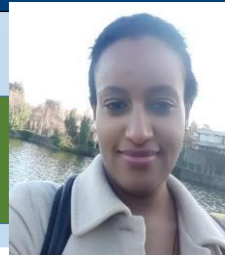


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## INTRODUCTION

In 2016 the maternal mortality ratio was 412/100,000 live births and neonatal mortality was 29/1000 birth in Ethiopia (EDHS, 2016) while it was 6.6/100,000 and 6/1000 live birth, respectively, in Ireland (WHO,2016).

**Sustainable Development Goal 3 (3.1,3.2)** aims to reduce maternal mortality by 70/100,000 and neonatal mortality by 12/1000 (SDG, 2016). To support this, the **World Health Organization** recommends a pregnant mother to have at least one ultrasound scan before 24 weeks of gestational age (WHO, 2016). Empowering a frontline maternal health care provider, Midwives, with **evidence-based practice** is the **World Health Organization and Ethiopian Health Sector Transformation Plan** to achieve the Sustainable Millennium Development Goal 3.1 and 3.2 in developing countries (WHO,2016, HSTP,2015/16).

## In Support of Sustainable Development Goal 3.1 and 3.2

Figure 1: Midwife led obstetric ultrasound in lower-and-middle-income countries Source: Google



## OBJECTIVES/METHODOLOGIES

### Objective 3

To evaluate perception of pregnant mothers on utilization of ultrasound



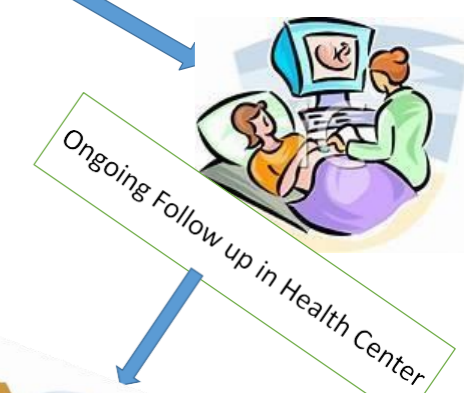
Focused Group Discussion

### Objective 4

To determine the feasibility of integrating an obstetric ultrasound into the midwifery clinical programme



Obstetric Ultrasound Training



Ongoing Follow up in Health Center



Scan transfer to UCD for Confirmation

Feasibility Measure



- Lack of sufficient **ultrasound** equipment
- Ethics approval could delay start
- Lack of engagement of local stack holders

## REFERENCES

- EDHS, E., 2016. demographic and health survey 2016: key indicators report. *The DHS Program ICF*
- Federal Democratic Republic of Ethiopia Ministry of Health, 2015. Health sector transformation plan (2015/16–2019/20). The Sustainable Development Goal Report.2016. <http://ggim.un.org/documents/The%20Sustainable%20Development%20Goals%20Report%202016.pdf>
- World Health Organization,2016.Maternal mortality factsheetno.384.2015.https://www.who.int/news-room/fact-sheets/detail/maternal-mortality
- World Health Organization, 2016.WHO recommendations on antenatal care for a positive pregnancy experience.

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Table 1: Sustainable Development Goal and Ethiopian Health Sector Transformation Plan on Maternal and Neonatal Mortality Reduction

S. no		Maternal Mortality (100,000)	Neonatal Mortality (1000)
1.	Ethiopian Demographic Health Survey Report, 2016	412	29
2.	Sustainable Development Goal, 2030	70	12
3.	Ethiopian Health Sector Transformation Plan IV, 2015/16-19/2020	267	11

## SETTING



East Africa, Southern Ethiopia

## Expected Output

- ✓ Reviewed and piloted evidence on integrating obstetric ultrasound into midwives' in low-middle income countries
- ✓ In-depth stakeholders' opinion
- ✓ Obstetric ultrasound trained midwives
- ✓ Three published papers in peer reviewed journals
- ✓ Ultrasound instrument input for health facilities

## Outcome of the Study



## Objective 1

To systematically evaluate evidence for best educational practice for midwifery led obstetric ultrasound in low-and middle-income countries



Systematic Review

## Objective 2

To explore perception of stakeholders on integrating ultrasound



In-depth- Interview

## Funder



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