

PILOT PROJECT: MENTORED ONLINE MIDWIFERY EDUCATION MODULES AIMED AT MATERNAL HEALTH STAFF IN EL TRIFINIO, GUATEMALA. LA Maurer (BS, MD Candidate, SOM), L Norheim, ED Barrington, A Nacht, Department of Obstetrics and Gynecology, University of Colorado, Aurora, CO.

Guatemala has one of the highest maternal mortality ratios in the world with women in rural areas, such as the El Trifinio region, being disproportionately affected by preventable maternal deaths.¹ Although a birthing center was opened in Trifinio in 2016 as an extension of the established clinic known as the Trifinio Center for Human Development, lack of appropriately trained staff for the clinic has limited its use.² Therefore, the maternal health team at the University of Colorado plans to develop a self- paced, online midwifery training program with remote mentorship for community nurses in Trifinio that is based upon the essential competencies set forth by the International Confederation of Midwives (ICM). As part of the pre-implementation phase, this project aims to assess the feasibility of such a program. To gain a baseline understanding of similar programs, the current literature on skilled birth attendant or midwifery training programs, the success of online education, and the use of remote mentorship to enhance online education was organized into three respective evidence tables with preference given to papers that are most relevant to the setting in El Trifinio. Focus then shifted to our target audience and, with the guidance of a charge nurse at the Trifinio clinic, a 20 question pre-pilot survey was developed to be given to the community nurses with the aim of assessing their learning preferences, expectations of the program, and potential limitations that may inhibit their success in the program. Additionally, in preparation for US based content experts to begin creating the modules, a process map was made with a corresponding workbook which details the process of adapting a given ICM competency into a deliverable module. Thus far, we have shown through evidence tables that there is a need for skilled birth attendants in low- and middle- income countries, online education is feasible even in very remote areas with limited access to reliable wifi, and mentorship even in a remote context does enhance students' overall experience with online education. These preliminary findings support the hypothesis that our proposed blended educational program is feasible. Although our results are limited to date, ongoing work includes administering the pre-pilot survey to the community nurses in Trifinio and interviewing content experts on their preferences and expectations of the program. The resulting data from the community nurses and content experts will be analyzed and presented to the maternal health team at the University of Colorado as a tool to inform the logistics of how content is delivered and created in this program. Future work will be to pilot the process map on content experts with subsequent refinements being made based on pre- and post-survey responses and to create a document with instructions for nurses on how to approach this type of education. Finally, we plan to pilot an educational module to community nurses with pre- and post-surveys and continue with quality improvement of the program.

1. Franco de Méndez N. Maternal Mortality in Guatemala: A Preventable Tragedy. *Population Reference Bureau website*. June 9, 2003. Accessed July 12, 2020. <https://www.prb.org/maternalmortalityinguatemalaapreventabletragedy/>
2. Terhune M. New Options For New Moms: Birth Center Opens In El Trifinio, Guatemala. *Colorado School of Public Health website*. 2016. Accessed April 10, 2020. <http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/globalhealth/about/Documents/GlobalHealthLink48.pdf>