## UNDER THE SPOTLIGHT **BIODAL** midwifery

global

**Bethany Holt** encourages us to pray for health injustices she experiences in the birth centre she works at in the Philippines.

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ithin the last year, across the Philippines the

Department of Health (DoH) has implemented a national policy that restricts women from giving birth outside of the hospital if they are primiparous (birthing their firstborn) or within the community of the positive experiences and the loving and compassionate care they receive within our four walls, and at an accessible cost to the individual. As midwives, we know there is evidence that minimising the level of intervention in a woman's care

grandmultiparous (birthing baby number five and above). For a long time in the Philippines, women have been discouraged from giving birth at home, so it is a commonly held, yet incorrect, belief that it's illegal to give birth at home. It is unclear whether this policy was implemented to protect women and their families, or whether there is a financial or even political agenda behind the decision.

I've been involved in a stand-alone birth centre which has provided low-cost charity midwifery care for over 25 years in a major city in the Philippines. Unfortunately, the above restrictions also apply to us here. This is so disappointing for many reasons. Many women seek care at our facility, sometimes commuting one to two hours because of the reputation of the clinic. They've heard gossip

has a huge positive impact on their outcome and experiences.<sup>1</sup> Many assume in this still developing country that requiring women to give birth in hospital is positive, as there is an assumption they will get a higher level of care. Unfortunately, this is not the case. The public healthcare system is grossly overstretched, overcrowded, understaffed, and lacking adequate facilities in more ways than one. Imagine having to manually pump oxygen into your newborn's lungs day after day, while a doctor may pass by and say, 'that baby has no hope' and walks on by to tend to the babies with more of a chance. That is an account of a medical student on placement in a government hospital.

In the middle of the pandemic, we referred a woman needing further management of a postpartum haemorrhage to a public hospital.



While her family was running around the city to try to fill a prescription for a basic medication, she was dying inside the hospital, alone in Covid isolation with staff too fearful to tend to her. Women we provide antenatal care for often plead with us to accept them or pray the guidelines will change in time for them to birth their babes without admission to hospital. They've heard horror stories of the local government hospital and we try to reassure them they will get good care. We have no choice but to try to offer these women hope while knowing they may well experience some trauma at some point in their birthing journey.

The staff are so burnt out at the public hospital, exhausted in their caregiving, having to dig deep to find compassion in the pressure of busy days upon days, still fearful of Covid. They don't like the system either, but they're stuck in it because they must work to bring in a salary, often for the whole family. We would love to ease their burden. we have no choice but to try to offer these women hope while knowing they may well experience some trauma We have a fabulous birthing centre with skilled midwives ready to provide excellent care. Being only a 5-10-minute drive from the public hospital, we can refer women in an appropriate and timely manner. We seek to enhance their care as we provide them labour and delivery services, not compromising it, as some might believe. We have the time and energy to take that care to a higher level than could ever be expected of the government hospital and consider it a privilege to do so.

Please pray for the Philippines DoH to be moved to change national guidelines as we seek to challenge this injustice. Please pray for the local government hospital to be sustained, to find rest and energy and for women to be protected. Please pray for our birthing centre as we prepare ourselves to face the challenge – that we wouldn't lose sight of our purpose to be the hands and feet of Jesus as we care with compassion for those God calls us to.

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 Çalik K, Karabulutlu Ö, Yavuz C. First do no harm interventions during labor and maternal satisfaction: a descriptive cross-sectional study. BMC Pregnancy Childbirth 18, 415, 2018. doi.org/10.1186/s12884-018-2054-0