MATERCARE IN HAITI

Last January two days following the earthquake MCI received an urgent request from the Mother Teresa’s Missionaries of Charity in Delmas 31, Port au Prince to help provide medical assistance at their first aid station. MCI arrived seven days after the catastrophe we found that the first aid station was more a major injury triage centre. We were able to help for a week treating and triaging the injured and at the same time we tried to determine what maternal health care service were available.

MCI had carried out maternal needs assessments in East Timor at the request of the Auxiliary Bishop of Melbourne, following the departure of the Indonesian occupations forces and also in Albania during the Kosovo crisis. Mothers in these situation suffer as every one else, the fractures, hunger, disease, loss of loved ones and homes but also they suffer from life threatening obstetrical complications frequently hypertension. It is understandable that in catastrophic crisis the first concern is for trauma services and the provision of general supplies to sustain life but somehow the special needs of mothers are forgotten almost as it motherhood goes on hold. This many were delivering in the streets or camps without dignity, or in safe, clean facilities and alone without any professional help. They also appear to have post traumatic stress as the following case illustrates. A young mother was admitted in labour to the Hospital. When it came to the delivery she refused to “push” but kept shouting to her baby still in the womb “stay in there, don’t come out, it is hell out here”. She delivered safely eventfully and was discharged the next day with her baby, but had no where to go, since her husband and parents had been killed and her home destroyed. She was given a tent by the hospital.

By chance the Apostolic Nuncio, Archbishop Bernardito Auza, visited the Sister’s compound and when he discovered that MCI was a group of ob/gyns he asked us to visit St Francis de Sales Hospital in downtown Port au Prince which, had been badly damaged, to see what we could do to help. We managed, with some difficulty to do so and found most of the buildings badly damaged including the three story block comprising labour/delivery, the nursery, and maternity ward which had collapsed killing the mothers, their babies and medical and nursing staffs. Their bodies have still not been recovered. We met the administrator of the Hospital once and told him that MCI was interested in the long term, to working with Haitian colleagues, assisting with developing a temporary maternity field hospital and to provide training programmes in the management of high risk mothers. We have been told that hospital was to be relocated, demolished and rebuilt as a much larger (250 bed) teaching hospital. To date we have not heard if we can be of assistance.

At the same time we also visited St. Damien’s Paediatric Hospital, close to the airport, which had survived the earthquake with little damage. Because of the emergency and the lack of maternity services it had been decided to develop a high-risk pregnancy unit in the hospital, prenatal clinics and normal delivery centres in the makeshift camps. Discussion took place between the hospital administration, MCI and also the head of department of obstetrics from the University of Milan. It was agreed that both groups, would work with the newly appointed Haitian chief of obstetrics, and send teams of obstetricians and midwives for 2 week rotations to help out.

Appeals for volunteer obstetricians and midwives made. MCI has sent 16 teams to date, including 18 obstetricians and 10 midwives and nurses. I late February our Chairman Dr Bogdan Chazan, arranged an interview with the First Lady of Poland Mrs. Maria Kaczynska, who was most gracious and interested in the work of MCI and who volunteered to be a patron of the Haiti project. Tragically, she died with the President and many
government, church and military leaders in the terrible air crash. The largest number of volunteers have been from Poland which is a wonderful tribute to her. Other volunteers have been from Canada, the USA, Ireland, and Japan.

Progress in rebuilding has been slow which is not altogether surprising given the enormity of the tragedy, the loss of so many lives, in particular doctors and nurses and the devastation of a city and its infrastructure. St Damien’s seems to have enough Haitian obstetricians and so that part of our contribution to Haiti may be over but there is an urgent need for neonatologists and neonatal nurses.