

Philadelphia University Faculty Volunteer with Midwives for Haiti

Three midwifery faculty members from Philadelphia University recently took leave to provide care for pregnant women and others in Haiti, which is still reeling from a massive earthquake in January. Cindy Farley, CNM, PhD, FACNM, Liane Miller, CNM, and Tanya Tringali, CNM, each volunteered with Midwives for Haiti—a group established to help combat the country’s high infant mortality rate.

“It was with sadness that we witnessed the human suffering,” said Farley, who, along with the other midwives, treated up to 50 women per day. “What we were doing wasn’t enough, but just going down there communicates something to the people you’re serving.”

The midwives brought as many supplies and instruments as they could. They worked in conditions, where both the humidity levels and mosquitoes were oppressive. “It was a good experience in how to work with few resources,” Farley said. “We’re used to having lab tests and high-tech equipment for everything. You have to learn to appreciate listening, asking, touching—those kinds of assessment are really important.”

The Philadelphia University colleagues were the first midwives to volunteer in Haiti after the quake. With money and volunteers now flowing into the country, Farley said Midwives for Haiti is working towards its longer-term goal of building a birth center in Cite Soleil—a slum just outside the capital—and to educate and train women’s health care providers in

Midwife Joins Multidisciplinary Effort in Haiti

by Angela Ferrari, CNM, Project HOPE volunteer



Angela Ferrari, a nurse-midwife from Massachusetts General Hospital, recently completed a volunteer mission for Project HOPE.

Each morning, the provider staff at Hôpital Albert Schweitzer (HAS) meets to review cases from the last 24 hours. During my stay, the hospital director asked me to do a grand rounds presentation. The hospital had recruited US midwives to visit, so I knew I was speaking to a crowd already aware of the benefits of midwifery care.

I chose to review the history of midwifery in the United States and drew parallels between the profession in the United States and recent development of the profession in Haiti. In both countries, midwives had been used as part of large public health initiatives. HAS utilized midwives in Haiti to wipe out the endemic of tetanus in Deschapelles. The first US nurse-midwives administered vaccines in the mountains of Kentucky in the 1930s. When looking to improve maternal and infant health outcomes, both countries recognized that midwives attended most births and had greatest access to women, especially in areas of highest need.

Haiti. The Philadelphia University group raised \$15,000 to help accomplish this.

“[The people of Haiti] need us there to provide care now, but what they really need, in the long run, is help getting them to a place where they can take care

I also listed a series of CNM/CM skills that would be particularly useful in improving outcomes in Haiti: optimizing physiologic process of labor, intermittent auscultation, skin-to-skin care, breastfeeding, and neonatal resuscitation in all environments. I am certain that my American and Canadian colleagues walked away with a better understanding of midwifery.

The pediatricians were thrilled to learn about my breastfeeding knowledge as they were currently caring for a 2-week-old malnourished baby whose mother’s breast milk supply was diminishing. I visited mom in the nursery where she was with her small, slightly preterm baby. She mentioned pain in her stomach and lack of appetite. She had a cesarean section for eclampsia, and as we talked, it became clear that she had not taken pain meds after the surgery. I shared ways to help stimulate more milk production and prescribed a pain medicine, hoping that with pain management she would eat more.

The picture wasn’t complete until the next morning when the pediatricians told me mom confessed she did not have food to eat. Families must provide food for inpatients, but pediatricians are able to “prescribe” food for moms of malnourished babies who are under their care. They prescribed mom food which would help mom make more milk for baby. I am confident that our care truly made a difference for the health of mom and her baby.

of their own,” said Tringali. “I feel very positive about what this project will bring to this community in years to come, the most important of which will be a dramatic reduction in the maternal and infant mortality rates in this region.”