

Moving midwives to work in rural areas helps improve essential obstetric care

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A scheme supporting newly graduated, unemployed, and retired midwives to work in rural areas of Nigeria and provide essential obstetric care has helped to improve maternal, newborn, and child health and could potentially serve as a model for other low-income countries. This includes helping redistribute health workforce in low-income countries to reduce the health inequities between urban and rural areas.

In a Health in Action article in this week's [PLOS Medicine](#), a group of Nigerian researchers from the National [Primary Health Care](#) Development Agency in Abuja, and the Federal Ministry of Health, describe the Midwife Service Scheme in which midwives are posted for one year to selected primary care facilities in hard-to-reach areas or among underserved populations with the capacity to provide basic essential obstetric care linked to a secondary health care facility that is able to provide comprehensive emergency obstetric care.

The authors say: "The [Midwife Service Scheme] Strategy of the Nigerian government recognises that strategically redistributing and improving the skill set of existing cadres of health workers is achievable on a large scale."

After one year of the scheme, there was an uneven improvement in maternal, newborn, and child health indices in the six geopolitical zones of Nigeria and despite major challenges to continuing the scheme—such as the retention, availability and training of [midwives](#), and varying levels of commitment from state and local governments across Nigeria—there

are plans to overcome these challenges and further develop the scheme.

The authors say: "The initiative potentially serves as a model for other developing countries within and outside sub-Saharan Africa who may need to redistribute their health workforce to reduce the inequities that exist among geographical zones and between urban and [rural areas](#)."

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