

The Capacity Project in Mali

Since March 2006, the Capacity Project has been working to enhance the availability and quality of health care service provision to communities in currently underserved areas of Mali. Toward this aim, the Project is collaborating with Malian colleagues to address a number of needs, including the lack of a consistent supply of well-trained health workers committed to providing health services to rural communities. In particular, there is a shortage of health workers in the three underserved northern regions of Mali and a chronic shortage of well-trained midwives available to serve in rural areas throughout the country—about 75% of nurses/midwives in Mali are based in the capital city of Bamako.

The Project's objectives include increasing the alignment between health needs and available human resources in the three northern regions by strengthening a private-sector nursing school in Gao; supporting USAID's Prevention of Postpartum Hemorrhage Initiative (POPHI) to demonstrate an expanded role for a cadre of health worker, *matrones*, in active management of the third stage of labor (AMTSL); identifying and disseminating human resources for health (HRH) promising practices; and enhancing national and regional human resources information systems.

Activities in Brief

Strengthening a Nursing School in an Underserved Area

One of the Capacity Project's main goals is to develop better education and training programs for the health workforce, in order to improve quality, accessibility and use of priority health services. In Mali, the Project is working to increase the alignment between health needs and available human resources in three underserved northern regions—Gao, Kidal and Tombouctou—by strengthening the *Ecole des Infirmiers de Gao* (EIG) as a Center of Excellence in community-supported, technology-based training. This private-sector nursing school plays a vital role in training health workers to serve the diverse population of this remote area. At the EIG, around 40 faculty members provide instruction for approximately 240 students.

Since 2006, the Project has conducted a series of training workshops for a mix of clinical staff, faculty members and local policy-makers at the EIG with the aim of modeling the Project's performance-based approach to curriculum development. Working closely with the EIG, the Project introduced a Francophone version of its *Learning for Performance* guide and workbook, which helps connect learning to specific job responsibilities and competencies. Using this approach can shorten the time required for training by focusing learning on what is most essential for the job, and improve job performance by teaching what is relevant to specific duties. The *Learning for Performance* approach has since been used to finalize family planning/reproductive health and child health modules for the EIG's curriculum.

The Project also assisted in the reorganization of the EIG board of directors, which had previously

been comprised solely of teachers and school administrators. With the Project's assistance, the board currently includes political and administrative representatives from the region of Gao, such as the governor, mayor, hospital director and regional health director. In addition, the Project also contributed to the development and dissemination of a five-year strategic plan for the EIG covering 2007–2012.

Over the course of 2007–2008, as part of a broad-based strategy to enhance the training of health workers who serve the northern zone, the Project assisted the EIG with its technology needs so that faculty and staff can make use of distance-learning tools to update their skills and access technical resources. The Project has supplied the EIG with 15 desktop computers, two laptops and a variety of multimedia equipment and accessories.

Other activities include assisting with the organizational development of the EIG; designing and installing a networked, technology-based learning system (including hardware and software); developing and implementing a plan for upgrading EIG practicum sites; conducting documentation of promising training and learning practices at the EIG; and supporting the Ministry of Health (MOH) National Training Institute to use the revised EIG curricula as a basis for national curricula revisions.

Demonstrating an Expanded Role for Matrones in Preventing Postpartum Hemorrhage

Postpartum hemorrhage is the leading cause of maternal mortality worldwide. In collaboration with POPPHI and the MOH, the Capacity Project is helping to increase the alignment between maternal health needs and available human resources in three regions—Koulikoro, Sikasso



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and Gao—by demonstrating an expanded role for *matrones* in active management of the third stage of labor (AMTSL), a recommended practice to prevent postpartum hemorrhage. *Matrones*

oversee approximately 50% of all births in Mali, thus their sanctioned use of AMTSL would assist a very large population across the country.

To begin, the Project aided in establishing the Prevention of Postpartum Hemorrhage Technical Advisory Group (PPHTAG). This committee consists of the national director of health/ regional health director and representatives from MOH pharmaceutical departments, ob/gyn and

midwifery associations and other stakeholder groups. It has the role of assisting with and reviewing the pilot study protocol and discussing related issues. After conducting a baseline study, the PPHTAG finalized the training strategy, materials and schedule of activities for the pilot study.

To date, 84 midwives, doctors and skilled birth attendants were trained in AMTSL and in the “training of trainers” technique. In turn, they trained an additional 60 drug managers and 57 *matrones* in the three northern regions.

In 2007-2008, the Project conducted a final evaluation of the pilot initiative which revealed that *matrones* are able to perform AMTSL with the same levels of success and competency as other qualified health workers. Current efforts are focused on dissemination of these results to increase regional and international recognition and acceptance for expanding the role of *matrones*.

The Project is also working with the MOH to implement a new training methodology

for all skilled birth attendants in AMTSL. By supporting decentralized district-level training that uses a combination of group-based and site-and-individual activities, the Project hopes to decrease the amount of time needed to train newly appointed obstetrical nurses, midwives and doctors in AMTSL. This methodology is currently being implemented in 16 districts in the Koulikoro and Mopti regions.

Identifying and Disseminating HRH Promising Practices

To support the development of human resources for health in Mali, the Project is helping to document and describe HRH promising practices and lessons learned at the country level. These include the community-based recruitment strategy of the EIG and the strong partnerships that the EIG, MOH and USAID’s Kenya Ciwara Project are establishing with local communities in Gao Region. Broad-based stakeholder partnerships are needed to address HRH issues from both the supply and demand sides.

The Project works to disseminate promising practices and share HRH expertise through a broad-based tri-regional partnership. Going forward, the Project will support this emerging partnership of HRH stakeholders as well as the continued development of regional HRH leadership.

Enhancing National and Regional HR Information Systems

The Project identified the absence or unavailability of key human resources data as an obstacle to developing a comprehensive national HRH strategy. As an initial step toward enhancing national and regional human resources information systems (HRIS) in Mali, the Project is advocating for use of HRIS and demonstrating its effectiveness.



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The Capacity Project Partnership



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Additional Partners in Mali

Ministry of Health (MOH)
Prevention of Postpartum Hemorrhage
Initiative (POPHI)
Ecole des Infirmiers de Gao (EIG)

Assistance Technique Nationale (ATN)
Keneya Ciwara II Project