

REPORT ON BEmONC TRAINING

The basic Emergency obstetric and newborn the capacity of are (BEmONC) Training was successfully conducted with the aim of strengthening the capacity of health workers in managing maternal and newborn emergencies. The training brought together 75 participants, supported by 7 facilitators and coordinated by 2 secretariat staff.

The training was held at Alheri hotel, yola, from 11th to 20th February 2025. The venue provided a conducive environment for both learning and accommodation, ensuring smooth facilitation and interaction throughout the training period. Daily sessions commenced at 8:00am and closed at 5:30 pm, allowing adequate time for theoretical and practical sessions.

Rapporteurs were assigned and effectively documented the 10 days of activities, capturing proceedings, highlights and key outcomes

The training was organized by (UNFPA) and provide an avenue for both theoretical and practical learning.

Objectives of the training

1. To enhance the knowledge and skills of health workers on the timely identification and management of obstetric and newborn complications.
2. To promote standardized clinical practices to improve maternal and neonatal outcomes.
3. To build teamwork and coordination among healthcare providers at facility and community levels.

Methodology

A combination of teaching and learning methods were used, including:

Presentation

Group work and case studies

Role plays and discussions

Practical demonstration and skills drills

Key topics covered:

Pre-test

Day 1 & 2:

- Concept of reproductive health (from womb to the tomb).
- New SMH Strategy, A corticosteroids, trends for averting maternal/newborn mortality.
- History taking, examination & rapid initial assessment.
- WHO 2016 ANC model & intervention to increase ANC uptake.
- Birth preparedness and complications readiness including calibrated drape.

Day 3 & 4:

- Concept of EOC and signal functions.
- Mngt & prevent pre-Eclamsia/Eclamsia.
- Anticonvulsant regimens. Toxicity & contra indication.
- Patient centered care and respectful maternity care.
- Principles of infection, prevention and control.
- Bleeding in early pregnancy abortion and PAC.
- Bleeding in late pregnancy (bleeding in early pregnancy ectopic & molar pregnancy mngm).

Day 5 & 6:

- Overview of obstetric blood loss-use of calibrated drape estimation and uterotonics.
- Mngm of post-partum hemorrhage.
- Use of calibrated drape.
- E-MOTIVE.
- NASG.
- Anemia in pregnancy IFAS, MMS, IV Iron.
- Malaria in pregnancy.
- HIV/AIDS and HBV infection in pregnancy and PMTC.
- Mngt of 1st & 2nd of labor and use of partograph.

Day 7 & 8:

- Prolong obstructed labor.
- Clinic visits.
- Active mngt of 3rd stage of labor (AMSTL).
- Analgesia/Anesthesia Episiotomy and perineal tear/ suture of Episiotomy.

Day 9 & 10:

- Care immediately after birth essential care for every baby ECEB, essential care for small babies (ECSB) KMC.
- Birth Asphyxia HBB & Neonatal jaundice.
- Record keeping/ two way referral and community linkage.
- MPDSR.
- Concept, philosophies and medical Audit, /conducting death reviews using facility and community tools.
- Role play for communication skills and counselling/Drill plotting of partograph.
- Hands on all mannequins.
- Post-test

Outputs/highlights

75 participants trained and equipped with BEmONC knowledge and practical skills

Active engagement through drills and simulations

Rapporteurs successfully documented proceedings for the entire 10 days

Networking and peer-to-peer learning among participants from different facilities

Challenges

Recommendation

Continues mentoring and supportive supervision for participants at the facility level.

Organization of periodic refresher trainings to sustain knowledge and skills

Provision of essential BEmONC Training , held at Alheri hotel,yola from 11th-20th August 2025, achieved its objectives of equipping 75 health workers with life-saving knowledge and skills. Facilitated by experienced trainers and coordinated by 2 secretariat staff, the training combined theoretical and practical sessions running daily from 8:30 am to 5:00 pm. The contributions of rapporteurs in documenting the training ensured that key lessons and outcomes were well captured. This training is expected to significantly contribute to reducing maternal newborn morbidity and mortality in the targeted areas.

Annexes

List of participants

Rapporteur's daily reports

Photographs of session

ADAMAWA STATE PLANNING COMMISSION

ACTION PICTURES:



Figure 1 PRE- TEST SESSION



Figure 2 AT JAM BUTU PHCC DURING TRAINING SESSION



Figure 3 PRACTICAL TRAINING SESSION



Figure 4 ONGOING CLASS SESSION



Figure 5 PRACTICAL SESSION AT SPECIALIST HOSPITAL



Figure 6 TRAINING SESSION

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Figure 7 PRACTICAL SESSION AT THE FACILITY



Figure 8 PRACTICAL SESSION



Figure 9 TRAINING SESSION



Figure 10 THE DIRECTOR DISEASE CONTROL ADDRESSING THE PARTICIPANT

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Figure 11 ONGOING SESSION



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Figure 12 POST TEST