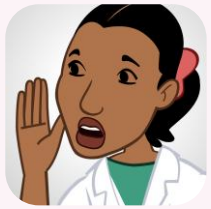
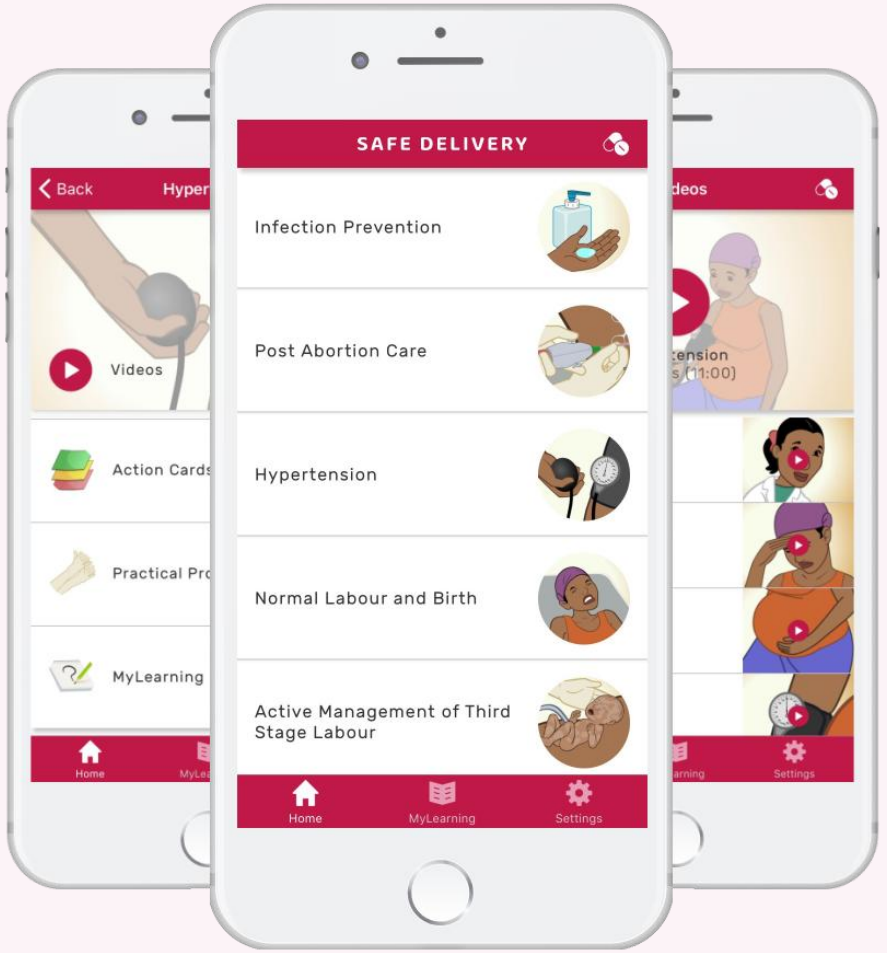
Download the Safe Delivery App

1. Go to Google Play or App Store

2. Search for Safe Delivery App

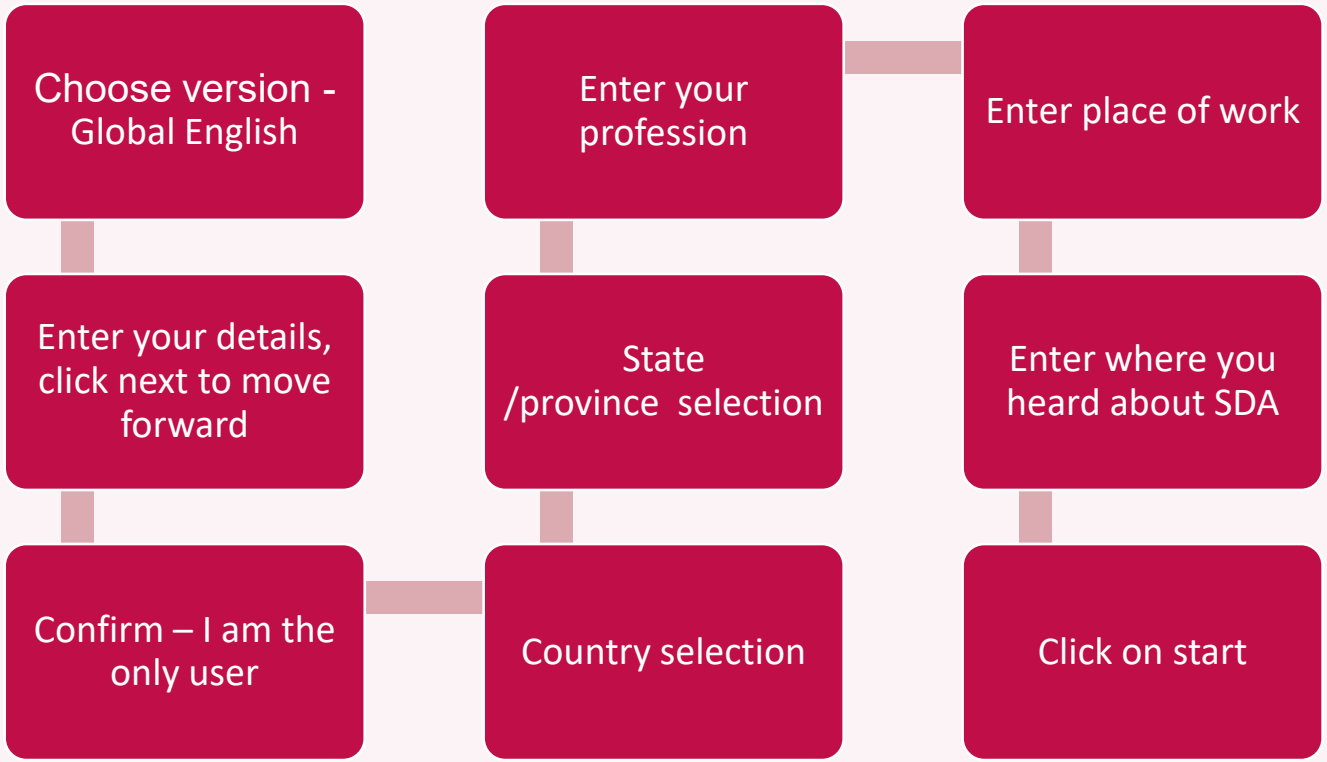




QR codes to download the SDA

Download for **Android**

Download for **iPhone**





maternity FOUNDATION

International Confederation of Midwives

SDA integrated workshop on Modern Contraception

Welcome



Workshop Introduction



Facilitator Introduction

Help us know you ☺











Objectives

By the end of the workshop the learners will be able to:

- ✓Install and navigate the SDA
- ✓Explore the modern contraception module of the SDA
- ✓Gain knowledge on modern contraceptive methods
- ✓Understand concepts of contraception counselling
- ✓Demonstrate skill in insertion of Intrauterine contraceptive devices.

Agenda

- The Safe Delivery App
- Modern Contraceptive module
- Skill stations
  - Station 1: Contraception counselling - Game
  - Station 2: Insertion and removal of IUD
  - Station 3: Insertion and removal of Postpartum IUD
- Discussion and closure

3 mins

Pre-workshop survey

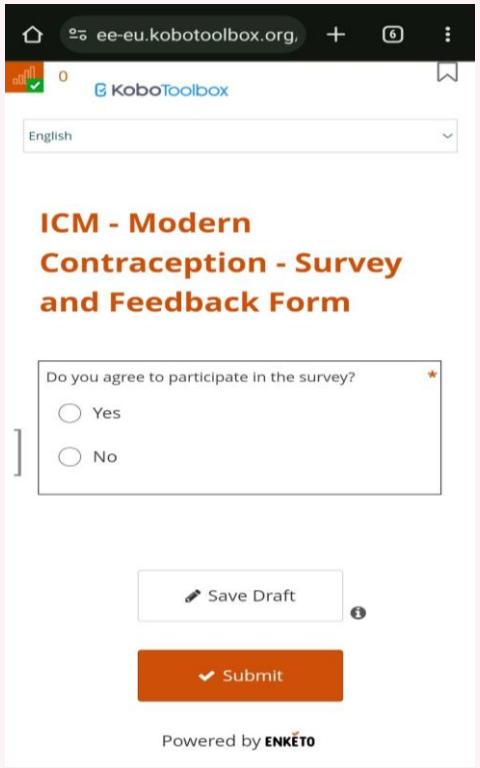
Link to the survey: https://ee-eu.kobotoolbox.org/x/Bz46b1Lt

1

Use your phone's camera to scan the QR code

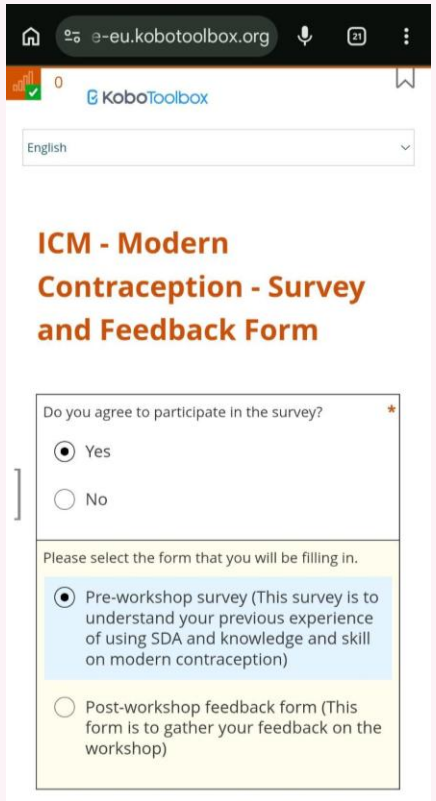
2

Once the code has been scanned, this screen will open on your phone



3

Select 'Pre-workshop survey' option



1

Maternity Foundation and the Safe Delivery App

25 mins



Maternal health is a fundamental pillar in any healthy society.

Yet women continue to die of preventable causes during pregnancy and birth

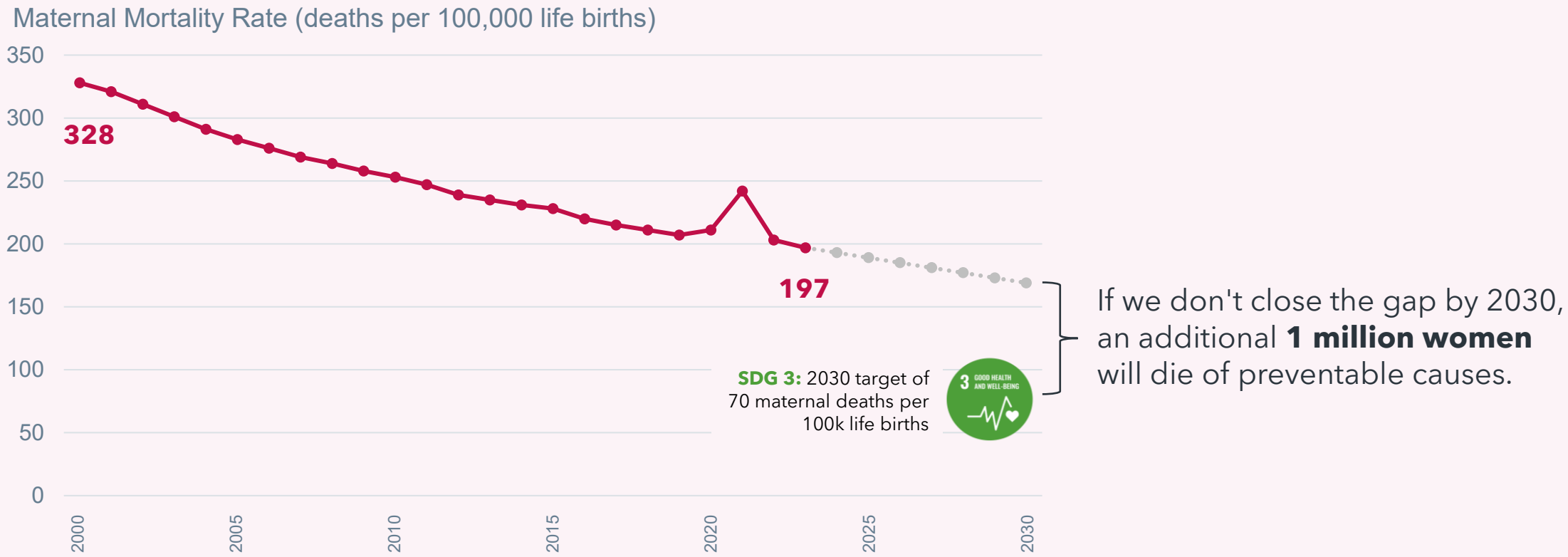
Every 2nd minute a woman dies of causes due to pregnancy or birth

Every 14th second a newborn suffers the same fate

Global progress in reducing maternal mortality has stalled

There is a **growing gap** between current trends and the UN Sustainable Development Goals.

To achieve the goal, the MMR would need to decline by approximately 15% each year – a stark contrast to the current 1,5%





Maternal mortality is rooted in poverty and inequality

92% of maternal deaths occur in **low resource settings**

A woman in **Sub-Saharan Africa** is 400 times more likely to die during birth than a woman in Australia or New Zealand.

Women in **humanitarian settings** are at even greater risk.



Ensuring maternal and newborn health continues to be an urgent issue in SSA

37

Of the 40 countries in the world with **highest maternal mortality rates**, 37 are in Sub-Saharan Africa

70

Sub-Saharan Africa alone accounted for approx. 70% of **global maternal deaths** in 2023

57

57% of the Sub-Saharan population is still living in **rural areas** where access to healthcare can be limited

Investing in midwifery is critical to fill the gap and prevent women from dying

80% of maternal deaths are preventable if mothers receive quality care by a midwife …

…but only **20%** of practising midwives in sub-Saharan Africa have sufficient skills



Midwives can provide up to **90%** of all maternal and newborn health service…

… but there's a shortage of **900,000** midwives in 2030



Maternity Foundation is a leading global NGO within Maternal and Newborn Health

Maternity Foundation **ensures safer births for women and newborns.**

Our mission is to **end all preventable maternal and newborn mortality and morbidity.**

Our vision is that **it should not cost life to give life.**

The Safe Delivery Programme reaches, trains and supports midwives in some of the world's fragile settings

The Safe Delivery App is a free digital job-aid for managing the most common complications

- 17 clinical modules in the global English version
- Evidence-based guidelines
- Microlearning: action cards, videos, and quizzes
- MyLearning platform
- Offline functionality



Watch an introduction to our work here

Safe Delivery Programme ensures that the App and our training method is rolled out

- Localised adaptation into cultural context and language
- Cascading through Training-of-Trainers and Communities-of-Practice
- Institutionalisation by integrating the App into accreditation systems and national curricula

Our global footprint, including countries with ongoing and past partnerships, as well as a high concentration of Safe Delivery App users



500,000+

healthcare professionals reached

across **70+** low- and middle-income countries

The boundaries shown on this map do not imply the expression of any opinion whatsoever on the part of Maternity Foundation concerning the legal status of any country, territory, or area.

Implementation of the Safe Delivery Programme is designed to ensure broad dissemination and sustainable local integration

Examples of local implementation and partnerships



India

Implementation of Gestational Diabetes project in key states

WORLD DIABETES FOUNDATION



Ethiopia

Mentor programme as part of nationwide programme

UNFPA



Syria

Support champions who lead roll out in local communities

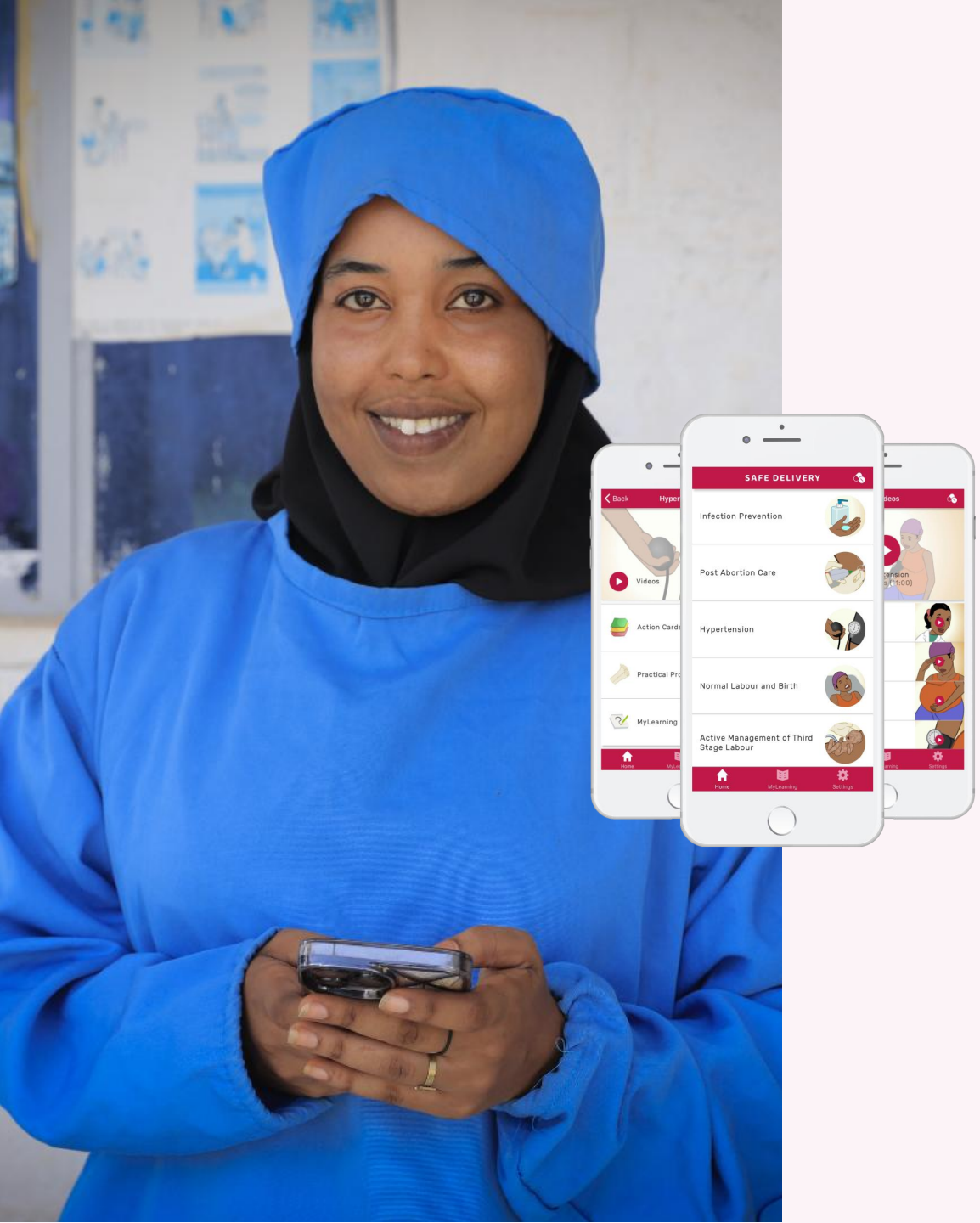
novo nordisk foundation



Bangladesh

Training of Master Trainers to cascade use of the App

BRAC UNIVERSITY



Safe Delivery App

- Free and offline-capable
- Evidence-based and constantly updated
- Simple and intuitive micro-learning
- Localised and context-adapted content

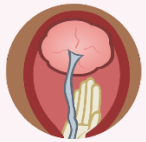
We cover 19 clinical topics… and counting



Infection Prevention



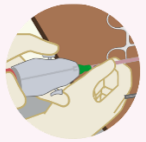
Maternal Sepsis



Manual Removal of Placenta



Post Partum Haemorrhage



Post-Abortion Care



Hypertension



Prolonged Labour



Active Management of Third Stage Labour



Low Birth Weight



Normal Labour & Birth



Newborn Management



Neonatal Resuscitation



Postnatal Care



Safe Abortion



Perinatal Mental Health



Modern Contraception



Antenatal Care



Female Genital Mutilation



Gestational Diabetes Mellitus



Climate



Suturing



Customisable and Modular

1 Agile & easy to update

- Continuously updated to most recent guidelines both at global and national level

2 Customised to different global and national contexts

- 5 global versions
- Global versions based on WHO guidelines
  - English, French, Arabic, Portuguese and Spanish
- Country versions adapted in terms of language, guidelines and visuals

3 Adding new relevant content – modular structure

- Preventative modules
  - Antenatal Care
  - Postnatal Care
  - Perinatal Mental Health
  - Modern Contraception
  - Safe Abortion
- Modules in Production
  - Suturing
  - Climate Change

Existing App Versions



Global versions

- English
- French
- Arabic
- Portuguese
- Spanish



Adapted versions: Asia

- Afghanistan
- Arabic
- Bangladesh
- Cambodia
- India (8 languages)
- Kyrgyzstan (Kyrgyz + Russian)
- Laos
- Myanmar
- Nepal
- Papua New Guinea
- Tajikistan (Tajik + Russian)
- Uzbekistan (Uzbek + Russian)



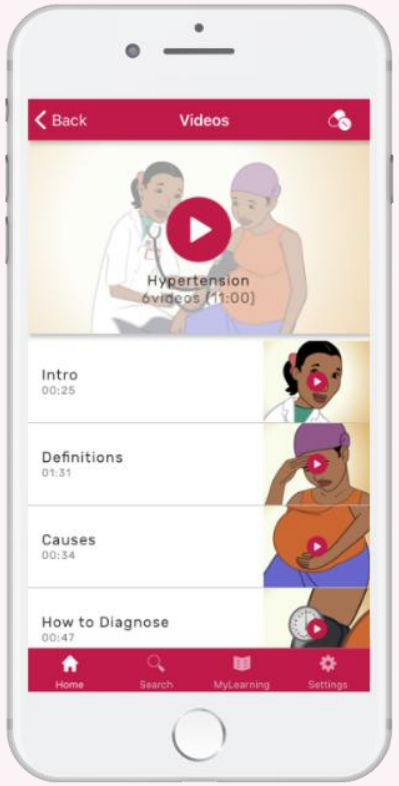
Adapted versions: SSA

- Benin
- Ghana
- Ethiopia (4 languages)
- Rwanda (English + French)
- Somalia
- South Africa
- Tanzania (English + Swahili)

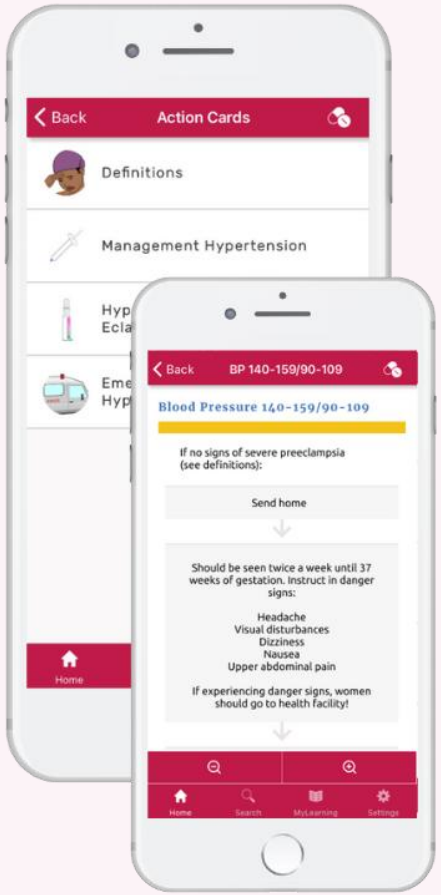
+Ukraine

SDA Features

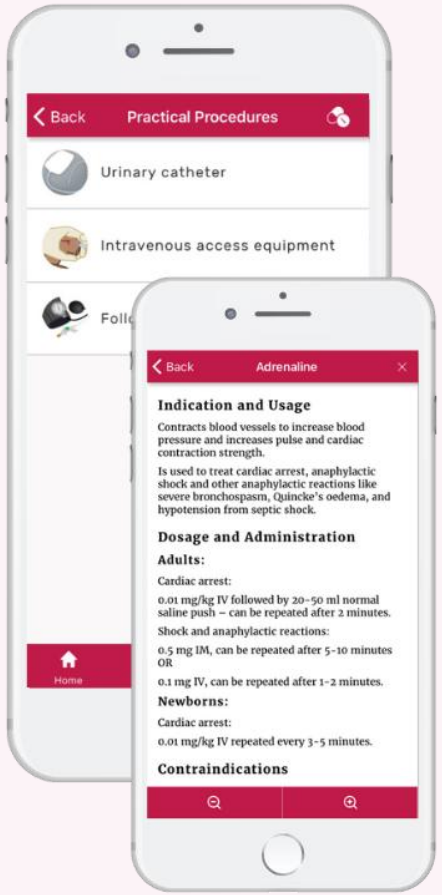
Videos



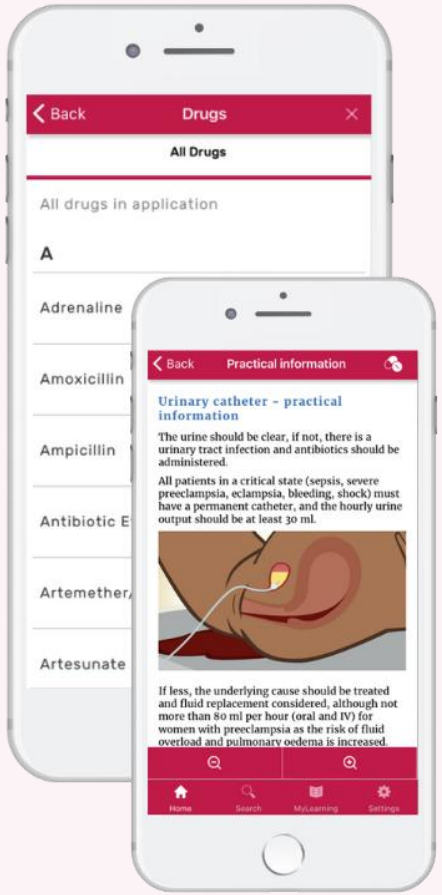
Action Cards



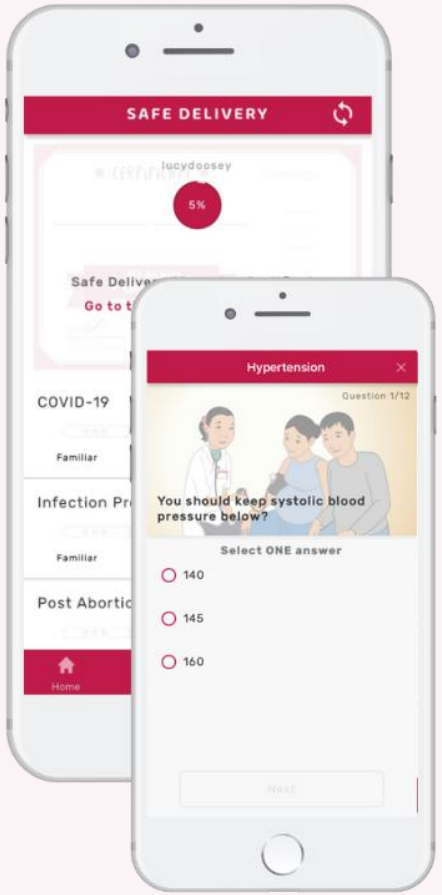
Practical Procedures



Drug List



MyLearning



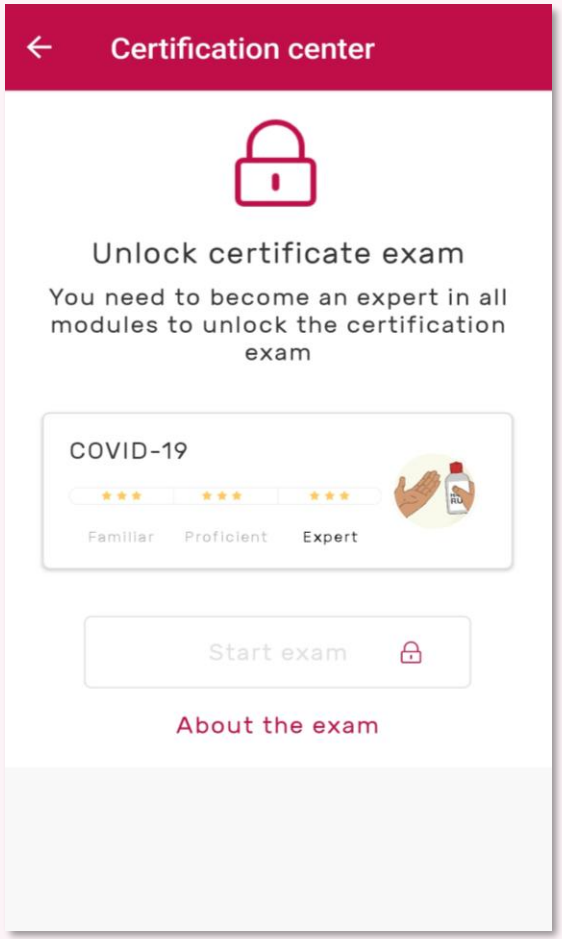
MyLearning

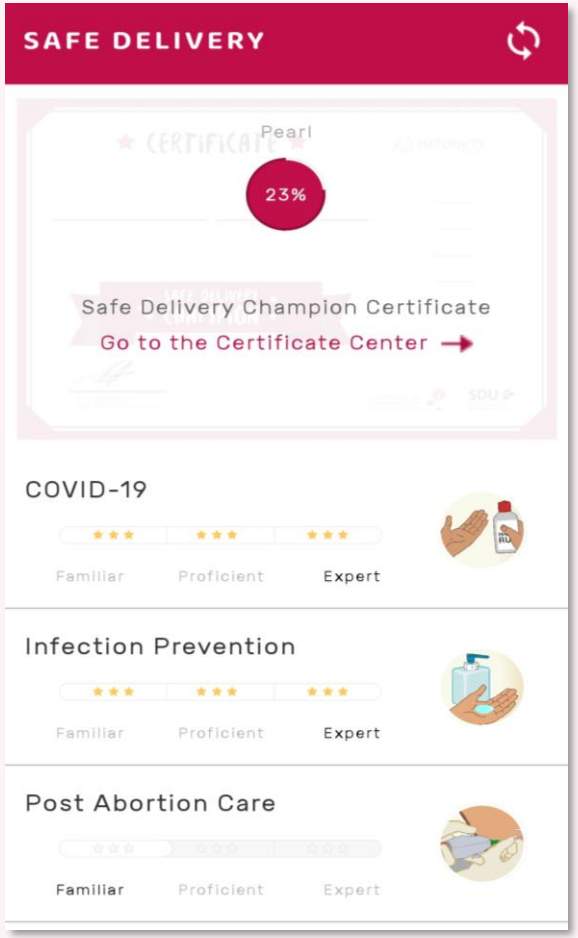
E-Learning platform for receiving official certificate and becoming a Safe Delivery Champion

- ✓ 3 levels for each module:

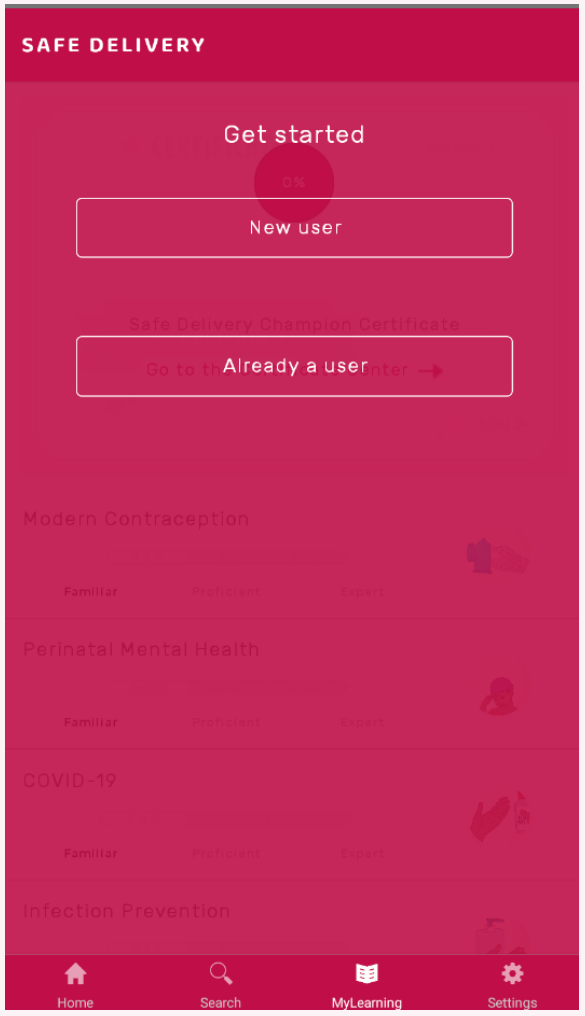
  Familiar > Proficient > Expert
- ✓ Pass level with 100% marks → move to next level
- ✓ Become **expert** in all available modules →

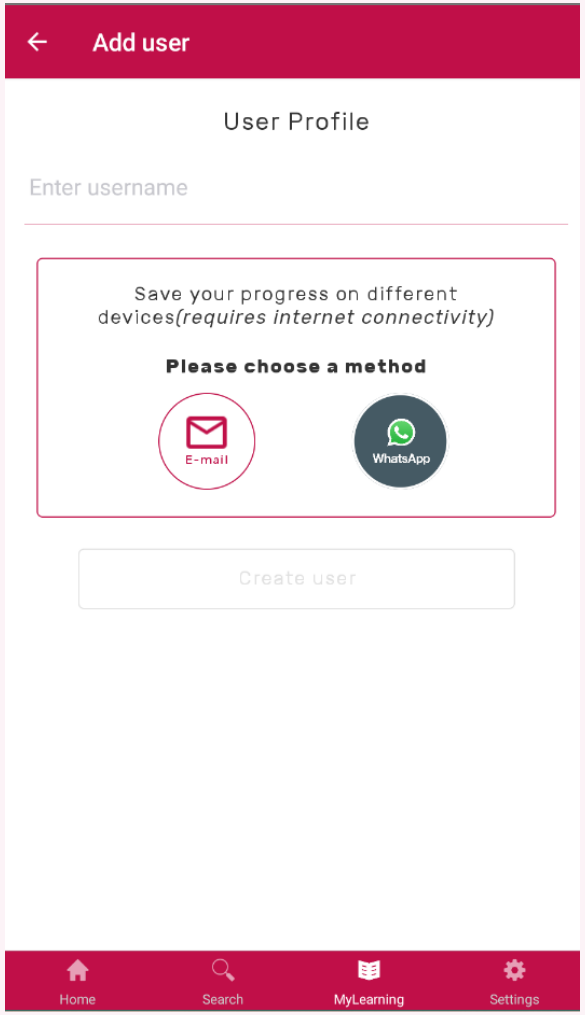
  Proceed to Champion exam
- ✓ Pass exam with >70% to become a **Safe Delivery Champion**

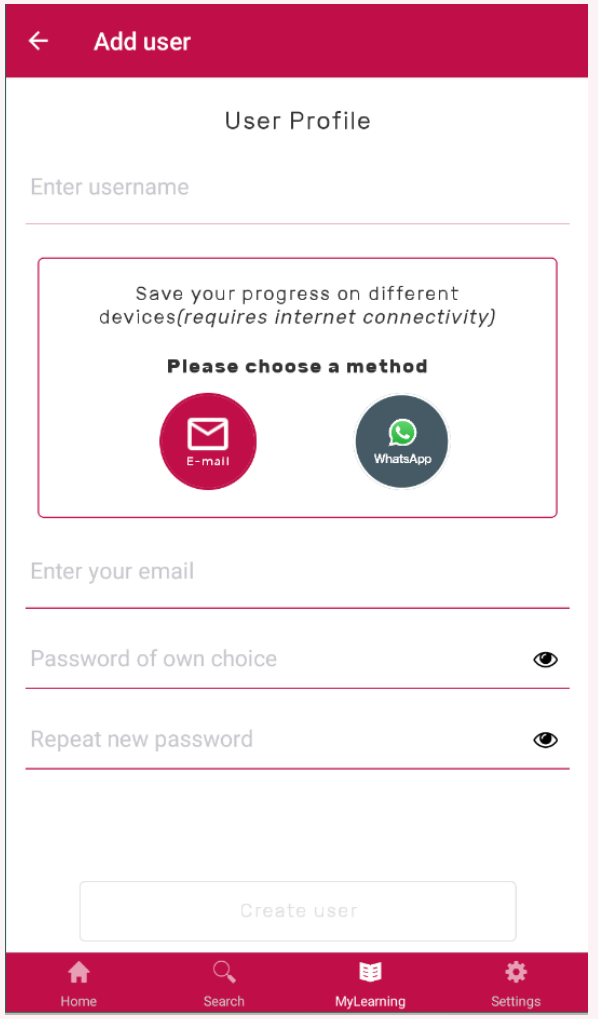


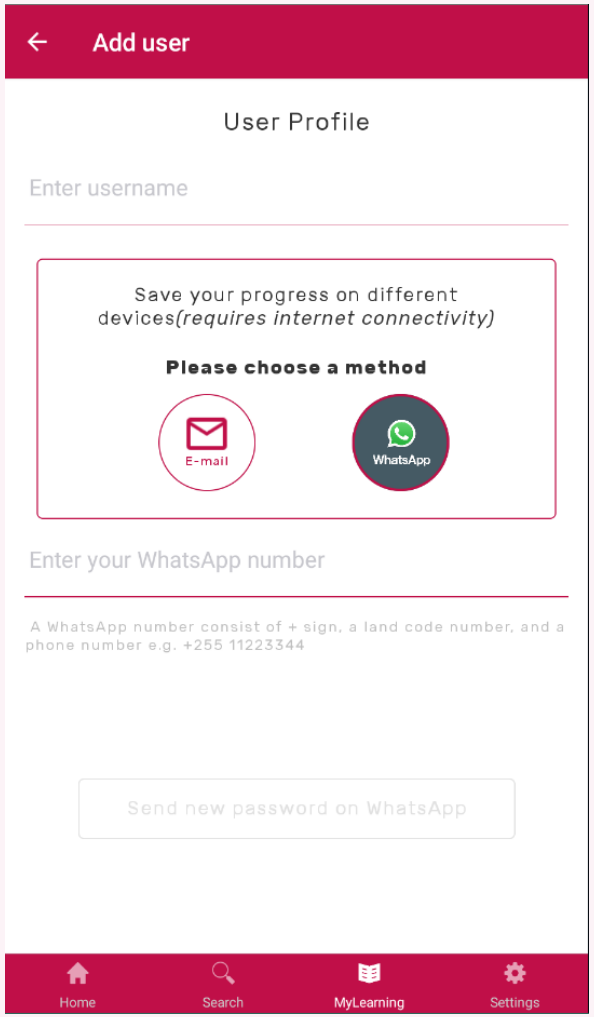


CREATING A USER PROFILE



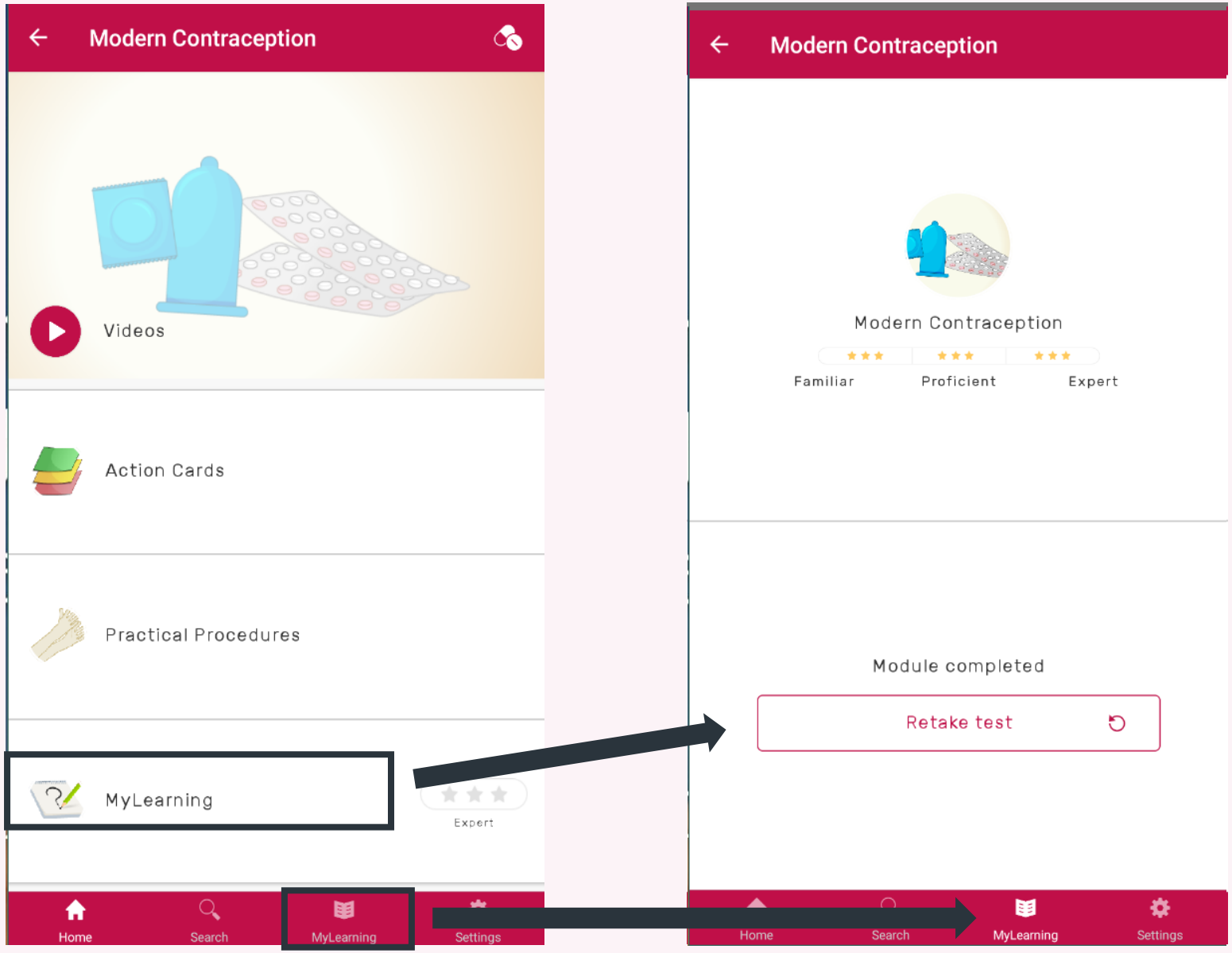




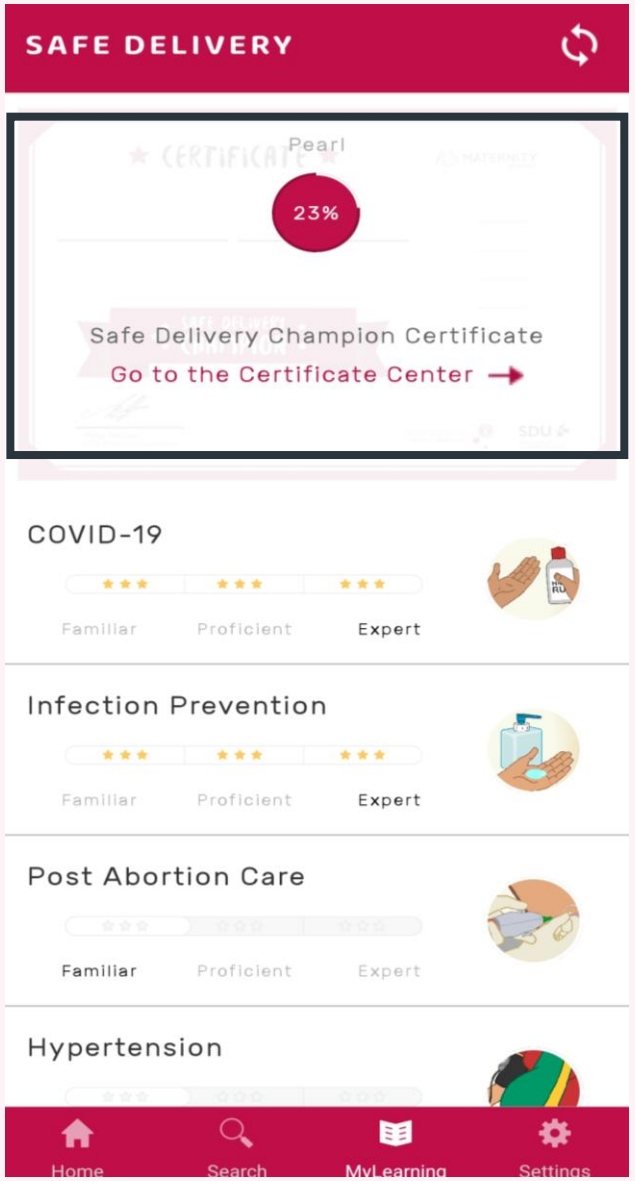


MyLearning

MyLearning

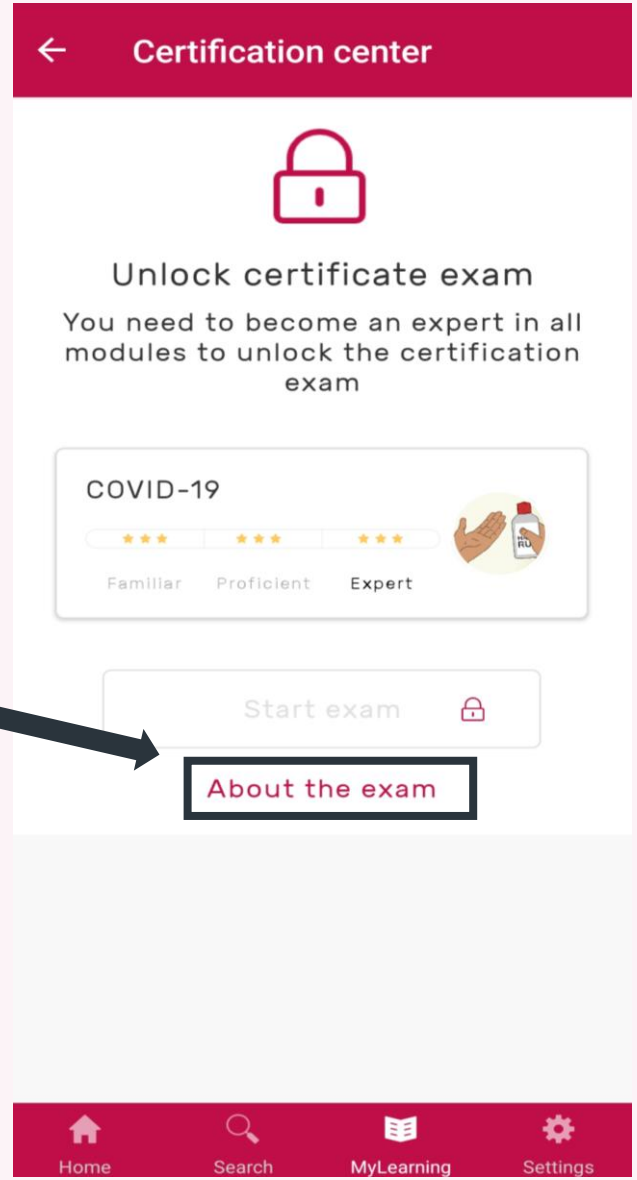


SAFE DELIVERY CHAMPION CERTIFICATE



Unlocks when 100% is completed – All modules are completed up to the expert level

Details about the exam is in here



CERTIFICATE

MATERNITY foundation

This certificate is granted to

22.03.2023

Nurse/ Midwife

Margaret Wairima

for successfully completing the MyLearning certification exam in the Safe Delivery App and earning the title of:

SAFE DELIVERY CHAMPION

Anna Frellsen
CEO, Maternity Foundation

UNIVERSITY OF COPENHAGEN

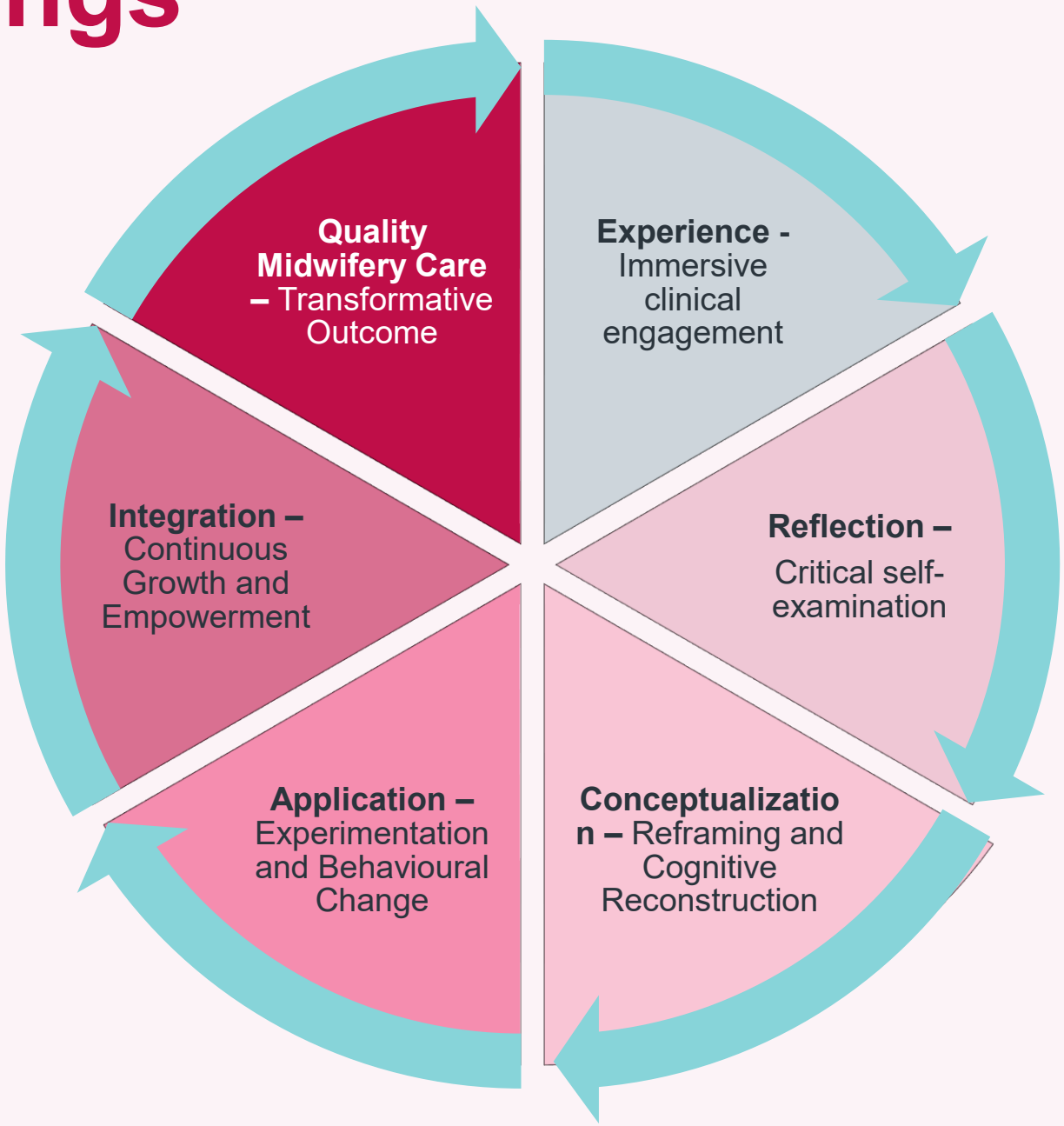
SDU UNIVERSITY OF SOUTHERN DENMARK

ID: MS0T1-IL78

SDA integrated trainings

The transformative learning loop, educating midwives to learn:

A pedagogical approach that is more than just education



Maternity Foundation has developed a unique approach to training, upskilling, and empowerment of midwives

- '*Glocal*' model, bringing **global** and **local** together in our clinical content and trainings
- **Evidence-based** global and national guidelines incorporated and contextualised
- **Online**, **in-person**, **hybrid**, and blended with professional midwifery expertise
- **Tailor-made** to suit the participants' expectations and the partners' needs
- Follows **adult learning theory** and principles and interactive training methodology
- **Community of Practice** formulated and managed for continuous learning

We support midwives on each step of their learning journey, with trainings that show a significant increase of...

64% in skills

32% in knowledge

23% in confidence

Flexible and context-driven learning is at the heart of our training philosophy

Collaborative learning:
Discussions, peer-to-peer-learning and mentorship opportunities to build a strong professional community

Experiential learning:
Hands-on, case-based learning, simulations and real-world problem-solving

Customised:
We offer different training modalities and durations, and we apply a variety of teaching methods



Learner-centred approach:
We tailor to individual needs and encourage participation and self-directed learning

Engagement:
We foster a sense of purpose, professional growth and life-long learning

Training packages

01

SDA Champion Training

02

SDA Orientation*

03

SDA Deep Dive*

*Virtual and inperson trainings available

SDA integrated Training of Trainers

04

Advanced level

1. Managing Normal Labour and Birth
2. Managing Bleeding after Birth
3. Managing Complicated Pregnancy and Birth
4. Newborn Care
5. Essential Midwifery Skills
6. Safe Abortion Care
7. Modern Contraception
8. Perinatal Mental Health

Blended learning = + + or

SDA integrated Clinical Training

05

Basic level

1. Managing Normal Labour and Birth
2. Managing Bleeding after Birth
3. Managing Complicated Pregnancy and Birth
4. Newborn Care
5. Essential Midwifery Skills
6. Safe Abortion Care
7. Modern Contraception
8. Perinatal Mental Health

In-person training

Hybrid training

Becoming an SDA Master Trainer

Training catalogue available on the website
www.maternity.dk



2

Modern Contraception

50 mins

Why contraception?

- Reduces the number of times a woman is exposed to pregnancy
- Helps women avoid unintended and closely spaced pregnancies
- Helps women avoid > 4 births or births after 35 years of age

Preventing maternal morbidity and mortality

- 44% of pregnancies are unintended
- 56% of unintended pregnancies end in an induced abortion

Reducing unsafe abortion from unintended pregnancy

- Prevents closely spaced and ill-timed pregnancies and births

Reducing newborn and infant mortality

- Integrated modern contraception and antiretroviral medication when fully met reduces mother-to-newborn-transmission of HIV by 93%

Helping to prevent HIV/ AIDS

- Empowering people and enhancing education
- Reducing adolescent pregnancies
- Contributes to economic growth

Others

Modern contraception

- **Modern contraceptives** are the methods that are effective in preventing pregnancy and that are typically convenient and safe to use.

- Enables people to make informed choices about their sexual and reproductive health.

- Contraceptive information and services are fundamental to the health and human rights of all individuals.

SDG indicator 3.7.1





INDICATOR 3•7•1

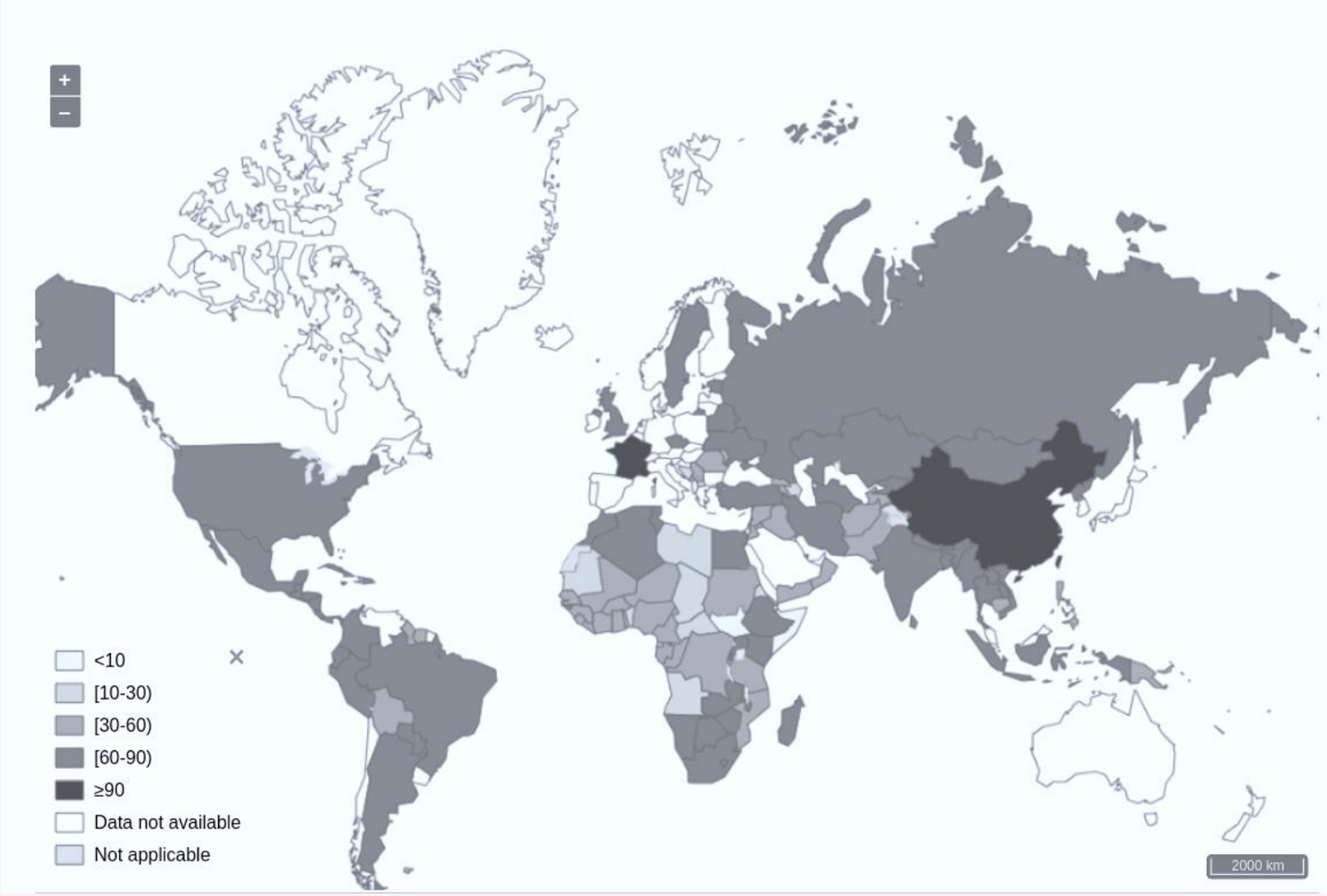
PROPORTION OF WOMEN OF REPRODUCTIVE AGE (AGED 15-49) WHO HAVE THEIR NEED FOR FAMILY PLANNING SATISFIED BY MODERN METHODS

Women of reproductive age who have their need for family planning met with modern methods (%)

Needs met globally:

77.5%

of women have had their needs for modern contraceptive methods met in 2022. It has stagnated globally



Source:
https://www.who.int/data/gho/data/themes/topics/sdg-target-3_7-sexual-and-reproductive-health

Unmet need for contraception

In 2021, there were 1.9 billion women in the reproductive age group (15–49 years) worldwide.

1.1 billion	Have a need for family planning.
874 million	Use modern contraceptive methods
92 million	Use traditional contraceptive methods
164 million	Have an unmet need for contraception

Source: https://www.who.int/news-room/fact-sheets/detail/family-planning-contraception



Unmet need for contraception – Why?

- Limited access to contraception
- Limited choice of methods
- Fear or experience of side-effects
- Cultural or religious opposition
- Poor quality of available services
- Users' and providers' bias against some methods
- Gender-based barriers to accessing services.



Source: https://www.who.int/health-topics/contraception#tab=tab_1

Modern contraceptive methods



How are modern contraceptives classified?

- Contraceptives vary in **mechanism of action** and **effectiveness**.
- Modern contraception can be categorised under three groups:
  - **Short-acting contraceptives**
  - **Long-acting reversible contraceptives** (LARCs)
  - **Permanent contraceptives**

Grouping modern contraception

Short acting methods

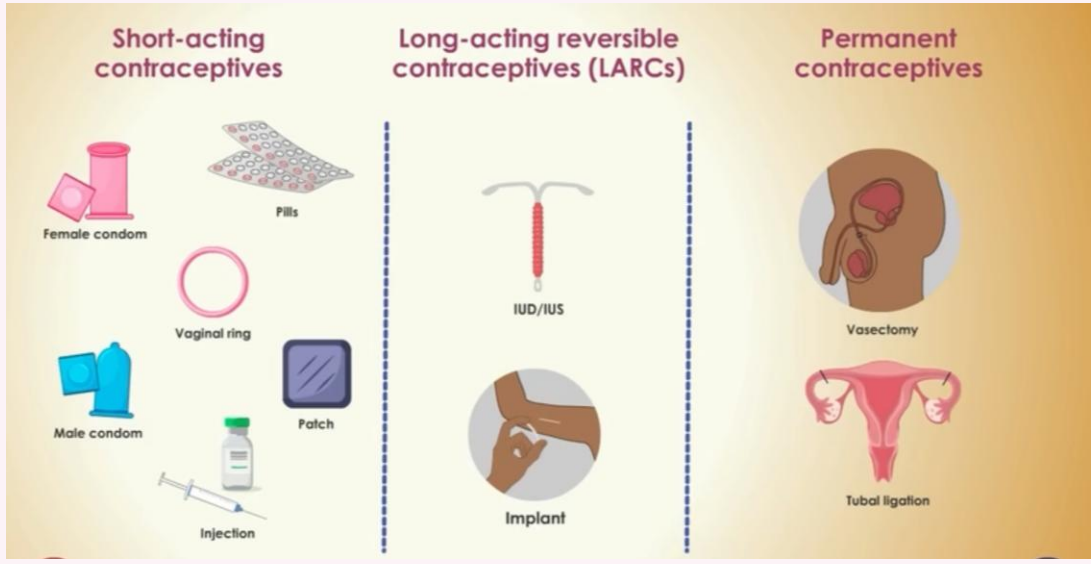
- Female /male condom
- Pills
  - Combined oral contraceptive
  - Progestin-only pills
  - Emergency pill
- Injectables
  - Monthly injectables
  - Progestrin-only injectable
- Vaginal ring
  - Combined vaginal ring
  - Progesteron releasing vaginal ring
- Combined patch

Long-acting methods

- Implant
- Copper IUD
- Hormonal IUD

Permanent methods

- Tubal ligation
- Vasectomy



Game based learning

- ✓ 4 groups
- ✓ Arrange the Flash cards in the order of their effectiveness
- ✓ The group who arranges it first is the winner
- ✓ Maximum time = 5 minutes



SDA can be referred to if needed

Contraception race

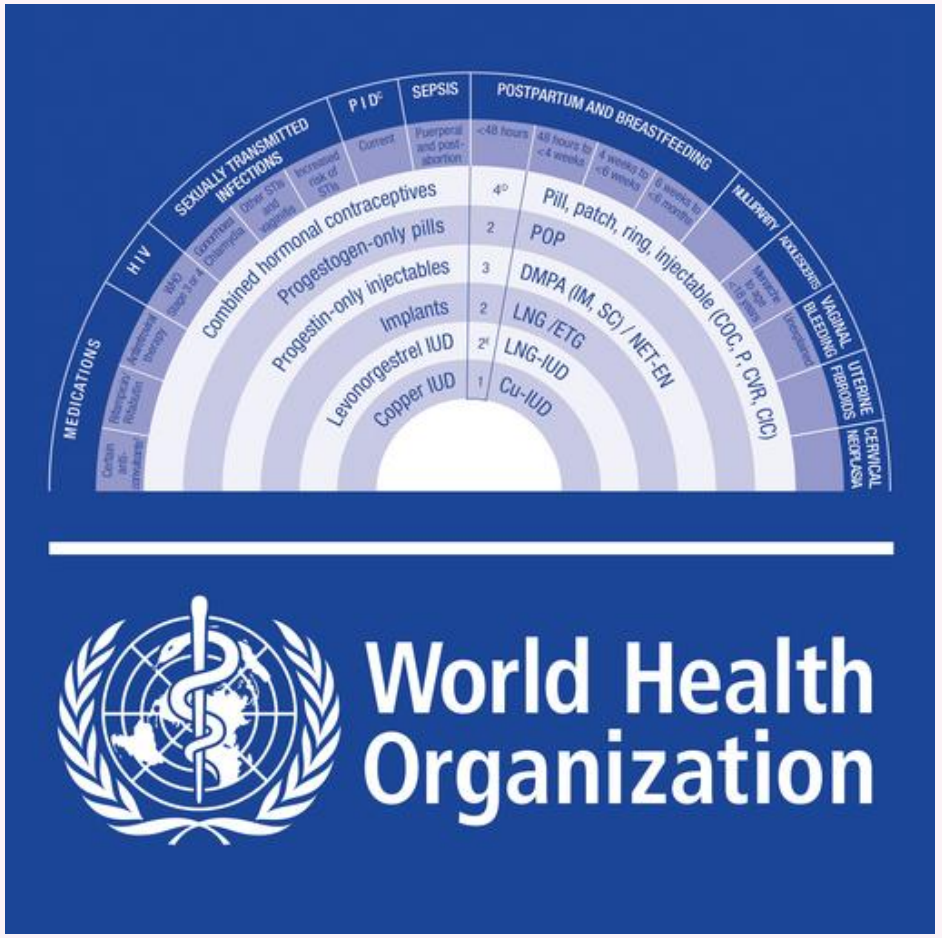
1. Contraceptive implant - 99.9%
2. Vasectomy - 99.8%
3. Tubal ligation - 99.5%
4- Hormonal IUD 99.3%
5. Copper IUD - 99.2%
6. Progesterone releasing vaginal ring - 98%
7. Combined Injectable contraceptive - 97%
8. Progestin only injectable - 96%
9. Combined vaginal ring – 93%
10. Combined contraceptive patch- 93%
11. Combined Oral Contraceptives - 93%
12. Progestin only pills - 93%
13. Male condom - 87%
14. Female Condom - 79%



Lets discuss….



Medical Eligibility Criteria – MEC for contraception



1. **Safely use** - Method can be used in all circumstances
2. **Generally, use** – Method can be used
3. **Generally, do not use** - Use of method not usually recommended unless other more appropriate methods are not available or acceptable
4. **Do not use** - method NOT to be used

WHO- MEC app
https://play.google.com/store/apps/details?id=com.who.mecwheel&pcampaignid=web_share

Brainstorm – Which method is the best?

Scenario 1 – Ms. X, 17 years had an unprotected intercourse last night.

Scenario 2 – Ms. Y, 25 years gave birth to her first boy 4 weeks ago and is breast feeding.

Scenario 3 – Ms. Z, 36 years, needs contraception as she does not wish to have more children.

Scenario 4 – Ms. G, 33 years has a known history of heart disease and is on medication. She does not want any more children.

Scenario 5 – Ms. J, 28 years requests for an IUD. On examination she has greenish discharge from the vagina.

To be continued….

Enjoy your lunch

Come back at 2:00 pm

For Part B – Skill stations