Preface

In 1990, the Society of Obstetricians and Gynaecologists of Canada (SOGC) joined the international movement for Safe Motherhood by adopting international women’s health as one of the organization’s strategic directions. Since then, the SOGC has developed projects aimed to increase the participation of obstetrical and gynecological associations by becoming leaders, advocates, trainers, and mobilizers of resources to ensure health for women and their newborns during the childbearing year. The ALARM International Program (AIP) responds the appeal made by Dr. T. Türmen, in 2000:

*It is not enough to be clinically competent. It is not enough to be socially aware and socially conscious. The obstetrician and gynaecologist must be a champion for ALL women’s health, welfare and rights... (They) must become the voices of the voiceless, the champions of the neglected, the militants of the poor. Their leadership and their social and economic clout are needed to make essential obstetric care available to all women. Their actions and voices are necessary to shift resources at the national level... It is time... to move beyond the consulting room, beyond the hospital ward, to play a prominent part in the revitalization of the health system as a whole.*

Dr. T. Türmen, World Health Organization (WHO), International Federation of Gynaecology and Obstetrics (FIGO) Pre-Congress Workshop, August 2000.

Since 1998, the AIP has evolved to become a five-day training and mobilizing tool that focuses on the clinical causes of maternal and neonatal mortality, sensitizes health care providers to a sexual and reproductive rights framework, and introduces maternal death case reviews. Another component of the program is to build the technical and organizational capacity of local and national institutions to deliver the AIP independently as a component of their continuing medical education. This is achieved through a ‘train-the-trainers’ course with a subsequent period of mentoring.

The AIP training is based on adult education principles and promotes the collaborative approach of all health care providers working and learning together. It was initially developed and piloted within our partnership projects with obstetrical and gynecological associations of Guatemala, Haiti, Kosovo, and Uganda. Its content reflects and responds to the local realities and conditions of low and middle resource countries. The AIP is currently available in English, French, and Spanish.

To this day, the SOGC delivers the AIP in conjunction with national obstetrical and gynecological associations or other partners who are committed to offer the course within their country’s maternal and neonatal mortality reduction program. The experience acquired with the delivery of the AIP in more than 20 countries to more than 1,000 health care providers confirms that it is an essential and adaptable intervention—regardless of location, culture, or level of available technology. In September 2005, the SOGC surveyed nine obstetrical and gynecological associations involved in the AIP to gain information about their experiences with the course. The survey provided positive feedback about the course. The results revealed that our partners are successful in implementing the course in their countries. The program has received endorsement of the International Federation of Gynecology and Obstetrics and is viewed as an important tool by the International Confederation of Midwives.

In November 2006 the SOGC launched its AIP PLUS program. This is an expansion of the initial five-day training course into a three-year commitment involving monthly and yearly meetings to document changes made in health care practice, sexual reproductive health issues, and maternal and neonatal mortality audits.

It is with this background information that we present the fourth edition of the ALARM International Program Manual. The objective of this revision was to produce an updated manual that addresses the realities of resource constrained countries while also promoting evidence-based medicine and introducing new technologies to reduce maternal and neonatal mortality and morbidity. This edition and its accompanying instructor’s manual has been entirely reviewed by members of the ALARM/GESTA International Committee as well as the International Women’s Health Committee of the SOGC and in collaboration with representatives from our partner countries of Guatemala, Haiti, Uganda, and Ukraine. The accompanying instructor’s manual has also been revised.
A complete literature review was performed and resources such as the Cochrane Database, the Advances in Labour and Risk Management (ALARM) Canadian Course, Essential Management of Obstetric Emergencies, 4th Ed., by T. Baskett and Integrating Management of Pregnancy and Childbirth: Managing Complications in Pregnancy and Childbirth by the World Health Organization were used. Approximately 80 illustrations have been added to this edition to aid the learning process. Credit is given to artist Fiona Crangle and to Sapien Publishers who granted us permission to use some of their images. Other additions include a module on birthing positions during labour and birth by medical student, Christine Newell, as well as supplementary information in Chapter 8, Post-Abortal Care, regarding contraception by Dr. Donna Cherniak.

The fourth edition of the SOGC’s ALARM International Program Manual remains dedicated to the sexual and reproductive rights framework. It will continue to develop as the program expands in low- and middle-resource settings and to adapt to the needs of health professionals assisting women and newborns during childbirth. Here lies the real challenge in safe motherhood and newborn health initiatives, one which SOGC and its partners are committed to address in the years ahead.

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