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STAFFING THE MATERNITY AND CHILD HEALTH SERVICES  
AND TRAINING OF STAFF

by

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In order to discuss the subject of staffing the maternity and child health services and training of staff, it is necessary to establish the scope and the nature of these services. Their scope is very broad and their nature is vital. It is dealing with the well being of both the mother and the child.

Several factors and conditions may affect the staffing of these services. I will try to mention the most important ones. To begin with stress should be laid on the Type of Centre which is to render such services. It may vary from one country to another. In some it may only be pure MCH work which is normally antenatal care of the expectant mothers, providing facilities for delivery or helping the mother to have good attendance during her puerperium, post-natal care, education of the mothers both at the Centre and at home in infant and child care and health, doing vaccination immunization of the mothers and the children, or it may have to integrate with this normal preventive service, a curative one, by treating the sick mother and child. This may be necessary in certain countries because through the sick mother and child we can approach all the other children of the family.

The other factor affecting the staffing of these services is the stage of the development reached by the country. These services may vary in a well developed country from the still developing one.

The nature of communications existing between various parts of the country, the social and educational conditions prevailing in the area and the size of the area to be served, the number of families to benefit from those services, all of these factors affect to a great extent the staffing of these services. Therefore, it is

quite clear that the problem of staffing of these services, as well as the training of staff, may have to vary from one country to another. But in general we need to have for each Centre or group of Centres, a MCH trained doctor, a qualified nurse, a well trained midwife and a public health or a health visitor, with a number of unskilled workers to help them. The size and the number of the team depends on the factors and conditions I have already referred to.

The training of the staff naturally needs training Centres. The number of these Centres depends on the needs of the country. The training may be within the country, or may be outside the country, in a regional Centre, or in another foreign country. The type of the training to be given also depends on the type of the services and on the availability of trainees. To be more specific, I should like to take my country's program of MCH services to illustrate to you the training programs, which we may need for these services.

In Iraq our MCH services are at the stage of development. It has been given in the last few years a high priority among our health programs. In order to administer and run these services in a satisfactory way, a special directorate, as part of the Ministry of Health, has been established in 1953-54. One of the main duties of this department is to arrange for the training of staff for MCH. WHO has assisted in providing an international team for this purpose. We have now in Baghdad a well established Training Centre. Another Training Centre for health visitors is also established in Basra City and we hope, in the near future, to have another one in the northern area of the City of Mosul.

Doctors and qualified nurses are trained at the Baghdad Centre by giving them short courses of practical work in MCH for 6 - 12 weeks, then they are posted to the other MCH Centres in the different provinces or liwas.

Due to the shortage of nurses in the country we were not able to provide well qualified public health nurses, thus we have substituted them by what we have called community health visitors. These are selected from girls who had a basic education of 8 - 9 years, i.e., finished the second year of the intermediary school and are given a course of training for 18 months. At present we have two centres carrying out this training: Baghdad and Basra Centres. The course has in total 1434 hours. Two-third of these hours for field training and ~~one-third only for theoretical~~

lectures. These following subjects are taught in this course: orientation in MCH, personal hygiene, principles of public health, anatomy, physiology, nutrition and food hygiene, environmental sanitation, psychology, communicable diseases, first aid maternal and child care and health, school health, nursing procedures and care at home and health teaching techniques. The field training includes practical training in specially selected hospitals including the children hospital in Baghdad. The graduates from these courses are distributed to the various centres and form the link between the servicing centre and the community served.

Very few qualified nurses have been trained at the American University of Beirut public health school for one year, but although most of them are working at Basra Centre, they are trained for multi-purpose MCH work.

Another training course which we have established in Iraq, although it is not connected with the MCH training centre but has a great relation to these services is the course for training community midwives specially for rural areas. This course is also for 18 months, 12 months at the centre which is at the Krakh hospital, where both lectures and practical training are given, and 6 months field training in different "liwa" hospitals, before they are posted to practice their profession. The course includes 258 lectures given by the staff of the hospital which includes the following subjects, general nursing procedures, public health, obstetrics and gynaecology, diseases of children and MCH, introduction in clinical medicine, principles of surgery and first aid, few lectures in diseases of eye, ear, nose and throat, drug administration. The trainees are selected from girls who had five years basic education or more and their age varies from 16 - 25. They have to be trained in field of MCH for 6 weeks at a rural MCH Training Centre at Sammawa, with special training in domiciliary deliveries. Also during their training at the Krakh hospital each trainee is requested to deliver ten normal cases and to help and observe at least 20 cases of normal and abnormal deliveries.

To raise the standard of the registered ordinary midwives in the area of the Centre, the Training Centre at Baghdad has planned a short training program for them in which mainly an orientation program and practical instruction in MCH work is given. The midwives in the area are invited to attend this course in a friendly way and those who attend the course are supplied with midwifery kits on loan and requested to help in the centre if need.

With all that we have achieved in this field of staffing the MCH services and training of the staff, still we have not reached our objective. We are still at the beginning, but with continuous efforts and patience, with experience gained by us in our centres or from the knowledge we acquire from other countries of the region, or outside the region, and the technical advice we receive from experts, we hope we will in not too long a time achieve our objectives and play our part in the well being of the mother and the child.