



*Baby Agness was not breathing when she was born at Chongwe district hospital in Zambia. But the Mumba family could celebrate a Happy Birthday thanks to Midwife Hamalala having been trained in Helping Babies Breathe.*

# 10,000 Happy Birthdays

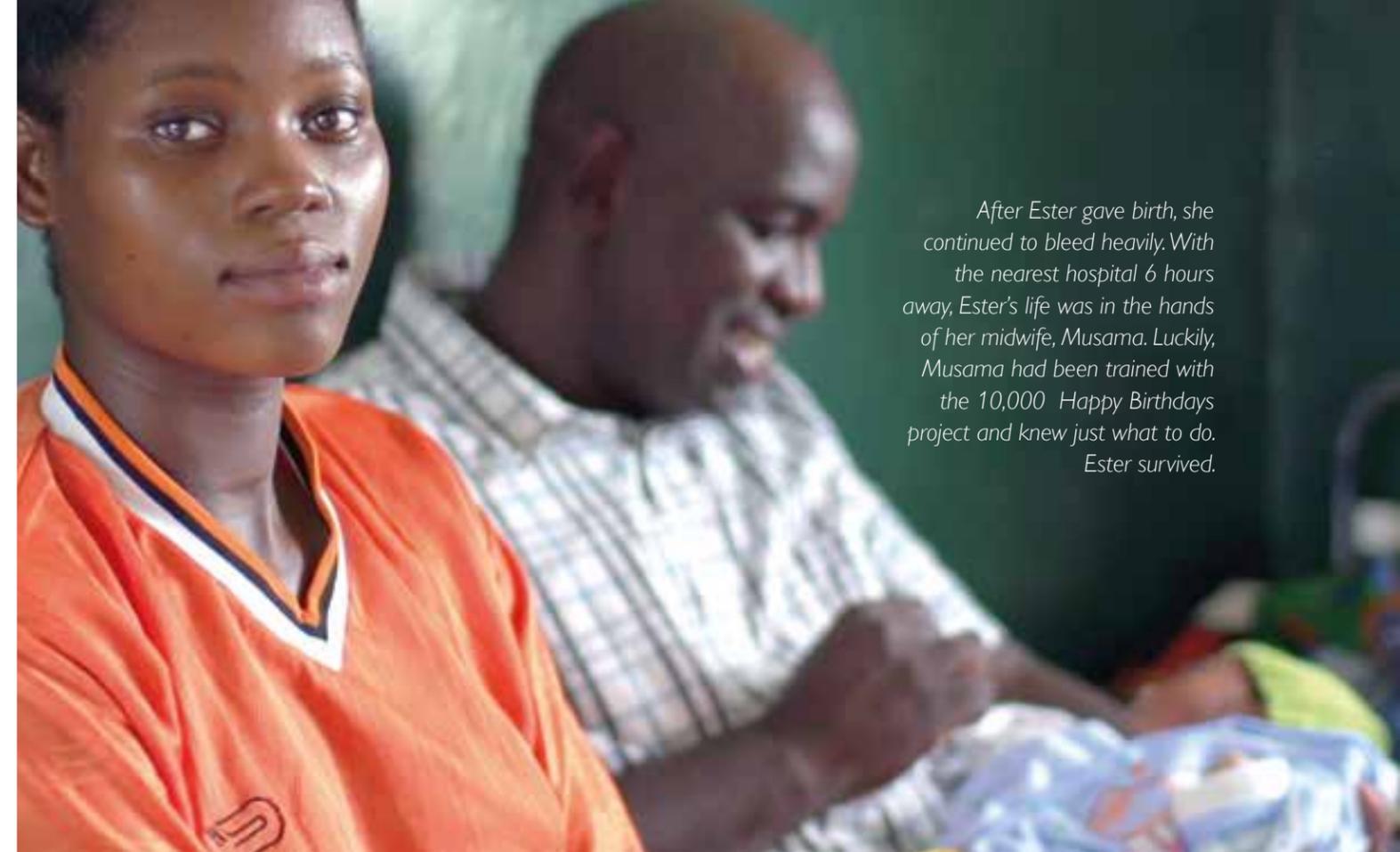
## PROJECT EVALUATION EXECUTIVE SUMMARY

Evaluation conducted by Southern Hemisphere  
on behalf of the International Confederation of Midwives  
September 2017

# The Program



*Helping Mothers Survive and Helping Babies Survive are suites of evidence-based educational programs by the American Academy of Pediatrics and Jhpiego. The programs teach birth attendants lifesaving skills to support mother and baby throughout labour and birth, until the time of discharge and to prevent and manage the leading cause of maternal and newborn deaths.*



*After Ester gave birth, she continued to bleed heavily. With the nearest hospital 6 hours away, Ester's life was in the hands of her midwife, Musama. Luckily, Musama had been trained with the 10,000 Happy Birthdays project and knew just what to do. Ester survived.*

## Background

The International Confederation of Midwives (ICM), in collaboration with the Midwives Associations (MAs) of Zambia (MAZ) and the Association of Malawian Midwives (AMAMI), and with support from Laerdal Global Health (LGH) embarked on the ambitious 10,000 Happy Birthdays Project in 2014. The goal of the project was to, by end 2016, train up to 10,000 midwives and other MNH providers in Helping Mothers Survive Bleeding After Birth (HMS BAB) and Helping Babies Breathe (HBB).

These programmes train participants in prevention and management of postpartum haemorrhage (PPH) and neonatal asphyxia respectively. In addition, reflecting ICM's mission, it aimed to develop the organisational capacity of the two Midwives Associations. A summative

evaluation of the project was conducted by Southern Hemisphere in 2017, with the support of the Laerdal Foundation.

## Evaluation methodology

A mixed-methods approach, combining qualitative and quantitative methods was used in this evaluation. Examples are semi-structured interviews, focus group discussions, clinical observations. Participants and facilities were sampled using purposive and convenience sampling methods. The Most Significant Change technique was used for qualitatively measuring outcomes; and the Midwives Association Capacity Assessment Tool (MACAT) was used for self-assessing the organisational capacity of the Associations. The evaluation findings should be interpreted within the context of its limitations.

## Findings

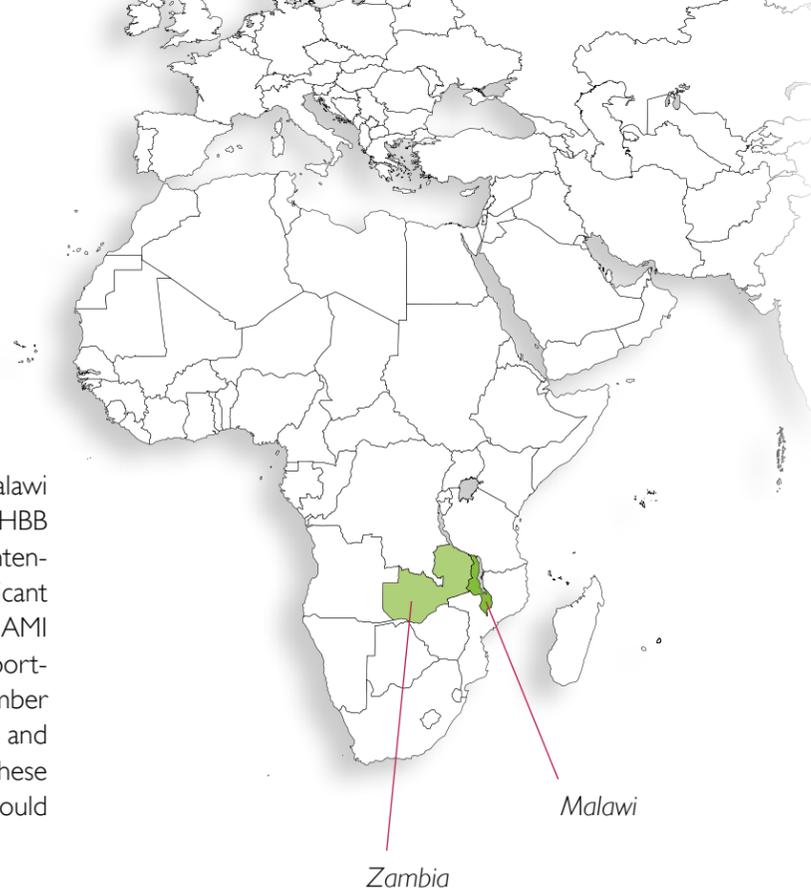
By the end of 2016, per the databases for Malawi and Zambia, 5512 individuals were trained in HBB and 7298 were trained in HMS-BAB. The intention of the project was to directly train a significant number of midwives, who, with support of AMAMI and MAZ would in turn train their peers, supportive supervision reports suggest that the number of people trained indirectly leads to achieving and possibly surpassing the target of 10,000. Of these trained indirectly AMAMI and MAZ did and could not keep exact records.

### Goal of 10,000 trained likely reached

Trainings were conducted over 2-3 days at district level, bringing together health care workers, educators and some managers. Trainings were reported to be of a good quality, and as being highly experiential. Upon completion of training, midwives trained in HMS-BAB and HBB become champions of this practice within their facilities, which reportedly, allows them to improve culture within their own working environments. Trainings were led by Master Trainers, who were selected from the pool of Champions who performed well, and were then mentored (through co-facilitation with lead trainers) to become Master Trainers. The mentoring of Master Trainers was reported by all Master Trainers as a highly effective component of the support provided to build their competency and confidence.

Improved ability to manage PPH and BA were reported by the overwhelming majority of study participants – and were confirmed by just over half of the managers/supervisors included in this study.

Several project-related changes reportedly contributed towards this, including: higher levels of knowledge of the causes of PPH, increased capacity to identify and address such causes using specific methods and procedures, expanded knowledge on the use of uterotonics and management of obstetric shock, and an increase in their knowledge of the Golden Minute coupled with improved ability to identify a baby at risk of BA and administer resuscitation techniques. Similarly, improvements in cooperation and team work were reported. Highly positive evaluation findings were noted regarding attitudinal changes, such as increased levels of confidence to manage PPH and BA as well as heightened awareness of the need to respond promptly to cases of PPH and BA. Of interest is the number of respondents who noted an increased sense of pride and achievement in their role as midwives, and a sense of motivation and dedication to their work. Changes in midwives' levels of respect, empathy, compassion and patience, and an improved ability to communicate clearly with mothers and family members were reported by most participants.



### Courses introduced in all midwifery schools

The project aimed to help create consistency and continuity of best practice amongst midwives from the moment they join the workforce, and thus strategically trained faculty and equipping the skills labs with Mama and NeoNatalie simulators of all midwifery schools in both countries. Supporting them to train their peers, as well as to institutionalise the HMS BAB and HBB methods as teaching methods. Four of the six schools included in the sample report to teach PPH and BA prevention and management to their students using the HMS-BAB and HBB methods, highlighting that the training had been institutionalised at the school because of the programme.

### Large number of simulators disseminated

All study participants report having shared the HMS-BAB and/or HBB training with colleagues after having participated in the training themselves. Knowledge and skills were either shared through orientation sessions to introduce co-workers to HBB and/or HMS BAB; on the job training, and Low Dose High Frequency Sessions (LDHF). Most interviewees indicate that they target new staff or students when sharing the training at their facilities. Fewer interviewees thus far have used LDHF sessions for refreshing or practicing HBB and HMS-BAB. Master Trainers were expected to conduct support and monitoring visits to facilities in their districts, Master Trainers were subjected to a ToT workshop to equip them with additional mentoring and support skills. Respondents in only five (out of 23) interviews mention that such support was received. Those that received support all reported it to be useful. Roll-out of support and monitoring to champions was found to be delayed due to the focus being on the provision of training, and Master Trainers being volunteers who mostly have other full-time jobs; they thus needed to be released of their duty to conduct these support visits.

### Importance of sufficient number of master trainers and local champions

The project distributed MamaNatalie and NeoNatalie simulators to all targeted facilities and midwifery schools enabled low-dose, high-frequency practice of HMS-BAB and HBB skills by midwives. This study found that of nearly 400 distributed simulators, nearly 300 were traceably distributed to schools and healthcare facilities (mostly at district level) to enable practice and sharing of skills. Some participants did indicate that they are either not using simulators frequently, or that they could not be easily located or accessed in their facility. It was confirmed that five of the six schools visited during fieldwork had received both simulators; and of the eight health facilities visited, four had received MamaNatalies and seven had received NeoNatalies.

### Strengthened midwives associations

A key feature of 10,000 Happy Birthdays is that its National MAs lead the Implementing the project, which generated positive outcomes for MAs: In terms of the organisational strengthening outcomes achieved, both MAs have improved their financial management, report writing skills, proposal writing skills and they have gained more knowledge and experience in project management because of the project. According to interviewees and the membership statistics, the MAs have undoubtedly increased their visibility and reputation because of the project, both at the level of their membership as well as partners such as the MoH. This is evident in that membership has grown by more than 300% since 2014, and the successful application for other project grants by both associations.



*Training in Kabwe, Zambia, 2015*

## Conclusions and Lessons Learnt

A clear and communicated roll out plan beyond the training workshops should be in place from the start, and should articulate how LDHF sessions and onsite support should be implemented. This requires a solid decentralised support-structure. Early on-set for mentoring and support by Master Trainers should be considered in future projects to consolidate skills learned and to support roll-out at facility level.

- The 10,000 Happy Birthdays Project, implemented in Malawi and Zambia, generated significant positive impact in both countries of implementation through its evidence-based, comprehensive approach to creating education and enabling environments to mitigate risk to mothers and newborns alike. The HMS-BAB and HBB curricula, devised by supporting partners Jhpiego and the American Association for Paediatrics, adhere with global best practice for emergency maternal and newborn care and are adaptive for use in diverse medical and nonmedical contexts.
- Upon completion of training, midwives trained in HMS-BAB and HBB reported improved ability to manage PPH and BA, improvements in cooperation and team work, significant attitudinal changes, including increased levels of confidence to manage PPH and BA, and heightened awareness of the need to respond promptly to cases of PPH and BA, an increased sense of pride and achievement in their role as midwives, and a sense of motivation and dedication to their work, and increased awareness and practice of respectful maternity care.
- The project strategically trained faculty of all midwifery schools in the countries to help create consistency and continuity of best practice amongst midwives, from the moment they join the workforce. Institutionalisation of the HMS BAB and HBB as teaching methods in most the participating schools was confirmed.
- The deployment of Laerdal training tools MamaNatalie and NeoNatalie simulators in targeted facilities and midwifery schools enabled roll-out and low-dose, high-frequency practice of HMS-BAB and HBB. Increasing monitoring and support would further consolidate the outcomes of the trainings and by increasing LDHF practice, and use of MamaNatalie and NeoNatalie at facility level.
- Implementation of the project by the national MAs, ensured that it reached communities of lowest resources or greatest needs, in accordance with support and direction given by their country's Ministry of Health. As such, implementation of the project has given a substantive boost to membership of empowered midwives who reported increased capacity to prevent and manage PPH and BA, higher professional satisfaction, improved collectivism with other midwives, and excitement and interest in the new opportunities to engage in their profession.
- Following the success, and building on the lessons learned of 10,000 Happy Birthdays, scoping has begun for the development of an additional three-year programme, entitled 50,000 Happy Birthdays. This programme will build upon the success of 10,000 Happy Birthdays and replicate its most effective models, whilst enabling greater support in implementation from partner countries and partner offices. It will also provide an option for partner countries to undertake training and education regarding other health issues that contribute to maternal and neonatal morbidity and mortality, such as essential care for premature babies and pre-eclampsia.

Naomi's baby was not breathing when he was born. The midwife, Faith, had been trained in Helping Babies Breathe and began bag and mask ventilations. Within minutes, Naomi heard her baby's first cry. Naomi's baby survived.



**International  
Confederation  
of Midwives**

Strengthening Midwifery Globally



**Zambia**  
Midwives Save Lives



**Laerdal**

helping save lives



**ASSOCIATION OF MALAWIAN MIDWIVES**  
MEETING WOMEN'S NEEDS



**Southern Hemisphere**

SUPPORTING MEANINGFUL CHANGE

The evaluation of the 10,000 Happy Birthdays Project was conducted by Southern Hemisphere

[www.southernhemisphere.co.za](http://www.southernhemisphere.co.za)

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