

Safe Motherhood in Historical Perspective: Guatemalan Midwifery during the 20th Century



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- I. Traditional Birth Attendants & Safe Motherhood 2007
- II. Guatemalan Midwifery: 1895 – 1940
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Traditional Birth Attendants (TBAs)



“a person who assists the mother during childbirth and who initially acquired her skills by delivering babies herself or through apprenticeship to other TBAs” (WHO, 1992).

I. Traditional Birth Attendants & Safe Motherhood 2007

Traditional Birth Attendants (TBAs)

- Today, in many poor countries, TBAs attend the majority of births.
- Throughout the 1970s and 80s, WHO promoted clinical TBA training as a primary means of reducing maternal and infant mortality.
- By the 1990s, WHO began to promote “skilled birth attendants” to replace TBAs.

Skilled Birth Attendant

“A skilled [birth] attendant is an accredited health professional -- such as a midwife, doctor or nurse -- who has been educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies, childbirth and the immediate postnatal period, and in the identification, management and referral of complications in women and newborns. Traditional birth attendants, trained or not, are excluded from the category of skilled attendant.”

(World Health Report 2005)

I. Traditional Birth Attendants & Safe Motherhood 2007

Birth Attendance in Guatemala



- Only 41% of Guatemalan births are attended by a skilled birth attendant.
- Guatemalan maternal mortality rate is 240/100,000; infant mortality rate is 19/1000.
- Guatemalan Ministry of Health has promoted TBA training programs since the 1950s.

I. Traditional Birth Attendants & Safe Motherhood 2007

Professional Midwives



“Skilled midwives are central to efforts to improve pregnancy outcomes... Developing countries that have significantly reduced maternal mortality have emphasized the role of the skilled midwife... *However, only about half of developing countries have schools dedicated to training midwives*”

(UNFPA Maternal Mortality Update 2004)

I. Traditional Birth Attendants & Safe Motherhood 2007

The Association of Professional Guatemalan Midwives



August 24, 2005

Why Did the Midwifery School Close?

The school's ultimate closure can be explained by:

- obstetricians' growing power and fear of competition
- the medical system's increasing emphasis on the "scientific" and "modern"
- Guatemalan society's suspicion of female independence
- the authoritarian Castillo Armas regime (1954 – 1957)

Each of these factors was due to or exacerbated by **increasing U.S. hegemony in Guatemala**. Indeed, while the development of Guatemalan professional midwifery can be traced to early French influence, its demise is the result of the United States' medical and political ascendancy during the twentieth century.

Professional Midwifery



- 2-3 year midwifery school established in 1895 at the Medical School of the San Carlos University.
- Presidential edict called for at least one student from each state to attend, but this was never achieved.
- Guatemalan professional midwives were the first women to receive university degrees in Central America.
- In 1924 midwives established their own professional association, which continues to be active today.

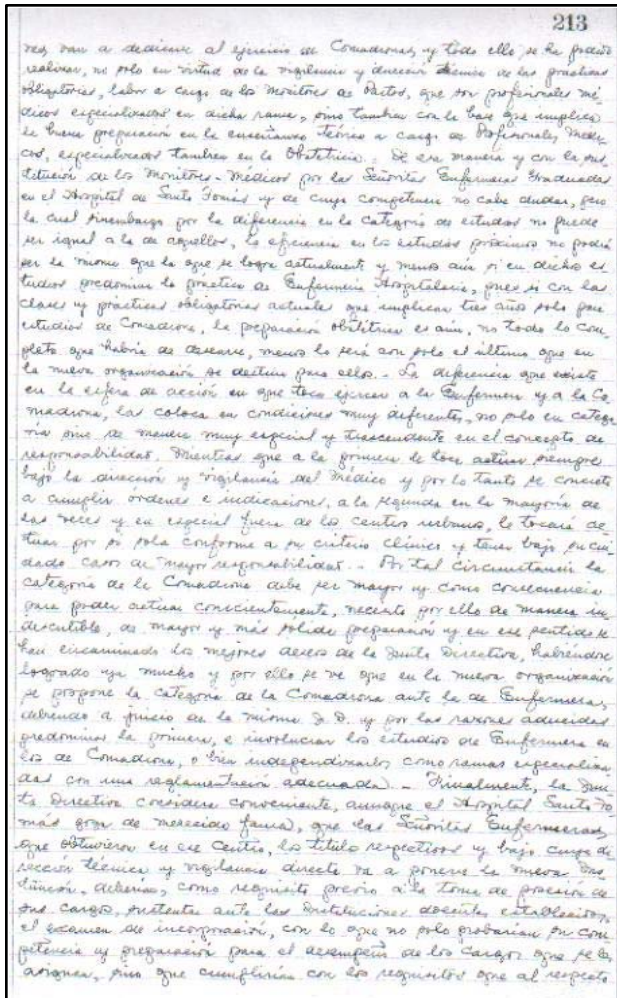
II. Guatemalan Midwifery: 1895 - 1940

Midwives vs. Midwives

- The opening of the school was accompanied by articles condemning the work of “empirical midwives.”
- According to one such article, the school’s goal was to produce enough professional midwives so that unlicensed midwives could be prosecuted criminally.
- Throughout its 65-year history the midwifery school and its graduates remained under the control of male doctors and politicians.

II. Guatemalan Midwifery: 1895 - 1940

Midwives vs. Nurses



- 1903: President Estrada Cabrera proposes that a national nursing school be established, but the edict is ignored.
- 1913: The Presbyterian Mission opens a nursing school in American Hospital.
- 1931: The Sisters of Charity open a nursing school in General Hospital (San Juan de Dios).
- 1940: President Ubico establishes the National School of Nursing, replacing the General Hospital School, and demands that the Midwifery School be closed, despite the objections of the Medical School Board of Directors.

II. Guatemalan Midwifery: 1895 - 1940

New Raw Materials, New Markets



In 1902 the International Sanitary Bureau (now the Pan American Health Organization) was formed in order to establish uniform sanitary codes to ease international trade.

III. The U.S. & Guatemala: 1900 - 1944

U.S. Influence in Guatemalan Medicine

1913: The Rockefeller Foundation, “missionary of science,” begins its work in Guatemala.

1922: The Medical School approves a new curriculum with courses in medical specialties (including obstetrics) because by now the professors have traveled abroad and can teach these specialized courses.

1942: The Institute of Inter-American Affairs (IIAA) is created as a war measure. Its Health & Sanitation Division will go on to provide funding and technical assistance to Latin American health systems.

III. The U.S. & Guatemala: 1900 - 1944

Institute of Inter-American Affairs (IIAA)



- Established a cooperative health service, employing U.S. and Guatemalan experts.
- Early focus on sanitation later expanded to include nursing education.
- In 1942 agreed to build a 300-bed general hospital in Guatemala City to be called, per the request of President Ubico, the Roosevelt Hospital.

III. The U.S. & Guatemala: 1900 - 1944

The October Revolution of 1944



“The socialism that I profess is spiritual because it gives primacy to thought, to the needs of the soul, before economic urgencies...”

Juan José Arevalo

III. The U.S. & Guatemala: 1900 - 1944

The Revolution & Maternal-Child Health



- Everyone is talking about it!
- Doctors are eager to specialize in obstetrics and pediatrics.
- Ministry of Health & IIAA Servicio propose training empirical midwives.
- Medical School & Professional Midwives propose re-opening the midwifery school and oppose training empirical midwives.

IV. Guatemalan Midwifery: 1946 - 1960

Professionals vs. Empiricism: 1946

April 11: The Servicio's proposal makes clear that they view midwives as needing to be minimally trained until the day arrives when they can be eliminated.

April 21: Medical School plans to open the midwifery school.

May 29: Medical School learns of the Servicio's plan to train empirical midwives, and immediately objects.

June 28: Medical School and MOH compromise by agreeing to open the midwifery school immediately.

July 1: Midwifery School opens, even as its curriculum is still being developed.

IV. Guatemalan Midwifery: 1946 - 1960

The Revolutionary Midwifery School



- A volunteer team of medical students and professors designed the new curriculum, basing it on those of other Latin American midwifery schools.
- The midwifery school had no trouble recruiting students. By 1948, 53 students were studying and in 1949, 19 graduated.

IV. Guatemalan Midwifery: 1946 - 1960

IGSS Maternity Hospital



- IGSS is the Guatemalan Social Security Institute, which was created by the Revolutionary government to provide healthcare and disability insurance for all employed Guatemalans.
- Midwives were recruited to plan and operate the IGSS Maternity Hospital.

IV. Guatemalan Midwifery: 1946 - 1960

The Rise of Anti-Communism

- 1947: Medical School leaders express concern that IGSS represents socialized medicine.
- 1950: Arbenz elected president of Guatemala; initiates land reform, a policy that will harm the U.S.-owned United Fruit Company.
- 1950: An active member of the “Anticommunist University Students” is elected president of the “Association of University Students,” igniting controversy.
- 1952: Funding for IIAA projects, especially the construction of the Roosevelt Hospital, is stalled, perhaps due to the souring of U.S.-Guatemalan relations.
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IV. Guatemalan Midwifery: 1946 - 1960

1954 CIA-backed Coup Ends the Revolution



“Communism uses the national education system as a means to infiltrate [the country] and extend its doctrine.”

Carlos Castillo Armas

IV. Guatemalan Midwifery: 1946 - 1960

Midwives vs. Nurses Under Castillo Armas

- August 1954: Sister Angela Lazo, who trained in the U.S., is appointed Director of the National Nursing School and begins a complete reorganization.
- December 1954: A group of doctors submits a report to the Medical School concluding that given Guatemala's great need for professionals providing obstetric services, the midwifery school should remain open and not be combined with the nursing school.
- January 1955: Ten new nursing students withdraw from school for being "imbued with ideas from the previous regime."
- July 1955: President Castillo Armas declares that all institutions similar to that of the Nursing School adopt its curriculum or be closed.
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IV. Guatemalan Midwifery: 1946 - 1960

The Decision to Close the Midwifery School: December 1955

- December 15: The Maternity Department of the Roosevelt Hospital opens after 13 years of construction. The Roosevelt Maternity replaces that of the General Hospital, but only doctors attend births, with nurses as assistants, and the midwifery students are not allowed to have clinical rotations.
- December 20: The Medical School Dean asks the Midwifery School Director to meet with him privately.
- December 28: The Midwifery School Director resigns.
- December 29: The Minister of Health writes to the Dean suggesting that the midwifery school be closed because the nursing school will develop a graduate course in obstetrical nursing.
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IV. Guatemalan Midwifery: 1946 - 1960

Epilogue: 1960 - 2007



- The last professional midwives graduated in 1960.
- A regular Guatemalan graduate course in obstetrical nursing was never developed.
- Traditional Birth Attendant training in Guatemala began in the 1960s, organized by the IIAA. Some professional midwives were involved.
- Many professional midwives were able to work as nurses, but some continued attending births until at least 2001, and the Association of Professional Guatemalan Midwives continues to meet.

Lessons from History

- International influence in the health systems of poor countries can have unintended consequences.
- TBA training has a long and very political history.
- There is a historical precedent for professional midwifery education in Guatemala.
- There were (and are!) professional midwifery schools in other Latin American countries.