

MIDWIFERY CARE FOR ALL: BUILDING THE PROFESSION

ANNUAL REPORT
2017-2018



PRESIDENT'S MESSAGE

Dear CAM Members,

Much has happened since our last Annual Members Meeting, in June 2017. We hosted the International Confederation of Midwives (ICM) Triennial Congress, the largest global midwifery event. CAM and NACM have made significant strides in increasing the visibility of midwifery with the Federal government. New Brunswick families now have access to midwifery services, and Newfoundland and Labrador and Yukon Territory families will soon have the same option. CAM's leadership on national and global initiatives and support for the work of our member associations continues to grow.

This annual report marks the completion of 14 years in midwifery association leadership, which I began in the AOM and continued soon after on the CAM Board. We can all take pride in CAM's growth and the expansion of its membership from 500 midwives across Canada in 2005 to over 1,800 today. My role on this Board and on the Board of the Association of Ontario Midwives privileged me to witness the challenges and contribute to the important gains of midwives from coast to coast to coast. I am most proud of the CAM's support of the formidable National Aboriginal Council of Midwives. I also share with you a sense of achievement in our global program and our successful presentation of an amazing ICM congress. Then there's the respect we now garner at the federal level of government. At the provincial level, it was a privilege to share in the work done to bring birth centres to Ontario and, of course, to defend the human rights of midwives.

Like all of you, I became a midwife because I wanted to care for pregnant people and their babies, to contribute to reproductive justice and to make meaningful change in society. I became involved in association leadership work for the same reasons and in its own way it has been rewarding. Meeting with other midwives to address the issues facing us across the country, advocating on our behalf with the government and other parties, meeting with and discovering how much we share and can learn from midwives from the global community; all of these things make association leadership immensely rewarding.

It is with a mix of pride and emotion that I thank you for the pleasure and privilege of serving you all. I urge you to actively participate in your associations - our profession needs a strong voice, now more than ever, to ensure we don't lose what midwives worked so hard to gain 25 years ago when the first province became regulated. Midwifery continues to be a marginalized profession, but as the recent Human Rights Tribunal of Ontario ruling on pay equity has shown us, when we bring our strength together we can achieve great things.



Katrina Kilroy, RM
CAM President



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NEW
IN 2017-2018

COMMITTEES AND WORKING GROUPS

Over the past year, the Board of Directors has been conducting an internal review of national committees and working groups. Several committee terms of references will be updated over the course of 2018-19 to ensure that purpose and objectives of committee work are in line with CAM's strategic objectives.

Here are some highlights from 2017-18:

GOVERNANCE COMMITTEE

In 2017, a permanent Governance Committee was appointed to assist the Board in creating and maintaining a healthy and efficient governance culture, to evaluate Board effectiveness and to recommend changes to Board structures and processes as required.

Terms of reference were updated and adopted in September 2017.

CAM NATIONAL COMMITTEE ON BIRTH CENTRES

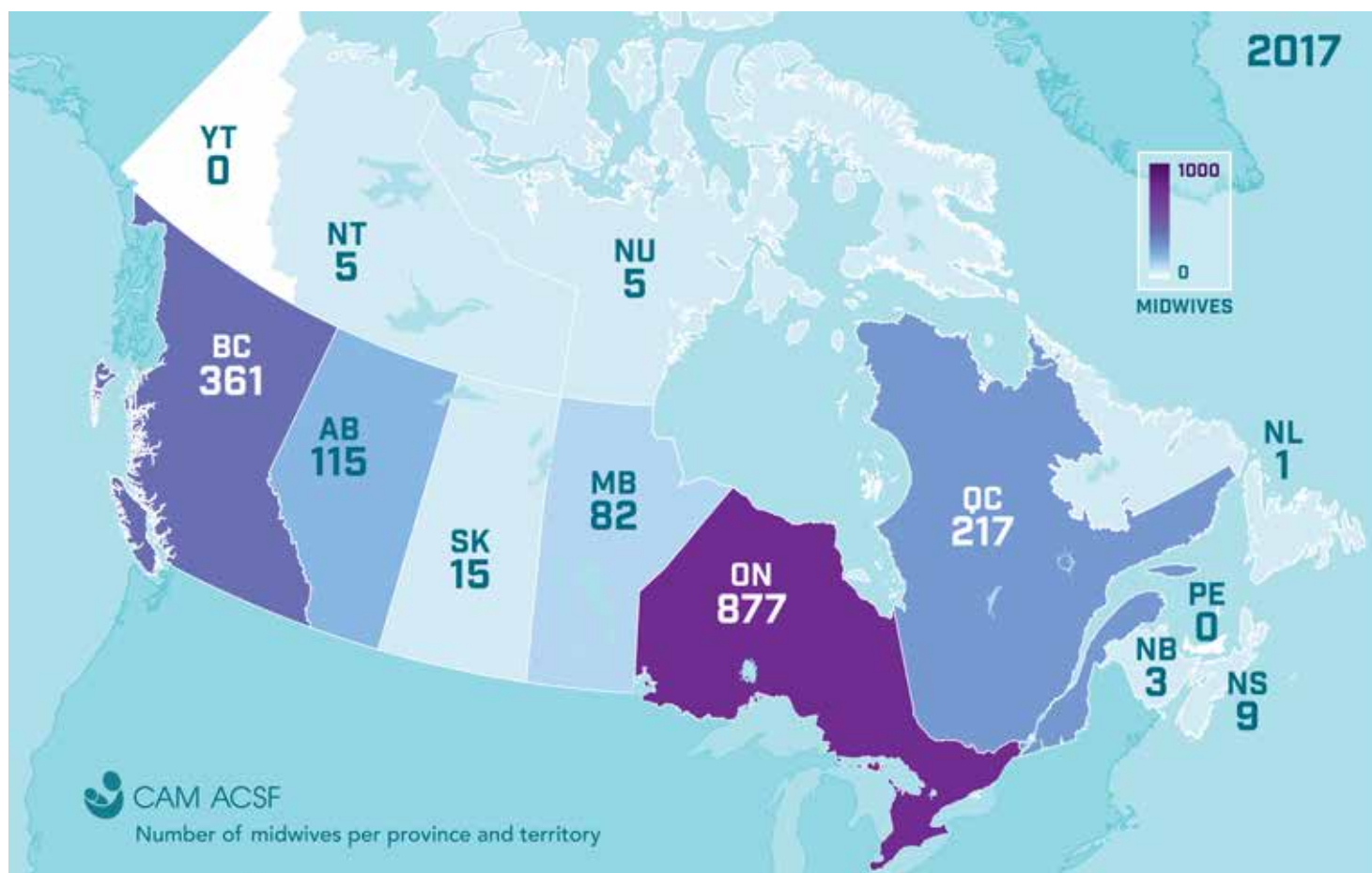
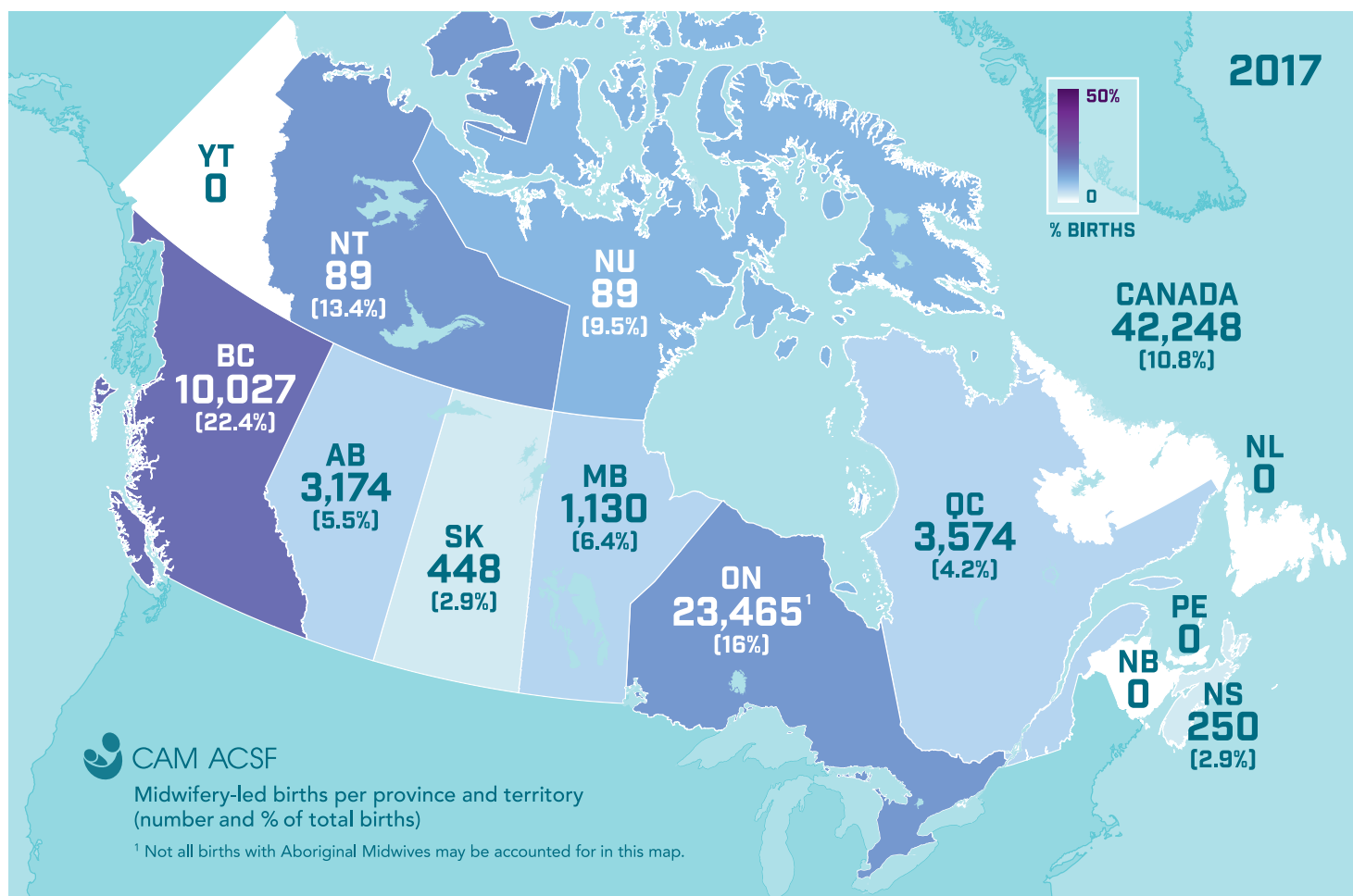
Terms of reference for this national committee were adopted in the spring of 2017 and recruitment of members was completed in 2018. The purpose of the national committee is to support CAM member associations in resource sharing and knowledge translation around best practices for the development and management of birth centres. The committee will also advocate for birth centres, develop a position statement, and facilitate research on birth centres.

NEW WORKING GROUPS

The **Working Group on Birth in Hospital Settings** will develop a position statement on midwives as primary healthcare providers in hospital settings in Canada. This position statement will be part of a three-part series of position statements on *Place of Birth*.

The **Working Group to develop a position statement on midwives as abortion providers** will advocate for increased access to abortion services across Canada through a human rights lens and the expansion of midwives' scope to include the provision of abortion care.





ACTIVITIES AND PROJECTS

1 FEDERAL ADVOCACY AND VISIBILITY

The profile and visibility of Canadian midwifery and of Indigenous midwifery was heightened during the International Confederation of Midwives (ICM) Triennial Congress in Toronto in June 2017. Advocacy efforts paid off when the (then) Minister of Health, the Honorable Jane Philpott, presented to a room filled with 4,200 midwives from around the globe that the federal government would be investing funding (\$6M) to develop Indigenous midwifery in Canada. CAM also received recognition from the office of the Minister of International Development when Celina Caesar-Chavannes, Member of Parliament for Whitby and Parliamentary Secretary to Minister Marie-Claude Bibeau, spoke of the important contributions Canadian midwives are making with respect to reproductive, maternal and newborn health around the world.

National Priorities

In October 2017, after successfully hosting the ICM Congress in Canada, the CAM Board of Directors met for a three-day retreat to re-focus CAM's work on national priorities. Key areas included:

- i. Working with provincial and territorial associations with lower capacity to better support their work (regulation, implementation, advocacy, growth of midwifery)
- ii. Offering appropriate forums to facilitate a national dialogue on the midwifery model of care
- iii. Increasing the promotion of midwifery to consumers and the general public to increase demand and promote growth of the profession.

The following activities and programs that were initiated over the last year are geared towards responding to these priorities and to continuing to advance CAM's strategic objectives.

A Support to Member Associations

CAM's commitment to supporting the capacity growth of member associations over the past year included:

- Creating a forum for midwives working in salaried models to meet and participate in collective problem solving to improve working conditions.
- Providing support to unregulated and newly regulated jurisdictions regarding midwifery implementation, including support for recruitment, media management, public communications, and insurance questions.
- Collecting relevant resources, information, and strategies from all jurisdictions to create a "clearinghouse" of information and resources at CAM.
- Developing action plans with member associations to support growth of midwifery, especially in smaller jurisdictions.

B National Discussion on Model of Care

CAM continues to support national discussions regarding the midwifery model of care by providing a platform and resources for members to discuss and share information about how midwives practice in different jurisdictions. Member associations and midwives can make use of CAM's video conferencing platform for information and resource sharing. CAM staff continue to be available to support these networking activities.

C Support for NACM

The work that CAM and NACM do together is an important part of the reconciliation needed in this country to begin addressing hundreds of years of colonialism, violence, and inequitable treatment of Indigenous Peoples. With this commitment at the heart of CAM's priorities, in Fall 2017, the CAM Board of Directors decided to increase the membership fee by \$30 per full CAM member and to dedicate the whole amount to NACM general operations. CAM will not receive any funding from this increase. The Board of Directors sees this support of increased capacity at NACM as one small step in the reconciliation process with our sister organization.

D Members' Survey

The 2018 Members' Survey opened on May 15. The Members' Survey signals the beginning of developing the next three-year strategic plan. When the Survey closed on July 9, 436 members from all provinces and territories except the Yukon had participated in the exercise to help the Board of Directors decide where to focus CAM's resources.

E Public Engagement

In late 2017, CAM successfully secured funding for a national public engagement project. These new funds will allow CAM to develop a public facing website, intended to inform the Canadian public about pregnancy and birth and to position midwives as experts in normal birth. The project allowed CAM to hire a Public Engagement and Research Coordinator, midwife consultants for website content research and validation, and a Public Relations Consultant.

Some outcomes of the project to date include:

- Design and programming of public facing website well underway since early Spring 2018. An official launch of the website is expected in the Fall of 2018.
- CAM President Katrina Kilroy interviewed on the national daytime television show *The Social* (CTV) and watched by an estimated one million live viewers and more online.
- Interview on Breakfast Television Montreal in May 2018 with midwife Trista Leggett and her client which had significant viewership across Quebec.

2 NACM REPORT

A Brining Birth Home Project

The Bringing Birth Home project motivated communities to integrate the ceremony of birth back to their land and nations, and to restore Indigenous midwives and midwifery as the primary source of reproductive knowledge. The top six success stories inspired by the project are:

- Two northern communities are working to close gaps in maternal and perinatal healthcare services for Cree and Inuit families.
- The University of British Columbia has created an Indigenous Student Coordinator position to increase support for Indigenous midwifery students.
- Stakeholders across Canada have met through NACM advocacy work and are now working together.
- Alberta Health Services now recognizes the importance of bringing midwifery back to the Wood Buffalo region.
- Provincial midwifery associations and national organizations are reaching out to NACM for advice and to form meaningful collaborations.
- The Atlantic region now has an Indigenous midwife.

Bringing Birth Home was funded by Save the Children Canada.

B Promoting Indigenous Midwifery

NACM participated on a Task Team organized by the First Nations and Inuit Health Board (FNIHB) to help determine how to distribute the \$6 million allocated for Indigenous midwifery that was announced in June, 2017. NACM and FNIHB Regional partners across the country were granted funds to promote midwifery and strategize around increasing Indigenous midwifery in Indigenous communities. NACM met with all of the FNIHB Regional Offices, and six NACM members visited nine communities across the country. There is considerable interest and activity around advancing Indigenous midwifery, particularly in Manitoba, Saskatchewan, Alberta, Ontario and the Atlantic provinces.

C New Website

NACM has been working with the CAM Communications Department to develop a new website for NACM that is scheduled to launch in Fall 2018.

D Building Relationships with National Indigenous Organizations (NIOs)

On May 21st and 22nd, NACM met with several NIOs in Ottawa, as well as with FNIHB and the Minister of Indigenous Services, Jane Philpott. The focus of the NIO meetings was to build relationships and raise the profile of NACM's work across the country and as the voice of Indigenous midwifery in Canada. NACM was exceptionally well-received, opening multiple opportunities for further engagement in the time ahead.

3 CAM GLOBAL

A Strengthening Midwifery Services (SMS II) in South Sudan

In 2017-18, the SMS II project focused on midwifery education, association strengthening with the South Sudanese Nurse and Midwifery Association (SSNAMA), supporting the professional development of midwives, and working with other professional cadres to improve maternal, newborn and child health in South Sudan. Midwifery education support consisted of producing resources such as a clinical procedure manual and a tutors' manual to help midwives learn and practice their profession. CAM Global worked alongside SSNAMA to provide support for strategic planning and capacity building. It conducted professional development workshops in Respectful Maternity Care (RMC) aimed at empowering midwives and nurses to become leaders and teachers in their workplaces. The peer-to-peer program connects midwives for learning and knowledge sharing, resulting in hundreds of communications between South Sudanese midwives and Canadian midwife participants this year. CAM also collaborated with South Sudanese doctors to develop a curriculum in emergency maternal and neonatal care and basic surgery. Inter-professional collaboration is an essential part of the work in South Sudan.

B Improved Service Delivery for Safer Motherhood (ISDSM) Phase II and More and Better Midwives Rural Tanzania (MBMRTz)

ISDSM Phase II

2018 is the ISDSM project's fifth and final year of operation (Phase I and Phase II). This project is run in collaboration with the Tanzania Midwives Association (TAMA) and funded by the Sanofi Espoir Foundation. This year CAM volunteers co-delivered Midwife Emergency Skills Training (MEST) with Tanzanian counterparts to 220 midwives. ICM midwife consultants facilitated two workshops for 26 Tanzanian educators in internationally recognized methods for hands-on midwifery education and one TAMA member became the first credentialed Competency-Based Education (CBE) teacher in Tanzania. CAM and TAMA produced three short films highlighting the accomplishments of the trainings in collaboration with the Fondation Sanofi Espoir that can be viewed on CAM's YouTube channel.

More and Better Midwives for Rural Tanzania (MBMRTz)

CAM, in partnership with TAMA, is an implementing partner in the MBMRTz project, which is led by Jhpiego, an NGO specialized in maternal and reproductive health and funded by Global Affairs Canada. The project's main goals are to improve the number of midwives working in Lake and Western Zones of Tanzania, and to improve the quality of care provided by midwives, by increasing their training and improving the facilities in which they work.

Over the past year, CAM and TAMA members developed and delivered a two-day Respectful Maternity Care (RMC) training to 175 Tanzanian midwives, and followed-up with supervisory visits. International Day of the Midwife (IDM) celebrations in Morogoro Town provided an opportunity for midwives from remote regions of Tanzania to connect with colleagues from the rest of the country. Newly developed pamphlets and workshops promoting midwifery were delivered to secondary students in rural Tanzania.

C Midwives Save Lives (MSL) Project

In 2017-18, the MSL project operated in Benin, the Democratic Republic of Congo (DRC), Ethiopia and Tanzania. MSL is being implemented by CAM in partnership with CUSO International and is funded by Global Affairs Canada. This year, a total of 20 Canadian midwife volunteers gave 2,745 hours of their time or roughly 343 days. Twelve Canadian midwives participated in the MSL project as technical experts working 1,770 hours as consultants or roughly 221 days.

Benin

Canadian midwife consultants and Beninois midwives developed a 5-day emergency skills training course for midwives that uses a participatory and competency-based education approach and is modeled after the midwives' emergency skills training used in Canada with adaptations for the Benin context. Four Canadian midwife volunteers have worked alongside Benin midwives to train 16 midwife trainers and 80 midwives using the new emergency skills training.

DRC

MSL was very active in DRC over the past year. Activities included collaboration between Canadian and Congolese midwives to:

- Develop an evidence-based 5-day emergency skills training adapted to the Congolese context that uses a hands-on approach.
- Draft a supportive supervision tool to follow in-service midwives in their clinical settings and to provide ongoing learning opportunities after their participation in the emergency skills training.
- Carry out a situational and gaps analysis of the midwifery clinical placement program for student midwives in order to develop a comprehensive action plan focused on capacity development of the schools and preceptors, collaboration between schools and hospitals, education and legalization of the scope of midwifery and philosophy of the midwifery education program and evaluation and supervision.
- Support the ongoing goal of creating a regulatory body for DRC midwives.
- Host a one-week action research workshop for 11 Congolese midwives who then formed four research groups to carry out projects on the utilization of the partogramme, Respectful Maternity Care during labour, the participation of husbands in pre-natal visits, and using GATPA.
- Develop a mentorship model, tools and workplan for the clinical mentorship of Congolese midwives. A second Canadian midwife consultant carried out a training session for 15 midwife mentors, who are now actively offering mentorship in their workplaces.



Ethiopia

Two Canadian midwife volunteers and Ethiopian midwife trainers delivered a Clinical Teaching Skills (CTS) Training course aimed at ensuring that health professionals involved in training midwife students have strong clinical teaching skills and pedagogical approaches. This is essential given the Ethiopian Government's focus on rapidly scaling up the number of midwives in the country and given the significant health workforce shortages in Ethiopia. Two Canadian midwife consultants and 18 midwifery experts in Ethiopia also met for six days of large and small workshops to prepare an initial draft of a "Midwifery Care Process" document to provide clarity on the scope of practice for in-service midwives, further differentiating them from the nursing profession in Ethiopia.

Tanzania

Three Canadian midwife volunteers have worked alongside Tanzanian midwives to train 320 in-service midwives in emergency skills in two regions in rural Tanzania.

D Saj Fanm Pou Fanm (SFPF) – Haiti

In Spring 2018, CAM began a new project to help build the Haitian government's capacity to train, recruit, hire and support midwives in the most disadvantaged areas of that country. Saj Fanm Pou Fanm is the Creole name of the project and CAM's partner is the Association des infirmières sages-femmes d'Haïti (AISFH). The five-year (2018-2022) project is funded by Global Affairs Canada (GAC) and led by the United Nations Population Fund (UNFPA). The aim is to reduce maternal and infant mortality by improving women and girls' sexual and reproductive health by strengthening the role of midwifery. Project Officer, Veronique Plouffe, joined the CAM Global team to assist with the implementation of the project and has recruited four francophone consultants to travel to Haiti in the Fall of 2018.

4 EVENTS AND COMMUNICATIONS

A ICM Triennial Congress 2017

A record-breaking 4,200 midwives from 112 countries attended the 31st ICM Triennial Congress to learn, share, meet and celebrate. The 2017 conference theme, *Midwives making a difference in the world*, was underscored by provocative and engaging presentations.

Canadian midwives and supporters from 18 different midwifery practices and groups across Canada worked to raise funds to top up HIROC's donation to CAM's Deliver Midwives to ICM Initiative that brought more than 20 International midwives to attend the 2017 ICM Congress.

B Parliamentary Reception for MSL

In honour of the International Day of the Midwife, CAM, MSL partner CUSO International and Mona Fortier, Member of Parliament for Ottawa-Vanier, hosted a reception on Parliament Hill. The event highlighted the work of the MSL Project specifically, and CAM Global in general. An event highlight was a speech given by Celina Caesar-Chavannes, Member of Parliament for Whitby and Parliamentary Secretary to the Minister of International Development, who underscored the importance of properly trained midwives to save the lives of mothers and babies.

C Canadian Journal of Midwifery Research and Practice (CJMRP)

Three volumes of the CJMRP were published in the 2017-18 reporting period.

D The Pinard Newsletter

Three volumes of the Pinard were published last year online and distributed by email, with hard copies sent by mail to approximately 350 midwifery practices.

ONLINE AND SOCIAL MEDIA PRESENCE

WEBSITE

CAM

2017.2018
2016.2017



55,489 17,490
USERS



79,353 24,818
VISITS



PAGES
VISITED

JOB APPS
16% 15%

EDUCATION
14% 13%

WHAT IS A MIDWIFE
5.5% 5%

WEBSITE

CAM-Global

2017.2018
2016.2017

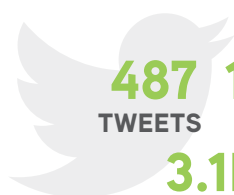


3743 1770
USERS



3704 1569
VISITS

SOCIAL MEDIA 2017.2018



487 1.9K (+517)
TWEETS FOLLOWERS
3.1K (+2K)
ENGAGEMENT



371 (+259) 5.6K (+1K)
POSTS FANS
28K (+21K)
ENGAGEMENT



16 311 (+261)
POSTS FOLLOWERS
133 (+133)
ENGAGEMENT

HIGHLIGHTS

MIDWIVES SAVE LIVES PARLIAMENTARY RECEPTION

Facebook live event watched by almost **1500** people.

INTERNATIONAL DAY OF THE MIDWIFE

Over **15 organizations** participated and thousands of individuals danced for midwifery.

MIDWIVES WORKING TOGETHER

3 part video series about Canadian and Tanzanian midwives working together was launched April 2018.

