

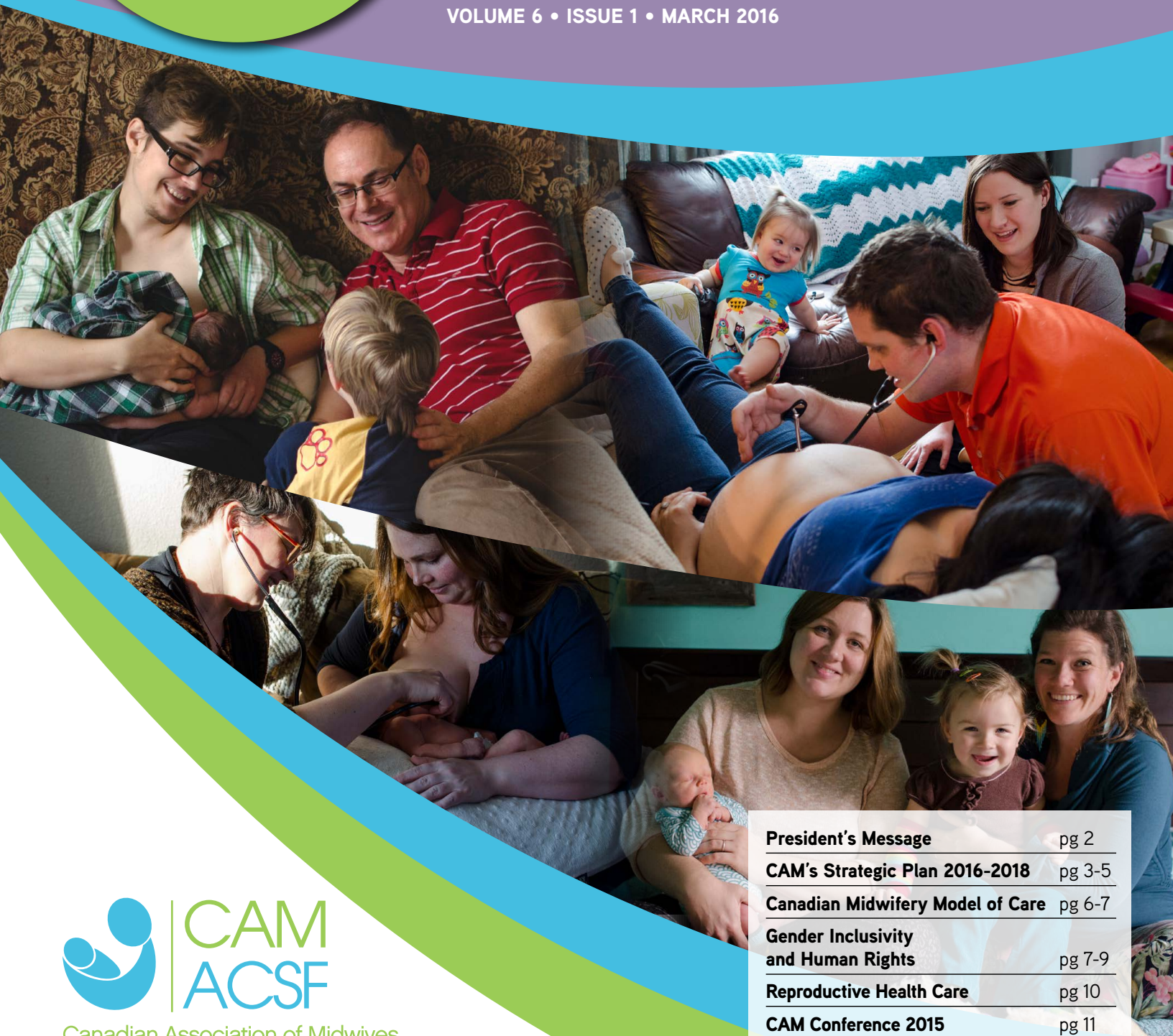
THE PINARD

Newsletter of the Canadian
Association of Midwives

CAM'S NEW STRATEGIC PLAN: 2016-2018!

This issue is all about new CAM publications! Read to learn more about the Canadian Midwifery Model of Care, Gender Inclusivity and Human Rights, Reproductive Health Care and more!

VOLUME 6 • ISSUE 1 • MARCH 2016



Canadian Association of Midwives
Association canadienne des sages-femmes

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PRESIDENT'S MESSAGE

My dear colleagues,

In this issue of the Pinard, we are proud to present a few recent publications from CAM, as well as CAM's new Strategic Plan.

First, let me share a few thoughts on the strategic plan. We can never put enough emphasis on the importance of a strategic plan; it is a fundamental tool to guide any organization. A good strategic plan must reflect the priorities of the year to come, and given that we still have much work to do support and grow midwifery, we have a demanding strategic plan.

CAM must first and foremost be the voice of midwifery, and therefore must continue to advocate for, grow, and protect the profession of midwifery as an autonomous, regulated and well funded element of the health care system throughout Canada. CAM will also work to ensure that midwives are at the table in any discussions of maternal and newborn health.

The development of midwifery in indigenous communities is critically important, we must support our indigenous colleagues in this regard. CAM will continue to work closely with NACM, their work is essential.

We must also be proud of our model of practice, and the associated improved health outcomes. We are experts in pregnancy and normal birth, and we must continue to position ourselves as such.

Over the next months and years, the development of CAM's global program will significantly help to grow the resources of the organization. We continue to believe that the international program accomplishes two goals: it supports the development of midwifery around the world and therefore helps to reduce maternal and newborn mortality, and it also increases the capacity and credibility of CAM on a national level. In short, by helping others we help ourselves.

Lastly, the strategic plan outlines a strengthening of CAM's organizational capacities. We are currently a far cry from the era of all of CAM's documents being contained in a few boxes in the basement of the president. We must continue to grow steadily and wisely.



CAM has published three other key documents in the last six months, starting with the Position Statement on the Canadian Midwifery Model of Care. I was personally looking forward to having a document that describes what distinguishes us as Canadian midwives. Having been in contact with midwives around the world and across Canada, I find it incredibly interesting to examine what brings us together as Canadian midwives. There are differences, but there is a common heart. This document will serve as a useful tool as we advocate for midwifery at the national and international levels.

We believe it is important to have a strong statement on inclusion as well. The statement on Gender Inclusion and Human Rights is a first step towards ensuring that all people feel welcome and recognized, both as colleagues and as our clients. In the next year, CAM will be working on tools to help all our members better understand and implement changes that support inclusion. Let us approach this with openness and humility.

The last, but not least, is our Position Statement on Reproductive Health Care. This statement is a long overdue and necessary statement for our association to have.

I believe that in the next years we will witness incredible growth of our association as well as the profession of midwifery in Canada. There is much work to do, but I feel that there is a good chance that change will accelerate in the coming years. As we grow, CAM needs its members, now more than ever. Your contributions are essential, please keep your eyes open as we launch new committees and new projects. Your involvement will ensure that CAM remains an association that reflects all of its members.



Follow us at:
facebook.com/CanadianMidwives



CAM is now on Twitter!
Follow us at [@Canadamidwives](https://twitter.com/Canadamidwives)

Cover photos of midwives and midwifery clients in Winnipeg, MB. Thank you to Maren Fidler-Kliewer, Lindsay Stevenson, Sarah Larson, Dave Larson, Amber Hewitt, Guy Page and others for sharing your photos!

All cover photos courtesy of, and chosen by, Elliana Gilbert Photography. Elliana Gilbert is a Winnipeg-based photographer who is passionate about supporting gender and human rights and is also a strong advocate for midwifery care. Thank you Elliana!

CAM'S NEW STRATEGIC PLAN: 2016-2018

The Canadian Association of Midwives has released its new Strategic Plan. This three year plan, covering 2016-2018, continues the work of the previous Strategic Plan (2010-2015) while expanding and refining key areas of growth.

CAM's previous plan was the organization's first Strategic Plan, born out of a need to provide continuity and direction, as the organization was growing. This current plan covers a shorter period of time, which is reflective of the increasingly dynamic nature of the organization and the profession of midwifery.

The Strategic Plan was developed by the CAM Board of Directors over a two year period, in consultation

with members and experts. The Board of Directors began in November 2013, by reviewing the previous Strategic Plan and CAM's activities. CAM conducted a survey of all CAM members in the fall of 2014 regarding their priorities, concerns and suggestions. The CAM Board of Directors consulted its staff members, as well as external consultants to gain further information.

HIGHLIGHT ON ADVOCACY

CAM's first strategic goal was reformulated and strengthened to reflect CAM's increased advocacy activity at both the federal level as well as in support of provincial and territorial initiatives.

HIGHLIGHT ON GLOBAL HEALTH

CAM's strategic goal on global maternal, newborn and child health was given a complete overhaul, reflecting the growth and development of CAM's activities in this area. For the next five years, funding for global MNCH projects will represent the majority of CAM's revenue stream.

CAM continues to strongly support the development of the profession throughout Canada and continues to share and grow with the National Aboriginal Council of Midwives.

CAM'S STRATEGIC OBJECTIVES

Provide advocacy for midwifery as an autonomous, regulated, publically funded profession in Canada.

- 1 Advocate for the inclusion of midwifery in federal health policy and planning initiatives.
- 2 Advocate for midwifery regulation, public funding and growth of the profession in all provinces and territories (unregulated, newly regulated and others).
- 3 Strengthen alliances and advocacy strategies among midwifery associations, regulators, educators, students and consumer groups.
- 4 Strengthen strategic partnerships with national health organizations.

Support the growth and development of the midwifery profession.

- 1 Promote and support the development of midwifery policy and position statements at a national level.
- 2 Develop and support strategies to address midwifery human resource and development issues in all jurisdictions.
- 3 Facilitate communication within the Canadian midwifery community.
- 4 Promote and provide opportunities for professional development and continuing midwifery education.

Support Aboriginal midwifery and the return of birth to Aboriginal communities.

- 1 Promote the National Aboriginal Council of Midwives (NACM) as the national voice for Aboriginal midwifery.
- 2 Share appropriate administrative and organizational support for the autonomous development of NACM.
- 3 With the support and direction of NACM, advocate for the necessary educational, policy, research and regulatory structures to support the growth of Aboriginal midwifery and the return and reclamation of birth to Aboriginal communities.



**THROWBACK
TO JANUARY
2010**



2
staff
members



1074
CAM members

Annual CAM budget:
\$300,000

CAM
CONFERENCE
IN EDMONTON,
ATTENDED BY
206
PEOPLE

Midwives perform
approximately
6%
of births in Canada

2016 2018

Advocate for normal childbirth, the Canadian midwifery model and primary maternity care close to home.

- 1 Promote public awareness of the role and expertise of midwives in pregnancy and normal childbirth.
- 2 Promote and uphold essential principles and practices that support normal birth and confidence in the birthing process.
- 3 Develop and promote resources to support normal birth and the midwifery model of care.

Strengthen the organizational capacity of CAM.

- 1 Maintain and continue to improve organizational effectiveness.
- 2 Secure increased and diversified funding to support CAM operations and projects.
- 3 Increase CAM's capacity for political advocacy, policy development, and media communication on emerging midwifery issues.
- 4 Increase CAM's visibility through marketing and communications.
- 5 Facilitate broader involvement of midwife members, students, and supporters in CAM activities and advocacy work.
- 6 Ensure the CAM Board of Directors is actively engaged in the achievement of the strategic plan.

Develop and strengthen partnerships and programs to improve global reproductive, maternal, newborn and child health.

- 1 Continue to work with, and grow opportunities to collaborate with other national and international midwifery and related health associations and like-minded NGOs on global maternal and newborn health.
- 2 Promote fundraising campaigns to support capacity-building projects with Southern partner midwifery associations.
- 3 Partner with CAN-MNCH to educate and advocate for the recognition of midwifery as a key component of maternal and child health.
- 4 Collaborate with ICM and other international maternal, newborn and child health (MNCH) stakeholders to guide global program development and to address issues of common concern.
- 5 Provide a platform for global midwifery dialogue and knowledge exchange through hosting the ICM Triennial Congress in 2017.
- 6 Leverage the success of CAM's global program and partnerships to advance CAM's domestic advocacy work.

1619
CAM members



Annual CAM budget:
\$3,000,000

Midwives perform approximately
10%
of births in Canada

CAM
CONFERENCE
IN 2015 IN
MONTREAL,
ATTENDED BY
379
PEOPLE



6
staff
members

WITH 7
MORE TO
COME IN
2016



TODAY
JANUARY
2016

CANADIAN MIDWIFERY MODEL OF CARE POSITION STATEMENT

In September 2015, CAM published a Position Statement on the Canadian Midwifery Model of Care. This statement was many years in the making, and partially originated due to requests from midwives in unregulated jurisdictions for a document that would help them to advocate locally for midwifery. This statement is intended to capture the essence of the midwifery model of care in Canada; it does not describe how all midwives work across Canada.

The working group that was formed to develop this statement, beginning in 2010, was made up of midwives Jessica Bailey, Chantal Gauthier-Vaillancourt, Katrina Kilroy, Kerstin Martin, Joanna Nemrava, Jennie Stonier and Gisela Becker, the President of CAM at the time. To help give context, we share a conversation with Jennie and Gisela ...

CAM: Why did you feel it was important for CAM to publish a statement on the Canadian Midwifery Model of Care?

Gisela: I feel strongly that it is CAM's role to develop position statements to help strengthen midwifery and support provincial and territorial associations and individual midwives. Furthermore, our Canadian model is unique and it was very important to share the basic tenets of this model as midwifery was evolving to serve more and more diverse populations.

Jennie: That is exactly it. There are certain principles that belong in the Canadian model, which grew from Canadian midwives working together with women that made the model successful. Both Gisela and I saw that the model, the practice of midwifery in Canada was evolving, and in some ways, without a lot of reflection. We felt there needed to be a reflection on what was most central and needed to be kept, and what could be evolved to be adapted to different needs. That is why we felt it important to put together this statement.

GISELA BECKER



is Assistant Professor teaching in the Midwifery Education Program at Mount Royal University, Calgary; she is working with Foothills Midwifery and provides backup for the midwives in the Primary Care Network in High River, Alberta.

JENNIE STONIER



has practiced as a midwife and midwife educator in northern and southern Quebec for close to 35 years. She has worked with the communities of the Hudson Bay Region of Nunavik, serving as senior mentor midwife in the Innuulitsivik midwifery service and education program. She currently practices in Salluit, Nunavik.

CAM: Take us back to when the working group began... what was the landscape at the time? What were the needs of the profession?

Gisela: At the time, we were still struggling to have midwifery in all jurisdictions, and there was enormous pressure from governments, health administrators and others to reduce midwifery. There was a sense that the Canadian model was the 'Cadillac' of midwifery care and was really not implementable, and we, as midwives, we knew that this is just not true. In jurisdictions where there is a strong framework of midwifery, we had seen that the Canadian model is what women want and is implementable and we were having great success. And really, these issues are still current today, in New Brunswick, Yukon and everywhere where midwifery is not yet implemented.

Jennie: A lot of different kinds of practices were starting, there were Indigenous practices, midwives becoming attendants at caesarean sections, and there was also a move towards a 'production' model of midwifery. Many of us feared losing the essence of the Canadian model; we felt it was an incredibly

important moment to come together to have a conversation about what is absolutely basic to our model and what can be adapted to allow us to reach out and grow as a profession.

Gisela: At the time, we felt it was quite political, in fact. How to do this blending, without either selling out the basic tenets of the Canadian model or leaving anyone behind?

Jennie: Overall I am very pleased with how the statement has evolved. I love the inclusivity of this statement, not just in terms of gender and communities, but the openness of the statement in the ways that midwives can 'be with women' and others needing midwifery care. The Canadian midwifery model of care was really informed at the grassroots level, and I feel that in this statement we are adhering to these roots as well as growing, and this is the sign of a maturing profession and organization.

Gisela: I feel that as we continue our debates about what is midwifery care, what types of practices we are developing, we must remember that it is the model itself that has made midwifery in Canada so successful, and we must not lose this.

GENDER INCLUSIVITY AND HUMAN RIGHTS

While developing the Canadian Model of Midwifery Care Position Statement, the CAM Board of Directors realized how critical it was to ensure that all people seeking midwifery care felt welcome by CAM's statements. In particular, it was evident that the language used in CAM's position statements could be more inclusive of all midwifery consumers, including trans people. CAM struck a working group to help support making language more inclusive at CAM. The working group has helped to shed light on the many ways that CAM can make changes to ensure that all people feel welcome.

In response to this, as well as other events, the CAM Board of Directors released a statement on Gender Inclusivity and Human Rights in September 2015.

CAM spoke with midwife Cora Beitel, a member of the Inclusive Language Working Group, and who gave a presentation at the 2015 CAM Conference entitled *Being with all people: Broadening midwifery to be inclusive of transgender and gender queer clients*.

CAM: What was your reaction to the statement?

Cora: When I first read the CAM inclusivity statement I was surprised and proud to be part of an organization that published such a strong statement. In particular, I felt that the language of the statement is very clear, not wishy washy, and this is impressive because it is often easy for large organizations to take a weaker stand in an attempt to please everyone, especially on difficult issues. And this statement, it is very clearly supportive of trans rights, and all human rights, and that is really important.

GENDER INCLUSIVITY AND HUMAN RIGHTS (CONT.)

CAM: Why do you feel the statement is important and necessary?

Cora: I feel this statement is important for a few different reasons. It is important right now, in terms of where we are at in midwifery care, because of the discussions that have been going on across North America on issues of trans rights and gender inclusivity. In the media, within midwifery care, there is a growing conversation that is happening, and so it was a critical moment for CAM to take a public stand in support of trans rights. By adding the voice of Canadian midwives to the table, we have made it clear that we support inclusivity for our clients and for ourselves as midwives.

In addition, this statement is important because it speaks to human rights, and caring for people who can be, and have been, marginalized, and that is at the heart of midwifery care. This statement is necessary; it makes it absolutely clear to everyone where Canadian midwives stand, and that not taking a stand is not an option anymore.

CAM: How will the statement help you in your work?

Cora: At the Strathcona Midwifery Collective, we have been putting a lot of thought into how we can make our practice inclusive to anyone seeking our care, and specifically how can we ensure that the trans and queer communities feel welcome. We have approached this both from a clinical perspective as well as a community perspective. So what this means is reflecting on what thoughtful, meaningful, and inclusive care really means in practice, and it also means expanding our activities to include support for the community. As a result we have organized a queer and trans pregnancy and parenting group for families in and around Vancouver. We continue to work with our College and the Midwives Association of BC to make sure that it is not just a handful of clinics that feel inclusive, but rather that all midwives in BC can provide inclusive care. This statement from CAM supports this work, it helps to contextualize what we are doing on a smaller scale into a more national scale.

CAM: What do you think are some important next steps? How can CAM best implement this statement?

Cora: There will be many people who are eager to put this statement into practice, but may not have the awareness,

resources or tools to do so, and so funding and training are really important, especially for smaller and more rural practices. For example, creating tip sheets and other resources so that all midwives can have access to the tools needed to put this into practice. And of course, it is critical that CAM continue to provide logistical support for the work that is already ongoing. In particular, CAM members are working to set up a National Advisory Committee on gender inclusivity, and this will help to provide follow-through for this statement.

CAM: How can other midwives use this statement in their work?

Cora: This statement is an entry point into a conversation that needs to happen, that is already happening, a conversation that can lead to education, training and support. Midwives can bring this statement to their practice, to hospitals, to the government to start this dialogue, to move towards improving our work, improving our care, making our care inclusive of everyone. It will be critical that CAM continue to provide support both logistical and financial, to make sure that the statement continues to be relevant in practice.



CORA BEITEL

Originally from Montreal, Cora Beitel studied midwifery at UBC and now practices in Vancouver's Downtown Eastside at Strathcona Midwifery Collective. The clinic serves a diverse population that includes many queer and transgender clients.

A STATEMENT ON GENDER INCLUSIVITY & HUMAN RIGHTS

STATEMENT ORIGINALLY PUBLISHED SEPTEMBER 2015

The Canadian Association of Midwives (CAM) is an organization that is rooted in the feminist movement and has a history of commitment to human rights and social justice. It is our goal to pursue visionary leadership in our work on these issues within the Canadian and global healthcare context. We are committed to including trans, gender queer, intersex and marginalized communities in our central dialogue and ensuring that CAM is inclusive in its statements, actions and in all aspects of its work. These priorities are not established by the needs of the majority but by the importance of the inclusion of all people.

We are aware of recent events in the United States and the claims of some that the important steps being taken to ensure that trans, gender queer and intersex people in our care and in our communities are not marginalized, denied or made invisible, are somehow undermining our ability to provide woman-centered care. CAM refutes this statement completely. We believe that it is critical for midwives to honour and respect all people's right to self-determination and their right to receive health care that is free from discrimination, transphobia and prejudice. Women and women's health care will not benefit by refusing to recognize or include the rights of others.

We are aware that transphobia disproportionately affects those with other, often intersecting, marginalized identities such as racialized persons, self-identified Indigenous people, those living as colonized people, those living with the legacy of residential schools, differently abled people and all living with the effects of the social determinants of health.

Discrimination in the provision of services can cause trans people to delay or avoid necessary health care services often to the point of putting their overall health at risk. We are also

aware that health equity depends upon care providers being informed about the needs of trans, gender queer or intersex people. CAM is committed to providing resources and education for our members and in auditing our own organization to ensure inclusion. We have begun our work on these issues within CAM and recognize that we still have much to learn and far to go as an organization and as individuals. We are committed to our own continuing education, in partnership with organizations and individuals who can provide guidance and direction to CAM. CAM believes that all midwives and midwifery practices can and should provide an environment where all individuals are welcomed, treated with dignity and respect and encouraged to be active members of the community.

We believe that it is critical for midwives to honour and respect all people's right to self-determination and their right to receive health care that is free from discrimination, transphobia and prejudice.



It is our hope and intent that all midwives will be supported in their practice and their profession regardless of gender identity or gender expression and likewise, that Canadian midwives will welcome all clients and provide them with compassionate, culturally safe care regardless of gender identity or gender expression. We support the changes that the Midwives Alliance of North America (MANA) has made to their core compe-

tencies document to reflect the diversity of midwives and clients and we are in the process of ensuring that our own Mission Statement, Values and Strategic Objectives are inclusive in language, scope and intent. We believe that ensuring that our work and our language reflects the existence and inclusion of trans, gender queer and intersex people does not erase the existence of women, it simply extends basic human rights to all midwives and the people they serve.

REPRODUCTIVE CARE STATEMENT

In early February 2016, CAM published a Position Statement on Reproductive Health Care. This statement was written in response to a motion from CAM members at an Annual General Meeting.

Be it resolved that: The Canadian Association of Midwives adopt a position stating that: Reproductive health care is an integral part of maternal health; this includes contraception, family planning and access to legal, safe abortion care as a fundamental right of women regardless of where they live.

After the motion was passed unanimously, the CAM Board of Directors struck a working group to develop the position statement. The working group, chaired by Zuzana Betkova, was made up of Johanna Geraci, Tanya Montazian, Lisa Morgan, Lisa Nussey, Simon Rosenberg, and Edan Thomas. Like all CAM position statements, the statement underwent a members' consultation in the fall of 2015 before being finalized and approved by the Board of Directors.

Read the statement online at:

<http://www.canadianmidwives.org/90-news/CAM-Publishes-Reproductive-Health-Care-Position-Statement.html>

We spoke with Edan Thomas, one of the midwives who brought the motion forward and a working group member on what this motion means to her.

CAM: Tells us a little bit about your motivation to bring this motion to the CAM membership:

Edan: In 2011, my practice brought a similar motion to the Association of Ontario Midwives AGM as well as the CAM AGM. Our practice has a long history of supporting reproductive rights and being activists on feminist issues. In 2010, the government under Stephen Harper, while touting Canada's leadership in global maternal and newborn health, was also in the process of passing bills that made it impossible for Canada to provide international development funds to organizations that were providing access to abortion and other reproductive services, such as Planned Parenthood working in Africa. At my practice, we felt strongly that midwifery organizations had to be able to take a stand on this.

CAM: What have you learned about the process of putting a motion forward?

Edan: Perhaps obvious, but it is very important to be aware of the deadlines for submitting resolutions, as it is within CAM's

EDAN THOMAS



is a midwife with the Midwives Collective of Toronto. She studied midwifery at the Ryerson MEP, and has been working with the Midwives Collective since 1999. Edan has a long history as a reproductive rights activist, stretching back to the Ontario Coalition for Abortion Clinics prior to the legalization of abortion and also including working for equal access to reproductive technologies.

bylaws that resolutions be submitted to the membership in advance of the AGM. It is also critical when bringing a motion to the floor for the membership to discuss, that it is clear in the motion what you want CAM to do. In other words, it is one thing to ask CAM to 'work' on an issue and it is another to specifically request that the organization develop a Position Statement.

CAM: What do you feel are the major impacts and benefits of this statement?

Edan: I think that the more organizations that are involved with any aspect of reproductive care, such as CAM, have statements on reproductive rights, the more impact we can have when these issues come up. When the government is making laws and looking at issues of reproductive care, it is important that CAM can quickly take a stance and publicize their stance through the media. When Harper was limiting access to reproductive health care in Canada's global development funding, other groups were able to quickly make statements to the media, but because we did not have a position statement, our hands were tied. Similarly, as debates are happening at both federal and provincial levels on access to reproductive technologies, we now will have a statement that can help us take a stand on these debates. It might just be adding CAM's name to a long list of other organizations, but I feel that there is power in being able to do this. We will be able, at key moments, to explicitly say the things that may sometimes go without saying or be unsaid.

Do you have other ideas in mind for statements CAM should develop?

Edan: Last year, myself and others brought forward a motion at the AOM AGM on gender inclusivity which was passed and led to the AOM putting resources into gender inclusive language for all their literature. Currently, I am working with a few colleagues to put together a motion for the next AOM AGM that talks about midwives with disabilities, how our organization can support them and ensure that they are able to practice without discrimination.

CAM CONFERENCE IN MONTREAL



Over 370 midwives, exhibitors and other health professionals attended CAM's 15th Annual AGM, Conference and Exhibit in early November in Montreal. The conference theme, *Midwives: Supporting Communities in Canada and Around the World*, was underscored by provocative and engaging panels on the Canadian midwifery model of care and the impact of global partnerships on maternal, newborn and child health. The keynote speaker, Frances Day-Stirk,

ICM President, opened the conference with an impassioned and personal speech about the future of maternity care and midwifery after the Millennium Development Goals (photo top right). Marie Montpetit, member of the Quebec National Assembly for Crémazie and Parliamentary Secretary to the Minister of Health and Social Services, attended the opening of the conference and spoke strongly in favour of the midwifery model of care (photo bottom centre).



Photo by Tourism Victoria

Canadian Association of Midwives
Association canadienne des sages-femmes

AGM, Conference & Exhibit /
AGA, Congrès annuel et exposition

VICTORIA, BC

The Fairmont Empress Hotel

October 26-28

2016

26 au 28 octobre



Call for Abstracts

March 1-April 15

In response to feedback from conference participants, this year, we are specifically looking for abstracts with clinical content.

So please share your research, clinical competencies, and innovative practices with us!



31ST ICM Triennial Congress

TORONTO, CANADA 18-22 June 2017

MIDWIVES - MAKING A DIFFERENCE IN THE WORLD

CALL FOR ABSTRACTS for the International Confederation of Midwives
Triennial Congress is now open!

Take advantage of this unique opportunity to network and to present your work to thousands of midwives and maternity care professionals from around the globe. We encourage midwives, health professionals, educators, researchers and others to consider how they can contribute to this important event that will be held in Toronto, Canada in June 2017.

Submission deadline: March 31, 2016

Please check the congress website for advice from Canada's Vicky Van Wagner on writing an abstract.

www.midwives2017.org/call-for-abstracts

UPCOMING EVENTS

MARCH 2016

**Perinatal Services BC 2nd
Biennial Conference: Healthy
Mothers and Healthy Babies**

MARCH 11-12, 2016

Vancouver, BC

www.interprofessional.ubc.ca/

MAY 2016

Women Deliver 2016 Conference

MAY 16-19 2016

Copenhagen, Denmark

www.wd2016.org/

**American College of Nurse-Midwives
61th Annual Meeting & Exhibition**

MAY 21-26 2016

Albuquerque, New Mexico

www.midwife.org

**IV ACL Congress, the XV FAME
Congress and the II ICM Southern
European Region Conference**

MAY 26-28, 2016

Tarragona, Spain

www.midwives2016.org

JUNE 2016

**SOGC Annual Clinical and
Scientific Conference**

JUNE 14-17, 2016

Vancouver, BC

www.sogc.org/

**The Association of Women's
Health, Obstetric and Neonatal
Nurses (AWHONN) Convention**

JUNE 11-15, 2016

Grapevine, Texas, USA

www.awhonn.org

OCTOBER 2016

MANA Annual Conference

OCTOBER 10-13, 2016

Atlanta, Georgia, United States

www.mana.org/mana2016

**ICM Africa Regional
Conference, Lesotho**

17-21 OCTOBER 2016

Lesotho

www.internationalmidwives.org

OCTOBER 2016 (cont.)

Birth and Beyond Conference

OCTOBER 20-22, 2016

London, Ontario

www.birthandbeyondconference.ca/

CAPWHN 6th National Conference

OCTOBER 21-23, 2016

Calgary, AB

www.capwhn.ca

**CAM/ACSF 2016 AGM,
Conference & Exhibit**

OCTOBER 26-28, 2016

Victoria, BC

DECEMBER 2016

**European Midwives Association Fifth
International Education Conference 2016**

DECEMBER 2 - 3, 2016

Westminster, London, UK



More info on events at:
[facebook.com/
CanadianMidwives](https://facebook.com/CanadianMidwives)