



MIDWIVES ASSOCIATION
of BRITISH COLUMBIA

FOR HER
DEDICATION TO
PROVIDING
MIDWIFERY CARE
TO REFUGEE &
IMMIGRANT
FAMILIES

Midwife of the Month Zahra Khoddamy

Photo: Zahra and her client Madina Adem and her baby Heba

Zahra Khoddamy focuses primarily on serving newcomers to Canada, entering the profession with the goal of introducing midwifery to more immigrant and refugees mothers. She too gave birth in a country where she could not communicate with her care providers and this personal experience has informed her practice. Zahra Khoddamy began practicing midwifery in July of 2016 and opened [Burnaby Midwifery Care](#) in August 2017 — the first midwifery practice located in the City of Burnaby. Her journey to becoming a midwife has been long and challenging and reveals her deep dedication to the profession.

MABC: When did you know you were going to become a midwife?

ZK: I was a child and my grandmother was a lay midwife in Iran. She would go to births at neighbours and come back and tell their stories. From a young age I really found it amazing and wanted to do the same thing.

MABC: How did your journey to become a midwife start?

ZK: It started in Iran. Back home the way it works is that after you finish high school you have to write a national exam. You get to pick the type of major you want to study, and you pick a few. I picked midwifery as well as environmental engineering and I got accepted for both.

Where I was accepted for midwifery was in a city far from Tehran up in the northern part of Iran. My family did not agree with my decision to study there because they thought the roads were too dangerous since you have to go through the mountains to get to that city. And there are frequent avalanches and car accidents on

the road.

Right away my parents said, "Forget that."

MABC: I can see why.

ZK: It was also very expensive for my family to afford both my tuition and rent (and everything else). Back home you don't go against your parents, especially when you are a girl.

I had to make the decision to stay in Tehran and study environmental engineering, which I really enjoyed. I graduated from school and married my husband and we emigrated from Iran to Turkey where my husband was working.

At that time I was pregnant. I had to go to doctors for my check ups and I didn't understand the language. I found it very difficult to communicate and I always worried that I was missing something.

I remember once when I had to ask a young man to help translate. We didn't have many friends, but this guy was a friend of my husband's. It was so uncomfortable to go to

my doctor's appointment with a stranger and talk about my private parts and vagina and how I was bleeding or not and have this man translate for me.

During labour when I gave birth to my son in Turkey and I found it very difficult not to be able to communicate with the care provider.

Then I came to Canada and I realized that my environmental engineering degree meant nothing and that I'd have to start from scratch. I felt like this could be my chance to pursue midwifery. I started asking people about it and they said, "Oh I don't know, maybe that is something they do in the U.S. It's not really in Canada." That's what I was told. And my English was not good at all.

In 2003 I went to Douglas College to study English as a Second Language and I had an instructor who said that her daughter was studying midwifery at UBC. I got so excited when I heard this. My instructor taught me how to search the internet for UBC and it was very difficult to find out the location or any program information

with my level of English. But I did it, I found [UBC Midwifery](#) and I got to ask them how I could study midwifery.

They told me I'd have to study and take more courses — doula courses, anatomy, etc., — and that the program is very competitive. And I thought to myself, well, I'll try. And I did. I took my English courses and I started anatomy. They also told me I had to volunteer with a midwife at a midwifery practice so I could really see what being a midwife was like.

I found a practice on the North Shore with Vera Berard ([Midwifery Care North Shore](#)) and she accepted me to be a volunteer in her office and then I registered for [Doula Training at Douglas College](#).

I took anatomy courses, and the next semester I took Women's Studies. I found Women's Studies so difficult with my level of English. I remember after each class I would sit in my car crying and drive home thinking, "I'm crazy. I don't understand why I am doing this, because it is all so difficult."

Towards the end of the course I started to get the idea of what the instructor was talking about. And I became really interested when the course was almost over.

But I enjoyed it and I passed but not with a very good grade. And then I applied to [UBC Midwifery](#). I got a call that they actually wanted to interview me. I was so excited. At that time I was also pregnant with my second child and I became a client at Vera's office.

They told me they wanted to interview me but I did not meet the English requirement and asked if there was anything I could do about that. But I couldn't because there just wasn't enough time before I had to submit it.

I was so upset that I couldn't get into the program.

Then everybody told me, "You're crazy, look at your English, it's UBC, you have to compete against Canadians, and you're not good enough. Try to find something else, you have a family here."

Financially it was a very difficult time. To be new immigrants to the country, studying, and having a child and trying so hard to get accepted at UBC.

MABC: And doing all that volunteer work!



From left to right: Vera Berard, RM, Jazmin Nagi (Zahra's office assistant) & Zahra.

ZK: Yes, and being pregnant.

MABC: Wow, that's dedication.

ZK: I continued and I also decided that if I couldn't be a midwife I would be a maternity nurse and work in labour and delivery rooms; that was the closest thing to midwifery.

And I applied to nursing school. I got in and again I studied a bit of nursing and thought, "Oh, no, this is not what I want to do, this is different." So, I decided I'm going to reapply to [UBC Midwifery](#).

This time I didn't even get a call for an interview. I felt that I should give up on the idea of becoming a midwife; it is way too competitive and I needed to take care of my family, I told myself.

I also heard that after you graduate from the program you can't work in the Lower Mainland. You have to go to other places because there are no privileges at the hospital. That made it so difficult for me, thinking I would have to leave the Lower Mainland. My family was so upset they said that they would not come with me.

I just decided well, okay, I'm going to finish nursing. I finished nursing and I still felt like, no, I wanted to become a midwife. I saw one of the North Shore midwives who I knew since she was a midwifery student (Brangwynne Purcell). I spoke with her and told her how I still wanted to become a midwife even though I was working as a nurse. She asked me why I didn't apply again? She told me she was working on the North Shore and the privileges restriction had been lifted. I kind of felt like, "I want to try again."

I came back home and told my husband that I was again wanting to try to go to midwifery school and my husband was like, "Oh my god, you want to go back to school again?"

After the conversation I felt bad because he was right, I had been a student forever. We went to sleep and my husband woke up in the morning and he was putting on his clothes and he said, "Okay, you have wanted to apply to midwifery school forever, you're going to do that." And I said, "Really?" And he said, "Yes, do it because I know you are not going to give up and you are always going to say you wanted to do this and I didn't let you do it, etc..." And I said, "Okay!"

I re-applied and felt very happy. I was still so worried about the

interview but when I went for the interview, I found I enjoyed it. I came out feeling happy and energetic and like, "I've got this!"

When I was filling out the application online it felt more like I knew what I was talking about. It was a change for me, and I kind of thought that I was going to get in; and I did!

MABC: What a journey!

ZK: It was a very long process. It was a very long journey. I felt like I was called to the profession, a true feeling for me.

When I was applying for midwifery school I already had a job and was able to provide for my family. I really wanted to come to midwifery only if I could be a good midwife and only if I could make a difference. I found there are lots of mothers in this country who do not speak English as their first language and that there is not much work done in this area of midwifery.

When I was in midwifery school there was always talk about rural midwifery and how midwifery is

looked at is often by white Caucasian middle class educated mothers who can advocate for themselves. They are the mainstream of midwifery clients.

I always felt that if this was the case, then midwifery was only for a certain group and that this was not a very good option. I felt like midwifery should apply to many other people and that I thought my job in the field would be to address the immigrant population because I've been there myself and I could compare my experience of giving birth in Turkey to giving birth in Canada.

My second labour and birth took a lot longer than my first, which usually goes the other way around.

Your first one is a lot longer; your second one is the fast one.

Even though the birth with my second child was longer and harder and my son needed to be fully resuscitated after birth, I actually came out of the room not as scared of giving birth because I was

looked after so well by Vera Berard and my doula Claire Macdonald. Being a midwifery client and



Zahra and her husband Amir, her son Parham (older) and her son Arad (younger).

working with Vera Berard it was really a confirmation for me that I should go and pursue my dream to become a midwife. I'll always thank Vera Berard and I tell her she really made a difference in my decision. She is an incredible midwife.

MABC: Can you describe the clients you are serving right now?

ZK: I am serving, of course, people from my own country (Iran) because I speak their language (Farsi) and I also speak Dari, which is a dialect of Farsi, and people from Afghanistan speak that language. I take care of people from Afghanistan and I also have clients who speak Arabic. I don't really speak Arabic but I understand it and I can say words. I can't complete sentences

and sometimes I don't really understand.

But because I come from a Muslim background these mothers really feel a strong connection to me. I think mothers tell each other their experiences and clients refer their friends and family to me. I think one of the most important reasons they approach me is that they know I understand what kind of things are important to them culturally.

I also have Chinese, Portuguese, Brazilian, Mexican and Korean clients as well as mothers from Iraq, Syria, Sudan and Eritrea and of course Caucasian clients. My clients are so diverse; they are a reflection of the population that

lives in Vancouver.

I feel very privileged and happy to be involved in the care of newcomers because I feel like I am able to connect with my clients and get a lot of love and respect from them.

Sometimes it is hard and very time consuming and I have to spend a lot of extra time with my clients especially when I have to ask

someone to translate and make sure clients understand what I'm talking about and how midwifery works, etc. Usually refugees have a complex social history which makes it even harder. My hope is that I can make a difference for these mothers.

And it feels like these mothers are very happy in my care and this makes me very happy.



Zahra and her clients Celina, Shuai, and baby Jasper.

MABC: Cultural and religious connections are so important in providing good care.

ZK: Exactly. I do understand their culture. I end up volunteering a lot of my time and it can be very tiring.

For example, I had a client who was a refugee and she came from Toronto. She was given a permanent resident status and had the Ontario Health Services Plan (OHIP); but, not MSP as it takes 3 months for MSP to be active when you move to BC from another province.

OHIP does not pay BC midwives, so I cared for this mother for free because she could not speak one word of English and she was illiterate in her own language. She really wanted a care provider who could speak her language.

And it was a very complex situation; she couldn't come for her appointments because she was very new and did not know how to

use the public transit services, so I visited her at her house.

Because I come from a Muslim background these mothers really feel a strong connection to me. I think mothers tell each other their experiences and clients refer their friends and family to me. I think one of the most important reasons they approach me is that they know I understand what kind of things are important to them culturally.

I provided midwifery care for free because I feel like we owe it to the society that we live in. to give back. I know she could have gotten care by doctors and that the doctors would have been paid but this mother needed a lot of extra help.

MABC: It must be so difficult when it feels that if you're not going to care for some complex clients then they might not get the

care they need.

ZK: Sometimes it's hard because I have other clients I have to leave.

MABC: What ways are you being supported? Do you have a practice partner?

ZK: I really need a practice partner. I just opened up [Burnaby Midwifery Care](#) and I am hoping to find another midwife to join the practice. I'm waiting for the time when privileges become available.

When I was looking for a space I

made sure the place that I rented was really close to public transit. That was one of my main priorities.

MABC: When you do seek a practice partner would you look for someone who speaks Farsi as well?

ZK: Not necessarily. It could be a partner that also speaks other languages. It's just that I feel there is a need for someone who feels comfortable working with newcomer clients.

It is very difficult at the time of birth to have translators because of schedules and times that they can be booked. That makes it difficult for mothers who speak different languages.

Usually they have to reach out for a friend or another option, like me or a nurse or a care provider, who speaks their language.

MABC: With the newcomer populations you are serving, do you feel they are fairly aware of what midwifery in Canada is?

ZK: No, definitely not. I think some people don't understand why they would go to a midwife when they can go to a doctor or to a specialist who 'knows more'. A doctor or obstetrician seems like a better option to some people.

And there are others who are

absolutely thrilled to find out there is midwifery available. It's really mixed and there are a lot of myths as well.

MABC: Are clients mainly finding you by word of mouth?

ZK: Yes, and it is also through [Burnaby Family Life](#) and the [BC Association Pregnancy Outreach Program \(BCAPOP\)](#). As well as [Immigration Services Society \(ISS\)](#) and [MOSAIC \(Multi-lingual Orientation Service Association for Immigrant Communities\)](#) workers who send these clients to me.

The ISS workers at MOSAIC in Burnaby have been very nice to me and selected me to be interviewed by BCAPOP because they really liked the service that I provided to their clients as a midwife. I was interviewed by BCAPOP and elected to be a panel member for cultural birth practices. It was a fantastic opportunity to share my experience as a midwife.

Most of these clients think that routine care is what they should follow and that is what feels culturally appropriate for them because they believe the care provider knows better. However, my hope is to get them involved in their care and help them understand what what other options are offered to them.

MABC: There must be so much change for pregnant people who have just arrived, welcoming a new baby and adapting to life here.

ZK: Yes, and the financial and many other challenges. My clients usually already have kids, it's really hard to take care of toddlers when you are pregnant and to adjust to the new atmosphere.

MABC: Do you find your clients are being supported in other parts of their lives in their introduction to Canada?

ZK: In some parts yes and in other ways no. I think more translation

services would help. It feels unfair that doctors and nurse practitioners can access translators outside of hospital and midwives cannot.

I used to go to a place called MO-SAIC where newcomer and refugee families go because it provides childcare for kids while mothers learn ESL. Because midwives do not have translators available to us in clinic and I had to go to this location to see a mother. I had to carry my own equipment for the appointment. There is no couch to ask the mothers to lie down, so it is very hard.



Ahmad Zeividavi, the director of [House of Omeed](#), and his wife Dina Sabiri with Zahra and her husband Amir Hassani.



I saw one client there and after that 4 more clients came to me. It is very difficult for these mothers to commute; they already have 2 or 3 kids, they don't have a car, they don't have somebody to take care of their kids. I find that commute is a big barrier for this clients to access midwifery care because they can't find their way around, so to make it easier for them I went to this location to see them.

MABC: And do you still go there?

ZK: I don't have a client at that location right now but I actually go see those clients at their own homes. It is really not easy and it is not helpful because there is no translator.

MABC: And you probably can't bring all the correct equipment, etc.

ZK: Exactly. The person who helps translate at that location is not allowed to translate for those clients at home. That is the policy of the place, to translate for the clients who are there.

I had to find my friends to volunteer through the church to get translation over the phone to be able to look after these people.

I'd like to say a big thanks to Ahmad Zeividavi the director of [House of Omeed](#) which is a resource center sponsored by a church that provides help to newcomers and refugees. They let me use their space and also provided translation help to me for free. Many thanks to Dina Sabiri who gave her time to us for free many times for translation.

MABC: That's a lot of extra work when you already have a full client load and a family.

ZK: I feel that we have to work on getting more translation help. There are some people who would like to help as volunteers; and we have to work out a way to utilize their help. But I believe this is a short term solution to the problem.

MABC: Would you say that the majority of your clients are newcomers and immigrants right now?

ZK: On average about 1/3 to 1/2. It keeps changing. Right now half of my clients are newcomers.

MABC: How does your husband feel about your career now?

ZK: My husband is a great support-

er of what I am doing and I always thank him. Without his help, I could never be where I am right now.

MABC: Could I get your thoughts on any ways you feel that midwifery education or the midwifery profession could be doing a better job at serving newcomers and refugees and supporting midwives who do?

ZK: Something I feel they could do is to bring more diverse students into the program and also to consider that things are different for people who are coming from a different culture or background and give them more opportunities.

The instructors are very helpful with sharing what they know but we could do a better job to include women of colour from all different ethnicities and backgrounds so we could make midwifery grow in many ways, and not just in certain ways.

First generation immigrants' lives are so complicated and hard here. You leave everything back home and come here to start from scratch. It is very interesting that when you are filling out applications to come to Canada they ask about your education and your work experience. When I filled out

the application I thought: oh, wow! To come to Canada my education and work experience means something and that's why they're asking about it. And then you come here and find out that it means nothing.

MABC: Do you think the English requirement is too stringent?

ZK: No, the midwife has to communicate with other members of the health care team. The English requirement isn't what is killing me. What kills me is how difficult life is for the immigrant student. Yes, the English as a Second Language courses are another level of hardship and it is not easy to learn another language as an adult.

MABC: Midwifery is a very demanding profession as is, let alone when you're serving a population who face a lot of complex barriers. Do you have strategies to keep yourself well and supported?

ZK: Yes, I have colleagues in the community who are very lovely and supportive and I go to them to talk as well as to ask for help to cover when I feel like I need some time to myself. They are very helpful and I am very appreciative of them.

BC Midwife of the Month is a monthly profile series presented by the Midwives Association of BC. This series honours practicing midwives for their extraordinary contributions to current issues facing the profession and serves to introduce the public to a broad spectrum of midwives working in BC.

