



# Evaluating the Adoption and Clinical Impact of the Safe Surgery 2018 Coaching Model for Caesarean Sections in Amhara, Ethiopia: A Brief Report

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## Abstract

Maternal mortality remains a significant public health challenge in Ethiopia, with suboptimal surgical care contributing to adverse outcomes. The Safe Surgery initiative introduced a coaching model to improve the quality of caesarean sections in low-resource settings. Its adoption and impact within the Ethiopian context required evaluation. This brief report aimed to evaluate the adoption and clinical impact of the Safe Surgery coaching model for caesarean sections in five referral hospitals in the Amhara region of Ethiopia. A mixed-methods evaluation was conducted. Quantitative clinical outcome data were collected from hospital records. Qualitative data on the adoption of coaching principles were gathered through semi-structured interviews with surgical team members and direct observation of programme activities. The coaching model was variably adopted across sites, with three of the five hospitals demonstrating high engagement. In these engaged hospitals, a clinically meaningful reduction in the incidence of surgical site infection was observed. Qualitative data highlighted teamwork and structured coaching sessions as key facilitators of practice change. The Safe Surgery coaching model shows promise for improving surgical care in Ethiopian referral hospitals. Successful adoption appears linked to institutional engagement and may lead to better clinical outcomes, notably a reduction in post-operative infections. Programme implementers should focus on strategies to ensure consistent institutional buy-in. Further research is needed to identify sustainable methods for integrating coaching into routine hospital practice and to measure its long-term impact on a broader range of outcomes. Safe surgery, caesarean section, coaching, maternal health, Ethiopia, quality improvement This report provides early evidence on the implementation of a surgical coaching model in the Ethiopian public health system, highlighting contextual factors influencing adoption and potential clinical benefits.

**Keywords:** *Maternal mortality, Sub-Saharan Africa, Caesarean section, Surgical coaching, Implementation science, Patient safety, Referral hospitals*

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