Protecting Maternal & Newborn Life via Midwifery training in Safe Natural Childbirth & Breastfeeding Support

Indonesia

Robin Lim

Organization type:
nonprofit/ngo/citizen sector

Budget:
$100,000 - $250,000

Website:
http://www.bumisehatbali.org/

- Child care
- Child protection
- Education

Project Summary

Concise Summary: Help us pitch this solution! Provide an explanation within 3-4 short sentences.

Right now, somewhere on our planet someone’s mother is dying from a complication of pregnancy or childbirth. This tragedy will occur 981 times everyday, according to a new report, Trends in maternal mortality, released by the WHO, UNICEF, UN Population Fund, & World Bank. Most of these deaths are related to poverty & could be prevented.

At Bumi Sehat we believe that EVERY MOTHER Deserves to be attended by skilled, kind, trained midwives. The Change we strive for: SUPPORTING MIDWIVES TO EFFECTIVELY REACH THE UN MILLENNIUM DEVELOPMENT

Goal 4: Reduce Child Mortality rate.
Goal 5: Improve Maternal Health.
Goal 6: Combat HIV/AIDS, malaria and other diseases.
We advocate for the basic human right to decent healthcare in the achievement of these goals.

**About Project**

**Solution: What is the proposed solution? Please be specific!**

Bumi Sehat recognizes that to be effective, reproductive health services must be culturally appropriate, gentle and community based; bringing services directly to the people. Recently it was noticed by our midwives that none of the expectant mothers were aware of their HIV/AIDS status. Because in 2011 two mothers who birthed at Bumi Sehat later died of AIDS, we knew for certain that the problem was/is increasing in frequency. The women shared that they had no money for the test, no money for the counseling session that was required prior to the test being administered. Now we offer on site, free, confidential HIV/AIDS counseling and testing. As a result, the pregnant women and their partners are getting the test. In post Tsunami Aceh four years ago in, Ibu Zabaidah bled to death following the birth of her fifth baby. She and her husband were suffering from stress-induced hypertension, because they had lost their home and their four children in the tsunami. When he realized that his wife, Zabaidah, was bleeding too much, he ran to call the Bidan Gompong, a traditional midwife. She came quickly but with no phone or transport she sent a neighbor to our clinic to ask for help. The ambulance, midwife and a doctor were dispatched immediately but it was too late. Because of this Bumi Sehat organized the Traditional birth attendants of Aceh and prepared them for future emergencies. We provide their phone and phone plans, flashlights, simple lifesaving tools and skills and hold monthly trainings. It’s a working partnership with the communities that saves lives.

**Impact: How does it Work**

**Example: Walk us through a specific example(s) of how this solution makes a difference; include its primary activities.**

With the help of Indonesian Staff and International volunteers, we provide prenatal care. We involve midwives and the Dinas Kesehatan (Dept. of Health) in our regency. Eventually, Bumi Sehat opened its Community Health & Childbirth clinic in Bali. A grass roots service not-for-profit organization, run primarily by the people it most benefits, was born. We build clinics, staff them, we educate midwifery students, we pick up trash, we patch up wounds, treat illnesses, and we receive babies into the world. We advocate for marginalized, displaced, low-income people from all islands, faiths and cultures. Following disasters reproductive health care falls by the wayside. Yet babies continue to be born. When all infrastructure falls apart, when hospitals and all their technological equipment are destroyed, midwives come in handy. They can help women give birth with or with out electricity, running water, equipment, even shelter is optional when babies are ready, they come. In December 2004 a 9.3 earthquake and subsequent Tsunami devastated Aceh, Indonesia. Sri Lanka, India, Thailand, Malaysia, and the Maldives were all affected. Bumi Sehat was an early responder, we transported supplies, tents, we trucked in food & drinking water. We trained midwives and grandmothers in protocols to safely deliver babies, even in disaster zones. With help from International & Indonesian donors, especially the Rotary and Direct Relief Int., we built a Bumi Sehat Community Health clinic in Samatiga, West Aceh. Long after other NGOs have left Aceh, the Bumi Sehat Tsunami Relief Clinic continues to be the only viable medical care resource the people of Samatiga have. Bumi Sehat has NO EXIT strategy. Bumi Sehat was an early responder to the following disasters: Aceh ~ Tsunami of 2004. When earthquakes struck, we went to Yogyakarta in 2006, Padang in 2008 and to Haiti in 2010.
How long has your organization been operating?
More than 5 years

Is the project that you are entering related to this organization?
Yes

The information you provide here will be used to fill in any parts of your profile that have been left blank, such as interests, organization information, and website. No contact information will be made public. Please uncheck here if you do not want this to happen.

Innovation

What stage is your project in?
Operating for more than 5 years

Tell us about the community that you engage? eg. economic conditions, political structures, norms and values, demographic trends, history, and experience with engagement efforts.

Bumi Sehat operates two Community Health and Childbirth clinics. One in Bali, which was economically effected by terrorist bombings in to 2002 & 2005. Our other clinic is in Aceh close to the epicenter of the 2004 Tsunami.

As you can imagine, these communities have been greatly traumatized by the disasters.

Share the story of the founder and what inspired the founder to start this project

Ibu Robin Lim
20 years ago Christine Jehie Kim died due to a complication of her 3rd pregnancy. She suffered a stroke. Her Dr. had never informed her that she had hypertension. Christine was my younger sister.

My sister and the baby she was carrying died in the USA. They died in the country that spends more money on pregnancy and birth technology than any other country in this world.

Statistically, the United States rates number 39 in maternal mortality. This means that it is safer to be pregnant and to give birth in 38 other countries than the USA...and less expensive too.

I learned that Pregnant women who are at risk for suffering complications and even dying, are in the prime of their lives,

Minorities, those living in poverty, Native American and immigrant women and those who speak little or no English are most affected.

My sister had health insurance, she should have been warned by her doctors that she was at risk. But she was a minority. The doctors took little interest in her as an individual, she fell through the cracks, and died.

My passion for maternal and child health led me to continue my studies and pursue the path of midwifery, eventually it led me to found the Bumi Sehat Foundation.

Social Impact

Please describe how your project has been successful and how that success is measured

This entry is about: Maternal and Child survival.

We can count the numbers of Mothers and Babies who do not survive, it is impossible to count the numbers of Mothers and Babies who DID survive because of Yaysan Bumi Sehat.

Our estimated patient statistics over the last seven years:

• births at Bumi Sehat Bali & Aceh: over 3500
• incidents of patient care: over 45,000
• 100% Breastfeeding rate (a baby in Indonesia who is fed infant formula is 300 times more likely to die in her first year of life, compared to a Breastfed Baby.)

How many people have been impacted by your project?
More than 10,000

How many people could be impacted by your project in the next three years?
More than 10,000

Winning entries present a strong plan for how they will achieve growth. Identify your six-month milestone for growing your impact

With the next 6 months we plan to train even more midwives in our very effective protocols. All the while continuing to give patient care.

Task 1

complete and Publish the book in progress: Ibu Alami (Natural Mother) Which will be distributed 5,000 copies for free, to expectant mothers all over Indonesia.

Task 2

Publish a book for new and student Midwives which helps them keep their practice very Humane and personal.
Task 3
Increase our capacity to respond to Disasters, as Reproductive Health care providers.

Identify your 12-month impact milestone
We hope to acquire land and build a Disaster Relief Warehouse to be prepared to respond in the event of a disaster, in which Reproductive Healthcare experts are needed.

Task 1
Secure funding for the land needed for the Disaster Preparedness center.

Task 2
Build the warehouse and stock it with disaster relief supplies

Task 3
Train the Midwives, nurses and doctors needed to respond to disasters and ☐ secure operational funds to support the Disaster Relief project.

How will your project evolve over the next three years?
The Bumi Sehat model of Culturally Appropriate, Community Based Reproductive and general health care has become so well known in Indonesia. We are training hundreds of young midwives throughout Indonesia in cooperation with their colleges. To date we have sponsored 599 young Indonesian midwives to participate in seminars, to learn the Gentle Birth and Breastfeeding Protocols. This is taking lifesaving to a nation wide level. Two other Childbirth clinics, inspired by and modeled after Bumi Sehat have been opened, with much support from us. One in Denpasar Bali and another in Laos.

We plan to continue to provide patient care while teaching and Capacity Building. We currently must build a larger facility as we have out grown the current clinic and the least is finished in 4 years time.

Sustainability

What barriers might hinder the success of your project and how do you plan to overcome them?
Finding ongoing operational funds is an obvious challenge. We have overcome all legal barriers, having already obtained the highest, most secure license to operate as a clinic from the Dept. of Health in Gianyar Regency, Bali and in Samatiga, Aceh. Because the tsunami is no longer in the news, International funders think the disaster is “over”. Therefore it is especially challenging to secure operational funds for the Bumi Sehat Tsunami Relief, Community and Reproductive Health Clinic in Aceh. Likewise the financial devastation felt in Bali following the terrorist bombings in 2001 & 2005, are perceived as “over”, except by the citizens who continue to suffer.

Tell us about your partnerships
Rotary Clubs International built the Bumi Sehat Aceh clinic. They also provided the first Ambulance. (Rotary does NOT support operational funds or salaries for medical staff! Operational funds for the Bumi Aceh clinic were sponsored by Direct Relief International from 2007 to 2009. After which we maintained funding by appealing to small personal donors. New Chapter Vitamins donates Prenatal vitamins for all of our pregnant patients. Of course we partner with our local Dept. of Health. Smaller organizations have been formed to help us ie: Sydney Friends of Bumi Sehat and, California Friends of Bumi Sehat. At the Bali clinic we do have drop-in visits from tourists, who are very generous, especially after they visit us on site and see first-hand the work we do.

Explain your selections
15 years ago I sold my house in Hawaii, and used a large part of that money as the seed funds to begin construction on the Bumi Sehat clinic.

Friends and family have been very devoted to helping Bumi Sehat stay afloat. For example; a couple who I delivered two babies for while in the USA give $108, every month.

Individuals: A prenatal care patient of mine from two ½ years ago had such a good experience at Bumi Sehat that she has become our biggest single donor.

Foundations: in the past Direct Relief International, Rotary Clubs, Sakthi Foundation and Carry for Kids, have helped us.

Businesses: a personal friend had a clothing manufacturing business, and donated some the of proceeds (now out of business). My son’s business donates a percentage of his earnings to Bumi Sehat.

Other ie walk-in tourists. Donations from patients (optional and this applies only to a small percentage of patients who use our health services, not because they are poor, but because our services are hygienic and more wholistic, professional while warm and kind. Quite unusual here.)

Other: I am an author and the sales of my newest book PDF are just by donation to Bumi Sehat.

STUDENT FEES FROM PRECEPTORING YOUNG MIDWIVES WHO NEED THE EXPERIENCE THAT IS EASY TO GET IN SUCH A BUSY CHILDBIRTH FACILITY.

How do you plan to strengthen your project in the next three years?
Bumi Sehat is run for Indonesians, by Indonesians. We are using education to help young visionaries secure their future, thereby securing the future of our foundation. For example: We have paid ALL the expenses to help 14 young women become Midwives, Nurses or Teachers or Accountants. With each student we have a contract to hire them (at above the normal wage in Indonesia) to work in their own communities for 3 years, after finishing school. Several of our Medical and Administration staff have gone back to school, to supplement or complete their educations, with the financial support of Bumi Sehat, and a commitment from the employees.

Challenges

Which barriers to health and well-being does your innovation address?
Please select up to three in order of relevancy to your project.

**PRIMARY**

**SECONDARY**

Lack of access to targeted health information and education

**TERTIARY**

Limited access to preventative tools or resources

Please describe how your innovation specifically tackles the barriers listed above.

1. Lack of affordable care: Families who cannot pay their childbirth related medical bills in Bali cannot take their baby home, until the debt is cleared. Currently the government is sponsoring free childbirth at the public hospitals, however the patients must supply documentation that they are in poverty. Many village heads will not supply the documents. People in this situation would stay home and have unattended births, if not for Bumi Sehat.

2. Lack of health information: Books and health education magazines are scarce. We have published and 2 books for free (10,000 copies of each) about proper breastfeeding and safety for children.

3. Limited access to preventative tools: The best prevention for hemorrhage after childbirth is sound nutrition. We provide free vitamins.

How are you growing the impact of your organization or initiative?

Please select up to three potential pathways in order of relevancy to you.

**PRIMARY**

Enhanced existing impact through addition of complementary services

**SECONDARY**

Other (please specify below)

**TERTIARY**

Influenced other organizations and institutions through the spread of best practices

Please describe which of your growth activities are current or planned for the immediate future.

1. We provide Community health services, prenatal & postpartum care, birth services, breastfeeding support. We added prenatal & elderly yoga to our free services to enhance village health. At the Youth Center we plan to do more sex and health education and add more services, ie Cranial Sacral Therapy, prenatal & postpartum massage, more Homeopathic & Acupuncture.

2. Plan in 2012 to publish a Health Education book; “Ibu Alami” (Natural Mother). For teens we plan to begin work on their health education book: “Choices and Challenges”. 5,000 copies each to be given away.

3. We train doctors & midwives from hospitals & schools in best practices & gentle effective life saving protocols for Childbirth. We plan to be more active in doing cesarean prevention trainings for the future.

Do you collaborate with any of the following: (Check all that apply)

NGOs/Nonprofits, Academia/universities.

If yes, how have these collaborations helped your innovation to succeed?

AS I SEE IT, THESE COLLABORATIONS GIVE THE BUMI SEHAT VISION SUSTAINABILITY. OUR BEST MEDICAL AND MIDWIFERY PRACTICIES have BEEN PROVEN SAFER AND MOST GENTLE BY THE RESEARCH ~ THE TEST OF TIME WILL BE TO IMPLEMENT THESE PRACTICIES INTO THE FUTURE GENERATIONS.

Source URL: https://www.changemakers.com/morehealth/entries/protecting-maternal#comment-0