



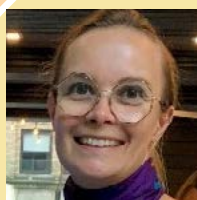
CAM'S 2022 ANNUAL REPORT



CAM ACSF

Midwives for everyone, everywhere
Des sages-femmes pour tous, partout

PRESIDENT'S MESSAGE



Dear CAM and NCIM members,

For midwives in Canada and globally it was a year of gains and losses, all in the context of climate change and an

ongoing pandemic. Globally, we face a shortage of almost 1 million midwives by 2030, and a shortfall of 9000 here in Canada. While female-identified people make up most of the healthcare workforce, we are all too aware that we are grossly underrepresented in senior leadership roles. We have seen midwifery in the Yukon and Newfoundland regulated and then paused. These painful expansions and retractions are necessary resets on a long and arduous journey to bring CAM's intended impact of equitable access to excellent sexual, reproductive, and newborn midwifery services for all, into reality. In the face of losses have been simultaneous wins, including scope optimization to allow midwives to provide medical abortion in Quebec, the upholding of the Human Rights Tribunal of Ontario decision in favour of AOM, and the re-launch of the Manitoba midwifery program. These struggles and triumphs have informed our focus on Professional Association Strengthening.

Here at CAM, we have spent 2022 working on structural alignment of governance and policies with CAM values of equity, integrity, respect, and responsibility. We have held multiple focus groups with members and engaged internal and external stakeholders on optimal networking frameworks, and your priorities for shaping the future governance of our organization, with a focus on increased and equitable opportunity for participation. We have been working with provincial and territorial associations in Canada and globally to refine our framework for Professional Association Strengthening in partnership with Dr Kristy Bourret and Dr Cristina Mattison.

With the Public Health Agency of Canada, we focused on Promoting Excellence in clinical practice through delivery of continuing professional development offerings on Recognizing and Responding to Family Violence and Midwifery Immunization Communication. We have also offered anti-racism workshops. We delivered our second Knovember Virtual Learning Services.

In the realm of advocacy, we have been working with Tiffany Ford group on government relations pushing to hold the liberals to their election platform which promised to expand the federal student loan forgiveness program to midwives. We have also collaborated with ICM and PUSH for Midwives to increase investment in midwifery associations worldwide.

I want to thank you all for persevering through many trials and tribulations, for showing up for your communities and digging that bit deeper to grow and further our profession, to invest in the next generation of humans and midwives, and for engaging with CAM, NCIM, SMAC and your various provincial and territorial associations and regulatory bodies.

Alixandra Bacon, RM
President, Canadian Association of Midwives
Pronouns: she/her/hers

I acknowledge my place of work is within the ancestral, traditional and unceded territory of the x^wməθkwəy̓əm (Musqueam), Skwxwú7mesh (Squamish), and Tsleil-waututh Nations .



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CAM'S THEORY OF CHANGE

The Canadian Association of Midwives launched a new Theory of Change for 2021-2025, replacing our previous strategic plan. This outcome-focused vision for our work is centered on our desired ultimate impact: equitable access to excellent sexual, reproductive, and newborn midwifery services for everyone.

To achieve this, we have established 3 pillars: Advocacy, Association Strengthening and Promote Excellence. We've also updated our organizational values. Equity, Responsibility, Respect, and Integrity are now the values that guide our decision-making processes.

Ultimate Impact

Equitable access to excellent sexual, reproductive & newborn midwifery services for everyone.



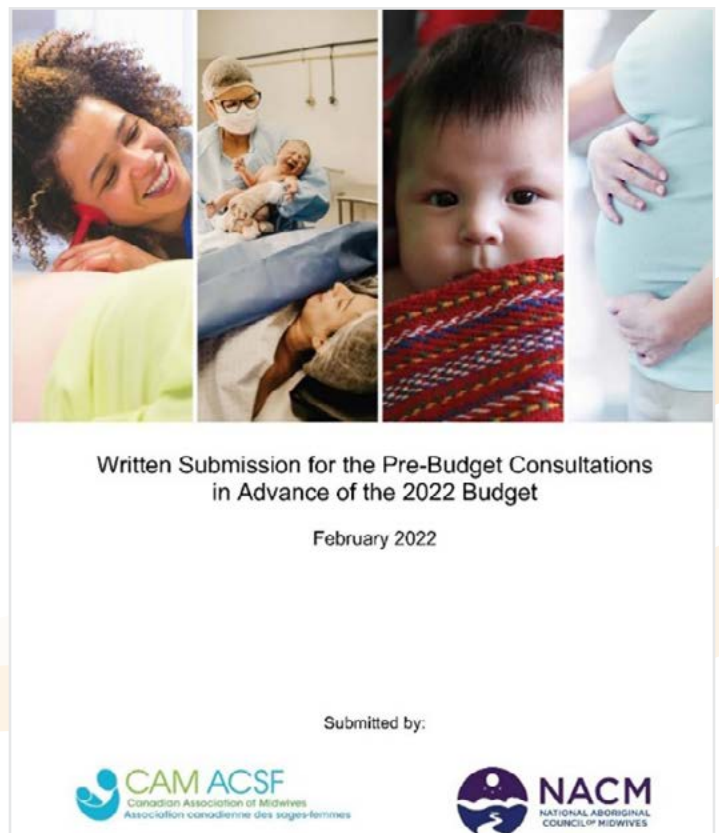
PILLAR 1: ADVOCACY

Advocate in partnership with the National Council of Indigenous Midwives (NACM) and other midwifery associations to relevant governments for policy changes and funding to advance Indigenous midwifery; the growth, diversity, and accessibility of midwifery throughout Canada; and continued investments to strengthen midwifery globally.

CAM & NCIM Participate in Federal Budget Consultations

In the run up to the announcement of the 2022-23 Federal Budget, CAM and NCIM submitted pre-budget recommendations to the Finance department which highlighted the need for investments in:

- Sustainable, community-owned, Indigenous midwifery primary health care and education sites.
- An additional five-year investment in the National Council of Indigenous Midwives to support Indigenous communities establishing Indigenous midwifery.
- Including midwives in Canada's Student Loan Forgiveness Program for Doctors and Nurses.



United Nations General Assembly and ICM Events

In the Fall of 2022, CAM President and Executive Director attended ICM events and the PUSH for Midwives Campaign Launch at the United Nations General Assembly.



International Day of the Midwife 2022

Member of Parliament Marc G. Serré stood in the House of Commons on May 5, 2022, and delivered a statement recognizing the work of NACM & CAM and the important contribution of midwives and Indigenous midwives to our public health care system.

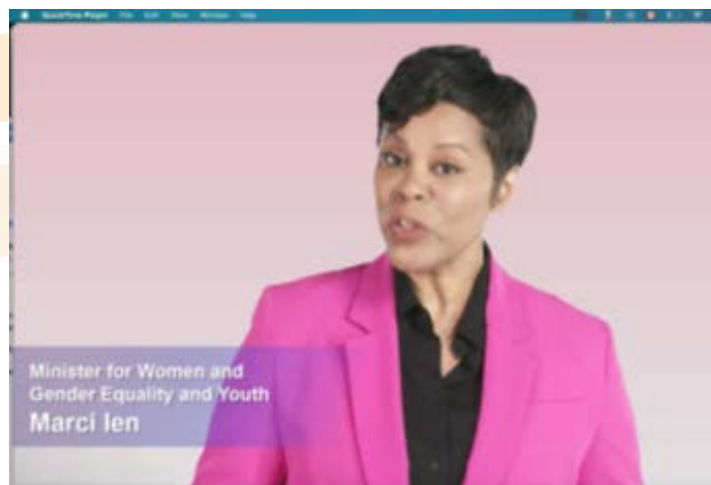
Watch the video: <http://ow.ly/YQ8S50J0CEQ>



PILLAR 1: ADVOCACY

CAM National Conference 2022

The Honourable Jean-Yves Duclos, Minister of Health & the Honourable Marci Ien, Minister of Women and Gender Equality and Youth both delivered messages to CAM & NCIM members and conference delegates during November 2022.



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Advocating for Federal Investments in Midwifery and Sexual & Reproductive Health at Home and Globally

Throughout the year, midwifery leaders met with high level politicians, political staff, and national stakeholders to advance Canada's commitments to Indigenous midwifery, to addressing anti-Indigenous Racism in health care, to increase investments in sexual and reproductive health and rights in Canada and to strengthen midwifery globally.



Visit of the Honourable Jean-Yves Duclos, Minister of Health to the offices of the Canadian Association of Midwives for a meeting with CAM and NCIM in November 2022.

PILLAR 2

ASSOCIATION STRENGTHENING

Strengthen Associations to develop robust internal structures, organizational effectiveness, anti-oppressive frameworks, and financial capacity to lead RMNCH/SRHR programming and advocate for the profession.

Midwifery Association Strengthening Research - Building the Evidence

The first phase of midwifery association strengthening research (MITACS 1.0) completed in 2020 demonstrated that investing in midwifery associations can improve gender equity and overall access to sexual and reproductive health and rights of women and girls.

In 2021, CAM partnered again with McMaster University and researchers Dr. Kirsty Bourret and Dr. Cristina Mattison for a second phase of midwifery association strengthening research (MITACS 2.0). This research aims to explore the appropriateness and responsiveness of the original framework in multiple country contexts including Somalia/Somaliland and Haiti and Canada.

Three (3) case studies were selected for study: the Association of Midwives of Newfoundland & Labrador, the Midwives Association of Alberta, and the Association of Nova Scotia Midwives. In the second phase of midwifery association strengthening research (Mitacs 2.0), researchers Drs Kirsty Bourret (midwife) and Cristina Mattison worked in close collaboration with CAM and midwifery associations in Canada (Alberta, Nova Scotia and Newfoundland and Labrador),

Puntland (state in Somalia) and Democratic Republic of Congo.

As a result, they were able to further evolve the framework to develop observable and measurable methods of building capacity within midwifery associations. The process included building research capacity within associations and with midwifery students in Alberta who collected and analyzed the data in their region.



Midwifery Association Capacity Building Survey

In 2022, the results of the national midwifery association capacity building survey demonstrated that most associations have a unique set of priority areas to build in technical and organizational capacity.

CAM identified that most provincial and territorial midwifery associations in Canada have very low capacity in most areas of organizational and technical capacity (9 of 11 associations surveyed). The following top six areas of capacity were identified as priorities for associations: Communications, Financial Management, Funding, Strategic Advocacy, Networks & Leadership.

The need for an online platform to support associations to increase capacity in these priority areas was identified. The proposed website “The Exchange” to be launched in 2023, will serve as a hub of information, training and resources for midwifery association staff and midwives who are actively building their association. The site will strengthen networks and promote the exchange of knowledge between midwifery associations.

National Framework to Address Quality Assurance and Lack of Access to Emergency Skills Instructor Certification

CAM extended its consultation process to assess the needs of NCIM (formally NACM), CAM Global and CAM leadership in relation to the roll-out a Learning Management System (LMS). The LMS will enable CAM and NCIM to house and provide quality professional development courses and trainings for members in addition to enabling midwifery associations to better manage emergency skills programming for their members and instructor certification. It is expected CAM will secure funding and finalize procurement of the LMS in 2023.



theexchange.canadianmidwives.org

canadianmidwives.org

PILLAR 3

PROMOTING EXCELLENCE

Promote Excellence in midwifery practice, reproductive justice, and anti-oppressive approaches to health care by providing resources and learning opportunities through clinical knowledge translation and global health programming.

CAM Conference Knovember: November 1-3, 2022

Again in 2022, CAM held the annual conference Knovember virtually. With over 400 participants this conference was a great success of knowledge sharing and networking. With 10 live sessions, recorded sessions available to attendees throughout the wholeentire month of November, opportunities for midwives to network and an inspiring keynote address from Jenny Joseph, a Time Woman of the Year, the conference was again a great success.

Through our platform, Pheedloop, participants were able to connect with sponsors and exhibitors, continue conversations with speakers and colleagues from across the country.

- **428** attendees
- **10** exhibitors
- **3** sponsors
- **93** speakers
- Survey responses:
good-**excellent**
- **47** sessions
(live and recorded)



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Midwives for 4 (full series COVID-19 vaccination)

CAM's Midwives for 4 project funded by the Public Health Agency of Canada, aimed to expand access to, and uptake of, COVID-19 booster shots, with a specific focus on pregnant people and marginalized communities.

The project's objectives included:

1. **Build the capacity of midwives as vaccinators**
2. **Support community based COVID-19 education, promotion, and outreach**
3. **Build the capacity for evidence-based vaccination communication**

This project established a community of practice (COP) and micro-contribution program engaging midwives, midwifery associations, and midwifery clinics. Through the COP, nine microgrant recipients had an opportunity to network and start building community. They shared their challenges such as bureaucratic and legal hurdles, liability concerns and the impact of the lack of knowledge on the role of midwives in vaccination. The COP offered a space to initiate dialogue and investigate how clinics can better collaborate advocacy efforts and achieve consistency in applying policies.

Micro-Contribution Program

This was CAM's first micro-contribution program and proved to be a successful approach to build internal strength within participating organizations. For example, funding allowed Midwives Association of Northwest Territories, Regroupement les sages-femmes du Québec and the Prince Edward Island Midwives Association to focus on developing essential infrastructural components such as a website or resource page, branding and visuals, surveying tools or

translation of resources for increased public engagement. As part of the project activities, the Association of Ontario Midwives was able to develop key messages for government with strong health equity arguments to remove barriers to midwives to provide a wider range of vaccinations among other communication activities.

Participating midwifery clinics were able to procure the essential equipment and establish protocols required to provide vaccination for their clients (Community Midwives of Ottawa, East Ottawa Midwives) or re-engage with local partners to discuss directives (Community Access Midwifery Program, Guelph, ON).

Through the project, midwives took safe and trauma informed approaches to promote and administer vaccines. For example, Waasegiizhig Nanaandawe'iyewigamig Health Center (WNHAC) in Kenora, ON, developed culturally safe materials and will be distributing them to the twelve communities they serve, hosting gatherings for their community members to discuss their experiences and questions regarding vaccination, and administering vaccines where people feel most safe getting them (ie. home or in office). Other culturally safe outreach practices used by (Ottawa South Midwives) included attending mosques to build connections and trust with the groups without a family doctor and initiating conversations in the language of clients first choice about vaccines in a culturally safe way.

**THIS DYNAMIC AND
ENGAGING NEW MEDIA
IS THE FIRST OF ITS
KIND FOR MIDWIVES IN
CANADA.**

A Podcast

A podcast focusing on COVID-19, vaccination and midwives as vaccinators was created. Midwives have long expressed a need for information in audio format. This was CAM's first podcast and an opportunity to use audio as a means of delivering information to our members. Interviews were recorded with midwives, researchers, an Indigenous Elder and clinics providing innovative solutions during the pandemic. **This dynamic and engaging new media for CAM is the first of its kind for midwives in Canada.**

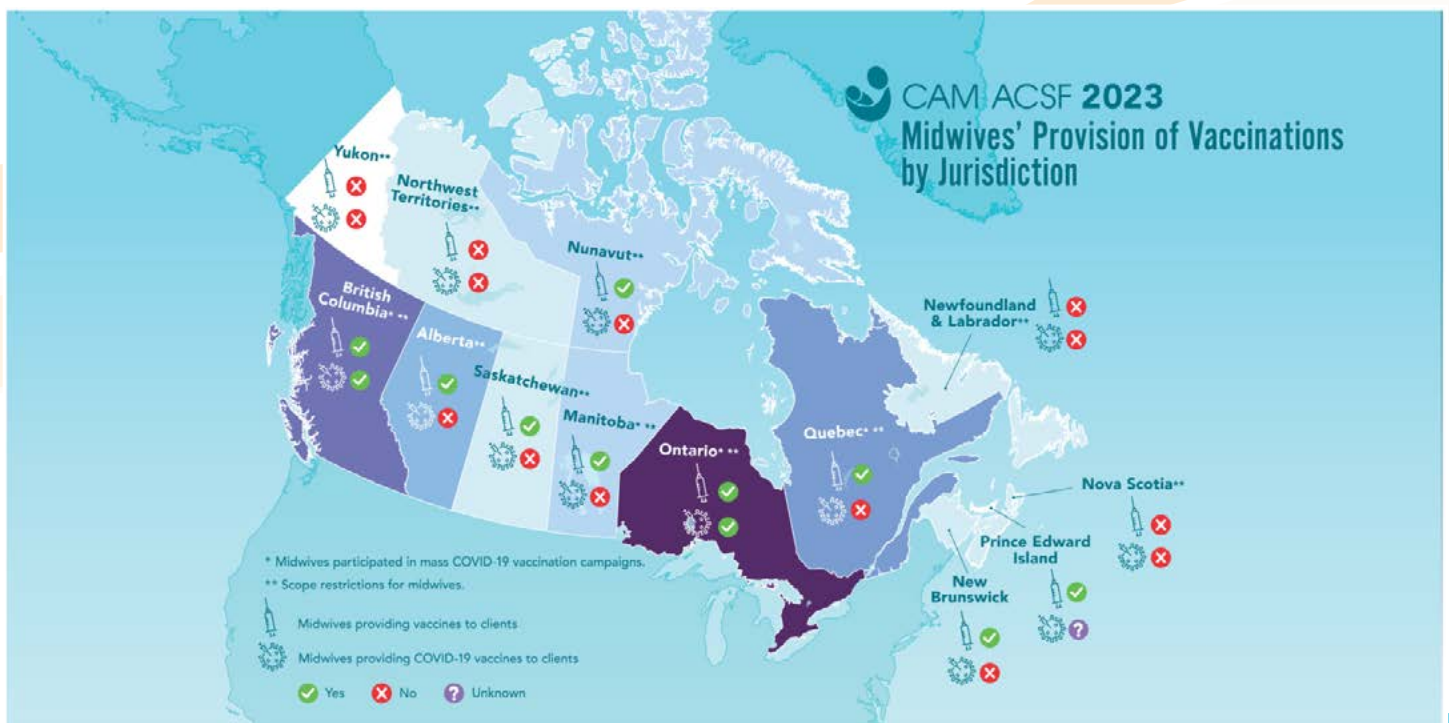
Evidence Synthesis

CAM also developed an evidence synthesis to understand the barriers and facilitators to the implementation and integration of midwives as vaccine providers in health systems in Canada. The findings were informed by three main sources of evidence, which included 23 relevant peer-reviewed articles, 39 key informant interviews with health systems' stakeholders across Canada, and a review of publicly available

vaccines
We can talk about it.

resources. The synthesis serves as an evidence-based tool for health professionals, midwifery associations, and health system decision makers to understand the current state of midwives' provision of vaccines across Canada and to also inform future vaccine-related healthcare decisions based on the best available evidence.

The Midwives for 4 project created a space for the public and midwives to interact and to position midwives within the health system as a trusted source for informed decision-making.



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Midwives Recognize & Respond to Family Violence

Midwives Recognize & Respond to Family Violence

The Canadian Association of Midwives (CAM) and the National Council of Indigenous Midwives (NCIM) are partnering with McMaster University on a project to build the capacity of midwives to recognize and respond safely to family violence. The three-year project centres around the development of teaching materials, continuing education trainings, and practical resources. Through this program, we aim to reach thousands of midwives and their clients, with the potential of reaching up to 18,000 people per year. The project is funded by the Public Health Agency of Canada. Below are our principal activities for 2022.

Addressing Family Violence in Perinatal Care

This undergraduate curriculum, developed by the project partner McMaster Midwifery Education Program, aims to guide and educate students to address the needs of people impacted by family violence. Scenarios and learning activities encourage reflection and are a starting point for learning. The richness of the workshop is in the small group discussions and in building student understanding of their roles and the roles of others caring for people experiencing trauma and family violence in the perinatal period.

This year, 18 midwifery students participated in the undergraduate two-day workshop at McMaster University. Student feedback described the importance of course content and activities that promoted skill development in working with vulnerable populations and people who experience violence. Participants appreciated the practical scenarios and how they highlighted the multiple factors impacting any situation.

Addressing Family Violence in Clinical Care – a workshop series

An adapted version of the McMaster MEP curriculum, this discussion-based training series aims to teach midwives how to address the needs of people impacted by intimate partner violence (IPV) and recognize how IPV intersects with the larger systems of power, oppression, and structural violence.

This year, 41 practicing midwives and midwifery students participated in the online workshop series and the half-day workshops in Toronto and Vancouver.

As a result of these workshops, participants said they will integrate a health equity lens into their clinical practice and will aim to connect with more local organizations. Others said they will strive to help people without involving potentially harmful healthcare or social service systems. Still, others

said they will now assume all clients have had some experience involving violence. With this perspective shift, their goal will be to provide care in a safe environment where trust can be built over time and where clients can feel safe to talk when they feel ready. Others appreciated the resources and practical tips provided.

Indigenous Midwives Recognize & Respond to Family Violence – a series of discussion circles

Developed by NCIM, this four-part series of discussion circles was delivered online through storytelling and learning activities. Participants discussed resilience, strengths and protective factors of Indigenous communities; culturally



safe, trauma-informed and aware care, as well as strengthening ancestral and intergenerational circles of love and care. Twelve Indigenous Midwives and Indigenous midwifery students participated in these circles.

As a result of these discussion circles, participants learned that connection with people experiencing violence is an avenue to healing; the relationship-building piece is the key to transformation and

change. Others noted they learned the importance of modeling clear boundaries for clients and not creating pressure for expected outcomes. Participants appreciated the opportunity for collective learning in a culturally safe space.

Avoiding Harm: Pregnancy, Family Violence and Trauma-Informed Care

This panel discussion broke the taboo of pregnancy and family violence and discussed best practices in trauma-informed care, including Indigenous-led approaches, culturally aware care, and community engagement.

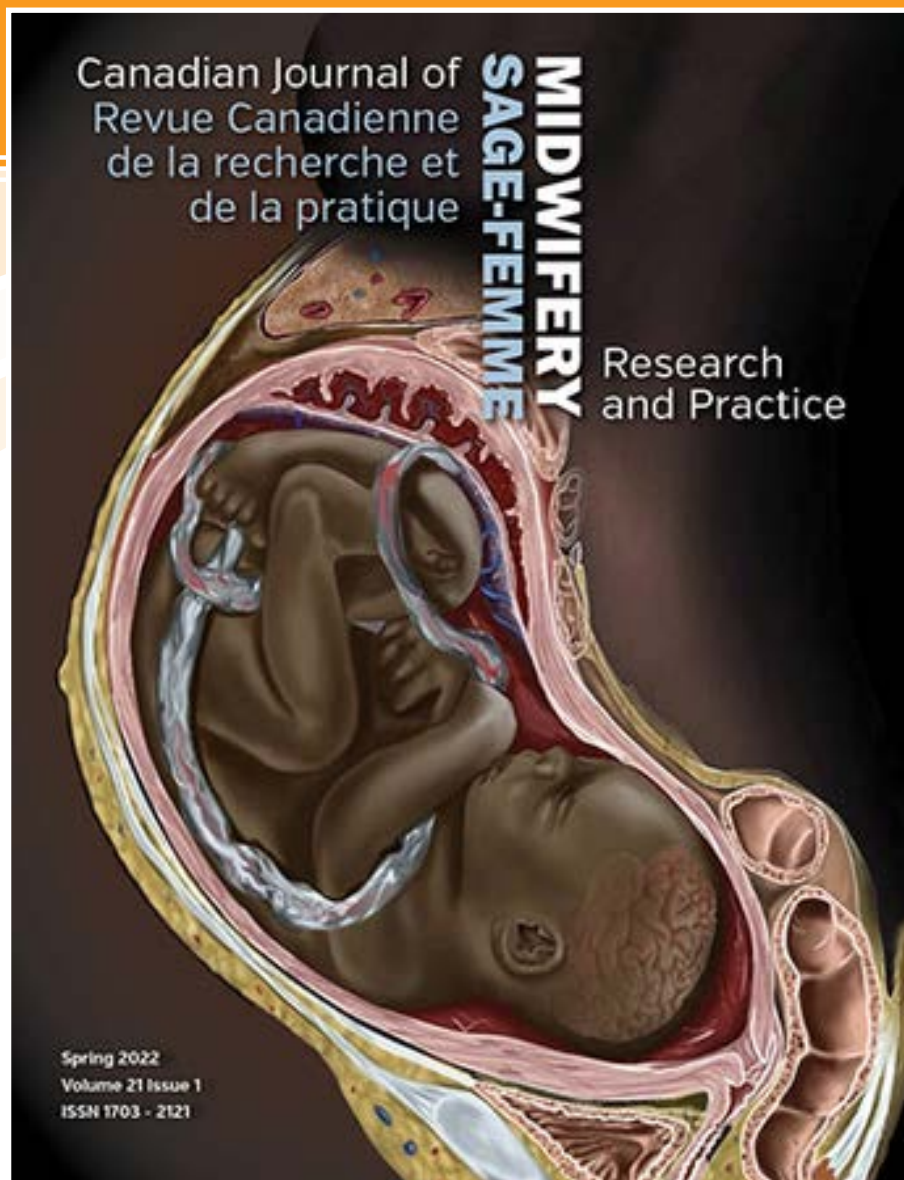
The following midwives and intimate partner violence experts presented their knowledge and perspectives to CAM's annual conference participants:

- Bounmy Inthavong, Registered Midwife, St Jacobs Midwives/Association of Ontario Midwives
- Esther Enyolu, Executive Director, Women's Multicultural Resource & Counselling Centre of Durham (WMRCC)
- Jacqueline Benn John, Executive Director, Women's Support Network of York Region
- Stephanie George, Indigenous Midwife, Lactation Consultant, Indigenous Health Instructor



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CAM continues to publish Canada's only
midwifery research publication:
The Canadian Journal of Midwifery
Research and Practice (CJMRP)



GLOBAL

The Canadian Association of Midwives (CAM) believes that midwives play a unique and fundamental role in the provision of quality reproductive, maternal, and newborn health care – both in Canada, and internationally.

Since 2008, the CAM has been working through partnerships with other national midwifery associations to deliver reciprocal capacity building and project development initiatives. In 2022, the CAM led SMART RMC completed its first year, PASSREL its second year of five, SMEPS began year four of five, and SMSII came to its official conclusion.

CAM Global is excited to announce that two new projects - In Venezuela and Tanzania, are set to begin in 2023.

HAITI: Projet d'appui à la sante sexuelle et reproductive égalitaire (PASSEREL)

Launched in April 2021, the Supporting Equal Sexual and Reproductive Health (SESRH) Project, funded by Global Affairs Canada (MAC) and implemented by the Fondation Paul Gérin-Lajoie, the Canadian Association of Midwives (CAM) and the Society of Obstetricians and Gynaecologists of Canada (SOGC) The ultimate goal of the project is to improve the sexual and reproductive health and rights (SRHR) of 55,346 citizens (40,755 adolescents/women and 14,591 adolescents/men) in the municipality of Croix-des-Bouquets.

PASSREL experienced many challenges in 2022 due to ongoing security concerns in the country. This included kidnapping, gang violence, vandalism. Despite these challenges, the midwives continued their efforts to provide safe and respectful care for their clients.

Highlights

- ASFH organized its first conference in May 2022 (May 4-5). It was a semi-virtual hybrid event and saw over **150 STAKEHOLDERS** in attendance.
- ASFH organized an **ADVOCACY EVENT** to sensitize the public and stakeholders to the role of midwives in providing care to victims of gender-based violence. (<https://youtu.be/oplqfNniuv0>)
- **48 MIDWIVES AND TRAINERS RECEIVED RESPECTFUL MATERNITY CARE** training in targeted health centers located in the Commune



SOMALIA & SOMALILAND: Strengthening Midwifery Education and Practice in Somalia & Somaliland (SMEPS)

SMEPS (2020-2024) aims to reduce maternal mortality by addressing the critical shortage of skilled midwives through enhancement of midwifery education and practice, regulation, and association strengthening. The project works in Somalia, Puntland and Somaliland.

Overall, the project consists of:

- Improving midwifery education by strengthening clinical skills, knowledge, and practice of pre-and in-service midwives.
- Promoting community advocacy by positively influencing gender equality norms concerning GBV, SRHR, consent and access to health care.
- Improving the ability of the MoH to manage and regulate midwifery education and practice, recognizing midwives' associations' technical expertise in the profession.

SMEPS is a United Nations Population Fund (UNFPA)-led collaboration between: Canadian Association of Midwives (CAM), the Somali Midwifery Association (SOMA), the Somaliland Nurses and Midwifery Association (SLNMA) and the Puntland Association of Midwives (PAM). It is supported by the Government of Canada through Global Affairs Canada.

Highlights

- In Fall 2022, Cathy Ellis from the University of British Columbia travelled to Somalia and Somaliland to **ORIENTATE AND TRAIN 50 TUTORS, PRINCIPALS, AND INSTRUCTORS** on the newly revised three-year midwifery

diploma curriculum, led by Ellis. This work will contribute to the development of a skilled midwifery workforce to provide quality and respectful care to women and newborns.

- Over 20 midwives from Somali Midwifery Association, Somaliland Nursing and Midwifery Association, and Puntland Association of Midwives participated in a **PEER-TO-PEER EXCHANGE** with midwives from Tanzanian Midwives Association (TAMA), Alix Bacon (CAM President 2021-23), and Midwifery Technical Expert Moya Crangle. The Peer-to- Peer offers new opportunities for personal and professional growth, and association strengthening.
- **A WORKSHOP ON THE FOUNDATIONS OF MIDWIFERY** regulations was held in Mogadishu, Somalia. The workshop was attended by representatives from federal ministries, National Health Professional Council, and the Somali Midwifery Association. A post-test was administered to the 28 participants at the end of the two-day workshop, and the highest score was 89%. This marked a significant increase from the pre-test's highest score of 42%. Moreover, 20 out of 28 participants scored above 70% on the post-test.



GLOBAL

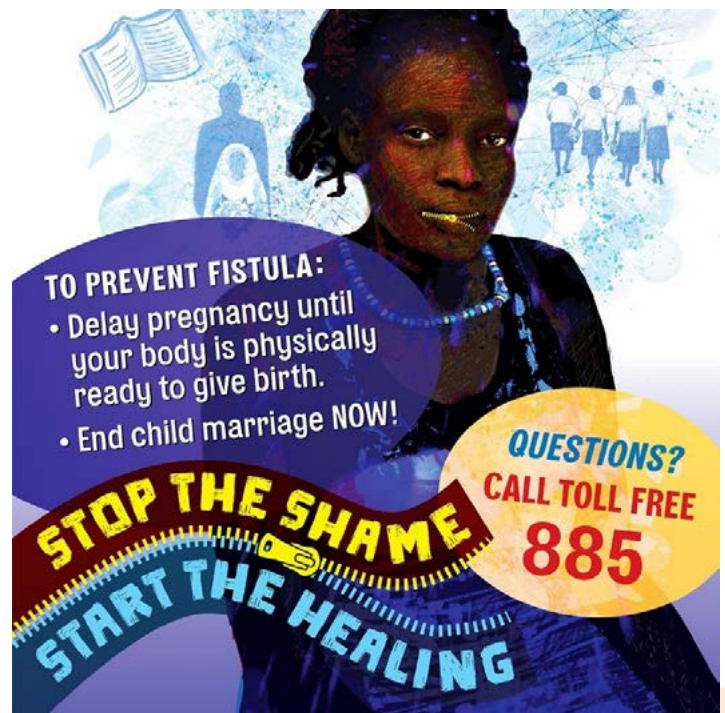
SOUTH SUDAN: Strengthening Midwifery Services in South Sudan Phase 2 (SMSII)

The SMS II project was extended for one additional year (2016-22)

SMSII aimed to increase the availability of skilled health care providers, especially midwives, in order to reduce maternal and infant mortality in South Sudan. SMSII is a collaboration between CAM and the South Sudan Nurses and Midwives Association (SSNAMA) to improve health outcomes and gender equality across the country through midwifery education and association strengthening. SMSII was a UNFPA-led project supported by the South Sudan Ministry of Health and funded by the governments of Canada and Sweden. In 2022, the focus was on providing information about Sexual and Reproductive Health and Rights (SRHR) to over 6M people.

Highlights

- **STOP THE SHAME, Start the Healing** Fistula Education, Prevention and Treatment campaign featured five short radio dramas, radio talk shows, billboards, and public health messaging materials to support the public “health education booths” held in schools, markets and public spaces all over South Sudan led by the South Sudan Nurses and Midwives Association. Hotlines received an 80% increase in phone calls with over 100+ women received life altering surgeries performed during 2022 and hundreds more registered for surgeries in 2023.



- **THINK** campaign featured over 60 PSAs in English and Arabic, radio talk shows, billboards and posters across South Sudan calling attention to the 5 priorities of the South Sudan Ministry of Health including preventing maternal deaths, HIV infection, ending Gender Based Violence & Child Marriage and increasing uptake of Family Planning.



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- **Zone 72 talk show continued into its fourth season on EYE Radio.** The youth 4 Youth talk show features young people and expert guests in discussion with callers about important issues facing youth in South Sudan. It has an estimated 20k weekly listeners and an additional 2k on Facebook live. The show airs every Saturday 4-5pm on EYERadio!



- **The youth focused SRHR website zone72.org was validated by the Ministry of Health and launched in 2022.**



Planning Has Begun

VENEZUELA

Planning work began on the three-year (2023-26) Zulia Health Project, led by UNFPA Venezuela with financial support from Global Affairs Canada.

This project aims to improve maternal, newborn, and reproductive health outcomes for women, girls and newborns from marginalized populations, in particular indigenous communities, living in the Sierra Machiques de Perijà and Maracaibo (state of Zulia), through quality respectful care. CAM and NCIM are technical partners on the project, the first time that the two organizations have collaborated internationally.

GLOBAL

CONGO & SOUTH SUDAN: SMART-RMC

Through the provision of gender-responsive, quality health care by a well-trained midwifery workforce, the SMART-RMC project aims to contribute to the reduction of maternal deaths in both the DRC and South Sudan. This CAM-led 3-year project, supported by Global Affairs Canada, is implemented in close collaboration with the Société Congolaise de la pratique Sage-Femme (SCOSAF) and the South Sudan Nurses and Midwives Association (SSNAMA).

Key project activities are grounded in Respectful Maternity Care (RMC), and focus on improving clinical services through:

- Training health care providers in evidence-based innovations using a gender-responsive rights-based approach, couple with quality improvement initiatives in targeted health facilities.
- Increasing women's and communities' awareness of their SRHR to access health services.
- Strengthening the capacity of midwifery associations to deliver gender-responsive programming and SRHR advocacy.

Highlights

- The project was officially launched in 2022 in Kinshasa and Juba, **in front of over 140 delegates representing respective Ministries of Health, Implementing Partners, community leaders and other key stakeholders.**

- In 2022, **196 midwives and nurses were trained on Respectful Maternity Care** (185 in the DRC and 11 in South Sudan) via in-person workshops held throughout the year.
- **565 community members were reached with RMC information and midwifery services** (FP, ANC, cervical and breast cancer screening, and comprehensive abortion care) through a series of mobile clinics and a community campaign in the DRC. Of the 565 people reached, 472 were women of reproductive age.
- Various talk shows and discussions about RMC and Sexual and Reproductive Health and Rights were held on local and provincial radio stations in the DRC throughout 2022. **Over 5000 community members, of which 1050 pregnant women, were reached with RMC and SRHR information** through this channel.



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NCIM

NATIONAL COUNCIL of INDIGENOUS MIDWIVES

Community Engagement

NCIM's most remarkable success in 2022 for community engagement was the 3-day Restoring Indigenous Midwifery and Birth virtual forum. Nearly 700 participants from a diverse array of backgrounds represented nearly every province and territory, and included rural, northern, remote, and urban communities, plus several states. Sessions were very well attended and covered topics such as midwifery education, flexible models of care that meet the needs of Indigenous communities, successes, inspiring remarks by Elder midwife Katsi Cook and opening and closing prayers from Elder midwife Darlene Birch.

We also heard presentations on the three Indigenous midwifery demonstration sites which have been funded by the federal government. We continue to provide direct support to the three sites which are now at the stage of hiring midwives and developing local midwifery capacity through NCIM's Indigenous Midwifery Education Initiative.

During the peak of the pandemic, we adjusted our community engagement strategy to develop resources that could be used by communities and Nations anytime, autonomously and at their own pace. We remain available to advise and provide support to advance Indigenous midwifery, while simultaneously working to provide

Uproot

A half-day virtual symposium
to understand and remove the
colonial barriers to restoring
Indigenous midwifery
and birth.

Feb 28,
2023

12-4pm
EST

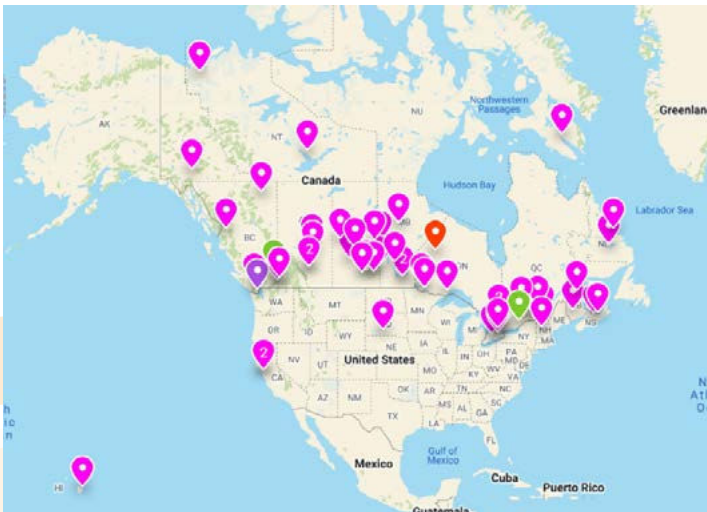
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date

@NACMidwives  **NACIM**
NATIONAL ABORIGINAL
COUNCIL OF MIDWIVES

communities and Nations the tools and resources to advance their work without requiring our direct involvement. In 2022 we started to develop two online knowledge hubs, one which will contain resources and tools to create and activate an advocacy strategy, and the other which will contain resources for starting a midwifery practice. Both resources are expected to be active by 2024. While we are directing more focus towards in-person meetings this year, creating engaging and accessible resources will remain a top priority.

During 2022 NCIM also supported Nova Scotia Native Women's Association to hire an Indigenous midwife as part of their ongoing work on Decolonizing Birth in Mi'kmaw'ki. This work included thirteen community visits to share about Indigenous midwifery and hear community visions of restoring birth with the intention to lay a foundation for further strategic work.

Map of forum participants



Advocacy: Federal Investment in Indigenous Midwifery

NCIM is advocating for a significantly higher investment in Indigenous midwifery from the Federal Government. To achieve this, in 2022 NCIM developed four policy briefings and launched a national survey, to build a solid base of evidence and information for decision-makers to frame the positive cultural and clinical impacts of Indigenous Midwifery.

Key issues in the briefings and survey include the role of Indigenous midwives in public health, the need to invest in Indigenous midwifery through an Indigenous-led human health resource strategy, recognition of Indigenous midwifery in federal jurisdictions, the protective and healing work of Indigenous midwifery in the context of ongoing violence experienced by Indigenous communities, including forced and coerced sterilization, and missing and murdered Indigenous women, girls, and 2SQ+ folks. The briefings and survey results will be used to advance NCIM's key policy goals throughout 2023.

NCIM leadership continues to co-chair the Federal inter-departmental committee on Indigenous Women's Health and Well-being to provide integral feedback for policy advancement.



NCIM
NATIONAL COUNCIL of
INDIGENOUS MIDWIVES

Addressing Anti-Indigenous Racism

Since the death of Joyce Echaquan, the Federal Government has been holding quarterly national meetings with Indigenous partners, provinces, and territories to engage stakeholders in the implementation of actions to address anti-Indigenous racism in the Canadian health care system.

We continue to participate in the Department of Indigenous Services Canada's Advisory Circle for Anti-Indigenous Racism in Healthcare to ensure Indigenous sexual and reproductive care are at the forefront of health care transformation. We do this alongside the Indigenous Physicians Association of Canada, the Canadian Indigenous Nurses Association, National Friendship Centers, and Health Excellence Canada, just to name a few. We are happy to share significant progress from 2022 on actioning transformation in midwifery education and ensuring relevant resources are available in addressing anti-racism!

- Hosted an **Anti-Racism Sharing Circle** for Indigenous Student Midwives in December 2022.
- Began developing an **Evaluation Framework** to determine Midwifery Education Program progress towards addressing anti-Indigenous racism.
- Developed **resources for Lifegivers and Caregivers when facing AIR in the workplace**, education, and healthcare (to be released in late 2023).

- Supported a **webinar on health care professionals and SRHR advocacy** that was co-designed by PHAC and Action Canada to highlight Sexual and Reproductive Health Awareness week 2022. <https://www.actioncanadashr.org/news/2022-01-31-advocacy-action-healthcare-providers-are-essential>
- Facilitated the NCIM **Anti-Indigenous Racism working group** to inform our overall strategy for addressing anti-Indigenous racism.



IME 2022 Achievements

2022 was a year of consolidation for the IME program, with many delays faced during the pandemic, which hindered implementation of activities.

During the implementation year, NCIM engaged diverse stakeholders through advocacy conferences and meetings through the anti-Indigenous racism activities to address racism in the health and education systems including the midwifery education programs. These campaigns and meetings have since become conversation starters on racial behaviors and acts happening in the health and education sectors, and how it impacts Indigenous health care workers, students, patient/client care and ultimately their health seeking behaviors.

The first phase (Topic one) of the introductions to Indigenous midwifery course was developed and delivered to fifteen (15) students from six (6) communities. Alongside this course, the students also attended an in-person land-based gathering that emphasized the learnings and teachings that took place in this course, including Indigenous medicines and ceremonies associated with pregnancy and childbirth.

The project on-boarded nine (9) additional learners from three (3) communities into the existing cohort. One of these communities is new to the cohort, although they have peripherally participated in selected activities of the project. The project also conducted a visioning meeting with the Indigenous midwifery education committee, to discuss strategic vision of the project beyond 2023.

Among other things, the delegates discussed:

- **IME framework and how it translates to time, achievement, and progression for students**
- **Funding options beyond 2023 Johnson and Johnson funding**
- **End of project evaluation**
- **Community support on MNCH services – as it relates to some communities who are struggling to maintain basic MNCH services due to various challenges**
- **Community engagement and participation for sustainability**

The program also initiated a strategic partnership with Athabasca University for the provision of health science courses to the IME students. The University committed to offering science courses to IME students without requiring any pre-requisites. They also provide subsidized tuition for students who enroll into their course through their respective bands.

The Mentorship Lead conducted community visits to all communities in the cohort between the months of October and January, to provide technical support to students and community leaders on their path to establishing a midwifery program in their communities.

The program also initiated a partnership with the Association of Ontario Midwives (AOM) to support IME activities for Ontario communities through education and community MNCH strengthening.



CAM ACSF

Midwives for everyone, everywhere
Des sages-femmes pour tous, partout

Since 2001, the Canadian Association of Midwives (CAM) and the National Council of Indigenous Midwives (NCIM) have promoted the vital role of midwives in sexual, reproductive, and newborn health. We work across all levels, driving change in legislation and funding, strengthening regional associations, and supporting midwives directly with tools and learning opportunities.

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NCIM
NATIONAL COUNCIL of
INDIGENOUS MIDWIVES

The National Council of Indigenous Midwives (NCIM) exists to promote excellence in reproductive health care for Inuit, First Nations, and Métis women.

We advocate for the restoration of midwifery education, the provision of midwifery services, and choice of birthplace for all Indigenous communities consistent with the U.N. Declaration on the Rights of Indigenous Peoples. As active members of the Canadian Association of Midwives, we represent the professional development and practice needs of Indigenous midwives to the responsible health authorities in Canada and the global community.

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