

## Description

## DoctorSHARE and One4One in Indonesia

**Georgia Wood – Midwife**

After working as a midwife for a year following qualification, I moved to Indonesia with my partner's work. I knew I would not be able to work clinically as a midwife however there is so much more to midwifery than hands on clinical work. I have been involved with various maternal health projects but a recent trip was with a Non-Government Organisation (NGO) volunteer based foundation called DoctorSHARE in Palu, Indonesia. Here I share the awe-inspiring courage of Indonesian communities, the ongoing humanitarian work and how All4Maternity's One4One Subscription is helping midwives here.

**Why DoctorSHARE?**

In September 2018, the International news reported that North West Sulawesi had been hit by a 7.0 magnitude




alu and neighbouring coasts. The disasters
s. There are still over 1,000 people missing
usbands were still missing.

After this disaster, DoctorSHARE deployed their floating hospital boat to provide medical relief to the community of Palu and surrounding areas. This was the first time that DoctorSHARE had midwives on the boat and I was invited along to help coordinate and support Dila and Tina,

both registered Indonesian Midwives. I spent some time doing empowerment workshops and listening to their concerns. Unfortunately I could not help with anything physical for them but hopefully they left feeling united by the midwifery workforce and that they are not alone.

**Improving health outcomes with innovation**

Every morning on the floating hospital, there was an antenatal clinic where women could have a free antenatal examination and also an ultrasound scan if needed. On a typical day around 20 women would come at various stages of pregnancy.

It was eye-opening when none of the women knew their last menstrual period or had any idea how many weeks along they were. Made managing care very tricky indeed. My first week of being with DoctorSHARE there was an obstetrician who was volunteering his time on the boat. He was very kind to the women and during his week on the boat he did 3 caesareans (the boat has an operating theatre) which I was allowed to witness. All women got skin to skin in theatre which was amazing to see and made me realise some hospitals in England are still struggling with this concept!! I was also privileged to witness a vaginal birth where the midwives were the lead care providers also facilitating practice of optimal cord clamping! I was very impressed!

**Trapped in crisis**



Buildings and homes destroyed by the earthquake

Before going to Palu, I had no idea the scale of the psychological impact that this disaster would have on the people. We first visited a local maternity unit at a puskesmas*, this puskesmas had been ostracised by the community as a woman and her baby had unfortunately died here.  All the midwives went to prison and the community had threatened to burn the puskesmas down!!

Luckily the midwives were released, however they were obviously quite terrified of it happening again.

When we visited they had had no electricity since the earthquake and so were having to use torches and candles to light the labour ward. Whilst they were giving me a tour one of the midwives started crying; she was so terrified to be inside the building in case there was another earthquake. The World Health Organisation estimate that 30% of all healthcare professionals in Palu and surrounding areas are suffering ill mental health and therefore are unable to go to work. Myself, Dila and Tina decided we would invite all the midwives from the Puskesmases in Palu to the boat and provide a safe space in which they could share experiences and gain strength from one another.

With the promise of sweet tea and cake we had over 40 midwives join us on the boat. We spent hours chatting and sharing stories over many cups of sweet tea. I couldn't help but shed tears at the stories these midwives had and the challenges that they face in their everyday work. They were fascinated by what midwifery looked like in England and the

reality of how privileged we are was really brought home to me.

**Sharing love, mutual trust and respect**

Their strength and determination to improve maternity care for Indonesian women and their families was awe-inspiring. They had many stories to share but a common theme was that many of them used to work in remote areas of Indonesia as newly qualified midwives. Sometimes a 2-3 hour horse and cart ride away from a puskesmas.

A midwife named Lilas had tears in her eyes as she recounted the story (20 years ago) of a woman who had a major PPH whilst giving birth in her village. She said it was a 3 hour journey to the hospital and she could see the colour draining from the woman and her slowly turning blue. She said she spent the whole time willing the woman to stay awake and praying. Amazingly the woman survived but the emotional impact for midwife Lilas was huge. She never worked in a remote village again. The responsibility of working in such remote areas with limited support had obviously had a big impact on these midwives.

A couple of days after meeting the midwives, a woman who was having her 8th baby turned up to antenatal clinic. She had travelled over an hour on a motorbike to visit us from her village. All her previous children had been born at home with a Dukun (Traditional Birth Attendant), her last two children had not survived past a year old. She came to see us with her husband as this baby had not moved in a week. Unfortunately on scan it was confirmed that this baby had in fact died. After meeting this woman and hearing the stories from the local midwives, we decided to reach out to the villages outside of Palu. We wanted to see what care was being given to local families and to advise them that they could come to our hospital boat and access free healthcare check ups.

**Hope in crisis**

Many of the people in Palu and surrounding villages are living in tents as their homes are either destroyed or unsafe to enter post earthquake. One village that we visited had hundreds of makeshift tents in a field right next to their original destroyed village.



Relief tents in Palu, Indonesia, photo credit: Ian Morse/TNH

We had the amazing honour of meeting United Nations Family Planning Association Midwives in their reproduction tent. They had slogans and posters all around their tent with health messages such as hand washing and safe sex practices.

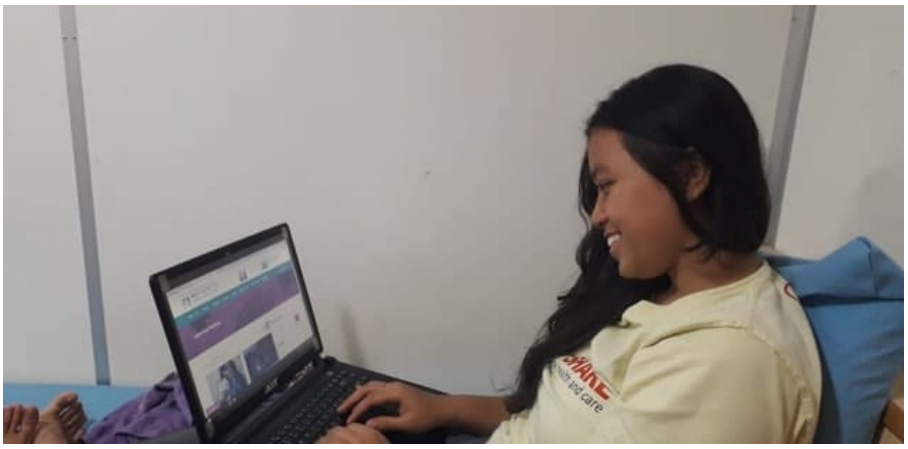
They also had two birthing beds and equipment for births. In one month they had five vaginal births in the tent with trained midwives in attendance. If they had not have been there these women may have given birth with a Dukun or had to travel over an hour to get to a health facility. Networking with these midwives was invaluable and they knew that if

needed to they could refer women to DoctorSHARE for health check ups. In the coming days and weeks they did, and UNFPA and DoctorSHARE had a great collaboration.

DoctorSHARE provided me an amazing opportunity to learn about Indonesian healthcare and I had access to over 20 doctors and midwives every day who I could bombard with questions whenever I wanted! They all definitely got their own back and asked a lot of questions about the UK and the NHS ? To have had the privilege to work alongside such inspirational, strong and courageous midwives and doctors was an honour and one I will never forget.

**All4Maternity's One4One subscription**

Recently over forty Midwives from all over Indonesia's vast archipelago have been granted free access to the All4Maternity platform. This has all been made possible by the One4One subscription that the platform offers. For every new subscription in a high income country, a midwife in a lower income country is gifted access to the site.


Midwife Dila using the site whilst working for DoctorSHARE in Palu

This has meant that the Indonesian midwives have been given easy to access evidenced based information plus the website even translates into the language of their choice! Especially useful when the majority of midwives in Indonesia do not speak English but their language Bahasa Indonesian.

The midwife workforce in Indonesia are so strong in their continued efforts to provide safe maternity care for women and their families. Maternal and Neonatal Mortality and Morbidity continue to be high and this is for a multitude of reasons. However, a problem that many midwives have, one which I have heard many times is the lack of evidence based information being available and even being taught at midwifery schools. Therefore having access to All4Maternity provides up to date resources at the click of a button which is so important when midwives can sometimes be very remote. Some of the midwives are over two hour drives to the closest hospitals!

**Feedback from midwife Dila**

**Why do you like this website?**

*I could tell that this website is different from others from the quality of the design. It is user friendly and easy to use.* ***We can easily access through our mobile phones.*** *The language is very communicative and understandable. Gladly, it has automatic translation. So that, people in non English country will definitely understand about the content without language barrier.*



**How was this website useful?**

*Learning, sharing, caring; those points show that this website is useful. Those are good impressions in the beginning. Every midwife definitely wants to be updated. By having the access to this website, we can learn from the latest research that will help us in clinical practice through the amazing modules. That is the point of learning according to me. The point of sharing which I get in this website is we basically can connect about the midwifery field in the UK. So that, we as midwife from developing country could see the different side of the world. We realize that as a midwife we need each other to support. The point in caring is a must for supporting each other so we can always be motivated to help mothers and babies.*

*Hospitals run on a tier system, depending on the level of health insurance you have. For those with the most basic of insurance then you are allowed to visit a puskesmas which are very basic hospitals. They reminded me of free standing birth centres as their are no obstetric or paediatric team however they are very different in that there is very limited emergency equipment and the state of the building and conditions can be poor.

Georgia can be found on Twitter @geowoodster

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