Abstract for oral presentation.

Title: WORKPLACE MENTAL WELL-BEING AS A PATHWAY TO RESPECTFUL MATERNITY CARE: STUDY PROTOCOL FOR THE CPIPE INTERVENTION.

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Introduction:

Disrespect and abuse in maternity care settings are widespread and often normalized, fueled by systemic inequities, entrenched gender norms, and the chronic stress experienced by frontline healthcare providers. High workloads, limited institutional support, and emotionally demanding work environments contribute to provider burnout and bias, which in turn compromise the quality of person-centered maternal care (PCMC). Although global attention on respectful maternity care is increasing, there remains a critical gap in interventions that simultaneously address provider mental well-being and PCMC, particularly in low- and middle-income countries (LMICs). To address this, we developed the Caring for Providers to Improve Patient Experience (CPIPE) intervention—an integrated, multi-component strategy aimed at improving both workplace mental health and maternal care experiences.

Methods:

This is a cluster randomized controlled trial targeting up to 40 high-volume delivery facilities in Kenya and Ghana. The intervention has five components: provider training (using simulation-based emergency obstetric and neonatal care drills with integrated content on PCMC, stress, burnout, and bias), peer support, mentorship, embedded champions, and leadership engagement. We will enroll up to 400 maternal healthcare providers and three cross-sectional cohorts of 2,000 women each at baseline, midline, and endline. Study aims include: assessing the effect of CPIPE on PCMC (particularly for low-SES women), identifying mechanisms of impact through changes in provider well-being, and evaluating distal outcomes such as maternal health-seeking behavior and neonatal outcomes.

Results:

This study is ongoing. Pilot testing has demonstrated high feasibility, acceptability, and promising preliminary results across components of the intervention.

Conclusions:

CPIPE is a novel, scalable intervention that addresses both provider well-being and maternal care quality. If effective, it will offer a replicable model for improving respectful, equitable maternity care while promoting mental well-being among frontline health workers in LMIC settings

Key words: Person centred maternity care, stress management, stress and burnout, health care workers.