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Midwives Oversee Natural Childbirths in Gaza Empowering Mothers and Encouraging Safety and Respect: *Marwa and Baby Layan*

Gaza: In February the WHO oPt office launched a pilot project in Gaza that aimed at reducing medical complications in childbirth. Evidence indicated that a trend toward over-medicalization of the birth process had led to unnecessary medical interventions, and resulted in introducing risk in low risk situations, and distracted attention from higher risk cases. The project shifted attention to the mother by promoting a midwife-led natural birth process, using natural techniques for labor progress and pain control. Along with patient safety, the project sought to promote respect for the mother by ensuring her privacy, consent and control in the birth process. The ambitious project was as much about changing attitudes as it was about assessment checklists, upgrading staff skills, equipping and supervision, including empowering the trained midwife. Monitoring of some basic indicators (use of oxytocin and C-section rates) has shown enough positive results that the Ministry of Health will upscale the project in all of its hospitals in the next phase. Supportive counseling for parents during late antenatal care is also planned to strengthen knowledge and promote traditional remedies such as herbal teas for labor management. Below is the story of Marwa, one of the first patients to benefit from the project.



Baby Layan at 6 weeks

Marwa's private physician in her hometown of Rafah, a city in southern Gaza, told the 22-year-old that she would need a Caesarian section in order to have a safe delivery, since the baby was her first borne. She was alarmed by the advice but continued to see the physician for several antenatal checkups. She also registered at the Ministry of Health (MoH) primary health care clinic in her area, and was seen by a female obstetrician, which she preferred.

A student in Business Administration, Marwa was an educated young woman. But it was not until she arrived to Nasser Hospital in Gaza at 8 pm one evening in March, already in the first stage of labor, that she learned about childbirth as a natural process. Marwa was healthy, her pregnancy had been uneventful and her contractions were normal. She was evaluated according to a project maternal assessment tool and deemed low risk, so a midwife counseled her and gave her a WHO-MoH booklet describing the benefits of a natural childbirth for mother and newborn. Marwa understood that she could also play an active role in the birth process by using exercise and breathing techniques, and she could be supported by a midwife and other women --- a member of her family, if she chose.

It was not an approach that she had ever heard mentioned before---certainly not by her private physician nor relatives or friends. Eager to avoid any unnecessary surgery, Marwa decided to try a natural childbirth; a midwife was assigned to her who would monitor her labor progress, and coach her through labor and delivery. A physiotherapist was present to help her with exercises. No drugs were administered and labor pain was controlled by gravity and breathing: Marwa was encouraged to walk between contractions and to be in a comfortable half-

sitting position rather than the usual reclining position used in hospitals during active labor. The midwife's only intervention was a gentle rupturing of the membranes when the cervix was safely dilated to 7 cm. Since labor was permitted to take a normal course, Marwa also did not need an episiotomy, an unnecessary consequence of too-rapid births: Baby Layan --- whose name means soft --- eased out into the world at 11 am, bright-eyed and healthy, weighing 3.4 kilograms.

While the project encourages that mothers and newborns remain for at least 6 hours or overnight in hospital for post-partum monitoring, crowded hospital conditions and lack of patient privacy often prevail. Marwa left the maternity unit two hours after delivery, anxious to go home but very pleased with her childbirth experience.

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