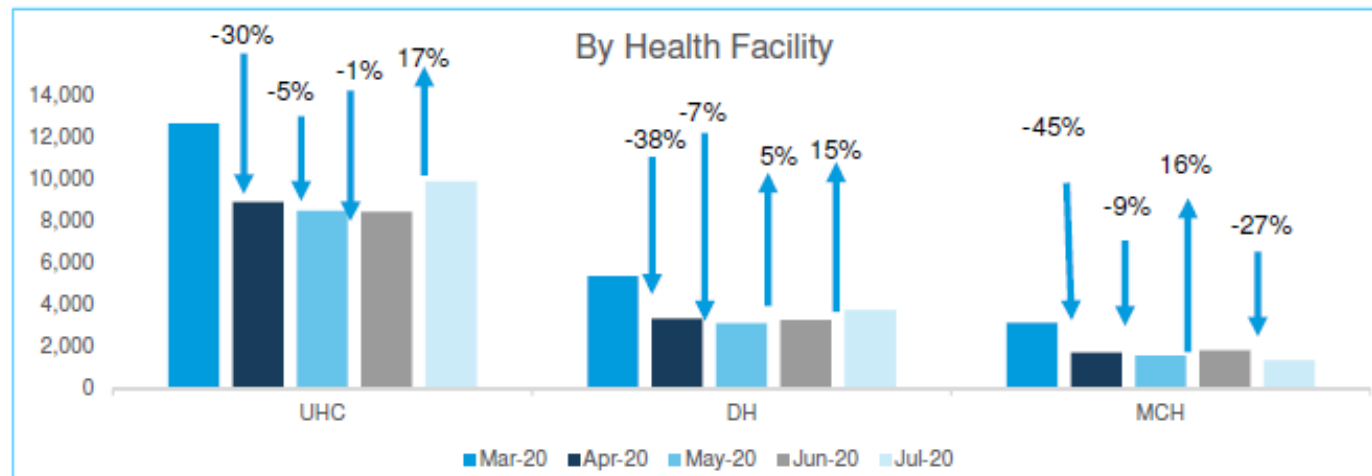
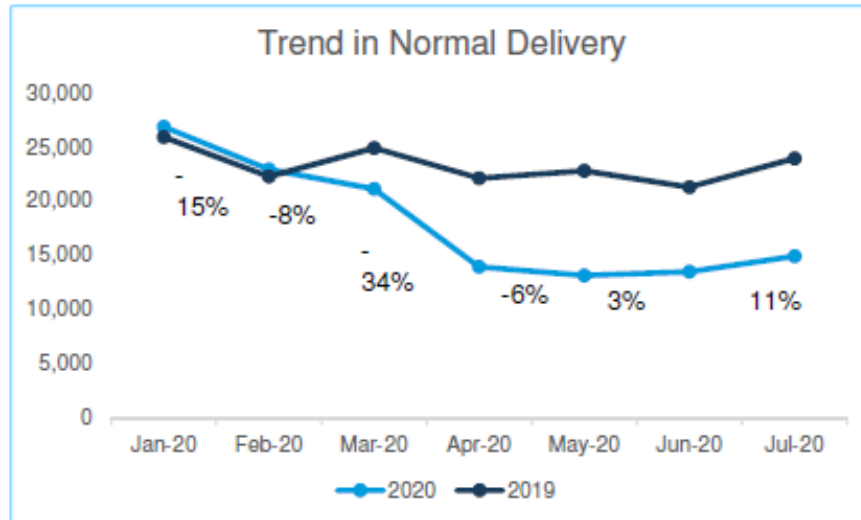
PNC-1 services



Source: DHIS2- data analysis by health systems team, WCO, Bangladesh

Effect of COVID-19 to essential SRH services

Normal Delivery



Source: DHIS2- data analysis by health systems team, WCO, Bangladesh

Effects of Covid-19 in Midwifery Services

- Pregnant mothers are afraid of their own and their babies' health during the pandemic.
- People spread rumours that a lot of covid patients are admitted in the hospital but that hospitals are not disclosing this information.
- Many midwives also got affected which made it difficult for other midwives to continue providing services.
- Because of covid situation, it was necessary to maintain a separate delivery room for suspected patients. It took time to manage the separate room.



How midwives made sure essential SRH services were still maintained during covid

- As shown in previous slides, during this corona pandemic the number of pregnant women coming into the facility decreased. They were not coming for ANC, PNC and delivery.
- I went to the community with doctors and UHFPO and told the people to come to hospital and promised to give their expected care like before.
- Since UHFPOs has a good rapport with the community, him ensuring that health services are available 24/7 gave reassurance to the people.
- We went twice to the community.
- We also tracked the women who came previously for ANC. Calling them to inform to come to the upazila health complex for their betterment.
- After newborn delivery, we explained and counseled mothers to tell everyone to come to hospital and that they do not need to be scared. And also told them to wear mask and nothing to be worried if everyone maintain measures to protect themselves and others.



Support from Professional Association (Bangladesh Midwifery Society – BMS) during Covid-19

- BMS' active members received 82 free online courses including COVID-19 learning materials.
- BMS provided cloth masks, gloves, face shields/sanitizer to all UpHC where midwives have been deployed and to the private sector where BMS has its members.
- BMS is providing virtual help by providing continuous information and offering help.
- BMS has a hotline started in this pandemic to provide members a support system. The hotline number belongs to the secretary of BMS.





BMS support during Covid-19

During the pandemic, Bangladesh was also affected by a major cyclone which caused flooding in 1/3 of the country

- BMS response to midwives in flood affected areas: distributed – birthing tool, ball, mobile phone, NVD kits and PPE.

Communicating regularly with coronavirus affected midwives, providing them free membership enrollment/renewal support or any other support as per their need like – sending them fruit/vegetables, mobile internet recharge etc.



Photo credit: Dhaka Tribune, July 2020

Administrative/policy changes that affected midwives during covid pandemic

- DGNM started providing information regarding COVID-19: how it spreads, prevention, necessary steps for midwives and other health care providers everyday by email.
- DGNM provided lots of PPE including gloves, masks, sanitizers, gown and goggles for the safety of midwives.
- The government declared incentives for all health care providers. If anyone gets infected with COVID-19, one will be given an amount of money and if a healthcare provider dies because of COVID-19, one will be given a larger amount of money according to their salary scale.
- The government offered another general incentive to healthcare providers including midwives, nurses and doctors. These healthcare providers will receive a one-time incentive of two months worth of salary.

All the steps taken by the government deserves praise.

Challenges

1. Human resources: During COVID-19 pandemic the demand for midwives increased twice than the normal situation. So registered midwives government employment is very essential. One to four midwives to one UpHC is not enough.
2. Knowledge gap: Lack of proper knowledge during the pandemic. Midwives felt the general training was not enough to manage during the pandemic.
3. Shortage of PPE: Government could not supply PPE in proper time that hampered the confidence for a while.



*For giving me the opportunity...
Any question please...*