

Self-Directed Learning Strengthens Bonds Between Midwives and Adolescents

"I was very afraid, but the midwife was so gentle with me. And after treatment she talked to me about STDs, AIDS and family planning."

For this 17-year-old Ghanaian adolescent, a midwife's ability to provide both emergency postabortion care and non-judgmental counseling about sexuality and family planning provided key information and encouragement to avoid risky behavior and unplanned pregnancy in the future. The midwife who treated the young woman participates in a PRIME II pilot program to improve the quality and accessibility of adolescent reproductive health services by strengthening the relationships between private-sector nurse-midwives and their adolescent clients.

Launched in 1999, the program is a joint effort of the Ghana Registered Midwives Association (GRMA) and PRIME II. The program relies on PRIME's innovative self-directed learning course, which combines self-paced individual instruction, peer support, and periodic facilitated group learning sessions that allow nurse-midwives to gain new skills without leaving their clinics for extended periods of time. Sixty midwives from the regions of Brong Ahafo, Eastern and Ashanti participated in the course in 1999; then the program—with an additional module on HIV counseling and testing—was extended to another 60 midwives in 2001.

Early results show that self-directed learning can be an effective tool for improving and expanding family planning and reproductive health services for adolescents. Baseline and follow-up evaluations of 28 nurse-midwives who participated in the PRIME course found that three times as many were offering diagnosis and treatment of sexually transmitted infections to adolescents at follow-up. Almost twice as many were providing condoms, and nearly four times more were offering postabortion care to adolescents. All 28 of the midwives reported at follow-up that their clinics were now providing specialized services for adolescents, including alterations in the physical environment to ensure privacy.

Vital to the program's success are the new attitudes toward adolescent reproductive health that the course has instilled in




many of the providers. “Now I know how to handle adolescents,” said one GRMA midwife during her evaluation. “I used to shout at them when they came to me for services, telling them they are not old enough to be sexually active or practice family planning. Now I welcome them, give them a talk on STD, HIV/AIDS, and give them family planning services. It has opened my mind to love my patients.”

The PRIME II Project works around the world to strengthen the performance of primary-care providers as they strive to improve family planning and reproductive health services in their communities.

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