

Lessons learned from a respectful maternity care training evaluation in Kenya and Tanzania

Key learnings

- Structural, physical, and organisational changes support respectful maternity and neonatal care, but lasting change towards routine respectful care is only possible with a change in provider beliefs and attitudes towards deeply-rooted obstetric practices.
- To address the gap in evidence-based resources for changing providers' beliefs and attitudes, MSI developed and tested a Respectful Maternity and Neonatal Care Training Toolkit. While we found remarkable positive shifts in providers' knowledge, attitudes and behaviours with related improvements in client-reported experiences, we saw that the effects of the training may decrease over time. Therefore, efforts must be further sustained through a variety of strategies such as routine refresher trainings, supportive supervision, appointment of 'respectful care champions' in each maternity, and integration of respectful maternity care activities in monthly staff meetings.
- This evaluation demonstrates that changes in obstetric practices such as birth companions were not successfully implemented until they came directly from the knowledge and conviction of the healthcare providers and not through an external imposition or by improving physical resources.
- A combination of physical and staffing resources as well as behaviour change methodologies are needed for long-lasting, sustainable change towards respectful maternity care.

The challenge

A gap in evidence-based resources to change long-standing, disrespectful maternity practices

In obstetric healthcare, sometimes the focus is on clinical safety over client care, which may lead to the mother herself being forgotten. During antenatal and postnatal care and delivery, communication and respectful behaviours from health providers can be lacking, compromising the quality of care.

This can lead to instances of obstetric violence. These include exams or procedures done without consent, pressuring pregnant people into procedures such as C-Sections, disrespectful treatment or mocking, or lack of privacy during labour and birth.

These negative experiences during pregnancy and childbirth can inflict physical and emotional trauma on women, resulting in higher rates of postpartum depression and anxiety, bonding issues, and breastfeeding difficulties.

As we develop MSI's maternity services, we are committed to ensuring our providers are aware of all forms of obstetric violence, and provide training to avoid it. The World Health Organization has released a Clinical Guidelines Toolkit to support high quality respectful maternity care which MSI has integrated into existing guidelines, clinical protocols and job aids. MSI has also ensured the necessary physical resources, supplies, equipment and staff to deliver recommended practices.

However, MSI found that there were no resources available to guide the most challenging component needed to transform practices and ensure respectful maternity care: change in attitudes, beliefs and behaviours.

What we did

A respectful care training exploring providers' beliefs and attitudes

MSI operates a multi-country network of maternities, with 21 maternities operational across seven low- and middle-income countries. MSI maternities offer the full range of services including vaginal, assisted births, and C-Sections, antenatal and postnatal care, comprehensive abortion care, as well as gynaecological surgeries and admissions.

Using exercises inspired by Values Clarification and Attitudes Transformation workshops (VCAT), MSI developed a training toolkit that helps providers identify risks of obstetric violence in their day-to-day work and find respectful solutions. By exploring the providers' underlying beliefs and attitudes, these trainings encourage lasting change.

The toolkit includes an online course followed by in-person training, which explores the concepts of bodily autonomy, power, and gender dynamics through symbolic exercises, role plays, scenarios, and group activities.

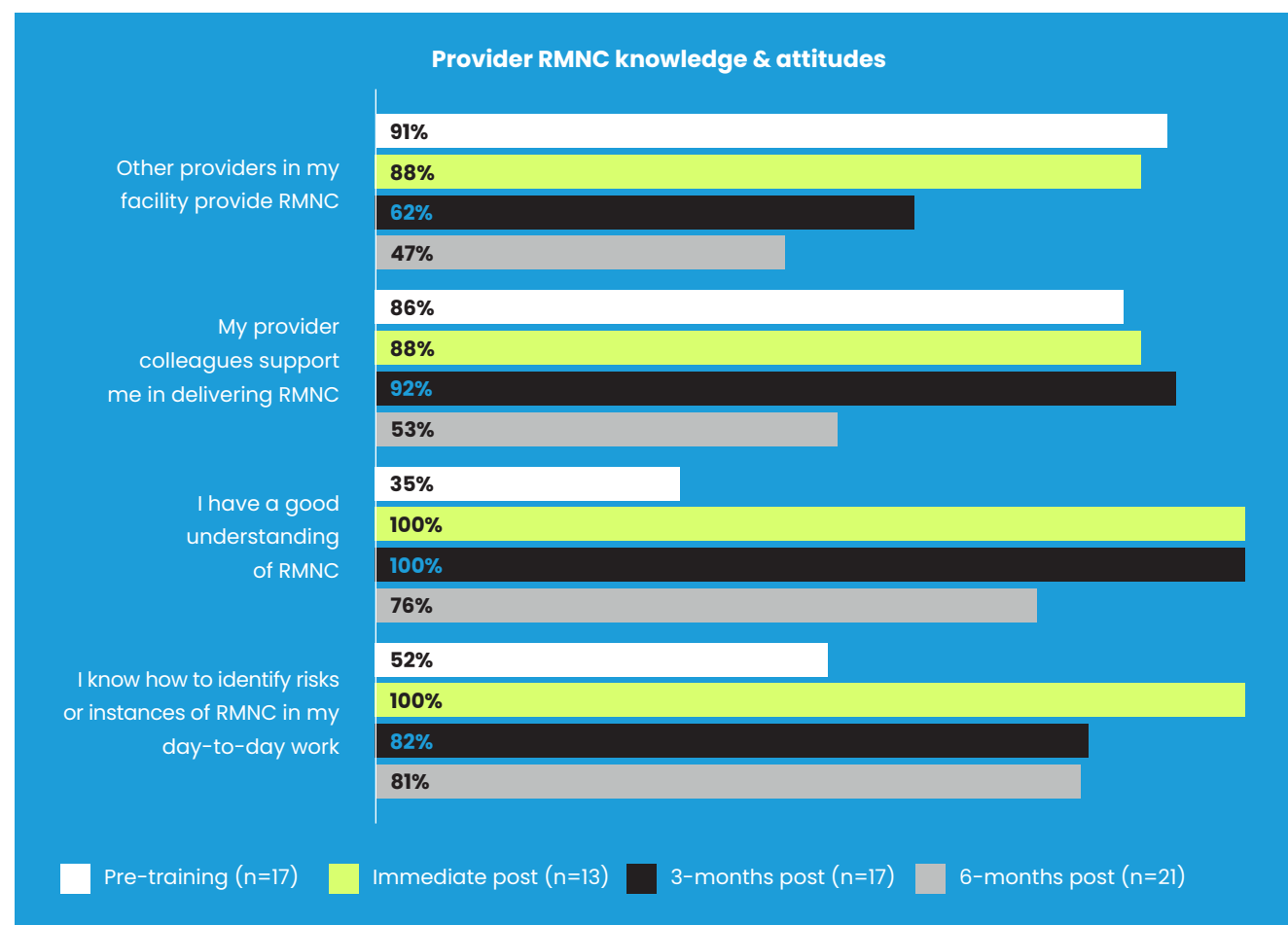
The impact of MSI's training was measured from the healthcare providers' and clients' perspectives. Client experience of care was collected from a cross-sectional survey of antenatal and postnatal patients attending MSI maternities in Kenya and Tanzania before and following the respectful maternal and neonatal care intervention. Healthcare providers completed pre- and post-workshop surveys at one day, 90 days, and 180 days following the workshop to measure any changes in their knowledge, attitudes and perception of intended behaviours regarding respectful maternity care.

What we found

Increase in provider confidence and awareness of respectful care practices

There was an increase from 35% to 100% of providers who strongly agreed that their knowledge, attitudes, and perceived or intended behaviours towards respectful maternity and neonatal care increased after the training.

However, the level of agreement dropped 90- and 180-days post-training (from 100% to 76%). Six months later, 81% of providers reported that they knew how to identify risks and instances of obstetric violence in their day-to-day work, compared to 100% immediately post-training.



Improved experiences for maternity clients

Following the training, more clients described that they were allowed/encouraged to move during labour (from 67% to 95%). More also reported they were allowed/encouraged to have a birth companion (from 75% to 95%). Furthermore, fewer people felt pushed into accepting care options (although this change was not statistically significant).

Almost no mistreatment was reported before and following the provider training, with 96% of clients at baseline and at endline reporting no mistreatment in a [validated scale](#).

[Read the full article here](#).



What this means

Respectful care for sustained impact

Decreases in perceived knowledge and practices over time underline the need for strategies to continue to support respectful maternity care in all facilities and to continue to engage all providers. For example through frequent, light-touch refresher trainings, supportive supervision, appointment of champions in each maternity, and integration of activities in monthly staff meetings. MSI is now implementing these as a follow-on to the training.

This evaluation demonstrates that changes in obstetric practices such as birth companions were only successfully implemented when they came directly from the knowledge and conviction of the providers and not through an external imposition or by improving physical resources. **A combination of physical and staffing resources as well as behaviour change methodologies are needed for a long-lasting, sustainable change towards respectful maternity care.**

“The training contents were so helpful and meaningful in the field of practice, hence facilitating quality and respectful care for our clients.”

MSI Kenya Provider, post-training

More information

For more information on MSI Reproductive Choices and the work that we do, please contact:

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