

CERTIFIED NURSE-MIDWIVES

and the INDIAN HEALTH SERVICE

...a perfect match



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Certified Nurse-Midwives (CNMs) and the Indian Health Service (IHS)

The Indian Health Service (IHS) has employed nurse-midwives since 1969, when the first nurse-midwife was assigned to a remote village in Alaska. A 1973 study that examined nurse-midwifery care of Native Americans at an IHS clinic in Fort Defiance, Arizona demonstrated marked improvements in pregnancy outcomes after the first five years of nurse-midwifery care at the clinic.¹ This study, combined with midwives' long history of caring for vulnerable populations and the recognition of midwifery care by leaders at IHS, have resulted in an interesting statistic: of all ethnic subgroups, Native American women are more likely than others to deliver their infants under the care of midwives. In fact, Native American women are five times more likely than their Caucasian counterparts to obtain midwifery care.²

Indian Health Service hospitals have found that certified nurse-midwives offer a cost-effective, patient friendly solution to the challenge of providing women's health care to Native American women. Though primarily recognized for excellent maternity care and immediate newborn care, nurse-midwives also provide a wide range of services that include primary care, family planning, and gynecological care for women throughout their lives. Nurse-midwives practice in a variety of settings, including hospitals, birth centers and urban clinics. Whether it is through hiring nurse-midwives directly or contracting for their services, midwives offer a culture of caring that is a good match for Native American families.

The American College of Nurse-Midwives is a member of the *Friends of Indian Health*, a coalition of more than 40 organizations and individuals dedicated to improving health care for American Indians/Alaska Native people.

Here are nine brief descriptions from the many models that work! If you have any questions or suggestions or would like to add your practice to our brochure, please feel free to call.

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1. Ross, M. G. Health impact of a nurse midwife program. *Nurs Res* 1981 Nov-Dec; 30(6):353-355.
2. Parker, J. D. Ethnic differences in midwife-attended US births. *Am J Public Health* 1994 Jul; 84(7):1139-1141.

With roots dating to 1929, the American College of Nurse Midwives is the oldest women's health care association in the U.S. ACNM's mission is to promote the health and well being of women and infants within their families and communities through the development and support of the profession of midwifery as practiced by certified nurse midwives and certified midwives. Midwives believe every individual has the right to safe, satisfying health care with respect for human dignity and cultural variations. More information about ACNM can be found at www.midwife.org.

Alaskan Native Medical Center

The Alaskan Native Medical Center (ANMC) is home to the largest midwifery service in the IHS system, employing 12 midwives. The midwives provide full-scope care in Anchorage as well as in many outlying communities including such remote locations as the Pribilof Islands. Maternity services include not only care to low-risk women, but collaborative management of women at-risk, with the midwives attending about 80% of all births. A very high rate of VBAC success results in a relatively low number of repeat cesarean sections and an overall cesarean rate of 10.1%.

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Chinle Comprehensive Health Care Facility

The Midwifery Service at Chinle Comprehensive Health Care Facility has seven full-time midwifery positions. The midwives provide full-scope midwifery care to the women and families of the Chinle Service Unit located centrally in the Navajo Nation.

They provide prenatal care at four clinics in Chinle, Tsaile, and Pinon, as well as antenatal testing in a midwife-staffed Fetal Assessment Unit and childbirth classes for prenatal patients and their families. Even women with medical complications benefit from the midwifery model of care, as the midwives collaborate closely with obstetrician colleagues and attend the majority of the 500+ births a year. In the postpartum period, midwives actively promote and support breastfeeding and provide postpartum care up to six weeks.

Women throughout their lives receive well-woman care, family planning and STD prevention, testing, and treatment from the Midwifery Service. Students at the school-based clinic at Chinle High School receive women's health care from the midwives; at a number of other local schools, the midwives assist with sexuality education by presenting as guest speakers on topics such as family planning, relationships, and STD prevention.

Working to provide midwifery care that is culturally appropriate for the Navajo women and families they serve, the Midwifery Service has developed its own educational materials that present information in a way that is grounded in Navajo culture. The midwives of the Chinle Midwifery Service are directed by a Native American, Ursula Knoki-Wilson, CNM, (Navajo) and include; Cate Phillips, CNM, Dorothy Mora, CNM, Mary Rose Korduner, CNM, Charlotte Swindal, CNM and Diane Roche, CNM.

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Fort Defiance Indian Hospital

Fort Defiance Indian Hospital has provided full scope nurse-midwifery care (AP, PP, FP, IP) to Navajo women since 1972. Nurse-midwives may elect to work via civil service or the commissioned corps of the United States Public Health Service. Midwives attend all non-operative vaginal births, which account for about 40 births per month. The hospital has a cesarean rate of 14.7% and a successful VBAC rate of 75%.

The midwives at Fort Defiance run several programs aimed at addressing special concerns of their patients. These include an STD screening program; a joint postpartum/pediatric clinic designed to facilitate early identification and intervention for breastfeeding problems; a program aimed at coordinating services and improving outcomes for patients with gestational diabetes mellitus; nutritional counseling services; and outreach services to provide prenatal care at an outlying clinic.

There are currently six full-time nurse-midwives and 1 half-time nurse-midwife. Rosemary Bolza has worked at Fort Defiance on the Navajo Nation since December 1979. Her first position was funded by the University of Arizona and the Navajo Family Planning Corporation. She became a federal employee in 1986, first as a civil servant and then as a Commissioned Officer in the Public Health Service. Gretchen Landwehr has worked as a full-scope CNM at Fort Defiance since April 2003. Her master's thesis in nurse-midwifery at Yale University School of Nursing was a history of nurse-midwifery within the Indian Health Service. Other nurse-midwives are Rosemary Bolza, CNM; Georgann Johnson, CNM; Kathryn Lucas, CNM; Kathleen Varty CNM; Teresa Willie, CNM; Mary Maloney, CNM; and Carol McConnell, CNM FNP.

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Native Women's Health Clinic

The Native Women's Health Clinic is tribally administrated by the Ogalalla Sioux Tribe from Pine Ridge, but is located in Rapid City, South Dakota. Two full-time and two part-time CNMs provide well-woman care to Native patients in Rapid City and from the surrounding area. Three private OB-GYNs provide regular clinic hours as well. The two full-time CNMs attend births at Rapid City Regional Hospital. The clinic has approximately 240 births per year.

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Northern Navajo Medical Center, Shiprock

There is a midwifery department of five nurse-midwives at Shiprock, New Mexico serving primarily the Navajo Native population. There are four obstetricians that serve as consultants. Midwives see about 40 women per day in the clinic. Approximately 70-80 women deliver their babies at the facility each month primarily with midwives. With midwives attending most of the births, the midwifery model of care has come to “set the tone” at Shiprock, with the family practice physicians practicing with primarily the midwifery versus the medical model in mind. The nurse-midwives also serve outlying clinics within the service unit area, traveling great distances to serve women in remote areas of the Navajo Reservation.

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Phoenix Indian Medical Center

At the Phoenix Indian Medical Center, maternity services are provided by two distinctly different services that work closely together. The PIMC Nurse-Midwifery Service carries its own caseload of about 450 patients and attends about 80% of the births at the Medical Center. The physician service follows a caseload of about 75 high-risk obstetrical patients. The nurse-midwives staff two clinics for selected at-risk populations: teens and substance-abusing women. In collaboration with a pediatrician, the nurse-midwives also staff a Mom and Baby clinic, where new mothers receive postpartum care while their baby has a well-baby check. The midwives also provide colposcopy services.

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Santa Fe Indian Hospital

Santa Fe Indian Hospital is located within the city of Santa Fe and gives care mostly to Native Americans from the surrounding Pueblos. Because of the urban location tending toward an artistic community, Santa Fe Hospital also sees a variety of Native Americans from other communities. There are three nurse-midwives that are only doing outpatient prenatal care. Women are seen throughout the pregnancy then referred out for deliveries. The midwives care for women of any age and give primary care via annual exams and interim checks for the hospital clinics as well as four outlying clinics: Santa Clara, San Felipe., Cochiti, and Santo Domingo.

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Tuba City Regional Health Care Corporation

The Nurse-Midwifery Service at Tuba City is 30 years old. The seven nurse-midwives at this hospital-based maternity service care not only for healthy, low-risk women, but also collaborate with their physician colleagues in the care of women with diabetes, pre-eclampsia and other obstetrical and medical problems. The nurse-midwives manage inductions and continue to offer VBAC. They are proud of their high rate of VBAC success (85%) and a low Cesarean section rate, most recently 12%. The nurse-midwives have developed a “newspaper” to provide information and support to breastfeeding mothers. The nurse-midwives are Sandra Gerling, Judith Maines-LeMarre, Bonita Nieto, Barbara Orcutt, Kathleen Varty, Nancy Whitson, and Jane Wilson.

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W. W. Hastings Indian Hospital

Seven nurse-midwives provide full scope midwifery care at this IHS hospital. They currently see over 2000 patients a month in the outpatient clinic and attend approximately 80-90 deliveries per month. The midwifery staff includes two Native Americans, Gina Cole (Kiowa and Comanche) and Peachie Barton-Daugherty (Cherokee), as well as MaryAnn Bednarek, Cheryl Tarver, Rebecca Stephenson, Heidi Pitchlynn and Bonnie Warner (also certified as a Women’s Health Nurse Practitioner). Four of the midwifery staff have expanded their practice to include colposcopy and five to provide circumcision, significantly increasing access for clients who need or want these services. Two of the midwives are Commissioned Officers in the United States Public Health Service. The midwives are active in accepting and training midwifery students from several education programs, including the Frontier School of Midwifery and Family Practice, and Vanderbilt University.

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