**Feasibility of integrating abortion care competencies in preservice midwifery curricula in Kenya and Nigeria: A cross sectional mixed methods study**

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**Background**

Midwives play a crucial role along multidisciplinary teams, in reducing preventable abortion related deaths through competent and quality care but their training curricula for have been found deficient in emergency obstetric care including abortion related lifesaving competencies. We aimed to determine the feasibility of integrating abortion care competencies in preservice midwifery curricula in Kenya and Nigeria.

**Methods**

A multi-country, multi-site cross sectional mixed methods study design with 214 participants was used. Participants were purposefully selected from 38 universities and 43 mid-level colleges. Pre-service midwifery content was developed in line with ICM global standards for Midwifery Education and Essential competencies for midwifery practice with input from WHO guidance on abortion care and validated by global maternal and newborn healthcare stakeholders. This module content was used to assess the adequacy of curricula abortion content in both countries. Key informant/in-depth interviews and 8 focused group discussions were conducted. Data were collected using a checklist, self-administered questionnaires, and interview guide.  Chi square and Fisher’s exact tests for association within and between groups were used to describe differences (p<.05) and inductive content analysis conducted.

**Results**

A total 214 participants included 108 educators, 86 midwifery students and 30 key stakeholders from ministries of health, regulatory bodies, midwifery associations and principles, deans and heads of midwifery departments. Educators 86(79.6%) indicated that termination of pregnancy was illegal in some circumstances, 91(84%) agreed that treatment of incomplete abortion was within the scope of midwives’ practice and 86 (79.6%) indicated that post abortion care (PAC) was integrated into preservice curricula. Only 24(22%) educators had attended a continuous professional development (CPD) program on abortion care while 46(42%) had never had any CPD on abortion care. A majority 101(97%) agreed they needed competency upskilling and 106(98%) required additional resources to train on abortion care skills.  The most covered topics were PAC 40 (83%);25 (66%) in Kenya and Nigeria respectively. Over half 50 (58%) students indicated confidence in post abortion care and 20(45%) middle level and 29(69%) university level perceived competency in performing Manual Vacuum Aspiration (MVA) in post abortion care(p<.0271). There was a difference between programs where more university students 29(69%) reported MVA competency compared to mid-level college students 20(45%) (p<.027).

**Conclusion**

There is a midwifery educator core competency and curriculum content gap that reflects on preservice midwifery students’ competencies in abortion care. To enhance educator and student competencies, there is need to review and update midwifery curricula and develop continuous professional development (CPD) programs for upskilling midwifery educator competencies on quality post abortion care.

Key words: abortion, competencies, preservice