



Fund for Innovation  
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CANADIAN NETWORK FOR INTERNATIONAL SURGERY (CNIS)

# Midwifery Active Digitization Empowerment Initiative for Nigeria (MADE-I)

## Context

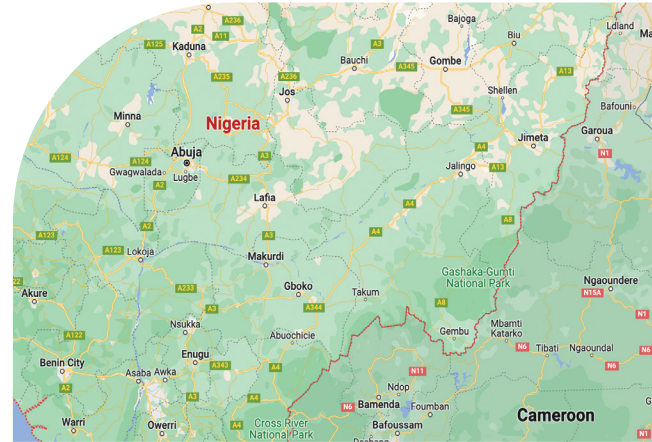
In Nigeria, widespread gender inequalities have a significant effect on women's economic participation and opportunity, educational attainment, health, and political empowerment (World Economic Forum 2019). Additionally, women face more barriers to education and training, have lower digital literacy rates, and less access to digital tools.

## The Innovative Solution

Supported by FIT, CNIS and their local partners (The Benue State Ministry of Health, the Mkar School of Midwifery, and the Makurdi School of Midwifery) tested an innovative solution that used a digital, rights-based maternal care and rights-based pedagogy approach to midwifery training with the goal of improving gender equality among midwifery students, increasing the number of midwifery students graduating per year, and mitigating healthcare workforce shortages.

## Advancing Gender Equality

The Gender Equality Strategy used a digital delivery approach to improve accessibility of midwifery training to students in two schools of Midwifery in Mkar and Makurdi. A gender expert supported the design, implementation, monitoring and evaluating of the strategy. Innovation results made progress toward gender equality outcomes inconclusive as data from male and female students could not be compared due to the large difference in sample size. Only 9 students were male, compared to a sample of 139 female students. However, some gender indicator results were positive showing that 97.5% of women students agreed or strongly agreed that the innovation can improve accessibility to midwifery training.



**COUNTRY**  
Nigeria

**AMOUNT**  
\$ 250,000

**TESTING PERIOD**  
15 months  
Ended January 2022



**GENDER RESPONSIVE (GE2)**

**THEME: HEALTH & NUTRITION**

## Testing Framework

The testing methodology utilized a randomized, controlled non-inferiority trial that compared the results of the digital instruction of the CNIS

Fundamental Intervention Referral and Safe Transfer (FIRST) course with a small-group structured teaching format. The digital delivery method included both theory and clinical practice. The overall evaluation of both digital and small-group learning was based on six modular tests, a comprehensive post-test, and an Objective Structured Clinical Examination (OSCE).

## Results and Impact

Both small-group and digital learning resulted in a 20% increase in test scores over the baseline pre-test, indicating that digital learning is an effective means to augment knowledge, thinking, case studies and technical skill acquisition in midwifery. Additionally, digital learning is as effective and requires fewer teachers than small-group learning. Endline results showed that the female student's immediate outcome concerning positive qualitative self-assessment of technical skill acquisition during the training ranged from 92% to 93%, supporting the conclusion that learning of technical skills was successful. Students had a very positive experience with digital learning and reported positive feelings about the course (96.9%), felt the course would help them in their future midwifery career (98.5%), found the course booklets helpful (98.5%) and recommend the course for all midwifery students in Nigeria (96.9%).

## Key Lessons

1. A change in location from Tanzania to Nigeria was required due to barriers experienced in the testing location, underscoring the importance of strong local partnerships. CNIS maintained contact with the midwifery instructors in Tanzania informing them of testing results. The FIRST for Midwives digital format was piloted in 2022 in Tanga, Tanzania, and later that year an instructor's course was held. FIRST for Midwives is now implemented by the instructors in that location.
2. To save costs, CNIS developed an app in-house, as opposed to using an app developer. The approach proved successful, as trainings were consolidated and time was used more efficiently. As a result, only one trip to Nigeria was needed, instead of the two that were initially planned.
3. It was found that unreliable internet, lack of access to reliable devices, and costly mobile data continue to be the primary barriers for students to access the digital workshops and should be considered in future interventions.

"I had good access to training materials and that really improved my knowledge, and I carried out the procedures myself which makes one learn faster." - Woman participant

### PARTNER ORGANIZATIONS

- Benue State Ministry of Health
- Mkar School of Midwifery
- Makurdi School of Midwifery

### TARGET PARTICIPANTS

8 Benue State Ministry of Health staff (7 male), 148 midwifery students (139 females, 9 males), 42 midwifery instructors (26 females, 16 males), which included the 2 female principals.

### FOR MORE INFORMATION

[Fund for Innovation and Transformation](#)  
[Canadian Network for International Surgery](#)

### ABOUT FIT

The Fund for Innovation and Transformation supports Canadian small and medium-sized organizations (SMOs) testing innovative solutions that advance gender equality in the Global South.



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