



International Day of the Midwife 5 May 2017



Speech delivered by Justine Mwangwi

Your Excellences, Honourable Members of Parliament,
Esteemed officials of the Government of Canada,
The President, members and staff of the Canadian Midwives Association,
My fellow midwives,
Distinguished guests,
Ladies and gentlemen,

On behalf of UNFPA, the United Nations Population Fund Country Office in South Sudan, the people and midwives of South Sudan, and on my own behalf, I bring greetings to all of you today from South Sudan.

Someone has said that the Inuit of Canada's north have over 100 words for snow. I wish there was that many for me to thank you, because I would use every one of them as I speak before you today to express the sincerest gratitude of the people of South Sudan for the help you are extending to our country. It is indeed a delight for us to be supported by you and may the Lord reward you richly for remembering the poor and destitute.

In South Sudan, UNFPA and the Ministry of Health are collaborating with the Canadian Association of Midwives to implement an initiative which seeks to strengthen midwifery services through the generosity of Canada and Sweden.

Through the project, midwifery education in South Sudan is finally on the right track. The project has built the capacity of Health Sciences Institutes to international standards by recruiting international professional tutors and equipping our libraries with up-to-date textbooks, as well as skills labs. Our curriculum is now at par with international criteria and management of the Health Science Institutes is much better.

I am one of the students who has benefited from the project and I can tell you more about the positive changes it has brought to midwifery education and to the lives of the mothers and their newborns that we, midwives, ultimately serve.

The peer-to-peer exchange between young Canadian and South Sudanese midwives builds the capacity of South Sudanese midwives to improve clinical practice in the field, taking stewardship, advocating for better health of mothers and their newborns.

I am fortunate to be in one of the peer-to-peer exchanges when the Canadian midwives shared a video for Manual Vacuum Aspiration, which I later on used to train other national midwives. I benefited from their strong advocacy skills to campaign for more midwives training at community and state level to address the issue of human resource for health.

I participated in discussions through social media, provided reports, shared knowledge and information on midwifery topics in the peer-to-peer exchange.

I would like to see the peer-to-peer exchange program further build an outstanding relationship between the midwives from the two countries and uplift the standards of South Sudan nurses and midwives association so that they can advocate for their professions, including regulating the practice of nursing and midwifery.

As a midwife now, I am able to assess, monitor, examine, and manage the condition of women before, during and after pregnancy. This includes identifying high-risk pregnancies, making referrals to appropriate facilities and providing basic emergency obstetric and newborn care services based on the context and situation of the health facility.

I also support and provide comprehensive reproductive health services for clients, including young people and other vulnerable groups in South Sudan such as those who were displaced by the conflict in the country, refugees and returnees, counselling them about birth spacing.

Given the current context in South Sudan where gender-based violence is rampant, I am one of the midwives supporting GBV survivors, having been trained on the clinical management of rape and providing gender-sensitive midwifery services.

To bring midwifery services closer to the people, I conduct outreach and home visits with families and communities to strengthen home-based care services.

As a mentor myself, I tutor students in the clinical area and supervises traditional birth attendants to enable them to support the work of midwives in caring for mothers.

Indeed, there are uplifting news and positive changes happening in South Sudan.

But the reality on the ground brought by the long-running conflict also affects the work of midwives.

South Sudan is experiencing inadequate human resources and this can increase delays in providing services to pregnant women and raise the risk of mortality.

The inadequate number of human resources, especially skilled birth attendants, results in long working hours for midwives, often with very little prospect for natural breaks. The situation is compounded by high temperatures under which we work, plus the lack of basic equipment and supplies, and poor infrastructure in general, which often breaks down the morale of health workers.

There were nights when I would be the only midwife to manage the entire maternity unit of a hospital and, at times, would do this in double duties.

The insecurity has also affected the health seeking behavior of mothers and disrupted the classes at Health Science Institutes. One example is the Kajo-Keji Health Science Institute, which was closed and students have to be relocated to Juba so they can continue their studies.

While we care for the well-being of our clients, the safety of our midwives is also very crucial. For instance, one national UN Volunteer midwife had to work three straight days without getting out of the hospital because she wanted to be sure of her safety and as well take care of pregnant women as no other midwives were able to come to work during the period because of the conflict.

It is not easy being a midwife in South Sudan. There are so many challenges and so many situations that could break your heart. I have held a baby whose mother died during childbirth and I could only hope that a better future and a better South Sudan await that child when he grows up.

Situations like this sometimes test my resolve to continue my work. I don't falter. Rather, the challenges strengthen my passion and commitment to save mothers and babies who need us most. I believe that if we all continue what we are doing to support strengthening the midwifery services in South Sudan, we will one day erase the impression that it is the deadliest place in the world for mothers to deliver.

If midwives are better skilled, equipped and empowered, we can save more lives.

In South Sudan we use the words "Oyee" to respectfully salute, congratulate, and express appreciation:

OYEE! Thank you to the people of Canada!

OYEE! Thank you to the Canadian Midwives Association!

OYEE! Thank you to the Government of Canada!

OYEE! Thank you Honorable Members of Parliament

Thank you all for listening.