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MIDWIVES FACE THE FRONT LINE

Community caregivers lead national efforts

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CARMEN ZACATAL, Chiapas – In the dank and dimly lit corner where Verónica keeps her curtained-off mattress, the expectant mother anxiously leans back and wiggles her shirt over her bulging belly. She's waiting for a regular checkup, but like many indigenous women in this southeastern state, the 20-year-old mother of two relies on the expert hands of neighborhood “parteras,” or midwives, instead of doctors and modern technology.

For centuries, traditional midwives have provided a lifeline for pregnant and nursing mothers in Mexico's marginalized regions. Much like earlier generations, caregivers today perform routine exams by touch and intuition, substituting machines and pills for hands and herbal treatments. Still, the hours-long distances to hospitals, unsanitary living conditions and inefficiency of local clinics continue to pose a fatal threat to the nation's reproductive health.

Nearly 60 mothers die for every 100,000 live births in Mexico each



Manuela López López, 80, has served the 2,500-person town of Carmen Zacatal, Chiapas, as a midwife for the past 60 years.



Martha Elena Pérez López, left, vigorously massages her patient's belly during a routine checkup.

year – down from 89 deaths in 2000, but nearly 40 deaths higher than the target set for 2015 by the United Nations Millennium Development Goals. (Comparatively, today there are 75 maternal deaths for every 100,000 live births in the United States, and 2.5 deaths in Canada).

Eighty percent of these deaths could be prevented by improving basic hygiene, recognizing early warning signs and elevating the standard of hospital care, said Dr. Rufino Luna, who previously directed maternal and perinatal health programs at the National Office for Gender Equality

and Reproductive Health in Mexico City.

As health officials and non-profit workers race to reduce maternal deaths in the next five years, they're finding that most success stories aren't in boardrooms or on hospital floors, but in the isolated and cloud-covered



Rosa María is pictured in her home.

villages of the country's most impoverished states, including Chiapas, Oaxaca and Guerrero, where the nation's highest maternal death rates are drastically decreasing.

Around 38,000 traditional midwives are registered with the Mexican government, Luna said, although

●● When the community makes a joint effort, the (mother) will not die. ●●

MERIT ICHIN
K'in al Antzetik



Local midwives say they approve of her decision to have sterilization surgery.

thousands of others are likely not included in the count.

In the 2,500-person town of Carmen Zacatal, a network of nine midwives has found itself at the forefront of the fight to reduce maternal mortality. Among the group is 80-year-old Manuela López López, who still

regularly attends to patients after 60 years on the job. Her granddaughters, Martha Elena and Marbella Pérez López, say that in the past generation, the midwives have effectively wiped out maternal deaths here by improving technical medical training, intervening in domestic violence and



THE NEWS PHOTO/MARIA GALLUCCI

Neighborhood midwives trek up muddy hills during their rounds to visit pregnant or nursing patients.

stepping up their roles as local health care providers.

"If it wasn't for the midwives in this community, the women would die, because they have no one else to care for them," Martha Elena said as she climbed a steep hill to visit a patient, Rosa María, at home.

After vigorously massaging Rosa María's taut belly, a process Martha Elena called "waking up the baby," the midwife proudly explained that the young mother's third child would be her last.

"The number of children has reduced a lot. Women no longer have eight or nine children; instead, they'll have two or three children and then have a (sterilization) operation," she said. "This is one of the reasons there are hardly any maternal deaths here."

two hours long. Few residents have cars, or the money to take a taxi. If the patient does arrive at a health center, her attending midwife is often denied entry, and the medical staff – which rarely includes a qualified obstetrician – might not speak the patient's indigenous language.

With the help of local non-profit groups like the Committee for a Risk-Free Maternity (CPMSR) and K'in al Antzetik (Tzeltal for "Land of Women"), the midwives are banding together with peers throughout Chiapas to educate each other themselves on their rights as midwives, on intervening in domestic abuse and on explaining to families basic care for pregnant women and newborns—like taking vitamins and folic acid, for instance.

improving reproductive health in Mexico, he said that reaching the UN-outlined target for 2015 would require widespread improvements beyond the midwives. Untangling the bureaucratic ties for public health care systems such as the Mexican Institute for Social Security (IMSS) could help rural communities access affordable treatment and medicine, he said. Training programs for medical professionals could help address the widespread lack of qualified emergency obstetricians and surgeons.

"Of all the women who die during pregnancy, 85 percent die in a hospital or health center, and 80 percent of these deaths are associated with poor quality of medical attention. Doctors and surgeons should be trained so that women have the best chance of survival."

CPMSR projects coordinator David Meléndez said that he was skeptical that the various players in the maternal health field could manage to overcome the severe poverty, ethnic discrimination and inadequate public health systems that stand in the way of Mexico reaching the UN-outlined target for 2015.

"In five years, we would have to have a count of 400 maternal fatalities (to reach the goal). Today, there are around 1,200 deaths each year in Mexico," he said. "In this sense, there hasn't been a sustainable or substantial advance in the past ten years."

Luna, however, said he was hopeful that non-governmental organizations and public programs could pull together in time to make the deadline.

"President Felipe Calderón has urged us to speed up the reduction of maternal mortality rates, and if we could get everyone working together...I think we could have an impact so strong that we would be able to reach the Millennium Development Goal," he said.

As Mexico races to reduce its maternal mortality rate to 22 deaths in 100,000 live births by 2015, health officials and non-profit workers are finding that community midwives hold the key to success.

But the recent progress hasn't been easy to come by, the midwives said, and not all indigenous communities have fared as well as Carmen Zacatal.

Men in these isolated towns often refuse to let their wives leave the house in emergency situations because the husbands believe contact with a male doctor would taint a woman's purity, the midwives said. The caregivers added that they themselves suffer emotional pressure from their husbands, who often accuse their wives of abandoning the family to work while failing to earn an income, as many patients fail to pay or compensate the midwives for their round-the-clock efforts.

There is no ambulance or pharmacy in Carmen Zacatal. The road to the nearest clinic is muddy, winding and

"These midwives have an ancestral knowledge that they pass down from generation to generation, but they also have to have better tools to establish ties with health institutions," said Merit Ichin, who leads K'in al Antzetik's Chiapas branch from San Cristóbal de las Casas.

"The idea is that when the community makes a joint effort, the pregnant woman will not die," she said, adding that her organization works with doctors, nurses and state health officials to better incorporate traditional midwives into modern medicine. This assures that rural and indigenous women can be attended to by neighborhood caregivers and still have access to professional emergency care should they need it, she said.

While Luna applauded the progress midwives have made toward