

A Space for Solidarity: National Conference of Salvadoran Midwives

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When discussing threats to peace in El Salvador, what comes to mind immediately is the civil war that the country is still recovering from or the gang violence that is sensationalized in the media. However, many women and girls are silently struggling to maintain peace in their lives because of a reproductive healthcare system that is failing them. In fact, the biggest threat to the health and security of women and girls in El Salvador is the lack of reproductive rights and effective maternal healthcare. According to the Salvadoran Ministry of Health, five of the top six causes of death for women between 20 and 59 are related to pregnancy and birth complications, most of which are preventable.¹ The inaccessibility of reproductive healthcare services, such as contraceptives and sexual education, coupled with the absolute criminalization of abortion is especially dangerous for adolescent girls. The leading cause of death for girls between 15 and 19 is ingesting chemicals to terminate pregnancies.² Such an extreme absence of reproductive justice is a form of institutionalized violence. Moreover, midwives, the very people trying to restore peace to the lives of women and girls in the most affected communities, are marginalized by the state. This proposal seeks to support the work of midwives in El Salvador by providing a space for them to fortify their knowledge, networks and movement for recognition.

Midwives in El Salvador have been increasingly pushed out of the nation's formal healthcare system, despite a growing body of research demonstrating the positive impact that midwives have on maternal health in Latin America.³ Reproductive rights are dangerously limited in El Salvador, making it an important place to work towards improving maternal healthcare. Instead of being recognized as a resource for community-based care, midwives are forced to operate under very constricted conditions. According to a World Health Organization report, there are no longer formalized training programs for midwives in El Salvador, greatly limiting the number of practicing midwives in the country.⁴ In 2011, the Ministry of Health released a comprehensive plan for maternal care in the country that almost entirely excludes midwives—only mentioning them in reference to helping to “keep track of” pregnant women and encouraging them to minimize the use of traditional birthing practices.⁵ Midwives from La Asociación de Parteras Rosa Andrade, the only official association of midwives in the country, report being threatened with prison time in the case of infant or maternal mortality during births they attend.

Despite lacking government funding or recognition, La Asociación de Parteras Rosa Andrade (LAPRA) continues to provide access to maternal health services in some of the most remote communities in Cuscatlán, El Salvador. This past June I had the opportunity to meet with LAPRA to learn about how midwives operate in the country. At the time, I had an internship in the maternity ward of a public health clinic in La Libertad, El Salvador, providing sexual health education to adolescent mothers. When I asked about midwifery, a nurse at the clinic told me that midwives no longer practice in the country. Understanding that midwives are rendered invisible globally, I decided to look into it for myself. I found LAPRA online and arranged to meet with two of the leaders, who then invited me to attend their monthly assembly of the 30 association members. At the assembly, the midwives reported giving prenatal care to a total of 75 women and adolescents during the previous month. In addition to prenatal checks, they administer contraceptives and provide sexual health education and domestic violence intervention.

Midwifery in El Salvador has a unique political history. Many of the midwives in LAPRA began attending births and promoting reproductive justice during the 12-year-long civil war when hospitals were inaccessible to many rural communities, especially those in guerilla territories. Some of the midwives were even involved in the opposition movement to the military dictatorship, providing maternal health care

¹ “Política de Salud Sexual y Reproductiva.” *Ministerio de Salud de El Salvador*, 2012.

² “Política de Salud Sexual y Reproductiva.” *Ministerio de Salud de El Salvador*, 2012.

³ Zepeda, Adán y Jorge Romero. “Promoción Del Empoderamiento De Género En La Población Indígena En Querétaro, México, a Través De La Difusión De La Salud Reproductiva Por Parte De Las Parteras.” *Estudios Sociales*, 2012, 20 (40), 293–312.; Llamas, Ana y Susannah Mayhew; “The emergence of vertical birth in Ecuador: An Analysis of Agenda Setting and Policy Windows for Intercultural Health.” *Oxford: Health Policy and Planning*, 2016, 31(6), 683–690.; “Cuidar la salud, salvar vidas: El estado de las parteras en el mundo” *Fondo de las Naciones Unidas para las Actividades en Materia de Población*, 2011. New York: UNFPA.

⁴ World Health Organization. “Annex 11. El Salvador.” *Global Health Workforce Alliance*.

⁵ “Lineamientos técnicos operativos para la estrategia plan de parto.” *Ministerio de Salud de El Salvador*, 2011.

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to women in the guerilla camps. In 1994, two years after the war ended, the government instituted a program to train and certify midwives, thereby allowing them to continue providing maternal care to rural communities. In 1998, over 30% of births were attended by midwives.⁶ However, the formal healthcare system has since excluded midwives completely—making it very difficult for them to operate. This marginalization of midwives has coincided with the implementation of some of the strictest anti-abortion laws in the world, resulting in many women in prison for having miscarriages that were deemed “homicides” by the state.⁷ Based on conversations I have had with family and friends in El Salvador, along with my own observations while interning at a public health clinic, there is a great deal of mistreatment that happens in the hospitals while women are giving birth. One woman I spoke with, who had her first few births at home with a midwife in the early 90s and her last birth in a hospital, felt that giving birth in the hospital was a much more difficult and degrading experience. I hope to be able to spend some of my time in El Salvador interviewing midwives and their patients, in order to document their history and current contributions.

When I spoke with LAPRA about their goals as an association and the possibility of working on a project with them, they suggested hosting a national conference for midwives, which has long been an aspiration of theirs. This proposal is to use the Davis Projects for Peace funding to spend two months in Suchitoto, El Salvador working with the country’s only active association of midwives to plan, organize and host a conference for midwives from across the country, many of whom, although unrecognized by the state, are still providing reproductive health services to their communities. The conference would be an opportunity for LAPRA to share their methods of organizing with midwives from other parts of El Salvador with the hopes of inspiring more midwives to join in associations. The conference would also be a space for individual midwives to give workshops about maternal and reproductive healthcare practices, traditional medicine, community outreach, domestic violence intervention and simply to share their experiences as midwives. Some midwives may be unsure about their rights as birth workers, or lack thereof, and of the exact rights of the pregnant women and girls that they work with. We would host feminist academics from the National University of El Salvador, where I have already established contacts, to present about the current state of maternal health in the country and the rights of both birth givers and midwives. This aspect of the conference would also allow Salvadoran midwives to develop relationships and begin working with supportive academics in the domains of Law and Public Health in order to push for government funding and acknowledgement. Some midwives from other countries where LAPRA has connections, such as Guatemala, Mexico and the United States, would also be invited to attend the conference in order to strengthen international networks of solidarity and recognition.

This project proposal is rooted in the desire to support the people who are *already* dedicating their lives to alleviating gender-based violence in El Salvador. The *Conferencia Nacional de Parteras Salvadoreñas* (National Conference of Salvadoran Midwives) would be a three-day-long retreat to foster unity, wisdom and hope among birth workers who have been pushed out of the Salvadoran state’s failing maternal healthcare system—a system rooted in patriarchal practices that often dehumanize birthing bodies. If midwives in El Salvador are organized and united they will be able to work alongside lawyers, academics and politicians in order to regain recognition as a legitimate source of maternal healthcare. Midwives are at the forefront of the fight for reproductive justice across the world. Although they are more marginalized than in many other places, midwives in El Salvador continue to provide access to life-saving maternal and reproductive healthcare services and domestic violence intervention in rural communities where many women and girls are living harsh realities. A space for solidarity-building among Salvadoran midwives is a necessary step towards bringing peace and care to the lives of Salvadoran women and girls.

⁶ “Persecuted: Political process and abortion legislation in El Salvador: A human rights analysis.” *Center for Reproductive Law & Policy*, 2001.

⁷ Viterna, Jocelyn. “The Left and ‘Life’ in El Salvador.” *Politics and Gender*, 2012, 8(2), 248-254.