

CANADIAN ASSOCIATION OF MIDWIVES

NATIONAL COUNCIL OF INDIGENOUS MIDWIVES

# ANNUAL REPORT

# 2025



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



**NCIM**  
NATIONAL COUNCIL of  
INDIGENOUS MIDWIVES

# PRESIDENT'S MESSAGE

## Canadian Association of Midwives – 2025 Annual Report

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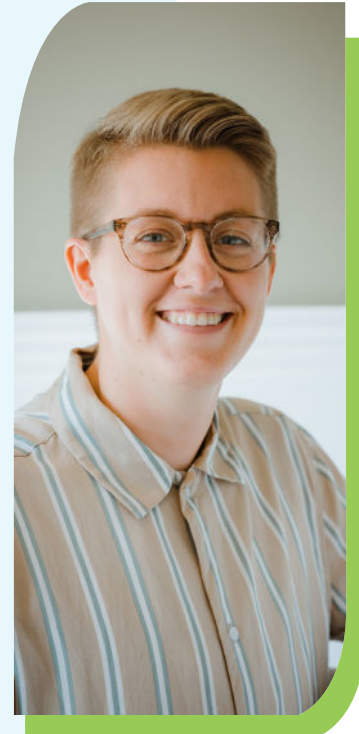
This past year has been one of real progress and hard clarity for the Canadian Association of Midwives (CAM) about what midwifery needs next. Across the country and internationally, I have had the privilege of meeting midwives where they live and work, seeing firsthand both the strength of our profession and the pressures it continues to face.

In Prince Edward Island, I visited midwives in their clinic space, where decades of advocacy have created the conditions for them to thrive and serve their communities. On May 5th, International Day of the Midwife, I stood in Fort Smith, Northwest Territories, surrounded by midwives and community members who have fought to keep birth in their community against all odds. These experiences reflect the reality of midwifery in Canada: resilient, essential, and too often under-supported.

This year, we implemented one of the most significant changes in CAM's history: following the adoption of new bylaws, we successfully implemented our governance reform, welcoming a new Board of Directors at our in-person conference in Calgary. Immediately following, the Board spent two and a half days developing our new Theory of Change. We named what many already know: midwifery is facing a workforce crisis. But we also identified the conditions required for a thriving future, one where midwives are fully integrated into health systems, supported in their practice, and recognized for the value they bring.

Our national conference in Calgary reflected this same energy, bringing midwives together to learn, reconnect, challenge ideas, and build collective momentum for the future of our profession.

I had the opportunity to travel to Québec to celebrate 30 years of the Regroupement Les sages-femmes du Québec, a powerful reminder of what sustained advocacy can achieve. Later in the year, I traveled to Australia to keynote their national conference and meet with midwifery leaders. What stood out most was not our differences, but our shared challenges and shared vision: a global midwifery workforce that is valued, supported, and positioned as essential to strong health systems.



This global perspective was further strengthened through the launch of CAM Global's new projects TRUST (Malawi and South Sudan) and SMILES (Somalia & Somaliland), expanding our contribution to international midwifery development and collaboration. At the same time, we continued to elevate our voice nationally. Our Executive Director's Op Ed in The Hill Times positioned CAM as a leader in advancing women's health globally, while our Climate Change and Sexual and Reproductive Health and Rights position statement reinforced our commitment to addressing the growing intersection between environmental change and health outcomes.



We also celebrated one year of CAM Learns—our national continuing education platform—bringing high-quality, accessible learning opportunities to midwives across the country and supporting excellence in practice.



This year showed real progress, but also how much still needs to change. We are building stronger structures, deepening relationships, and sharpening our voice. But the conditions midwives are working within must change if we are to realize our full potential.

CAM's path forward is clear. We will continue to advocate for a thriving midwifery workforce at the heart of stronger health systems—because when midwives are supported, communities are healthier, care is more accessible, and outcomes improve.



Thank you to every midwife, partner, and supporter who continues to do this work—often in challenging conditions, always with commitment and care.



In solidarity,

CJ Blennerhassett, RM, MHA, CHE

President, Canadian Association of Midwives

# CAM'S THEORY OF CHANGE (2021-2025)

2025 marked the final year of the Canadian Association of Midwives' most recent Theory of Change (2021-2025). Our work focused on advancing CAM's intended impact to ensure more equitable access to high quality sexual, reproductive, and newborn midwifery services in Canada and globally in partnership with midwifery associations, midwives, and relevant stakeholders.

CAM advanced this work by focusing efforts in three areas:

**Advocacy:** CAM, together with partners, works to influence policy changes and increase investments to integrate midwifery into health systems at various levels. These efforts focus on improving access to midwifery care, especially in underserved and Indigenous communities and by shifting perceptions and increasing knowledge of midwifery's role in sexual and reproductive health and rights (SRHR).

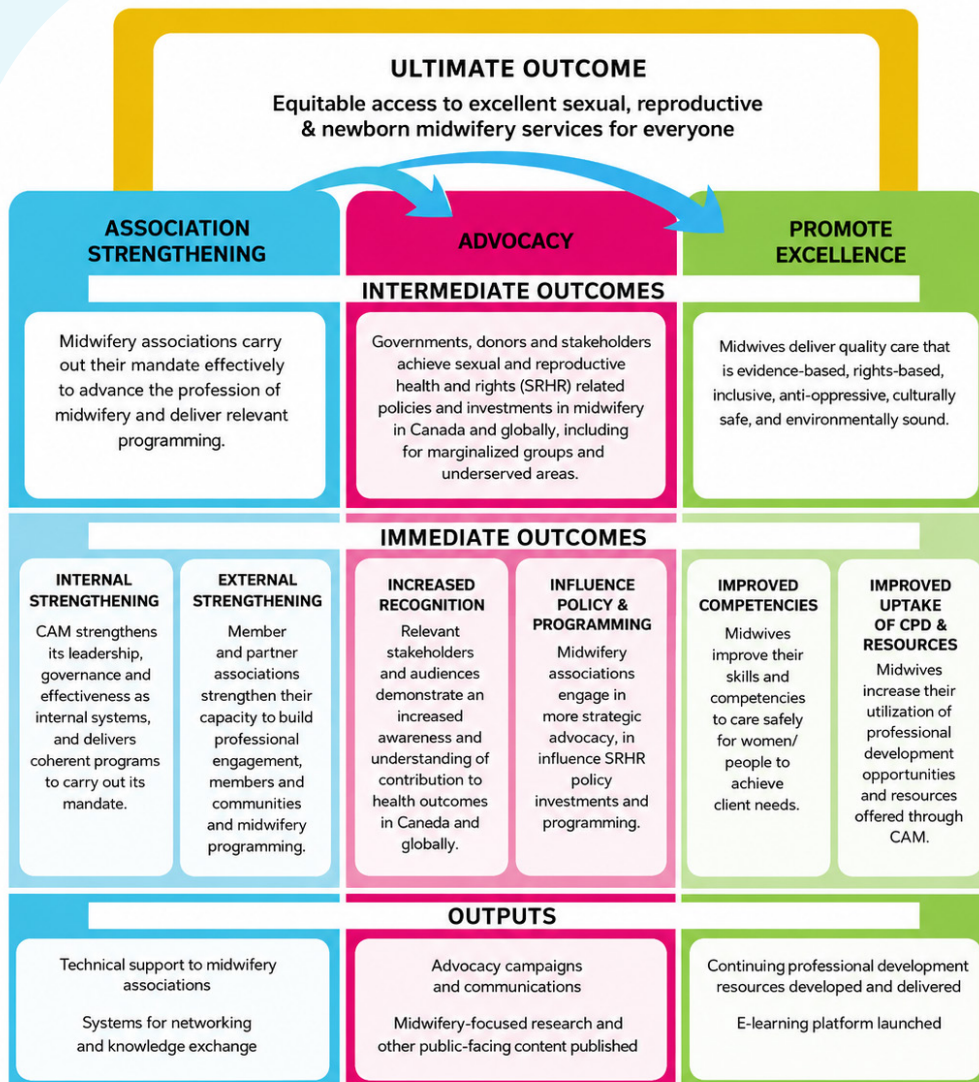
**Promote Excellence:** CAM aims to provide quality, continuing professional development content to help midwives deliver quality care that is evidence-based, rights-based, inclusive, anti-oppressive, culturally safe, and environmentally sound.

**Association Strengthening:** CAM partners with midwifery associations (provincial, territorial, national and global) for mutual capacity building and to ensure all associations, including CAM, can carry out their mandate effectively and deliver relevant programming.



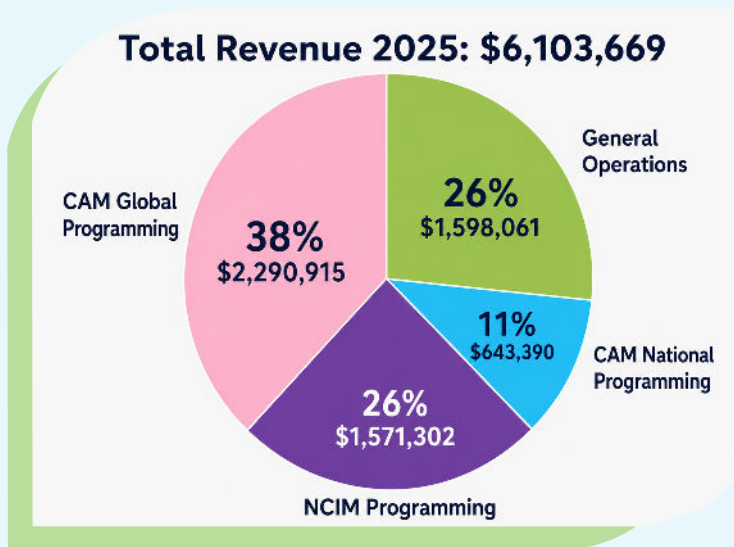
In November 2025, the newly formed CAM Board of Directors participated in a 3-day strategic planning session to review and update CAM's Theory of Change for 2026-2030. We look forward to launching the new version of CAM's Theory of Change in 2026.

## ORGANIZATIONAL LOGIC MODEL



# FINANCING OUR WORK IN 2025

CAM and NCIM work is supported mostly by publicly funded contribution agreements, grants and sponsorships. Membership fees represent a small portion of revenues and are dedicated to funding general operations, advocacy, government relations and governance.



## Total Revenue 2025: \$6,103,669

Breakdown of Total Revenue (General Operations and Program Funding)

**CAM Global Programming:**  
\$2,290,915 = 38%

**NCIM Programming:**  
\$1,571,302 = 26%

**CAM National Programming:**  
\$643,390 = 11%

**General Operations:**  
\$1,598,061 = 26%

## Donors who supported CAM and NCIM work in 2025 include:

- Health Canada, Sexual & Reproductive Health Fund
- Indigenous Services Canada (NCIM)
- Global Affairs Canada
- UNFPA (South Sudan, Tanzania, Venezuela, Country Programs)
- CARE
- McConnell Foundation (NCIM)
- McMaster & University of British Columbia (UBC)

**ASSOCIATION  
STRENGTHENING**



# ASSOCIATION STRENGTHENING

## GOVERNANCE REFORM COMPLETED

CAM's new governance model was officially approved by the membership, launched and implemented in 2025.

CAM hosted two Special Members Meetings (March 26 to adopt new bylaws and October 29 to adopt new Board of Directors slate) in addition to the Annual General Meeting in June when the newly formed Advisory Councils were presented to membership.

The newly formed Board of Directors met for the first time for a 3-day in-person strategic planning meeting in November 2025 in Calgary. In this new structure, the CAM Board of Directors will continue to hold fiduciary responsibility of the organization and remain responsible for governance and policy, financial oversight and Executive Director retention and recruitment. Three Advisory Councils will support the Board with strategy and oversight of our Global work, our Promote Excellence work and with member associations.

The Advisory Councils include:

- Midwifery Associations Advisory Council
- Clinical Excellence Advisory Council
- Global Program Advisory Council



As of October 29, 2025, the Board is made up of members of each Advisory Council plus four Strategic Agility positions (previously known as Executive positions): President, Vice President, Treasurer and NCIM co-Chair.

Three standing committees will support the work of the Board. They include:

- Governance & Recruitment Committee
- Finance, Audit & Risk Committee
- Strategic Agility Committee

## COLLABORATION WITH NATIONAL MIDWIFERY ORGANIZATIONS



National midwifery organizations including the Canadian Association of Midwives (CAM), the National Council of Indigenous Midwives (NCIM), the Canadian Alliance of Racialized Midwives (CARM), the Canadian Midwifery Regulators Council (CMRC), the Canadian Association for Midwifery Education (CAMEd) and the national midwifery Accreditation Council continue to host multilateral meetings several times per year to discuss issues of national concern and for information exchange.

This multilateral table ensures coordination of national efforts, avoids duplication of work and supports a united voice in advocacy spaces.

**ADVOCACY**



# ADVOCACY

## A Big Win for Midwives!

After announcing the inclusion of midwives in **Canada's Student Loan Forgiveness Program** in Budget 2024, amendments to the Canada Student Financial Assistance Act and the Canada Student Loans Act to permanently expand the reach of the program to include midwives was finally completed in December 2025.

**As of January 1, 2026, midwives are eligible to receive up to \$30,000 in Canada student loan forgiveness.**

How it works: if you have been working as a midwife for 12 consecutive months, if you worked in an eligible community (a rural area, or a population centre with no more than 30,000 people) and provided services for at least 400 consecutive hours, you may be eligible for up to \$30,000 in loan forgiveness for the outstanding balance of your federal student loan.

For more information and to learn how to apply, [click here](#).



## Call the Midwives!

For International Day of the Midwife 2025, CAM launched [Stories: Midwives in Action](#), a storytelling series highlighting the value of midwifery through real-world examples of care, leadership, and advocacy in Canada and globally.

The series showcased flexible, community-based models of care shaped by people's realities. In Fort McMurray, Ashlyn Doyle demonstrated how home visits and interprofessional collaboration can remove barriers to care. In Montreal, Emmanuelle Dennie-Filion highlighted a citizen-run clinic rooted in continuity and the social determinants of health. In an urban Indigenous youth setting, Nadine Morin showed how culturally grounded, trauma-informed outreach can build trust and improve access. In the Democratic Republic of Congo, Loti Kubuya Mielor's story underscored midwives' lifesaving role in civil unrest and crisis.

Also on May 5, CAM President CJ Blennerhassett and Heather Heinrichs appeared on CBC North to discuss and celebrate midwives in the North, with a particular focus on Fort Smith, where the community marked 20 years of regulated midwifery. Midwives are the primary birth providers in the community, and the anniversary recognized decades of advocacy, including the work of Lesley Paulette, a longtime champion for midwifery in the territory and recent appointee to the Order of Canada.



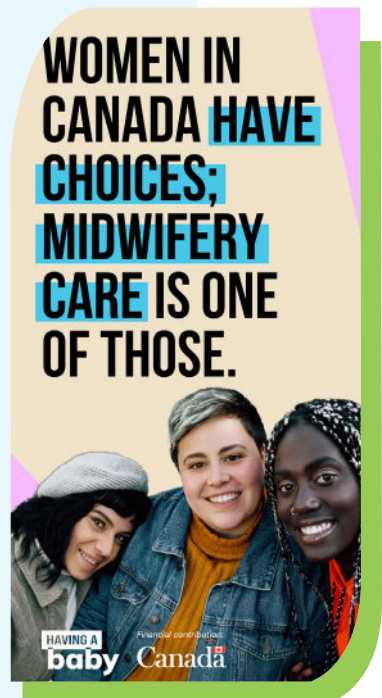
## Promoting Midwifery Campaign

CAM continued its national efforts to raise public awareness about the role of midwives in maternal, newborn, and reproductive health. Building on the first phase of the 2023–2024 Promoting Midwifery Campaign, this digital campaign used the established visual identity while refreshing the message around choice, access, and reproductive rights.

The creative approach contrasted growing restrictions on reproductive health care in several countries, with the range of choices protected here. It positioned midwifery care as an important option for pregnant people and highlighted midwives' role in supporting informed, respectful, rights-based care.

The campaign ran through Facebook and Instagram ads, as well as targeted website placements, reaching people of childbearing age in Ontario, British Columbia, Alberta, and Manitoba. It generated more than 9 million impressions and helped grow sign-ups for a future HavingABaby.co newsletter.

As part of the campaign CAM also held a photoshoot in Winnipeg to visibilize the work of Canadian midwives and in particular highlight the work of Indigenous and Black midwives.



**PROMOTING  
EXCELLENCE**



# CAM ENSEMBLE

“Opportunities to connect and get reinvigorated by practice. I loved the quality of the sessions/workshops. CAM was thought provoking!” -Conference attendee

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CAM Ensemble 2025 brought together midwives, students, researchers, partners, sponsors, and exhibitors from across Canada for three days of learning, connection, and a sense of “renewal” in Calgary. The conference demonstrated CAM Ensemble’s value as both a national gathering place for the profession and a platform for clinical learning, thought leadership, and community-building.

Attendee feedback showed strong satisfaction overall, with the program, workshops, plenaries, and conference environment emerging as the event’s greatest strengths. Participants especially valued networking, hands-on learning, diverse content, and opportunities to reconnect with colleagues and feel part of a supportive national midwifery community.

Overall, CAM Ensemble 2025 reinforced the conference’s role as an important national space for advancing midwifery practice, strengthening relationships, and supporting the profession.

## Key Highlights 2025

- Attendance grew to 347 total registrations in 2025.
- 86% of attendees rated the quality and variety of workshops as “very good” or “exceptional”.
- Over 30 Sponsors & Exhibitors participated in CAM Ensemble 2025.
- Clinical workshops were in high demand and at 100% capacity including Suturing, 2nd trimester POCUS and IUD Insertion.





# CAM LEARNS

In 2025, CAM Learns continued to build on its inaugural year by expanding its reach, diversifying and strengthening its course offerings, and increasing engagement across Canada and internationally. New courses on CAM Learns were launched at CAM Ensemble in November 2025, marking an important milestone in its visibility among midwives and partners. Over the course of the year, CAM Learns grew to over 700 learners, accounting for over 2000 course enrollments.

CAM Learns continues to expand its catalogue of self-directed learning, offering resources that range from short microlessons to in-depth, long-form courses. These bilingual offerings are designed to meet the diverse learning needs of midwives and other health professionals at various stages of their careers. Courses continue to be developed in collaboration with content experts, supporting high-quality and evidence-based learning experiences.



To learn more or to share your course ideas, contact: [admin@canadianmidwives.org](mailto:admin@canadianmidwives.org)

<https://camlearns.canadianmidwives.org/#/public-dashboard>

In 2025, CAM Learns secured funding from Health Canada to support the development of a new series of courses to support the sexual and reproductive health needs of underserved communities in Canada. This upcoming series will focus on abortion care, contraception counselling, gender-inclusive health care, and perinatal mental health.

In its second year, CAM Learns continued to lay the groundwork for sustained growth through course development, learner engagement, and strategic partnerships.

## List of new courses developed and launched in 2025 on CAM Learns:

Providing Inclusive Abortion Counselling and Care Using the CARE Approach

RSV Prevention in Practice

Providing Immunization to Clients and Their Infants

Introduction à l'interruption de grossesse – Concepts-clés et éléments pratiques

# INTRODUCTION TO ANTI-RACISM FOR MIDWIVES

and other Health Professionals



## L'ENTRETIEN MOTIVATIONNEL POUR LES SAGES-FEMMES

Comprendre et utiliser l'outil QVER

## PRE-DEPARTURE LOCUM TRAINING

for working in Inuit Communities



## RSV: IMMUNIZATION AND BEYOND

3 Microlessons for Midwives

# STRENGTH IN PRACTICE PODCAST

Launched in 2024, Strength in Practice continued to grow in 2025 as a trusted platform for conversations at the intersection of midwifery, sexual and reproductive health and rights, and health equity in Canada. Through discussions with frontline midwives, researchers, and advocates, the podcast explored issues shaping practice, policy, and public understanding.

The 2025 season showed strong audience interest in episodes that linked clinical practice to broader social, cultural, and systems-level questions. Topics such as gender, decolonization, misinformation and artificial intelligence resonated strongly with listeners, suggesting a growing appetite for values-driven, practice-relevant content.

## Project Partners:

Health Canada, BeSpoke Productions



Listen here:

<https://canadianmidwives.org/strength-in-practice-a-cam-podcast/>

## Key Highlights 2025

- Episodes released: **6**
- Total downloads: **1,382**
- Average downloads per episode: **230**
- Average retention over **62%**

## Episode downloads

- Midwifery Care Beyond the Gender Binary — **259**
- Decolonizing Health Care — **252**
- The Colour of Birth Project: Uncovering the Hidden History of Black Midwifery in Canada — **229**
- Vaccines, Pregnancy, and the Power of Listening — **224**
- Unmasking the Infodemic — **217**
- Artificial Intelligence (AI) in Midwifery: Birth, Bias, and Big Data — **201**

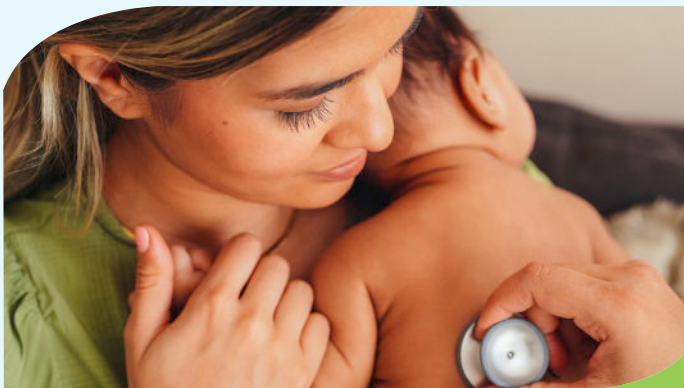
## Audience geography

- Canada **79.38%**
- United States **13.4%**
- Japan, UK, Netherlands **1.03%**

## CANADIAN JOURNAL OF MIDWIFERY RESEARCH AND PRACTICE (CJMRP)

In 2025, the Canadian Journal of Midwifery Research and Practice continued to grow as a specialized open-access publication, recording 78,000+ event clicks, 10,000 active users, and more than 6,900 abstract and article downloads. With active users up 25% from 2024 and 10 articles in the publication pipeline, the journal showed strong momentum, indicating that the journal is continuing to strengthen its reach, accessibility, and relevance within a specialized professional field.

- Nearly 79,000 event clicks suggest strong platform activity and solid discoverability, with users actively navigating and engaging with the journal site.
- 10,000 active users is a strong result for a specialized healthcare journal and suggests reach beyond CAM's core audience, with possible broader national and international visibility.
- 3,500 abstract views and downloads show that researchers and clinicians are finding, screening, and exploring relevant content.
- 3,453 full article downloads reflect deeper engagement and indicate that readers are meaningfully using the journal's published research.
- 10 articles in the publication pipeline point to healthy operational momentum, continued author interest, and strong publication continuity.



For more information visit

<https://www.cjmrp.com/index.php/cjmrp>

# VACCINATION & RSV

In 2025, CAM's RSV work combined published and in-development educational content to strengthen midwives' vaccine literacy and support informed conversations with clients and families. Alongside released content, CAM advanced a broader package of resources in development, including webinars, job aids, public-facing materials, and an animated educational video to expand access to evidence-informed RSV and immunization information.

## Project Partners:



## Key Highlights 2025

**CAM released a Strength in Practice podcast episode focused on vaccines, pregnancy, and the power of listening, helping frame immunization conversations as both clinical and relational.**

The episode supported reflective, evidence-informed practice by exploring how midwives can engage clients with trust, care, and clear information when discussing vaccination in pregnancy and infancy.

Distributed through CAM's podcast platform and website, the episode helped position midwives as trusted communicators on vaccine-related care.

Resources:

<https://canadianmidwives.org/vaccines/>

Ressources:

<https://canadianmidwives.org/fr/vaccination/>

## CART ACCESS PROJECT PHASE 3 (The Contraception Abortion Research Team)

The Contraception Abortion Research Team (CART) Access Project is a multi-year, multi-million-dollar initiative funded by Health Canada to advance more equitable access to abortion care for underserved populations across Canada. Phase 3 of CART began in December 2024 and brings together research, policy, clinical, and systems-level expertise from over a dozen national stakeholders to address persistent barriers to abortion access.

CAM's \$600,000 participation in the project focused on strengthening the midwifery dimension of this work. Over 2025, CAM developed training and knowledge-sharing resources to strengthen midwives' capacity and support more accessible, rights-based abortion care.

### Project Lead:

University of British Columbia

### Project Partners:

- Abortion Care Canada
- Action Canada for Sexual Health & Rights
- Canadian Alliance of Racialized Midwives (CARM)
- Canadian Association of Midwives (CAM)
- Canadian Midwifery Regulators Council (CMRC)
- National Council of Indigenous Midwives (NCIM)
- Canadian Association for Midwifery Education (CAMEd)
- Canadian Caucus of Queer and Trans Midwives (QTM)
- Contraception and Abortion Research Team (CART)

## Key Highlights 2025

**Training and education were the central focus of the year**, with major progress made in developing practical learning resources to support midwives in providing abortion care.

**A new bilingual micro-learning course was launched on CAM Learns in Fall 2025.** Developed jointly with the Canadian Midwifery Regulators Council (CMRC), the course provides accessible, focused training on abortion counselling for midwives across Canada. A French long-form course on key concepts in midwife-led abortion care was also released.

**A Lunch & Learn series on abortion care** with the National Council of Indigenous Midwives (NCIM) **was launched in September.**

**Additional resources were developed** to support the National Strategy for midwife-led abortion care, including a map of abortion provision by jurisdiction and an infographic highlighting the role of midwives in primary care, including sexual and reproductive health care.

Resources:

- <https://canadianmidwives.org/midwife-led-abortion-care/>
- <https://canadianmidwives.org/fr/interruption-de-grossesse/>

**CAM GLOBAL**



# CAM GLOBAL 2025

## 2025 marked a transition into a new phase for CAM Global.

Over the course of the year, three important projects came to a close:

- SMART-RMC (Respectful Maternity Care) in South Sudan and the Democratic Republic of Congo,
- Projet d'appui à la santé sexuelle et reproductive égalitaire (PASSREL) in Haiti,
- Strengthening Midwifery Education and Practice in Somalia/ Somaliland (SMEPS) project.

Each of these initiatives made meaningful contributions to strengthening the midwifery profession, supporting health systems, and improving outcomes for women, families, and communities.

At the same time, CAM Global launched a new generation of programming through two major initiatives: TRUST: Women's Voices, Midwifery Leadership for Resilient Health in Malawi and South Sudan, an \$8.5 million Global Affairs Canada-funded project led by CAM; and SMILES: Somali Midwives for Improving Lives and Enhancing Sexual and Reproductive Health in Somalia and Somaliland, led by CARE Canada with CAM as a key technical partner.

From a global health and humanitarian perspective, however, 2025 was also a deeply challenging year. Many of the countries where CAM works faced compounding crises, intensified by reductions in development assistance and humanitarian aid. Partners reported the effects of these shifts on essential health services, including midwifery care, as well as on the livelihoods of health workers. Inflation, economic instability, climate-related shocks, and ongoing conflict placed further strain on already fragile systems and vulnerable communities.

And yet, despite these pressures, midwives continued to provide critical care and support to their communities. CAM Global remains committed to standing with its partner associations, strengthening operational effectiveness, and advancing innovative approaches to service delivery, advocacy, and communications to help mobilize resources and deepen impact.

Find out more about CAM-Global  
<https://canadianmidwives.org/global/>

Pour en savoir plus sur CAM Global  
<https://canadianmidwives.org/fr/mondial/>



# Human Resources for Sexual and Reproductive Health and SGBV

CAM continued to support the UNFPA-led HR4 (Human Resources for Sexual and Reproductive Health and Rights and Gender-Based Violence) in South Sudan in 2025, strengthening partner advocacy capacity, public engagement, and coordination on sexual and reproductive health and rights. Through toolkits, workshops, media outputs, and technical support, CAM helped local partners expand outreach, strengthen advocacy, and support longer-term organizational and policy development.

## Project Partners:

Global Affairs Canada (GAC), United Nations, Population Fund (UNFPA), South Sudan Ministry of Health, South Sudan Nurses & Midwives Association (SSNAMA), National Council of Nurses and Midwives (NAMCOSS), Shabab le Shabab, Men4Women South Sudan



For more information visit [Human Resources for Sexual and Reproductive Health and SGBV](#)

Pour en savoir plus, visitez [Ressources humaines pour la santé et les droits sexuels et reproductif en Soudan de sud \(HR4-SRHR\)](#)

## Key Highlights 2025

**The Zone 72 radio program reached ~900,000 weekly listeners**, with 26 episodes aired and 10,000 average Facebook views per episode. Programming addressed key SRHR and social issues with inclusive features like sign language interpretation.

**More than 1,500 youth-friendly IEC booklets and posters** addressing myths and misconceptions were produced and disseminated across three themes: family planning, GBV, and HIV/STIs. All resources were also made available through an open-access IEC Hub.

**4 customized advocacy toolkits developed** (SSNAMA, Men4Women, Shabab le Shebab, AfriYAN), incl. advocacy strategies & reusable templates.

**1 national op-ed (“One Dollar, Two Lives”)** produced, integrating polling data and aligning with federal policy priorities.

**3 program sustainability workshops delivered** between April and September, reaching 90 participants total across government and partner organizations.

**Targeted technical assistance provided**, including M&E training and HR capacity building for SSNAMA staff.

# Supporting Equal Sexual and Reproductive Health (PASSREL)

PASSREL (Supporting Equal Sexual and Reproductive Health) was a \$6.5 million Global Affairs Canada-funded initiative implemented from 2021 to September 2025 by Fondation Paul Gérin-Lajoie, CAM, and SOGC to strengthen sexual and reproductive health and rights for 55,346 people in Croix-des-Bouquets, Haiti. Despite the ongoing conflict and instability in Haiti, midwives continued to provide care often at their own personal risk, to families.

## Project Partners:

Fondation Paul Gérin-Lajoie (FPGL), Association sage-femmes d'Haiti, Foundation for Reproductive Health and Family Education, Haitian Society of Obstetrics and Gynecology



For more information visit [Projet d'appui à la santé sexuelle et reproductive égalitaire \(PASSREL\)](#)

Pour en savoir plus, visitez [Projet d'appui à la santé sexuelle et reproductive égalitaire \(PASSREL\)](#)

## Key Highlights 2025

**PASSREL concluded in September 2025**, with the final phase focused on completing remaining activities, supporting sustainability, and preparing for project close-out with stakeholders and the Ministry of Health.

**ASFH (Association sage-femme d'Haiti) continued advocacy with health authorities** to promote the midwifery profession and support stronger recognition of midwives within Haiti's health system.

**Consortium partners advanced dialogue on respectful maternity care**, encouraging the integration of RMC principles into public health system standards.

**A local monitoring committee** was established in Croix-des-Bouquets, strengthening community-level accountability and local oversight.

**ASFH supported mobile clinics** organized by SHOG during summer 2025, helping raise awareness about cervical cancer and provide screening for precancerous lesions.

**These final activities helped sustain project gains** while reinforcing midwives' visibility, community engagement, and access to essential sexual and reproductive health services.

# SMART-RMC

The SMART-RMC Project was a Global Affairs Canada-funded initiative implemented from 2021 to 2025 by the Canadian Association of Midwives in partnership with midwifery associations in the Democratic Republic of Congo and South Sudan. Through rights-based, midwife-led approaches, the project strengthened respectful maternity care, improved women's experiences of care, and advanced sexual and reproductive health and rights.

SMART-RMC marked a turning point for CAM. For the first time, CAM served as the lead organization on an international project of this scale, moving beyond its previous role as a technical partner and opening the door to future initiatives such as the TRUST project launched in 2025.



## Project Partners:

Global Affairs Canada (GAC), South Sudan Nurses & Midwives Association (SSNAMA), Société Congolaise de la pratique Sage-Femme (SCOSAF)

This leadership role enabled CAM to exercise full strategic direction over project design and implementation, ensuring close alignment with its core values and theory of change. As a result, the project achieved strong outcomes, including the strengthening of partner midwifery associations SCOSAF and SSNAMA through a collaborative, respectful, and more human approach.

Significant improvements were also observed in targeted health facilities through quality improvement initiatives and in-service training, while community awareness activities contributed to increased public knowledge of sexual and reproductive health and rights.



## SMART-RMC HIGHLIGHTS

**The enabling environment for respectful maternity care was strengthened** in 40 targeted health facilities through improvements in infrastructure, protocols, and provider practices that support safe, dignified, and client-centred care.

**Midwives increased their knowledge, skills, and confidence** in delivering respectful, rights-based maternity care, helping to drive sustained improvements in provider practice and clinical interactions. Midwives demonstrated improved understanding of RMC principles and related clinical competencies (DRC: 5.2% to 96%; South Sudan: 11.5% to 70%.)

**Women's care experiences and use of maternity services improved significantly** over the course of the project, with major gains in positive care experiences and increased uptake in midwifery services. Positive care experiences increased markedly (DRC: 8.7% to 100%; South Sudan: 55% to 75.3%)

**Community awareness and engagement expanded** through sensitization activities, mobile outreach, and Ask the Midwife radio programming, reaching more than 30,000 community members directly; increased capacity of community members able to identify key RMC rights and services (DRC: 8.4% to 85.7%; South Sudan: 4.5% to 86.7% among women of reproductive age).

**Midwives and their associations helped catalyze grassroots advocacy and systems dialogue**, contributing to practical facility-level improvements and strengthening the visibility and influence of SCOSAF and SSNAMA in national policy and advocacy spaces.



# SMILES PROJECT ( Somali Midwives for Improving Lives and Enhancing Sexual and Reproductive Health )

The SMILES Project (**Somali Midwives for Improving Lives and Enhancing Sexual and Reproductive Health**) is a five-year, \$4 million initiative funded by Global Affairs Canada and led by CARE Canada, with CAM as technical partner alongside CARE Somalia, SOMA, PAM, and SLNMA. Building on SMEPS, SMILES strengthens midwifery education, leadership, and access to rights-based SRHR services across Somalia and Somaliland.

## Project Partners:

Global Affairs Canada (GAC), CARE Canada, CARE International Somalia, Somali Association of Midwives (SOMA), Puntland Association of Midwives (PAM), Somaliland Nursing and Midwifery Association (SLNMA)



For more information visit [Somali Midwives for Improving Lives and Enhancing Sexual and Reproductive Health \(SMILES\)](#)

Pour en savoir plus, visitez [Sages-femmes somaliennes pour l'amélioration des conditions de vie et la promotion de la santé sexuelle et reproductive](#)

## Key Highlights 2025

**Year 1 focused on laying the groundwork for implementation**, with partners preparing key activities to strengthen midwifery education and improve access to qualified, rights-based SRHR care.

**Preparations began for supportive supervision and gap training workshops** for tutors and clinical instructors from six targeted midwifery schools and associated clinical placement sites.

**A workshop was organized to support tutors in developing and upgrading standardized assessment tools** aligned with international standards.

**Midwifery associations received tailored organizational strengthening support**, including project management, finance, compliance, HR, and the early development of new strategic plans.

**Two student midwives and one midwife took part in volunteer placements**, contributing to literature reviews and delivering a workshop for Somali midwifery associations. **Linked goals:** Enhance professional development; Strengthen midwifery associations and government systems.

## Safe and Respectful Care in Venezuela/ Atención Segura Respetuosa (Zulia)

Funded by Global Affairs Canada, the three-year UNFPA-led project in Zulia, Venezuela had CAM often collaborating with NCIM to improve maternal, newborn, and reproductive health for Indigenous and other underserved communities by strengthening culturally appropriate care, community leadership, collaboration between health systems and Indigenous midwives, and awareness of health rights.

### Project Partners:

Global Affairs Canada (GAC), UNFPA (United Nations Population Fund), National Council of Indigenous Midwives (NCIM)



More information <https://canadianmidwives.org/global/zulia-project/>

Plus d'infos <https://canadianmidwives.org/fr/mondial/atencion-segura-respetuosa-projet-zulia/>

### Key Highlights 2025

**The first National Meeting of Indigenous Midwives of Venezuela was held in August**, convening 46 participants from five states and creating an important space to recognize Indigenous midwifery knowledge, strengthen leadership, and support national exchange.

**A regional gathering held in June brought together 53 participants** — including midwives, doctors, nurses, students, Indigenous leaders, and facilitators coming together to strengthen dialogue between traditional and institutional health systems and explore shared approaches to care.

**New intercultural tools and training materials were developed and distributed**, including 1,210 Wayuunaiki maternal health dictionaries as well as additional materials to support training replication, childbirth preparation, and service delivery.

**Further activities supported participation and practice at community level**, including passport support for four Indigenous midwives, a working group in Maracaibo to identify barriers to practice, and a community workshop in Toromo focused on sexual and reproductive health rights.

# SMEPS ( The Strengthening Midwifery Education and Practice in Somalia )

The Strengthening Midwifery Education and Practice in Somalia (SMEPS) project, a five-year initiative funded by Global Affairs Canada and led by UNFPA ended in 2025. In its final year, CAM, in collaboration with its partner associations; the Puntland Association of Midwives (PAM), the Somali Midwives Association (SOMA), and the Somaliland Nursing and Midwifery Association (SLNMA), implemented several key activities that contributed to strengthening midwifery education and advancing the profession across the region.

## Key Highlights 2025

**Official launch of the BARO app**, aimed at increasing knowledge of sexual and reproductive health among youth in Somalia and Somaliland.

**Engagement of 545 community members** through 54 community dialogues on safe motherhood and healthy practices during the childbearing year.

**Publication of an updated online repository** which serves as a companion resource to the updated three-year midwifery curriculum, available at <https://www.aqoontaumuliso.org/>

**Establishment of a supportive supervision steering committee** in Somaliland, which successfully conducted school visits and contributed to improving the quality of midwifery education.

**Completion of an endline evaluation of the three midwifery associations** using the International Confederation of Midwives' Member Association Capacity Assessment Tool (MACAT), demonstrating overall strengthened organizational capacity.

## Project Partners:

Global Affairs Canada (GAC), UNFPA (United Nations Population Fund), Somali Association of Midwives (SOMA), Puntland Association of Midwives (PAM), Somaliland Nursing and Midwifery Association (SLNMA)



## Strengthening Midwifery in Tanzania / Thamini Uzazi Salama (SMIT)

Led by UNFPA-Tanzania with implementing partners CAM and AMREF, the SMIT project (Thamini Uzazi Salama which means Value Safe Birth in Swahili) aims to reduce Tanzania's high rates of maternal and newborn mortality by increasing the availability of skilled midwives in the country via holistic, community-based approach. The 4M SMIT Project is funded by the Government of Canada through Global Affairs Canada over seven years (Dates: 2024-2031).

### Project Partners:

Global Affairs Canada (GAC), UNFPA (United Nations Population Fund), Tanzania Midwives Association



For more information please visit:  
[Strengthening Midwifery in Tanzania](#)

Pour en savoir plus, visitez  
[Renforcement de la profession de sage-femme en Tanzanie \(SMIT\)](#)

### Key Highlights 2025

**Delivered Midwifery Emergency Skills Training (MEST)** to strengthen midwives' ability to provide timely, high-quality care during obstetric and newborn emergencies.

**Reviewed and integrated six midwifery Continuing Professional Development modules** into the Ministry of Health's national e-learning platform, representing 43.4 credit points and expanding access to structured professional learning.

**Supported the development of the Tanzania Midwives Association 2025–2030 Strategic Plan**, helping strengthen TAMA's leadership, advocacy, and long-term organizational direction.

**Advanced the creation of an electronic TAMA membership registration database** enabling the association to digitally register members, strengthen communication, and better connect with and support midwives across Tanzania.

## Women's Voices and Midwifery Leadership for Resilient Health (TRUST)

The TRUST Project is a five-year, \$8.5 million initiative funded by Global Affairs Canada and led by the Canadian Association of Midwives, in partnership with the Association of Malawian Midwives (AMAMI), the South Sudan Nurses and Midwives Association (SSNAMA), and the National Council of Indigenous Midwives (NCIM). TRUST works to strengthen midwifery leadership, advance sexual and reproductive health and rights, and support more equitable, inclusive, and climate-just health systems.

### Project Partners:

Lead Canadian Association of Midwives, Association of Malawian Midwives (AMAMI), South Sudan Nurses & Midwives Association (SSNAMA), Association of Gynecologists & Obstetricians of South Sudan (AGOSS), CARE Canada, CARE South Sudan, Farm Radio International, Farm Radio Trust, Microresearch International, University of Guelph's Institute of Development Studies, National Council of Indigenous Midwives (NCIM)



For more information visit [Women's Voices and Midwifery Leadership for Resilient Health \(TRUST\)](#)

Pour en savoir plus, visitez [Les voix des femmes, le leadership des sages-femmes pour une santé résiliente \(TRUST\)](#)

## Key Highlights 2025

**TRUST officially launched in March 2025**, establishing a strong foundation for a five-year initiative focused on strengthening midwifery, women's health organizations, and equitable access to sexual and reproductive health and rights.

**Partners co-developed the five-year Implementation Plan** during a participatory five-day workshop in Addis Ababa in April 2025.

**Startup activities included national- and local-level stakeholder engagement** across all five project sites in Malawi and South Sudan, helping to build relationships, identify priorities, and support locally grounded implementation.

**Baseline assessments were initiated in both countries**, laying the groundwork for evidence-based implementation, learning, and future measurement of results, with key findings expected in 2026.

**AMAMI successfully disseminated its new 2026–2030 Strategic Plan**, which aims to strengthen external partnerships for advocacy and resource mobilization while building internal capacity for greater efficiency, effectiveness, and impact.

**NATIONAL  
COUNCIL OF  
INDIGENOUS  
MIDWIVES  
(NCIM)**



## MESSAGE FROM THE CO-CHAIRS

“This year has shown what is possible when we move forward together with clarity, purpose, and accountability to our communities.”

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Over the past year, the National Council of Indigenous Midwives (NCIM) has continued to grow in both reach and impact. This report reflects a year of steady progress—strengthening education pathways, advancing advocacy at the national level, deepening partnerships, and creating spaces for Indigenous midwives, students, and communities to come together in meaningful ways.



We have seen strong momentum across all areas of our work. Through the Indigenous Midwifery Education program, learners are being supported in community-led pathways that reflect Indigenous knowledge and realities. Our national events, including the Virtual Forum and Annual Gathering, continue to bring people together to share knowledge, build relationships, and strengthen a collective vision for the future of Indigenous midwifery. At the same time, NCIM has taken important steps in federal advocacy—ensuring that Indigenous midwifery is part of national conversations on health policy, funding, and legislative change.

This year also marked an important milestone as we finalized our 2025–2030 Strategic Plan, grounded in the vision of Birth Back — Indigenous midwives in every Indigenous community. This plan provides a clear direction for the years ahead, rooted in resurgence, reclamation, reconciliation, and restitution, and reflects the voices and priorities of Indigenous midwives and communities across the country.

None of this work happens in isolation. It is carried forward through strong relationships—with communities, partners, and each other—and through a shared commitment to restoring Indigenous midwifery as a vital part of community wellness and Nationhood.

We want to extend our sincere gratitude to the staff of NCIM for their continued dedication, leadership, and care. Their work behind the scenes—and often on the front lines—makes this progress possible. We also thank our members, partners, Elders, and learners who continue to guide and strengthen this work.

While there is still much to be done, this year has shown what is possible when we move forward together with clarity, purpose, and accountability to our communities.

**Samantha Leclerc & Alisha Julien Reid**  
Co-Chairs, National Council of Indigenous Midwives

**Every child deserves to be  
born and raised in safety,  
surrounded by loved ones.**

# LOOKING AHEAD: STRATEGIC PLAN 2025-2030

This year, NCIM began finalizing the development of its 2025–2030 Strategic Plan — a roadmap that builds on the work reflected throughout this report.

At the centre of the plan is a clear and consistent vision:

**Birth Back — Indigenous midwives in every Indigenous community.**

This vision reflects what communities have always known: birth belongs close to home, supported by people, practices, and knowledge rooted in culture, land, and relationship.

The Strategic Plan responds to longstanding and well-documented barriers. For many Indigenous families, giving birth still means leaving community. Indigenous midwives continue to face uneven recognition across provinces and territories, limited education pathways, and inconsistent funding.

At the same time, there is strong and growing momentum — from communities, midwives, and partners — to restore Indigenous midwifery as a core part of health systems and community wellness.

This plan is designed to support that shift in a coordinated and sustained way.

NCIM’s approach recognizes that meaningful change must happen at multiple levels at once. The plan is grounded in a Theory of Change that considers:

- The delivery of care within communities
- The systems and institutions that shape practice
- The policies and funding structures that enable or limit access
- The relationships and accountability needed to sustain progress over time

Together, these elements ensure that progress in one area is supported by change in others.



**Birth Back:** Indigenous Midwives in  
Every Indigenous Community



*A Whole-System Approach*

## Four Strategic Directions

The Strategic Plan is organized around four interconnected priorities:

### Resurgence

Focused on strengthening and growing the Indigenous midwifery workforce through expanded education pathways, student supports, and community-based training models. This work is essential to ensuring that more Indigenous midwives can live and practice in their home communities.

### Reclamation

Centred on advancing Indigenous midwifery leadership in health systems, governance, and research. This includes supporting Indigenous-led research, strengthening participation in decision-making spaces, and elevating Indigenous midwifery as a model of care.

### Reconciliation

Directed toward policy and systems change. This includes advocacy to improve legislation, funding, and regulation, as well as efforts to address structural barriers such as birth evacuation and inconsistent recognition of Indigenous midwives.

### Restitution

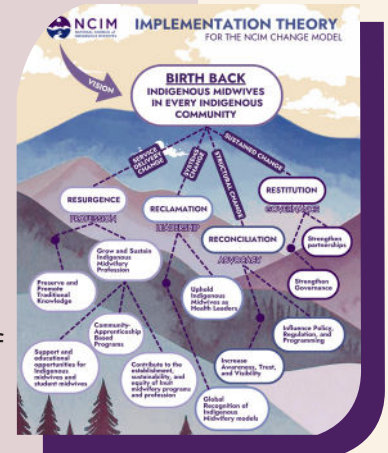
Focused on organizational strength and sustainability. This includes securing long-term funding, strengthening governance, and expanding membership engagement to ensure NCIM remains accountable and responsive to Indigenous midwives and communities.

### Moving Forward

By 2030, this work is intended to support:

- Increased access to Indigenous midwifery care within communities
- More accessible and culturally grounded education pathways
- Recognition of Indigenous midwives as leaders across health systems
- A strong, sustainable national organization supporting this work

The activities outlined in this report represent early steps in implementing this plan. Across advocacy, education, partnerships, and organizational development, NCIM is working to align its efforts with these long-term priorities.



## STRATEGIC DIRECTION 1: RESURGENCE - STRENGTHENING INDIGENOUS MIDWIFERY EDUCATION & WORKFORCE

### Indigenous Midwifery Education

The Indigenous Midwifery Education (IME) program supports First Nations, Inuit, and Métis communities in building their own midwifery education pathways. While not a formal academic institution, NCIM provides a flexible, community-led education framework grounded in Indigenous values, traditional knowledge, and NCIM's Core Competencies. The IME is currently tracking 12 learners across the country, spanning west from Ontario to British Columbia.

The delivery of IME Framework content is offered in modular learning bundles covering health sciences, midwifery skills, and cultural teachings. Learners can also take on health support roles such as doulas, prenatal educators, or lactation consultants while on their educational journey. NCIM remains a lifelong partner in supporting community-led midwifery education, contributing to health sovereignty and the rematriation of Indigenous birth care.

### Addressing Barriers to Workforce Growth

At the regulatory level, NCIM worked in partnership with national midwifery organizations to support changes that would better enable Indigenous midwifery education and practice. NCIM provided targeted recommendations across multiple jurisdictions, including Saskatchewan, Nunavut, and the Northwest Territories, in response to proposed legislative and regulatory changes. Across these engagements, NCIM consistently advocated for distinction-based approaches that recognize Indigenous midwifery education and training pathways, as well as expanded scope of practice. This work emphasized the importance of supporting sustainable, community-based midwifery models—particularly in northern regions—by ensuring that legislation and regulation reflect the realities of Indigenous midwives and the communities they serve.

NCIM engaged directly with federal decision-makers, providing a briefing to senior political advisors in the Minister of Health's office ahead of federal, provincial, and territorial Health Ministers' meetings (October 2025). This briefing highlighted ongoing challenges related to scope of practice, recognition, and the need for flexible pathways that reflect Indigenous midwifery models.



## Annual Land-Based Learning Event

Intensive, hands-on clinical skills workshop was held at the University of Manitoba from August 19th to 21st, to provide our learners the opportunity to learn PAP smears, internal examinations, and breast examinations. The other topics and skills covered were culturally-safe care, blood pressure and vitals, physical assessment of the newborn, blood draw and IV training, and theories of palpation and fetal well-being. These learning opportunities brought a new level of motivation and excitement to our learners. Connecting with Painted Horse Ranch, a family-owned land-based learning program, to build tipis and learn the roles, responsibilities, and importance of each part. The group was split into two groups, so on the day one group was building tipis, the other group was making moss bags, and the following day they switched.

Another new opportunity was to partner with Ode'imín Women's health clinic and the College of Midwives of Manitoba to offer the learners two days of clinical placements shadowing midwives and meeting clients in various stages of the perinatal period. Learners were able to ask their preceptors questions and learn new skill that they could apply within their own community work. Hopefully these partnerships will create stepping stones to other provincial colleges and practices, as the IME works to support multiple pathways to midwifery education across the country.



## STRATEGIC DIRECTION 2: RECLAMATION - INDIGENOUS MIDWIFERY LEADERSHIP & KNOWLEDGE SYSTEMS

### Annual National Virtual Forum

The NCIM Forum 2025: Indigenous Midwifery Beyond Birth brought together a growing community of midwives, partners, and supporters through a two-day virtual event in February. With 380 registered participants and 381 attendees on Day 2, the Forum demonstrated strong engagement across Canada and internationally, including participants from the United States, Mexico, and Guyana.

The Forum also supported 11 community watch parties across Canada, creating local spaces for shared learning and connection. Speakers highlighted the full scope of Indigenous midwifery—including language, food sovereignty, and wraparound care—through diverse, culturally grounded perspectives.

### University-based Midwifery Education Survey on Anti-Indigenous Racism

NCIM is leading a critical effort to confront anti-Indigenous racism in midwifery education and strengthen pathways for Indigenous leadership in health care. In February 2025, NCIM launched its first Anti-Indigenous Racism (AIR) Survey across all six Canadian university-based Midwifery Education Programs (MEPs) to assess how equity, safety, and accountability are being embedded for Indigenous students, educators, and staff.

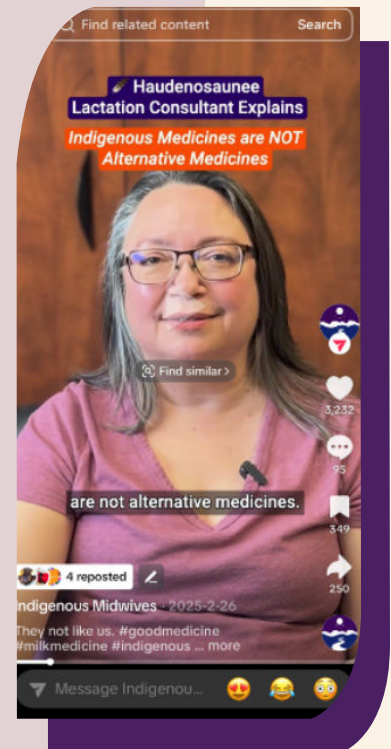
Rooted in Indigenous governance, this work reflects NCIM's role as a trusted national voice for Indigenous midwifery and as a steward of community-led evaluation. The survey process follows NCIM's Evaluation Framework, upholds OCAP® principles, and prioritizes Indigenous data sovereignty at every stage. Customized surveys for students, educators, and administrative staff emphasized cultural safety and confidentiality. No identifying or disaggregated data from Indigenous participants is publicly shared.

## Indigenous Midwifery Videos & Social Media

NCIM’s animated advocacy videos have continued to be a huge success when it comes to popular education. This year we added videos on [Ending Child Apprehensions & Keeping Families Together](#) and [Rising Together Against Anti-Indigenous Racism in Health Care](#)

The Forum also supported 11 community watch parties across Canada, creating local spaces for shared learning and connection. Speakers highlighted the full scope of Indigenous midwifery—including language, food sovereignty, and wraparound care—through diverse, culturally grounded perspectives.

In 2025, we also launched an Indigenous [Milk Medicine campaign](#), with expert insights, practical advice for Indigenous parents, and moving personal narratives that showcase the transformative power of Milk Medicine. This campaign began with in-depth interviews with Haudenosaunee and Michif lactation consultants, Stephanie George and Heather Heinrichs, alongside nursing parents from the Six Nations Birthing Centre. Their candid stories reveal how traditional feeding practices are about more than nutrition—they preserve our cultures, protect our sovereignty, heal relationships, and fortify community bonds. Our Milk Medicine videos helped launch [NCIM’s TikTok account](#), garnering over 30,000 organic views and over 1,000 new followers.



## STRATEGIC DIRECTION 3: RECONCILIATION - ADVOCACY, POLICY & LEGISLATIVE CHANGE

Over the past year, NCIM continued to advance Indigenous midwifery through coordinated advocacy efforts at the federal and national levels. This work focused on increasing investment in community-based Indigenous midwifery, advancing legislative protections for Indigenous women and birthing people, and addressing regulatory barriers that limit Indigenous midwives and students across Canada.

### Federal Election Advocacy

A key area of focus in 2025 was federal election advocacy. NCIM led its first coordinated pre- and post-election strategy in partnership with the Canadian Association of Midwives (CAM), working to ensure that Indigenous midwifery was reflected in federal priorities. This included developing and sharing platform recommendations, engaging with Members of Parliament, and preparing mandate recommendations aligned with different election outcomes. Following the election, NCIM shared these recommendations with the newly elected Prime Minister and his team and issued public communications to reinforce key priorities. NCIM also leveraged strategic communications, including a national advertisement in [The Hill Times](#) aligned with Red Dress Day and the International Day of the Midwife, to raise awareness among federal decision-makers.

### Ending Forced and Coerced Sterilization: Bill S-228

NCIM also advanced advocacy efforts to address forced and coerced sterilization. In collaboration with the Indigenous Women's Wellness Advisory Committee at Indigenous Services Canada, NCIM co-developed a Position Statement on this issue, grounding the work in Indigenous-led perspectives on reproductive justice. NCIM was proud to support the [Survivor's Circle for Reproductive Justice](#) to this committee to join our work. This priority was elevated throughout federal advocacy efforts, including direct engagement with Members of Parliament and integration into election platform recommendations. NCIM further supported the development of a coordinated open letter campaign, bringing together Indigenous and non-Indigenous health professional organizations to advocate for the passage of [Bill S-228](#), An Act to amend the Criminal Code (sterilization procedures).



## STRATEGIC DIRECTION 4: RESTITUTION - GOVERNANCE, SUSTAINABILITY & ORGANIZATIONAL STRENGTH

NCIM strengthened governance, supported leadership transition, expanded partnerships, and actively pursued new funding opportunities to support its growth and sustainability.

### Increasing community-based Indigenous midwifer funding

NCIM continued to advance its policy and funding priorities through sustained engagement with federal processes and decision-makers. In 2025, NCIM submitted pre-budget recommendations to the Department of Finance during both the initial consultation period in March and a subsequent round following the federal election in August. These submissions emphasized the need for long-term investment in Indigenous midwifery, including community-based services, education pathways, and supporting infrastructure.

Throughout the year, NCIM, alongside the Canadian Association of Midwives (CAM), met with political staff across key federal departments, including Health Canada, Indigenous Services Canada, and Finance Canada. These engagements focused on positioning Indigenous midwifery as an essential component of Canada's health system and advancing coordinated approaches to policy and funding.

NCIM also worked with partners to elevate the importance of midwifery infrastructure, submitting a joint recommendation to the newly appointed Minister of Housing and Infrastructure. This work highlighted the critical role of appropriate facilities and housing in enabling Indigenous midwives to live and practice in their communities.

To further strengthen the evidence base for advocacy, NCIM and CAM initiated a research partnership with Associate Professor Dr. Jennifer Leason to conduct an Economic and Social Benefits Analysis of maternal evacuations compared to community-based midwifery care. This project, expected to be completed in early summer 2026, will support ongoing efforts to demonstrate the value and impact of investing in Indigenous midwifery systems.

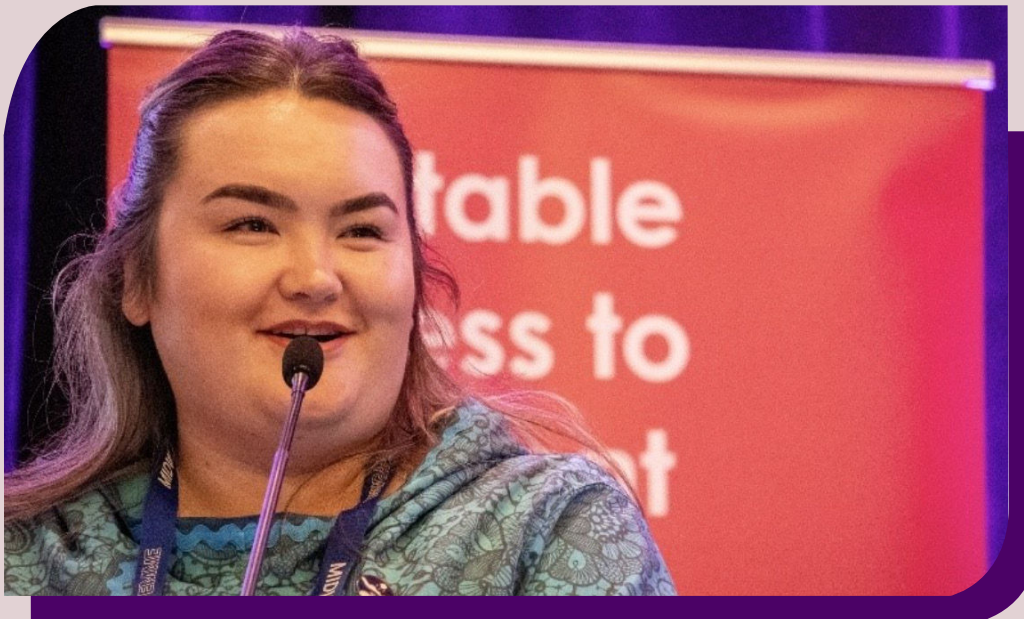


## 2025 Annual Gathering

The NCIM Gathering 2025: Caring Where We Live: Rural & Remote Midwifery brought together 88 Indigenous midwives, students, and partners from across the country for two days of learning, connection, and collective visioning. Grounded in Indigenous knowledge, ceremony, and community leadership, the Gathering created a strong national space to share experiences and identify priorities for advancing Indigenous midwifery.

Sessions focused on strengthening rural and remote services, supporting the next generation of midwives, and bringing birth back to community. Through sharing circles, discussions, and hands-on activities, participants emphasized the importance of culturally grounded care, mentorship, and practical skills development.

A strong sense of connection and momentum emerged throughout the Gathering, with participants building relationships and reinforcing a shared commitment to growing and sustaining Indigenous midwifery across communities.



## ABOUT NCIM

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. Indigenous Midwives enable access to culturally-safe sexual and reproductive health care for Indigenous families, the return of birth to Indigenous communities, and a reduction in the number of medical evacuations for births in remote areas.

## THANK YOU TO OUR FUNDERS



Indigenous Services  
Canada

Services aux  
Autochtones Canada

Fondation

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