

Concept Note

Title: Implementation research on the adaptability, feasibility, and effectiveness of the Ethiopian Intrapartum Care Guideline adapted from WHO recommendations

Background

Ethiopia has recently developed its first national intrapartum care guideline, adapted from the World Health Organization (WHO) Labor Care Guide (LCG), to improve maternal care during labor and delivery, enhance positive maternal experiences, and reduce neonatal complications and deaths. While the guideline provides evidence based recommendations, its practical application across diverse health facility contexts remains untested. Implementation involves resource, training, logistical, and financial considerations, and there is limited evidence on the most effective strategies for adaptation and integration at different levels of maternal health services.

Objective

To assess the adaptability, feasibility, and effectiveness of implementing the new Ethiopian intrapartum care guideline adapted from WHO recommendations across selected maternal health facilities and generate actionable guidance for scale up.

Proposed approach

This study will use an implementation research framework to guide the practical testing of the guideline:

- Assess facility readiness, staffing, and resources for guideline implementation.
- Identify barriers and facilitators from the perspective of healthcare providers and facility administrators.
- Pilot the guideline in selected facilities, monitoring adherence, maternal care practices, maternal experiences, and neonatal outcomes.
- Evaluate the feasibility, adaptability, and effectiveness of the guideline in real-world settings.

Expected outcomes

- Evidence based strategies for effective implementation of the intrapartum care guideline in facilities of varying capacity.
- Recommendations on training, resource allocation, and logistical support needed for guideline adoption.
- Practical guidance for scaling up the guideline nationally, improving maternal and neonatal health outcomes.

Significance

This research will generate critical evidence to bridge the gap between policy and practice, ensuring the Ethiopian intrapartum care guideline delivers its intended benefits across diverse facility contexts.