

y name is Bethany Holt.
I am a registered midwife and graduated from Cardiff University, Wales, in 2013.
I have been volunteering at Mercy Maternity Center in Davao, Mindanao, since September 2016. Mercy, a stand-alone birth centre also known as a charity 'lying in clinic', was incorporated in 1996 and has now supported 25,000 women through the birth of their babies at the centre.

Reaching the poor

The centre offers services to our women purely at cost rate, so there is no charge for the services provided, just for replacement of equipment used. The aim of the centre is to reach those with a lower income in order to help them obtain safe care, with the average wage of the women being £88-£147 per month. However, the passion of the centre and all of its staff is not only to provide safe maternity care but also to be the hands and feet of Jesus and so share the Gospel. This is incorporated into the daily goings on of the centre from worship and Bible study for the women before their antenatals, to giving out Bible studies, to praying with the women and

their families in labour. In addition to this, there is a desire to be more intentional in sharing the Gospel, seeking out ways in which to share God's love and so to respond to the prompting of the Holy Spirit as we develop relationships with the women and their families. We are reminded to seek an eternal perspective, making our ministry truly holistic.

Women who give birth in the centre, also attend the centre for their antenatal appointments throughout the week. On Mondays, we see all our new buntis (pregnant women) for their 'initial prenatal'. This involves taking their history and performing their very first antenatal appointment. They are then scheduled for their following appointments at the centre on Tuesday, Wednesday and Friday, Women are seen for their first antenatal appointment anything from eight weeks up to term! This is significant from a risk screening point of view as this might be our first contact with the woman and, for some, their first contact with a healthcare professional at all during their pregnancy. For those who attend late in their pregnancy, this makes it more difficult to determine holistically the health and

feature

wellbeing of the both the fetus and the mother. Saving Mother's Lives Report (2007)¹ highlighted late booking as a risk factor for maternal death. One of the reasons for the late attendance for some women is that they come down from the bukid (mountain) close to term to give birth in the city.

On Thursday, antenatals are also done in an area called Isla Verde in a clinic run alongside a church based in that community. Isla Verde is one of the most deprived areas that we reach out to and includes the Badjao community who often have little to no income or even education. These women will often turn up in labour to the birth centre with no investigations. One in seven adults in the Philippines have Hepatitis B, ² in addition to many women, especially from this community, being anaemic!

For those women who do turn up in labour with no investigations, we can carry out a rapid screening to determine their current hepatitis status and haematocrit level, but these investigations are ideally carried out antenatally, at the patient's expense. For those who are unable to obtain their own 'labs', we do offer charity payment for them.

However, there are women who slip through the net. This is something we are looking to improve as we aim for 100% screening for our patients for blood type, hepatitis, haemoglobin and urinalysis. These are actually the only investigations that are required for the women, a far cry from the thorough screening women in the UK receive all free of charge (thanks to the NHS).

All of our newborns are given their first Hepatitis B vaccination within a few hours of birth and are advised regarding their follow up vaccines to be obtained from the local health centre. This is part of a Hepatitis B screening programme commenced in 1992. They normally receive their BCG vaccine at the centre within the first two weeks.

Postnatal care

Any baby born at the centre or even a mother who laboured at the centre and was then transferred during labour, is offered their postnatal checks at the centre at one and three days old and then at one, three and six weeks old. In the UK, this is often done by community midwives at their home or in clinics. Here at Mercy, these postnatal checks are scheduled for the specific midwife who assisted the woman as she birthed her baby. This is either scheduled on their own time or



feature

while they are on a shift and they follow up with the mother and child until six weeks. This provides an element of continuity of care for the women and their families and enables relationships to be built between them and opportunities to share the Gospel.

Weekly visits are also made to certain women in their homes. Some women are specifically selected for various reasons for full continuity of care from the antenatal period, to being on call for the birth and through to six weeks postnatal. This is again a further opportunity to develop relationships with women and their families and also aiding regular attendance to antenatal appointments and subsequently engaging with care, positively impacting health. However, this can be a strain on the individual midwife in several ways and as a result is not performed across the board.

- [A] Maternal mortality in 1990-2015 WHO, UNICEF, UNFPA, World Bank Group, and United Nations Population Division Maternal Mortality Estimation Inter-Agency Group PHILIPPINES bit.ly/2nSHsXK
- [B] Philippines Maternal and Child Health Data 2015 Profile, Countdown to 2030: Maternal, Newborn and Child Surivival bit.ly/2C5VAQt

MATERNAL MORTALITY in the Philippines in 2015 was

in the Philippines in 2015 was
114 PER
100,000



NEONATAL MORTALITY 13 PER 100,000



live births

STILLBIRTHS
were
15 PER
100,000

Ultrasounds

Another service offered at the centre is that of free ultrasounds. An 'outside' ultrasound, an ultrasound at any other laboratory or obstetric clinic on the street, costs between f7 30 and f13 20 which doesn't seem like a large amount of money, but when taking into account the average income of our women. it's not surprising that not all of the women here are able to afford an ultrasound. We have been able to have several ultrasound technicians attend and provide basic training for a few members of staff. The ultrasounds we provide are unofficial due to the lack of official training we have and are mainly to clarify gestational age, fetal position, placental location and amniotic fluid index.

This is offered only to women who 'need' an ultrasound such as abnormal FH (bearing in mind Filipina buntis already have a 2cm less symphysis fundal height than Caucasians), unclear LMP, bleeding during pregnancy etc. So, while all our women in the UK might have a dating scan and then an anomaly scan, women here would be 'lucky' to have just one scan and often this does not take into account abnormalities of the fetus.

Our team

In addition to our wonderful team of

Philippines-qualified midwifery staff, we also have volunteers from all of the world with varying degrees of midwifery experience who are seeking to find out about what midwifery in the developing world looks like. Some of the midwives who have completed their time with us have gone on to work in other developing countries, even opening their own birth centres as they desire to reached the unreached for Christ. More details surrounding this aspect of the ministry can be found here: www.mercymaternity.org

If you would like to take a look at my blog or get in touch to ask more questions and find out how you can get involved through prayer, donations or even volunteering, please do. beth.h.mw@hotmail.com timetravellingmidwife.wordpress.com

Bethany Holt is a midwife.

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