Abstract #IMNHC188

The impact of longitudinal Midwife mentorship on the availability of essential drugs and supplies across five primary health facilities in Blantyre district, Malawi by: Oveka Jana,¹ Kimberly Baltzell,² Luseshelo Simwinga ¹, Alden Blair ², Miranda Rouse ²

affiliation: ¹Global Action in Nursing-GAIA Malawi; ²University of California San Francisco- Global Action in Nursing

Background

- Nurses & Midwives form the backbone of healthcare delivery
- The UCSF Global Action in Nursing (GAIN) project:
 - Aims to improve Maternal and Newborn Health outcomes
 - Supports Nurse-Midwives with training and longitudinal mentorship
 - Includes monitoring availability of drugs & supplies

Methods

- Data on the availability of 13 locallyprioritized essential drugs and supplies was collected on a bi-weekly basis from five public health facilities between 2019 and 2022.
- Analyses looked at overall availability, changes over time, facility-level trends
- Data was compared to qualitative information such as district-level stockouts and other influencing factors.

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Luseshelo (R) a GAIN Midwife Mentor cross-checking the available essential drugs and supplies with a GAIN mentee at Chileka Health Centre, Blantyre, Malawi.







Results

- Over time there was a decrease in variability of resources across all facilities.
- The facility with the lowest patient volume had consistently higher availability of drugs and supplies (average 81%), while the two facilities with highest patient volume were more sporadic, (average 56% and 47%, respectively).

Conclusion

- Equipping nurses and midwives with critical skills to monitor and advocate for essential drugs and supplies led to more consistent availability.
- Despite procurement limitations, frontline providers can recognize need and advocate for the availability of essential resources.

Recommendations for the field

- the quality of Interventions to improve maternal and newborn care should largely involve Nurses and Midwives.
- Longitudinal bedside mentorship can and should be integrated into in-service training for health providers across the country.