16 1.2 Utilise and promote more digital and mobile tools and knowledge management resources to reach and support midwives and their associations (including at different stages of their professional development, and in different country contexts, digital access, and languages).

16 1.3 Facilitate an agile ICM that is constantly learning and responding to the needs of its members in new and improved ways.

17 1.4 Foster and build the next generation of midwives while leveraging the knowledge and wisdom of older generations, fostering cross-generational learning.

18 Strategic Priority 2: Develop, strengthen, and support the rollout of a new professional framework for midwifery

18 2.1 Promote midwifery as an autonomous profession with a distinct philosophy and approach to care.

19 2.2 Facilitate an enabling environment for midwives.

19 2.3 Strengthen midwifery education, regulation, associations, leadership, and model of care.

20 2.4 Synthesise and drive research, evidence, and essential competencies for the profession of midwifery.

21 Strategic Priority 3: Foster a movement for midwifery, enabling and strengthening partnerships, advocacy, and communications for midwifery, with women’s voices at the centre.

21 3.1 Leverage advocacy and communications to influence and educate policymakers and wider audiences on the impact of and need for midwives.

22 3.2 Utilise effective and equitable relationships to build and support the profession of midwifery and expand the influence of ICM.

22 3.3 Build up partnerships between women and midwives, from the individual level, to the community level, to the global level (women’s rights and empowerment, woman-centered, respectful care, and gender equality).

23 3.4 Support partnerships between midwives (support for MAs, mentorship, strong regional support, twinning).

23 3.5 Strengthen partnerships between midwives and other stakeholders, including global and national policymakers, other health professionals (obstetricians, paediatricians, nurses), traditional caregivers, other health workers and associations, and partners across sectors (SRHR, Women’s Rights, UHC, etc.).

24 Donors and Partners

25 Bill and Melinda Gates Foundation

26 Direct Relief

27 Sida

27 UNFPA (Bangladesh and Global)

28 Latter Day Saint Charities

28 Anonymous Donor

29 MacArthur Foundation

30 Johnson & Johnson Foundation

30 Private Philanthropists

32 Reflections and Future Directions

33 Triennial Financial Summary

34 Summary Statement of Income and Expenditures
As we conclude the 2021-2023 triennium, I am proud to reflect on the progress we have made towards our key strategic directions. Over the past three years, we have focused on working locally with Midwives Associations in countries, regionally within the six ICM regions, globally on behalf of the more than 1 million midwives represented by our Member Associations, and collaboratively with our partners at local, regional, and global levels.

As we navigated the uncertain landscape created by the COVID-19 pandemic, it was critical for us to remain flexible and think in terms of long-term sustainable strategies that meet the needs of midwives in all six regions. Despite the challenges, I am proud to say that ICM has remained a reliable partner and go-to organisation for all matters related to midwifery.

In 2022, we focused on improving ICM’s stability and sustainability, strengthening our relationships with partners, and enhancing our reputation as a global leader for the profession of midwifery. Over the triennium, we implemented important governance changes, and continued to build relationships with partners globally, demonstrating that ICM is a trustworthy, reliable and important partner.

As my tenure as ICM President comes to an end, I am proud to have contributed to improving ICM’s operations and sustainability, relationships with partners, and reputation as a global leader for the profession of midwifery. I am grateful to have worked with our Board Members and Head Office team to help ICM grow into the strong, resilient organisation it is today.

I look forward to seeing the continued growth of ICM under the leadership of the newly appointed President, who will need to work with the Board members to provide strategic and inspirational leadership to ICM.

Thank you to all our members, partners, and friends for your ongoing support and collaboration. Together, we can continue to advance sexual and reproductive health and rights through midwifery and build a world where every woman and gender diverse person has access to quality midwifery care.

Warm regards,

Dr. Franka Cadée
ICM President
As we approach the end of the triennium period, I would like to highlight the progress that the International Confederation of Midwives (ICM) has made over the past three years. Our work has become increasingly important as women and gender diverse people worldwide continue to face numerous challenges during pregnancy and childbirth.

The 2021-2023 triennium has been characterised by a challenging global context for midwives and women. The COVID-19 pandemic has had a profound impact on midwifery globally, with midwives at the forefront of the pandemic response; maternal mortality remains a significant global health issue, with around 295,000 maternal deaths per year, mostly occurring in low- and middle-income countries; midwives all over the world have also been providing support, emergency healthcare, and relief to women, children, and families in humanitarian crises, including in and around Ukraine, Yemen, Pakistan, Afghanistan, Syria, and Türkiye. Midwives operating in these contexts face significant challenges, including a lack of resources, security concerns, and limited access to training and support. Despite the challenges posed by the global pandemic, pushback on reproductive health and rights, high maternal mortality rates, and humanitarian crises, ICM has remained committed to promoting the importance of care by professional midwives and improving maternal and newborn health outcomes globally.

Over the past year, ICM has experienced significant growth, which has required us to strengthen our internal systems. To keep up with this growth, we have developed several plans that intersect with our Operational Plan, including a Gender, Justice, Equity, Diversity, and Inclusion (G-JEDI) plan, a Sustainability Plan, and a Monitoring, Evaluation, and Learning (MEL) plan. We are ensuring that G-JEDI principles are integrated into all ICM work and processes, recognising that midwifery is a predominantly female profession with many midwives coming from historically marginalised communities.

We are proud of the significant progress we have made on our strategic priorities through delivery of our operational plan. In addition to the cross-cutting plans mentioned above, we have also developed plans for strengthening midwifery education, midwifery regulation and Midwives’ Associations, and begun working on new regional structures that will help us work more closely and effectively with our Member Associations. Additionally, we have developed a comprehensive new professional framework for midwifery that outlines the essential components of a strong and autonomous midwifery profession with a distinct philosophy and individualised approach to care. Through our advocacy and communication efforts, ICM has continued to support partnerships between midwives, with a focus on midwives’ associations, creating networks, sharing knowledge and expertise, and working towards building a sustainable and robust profession.

Moving forward, ICM recognises the threat that climate change poses to women and communities worldwide, which directly and indirectly contributes to adverse maternal health outcomes, increased infectious disease and food insecurity, and reduced access to necessary sexual and reproductive health services. We will continue to advocate for midwives and women in vulnerable regions affected by climate change, crisis, and conflict, and increase support, resources, and protection for midwives working in these settings.

Finally, I would like to express my gratitude to the ICM Head Office Staff and Board members for their unwavering dedication to our mission. Together, we will continue to make progress towards our shared goal of ensuring that all women and families receive safe, high-quality midwifery care, with ICM being the go-to organisation for all things midwifery.

Warm regards,

Sally Pairman
Chief Executive
About Us

ICM is a global professional association and non-governmental organisation (NGO) that supports, represents and works to strengthen professional associations of midwives throughout the world to achieve common goals in the care of mothers and newborn infants. ICM operates through the engagement and representation of its Member Associations (MAs) on national, regional, and global stages.

Through advocacy for the interests of more than one million midwives worldwide in 141 Midwives’ Associations across 119 countries, ICM has established itself as the leading representative body of midwives globally and the go-to organisation for all things midwifery.

This triennium has seen ICM work in conjunction with some of the world’s leading global organisations, including the United Nations Population Fund (UNFPA), the World Health Organisation (WHO), and United Nations Children’s Fund (UNICEF); healthcare professional associations such as the International Federation of Gynaecology and Obstetrics (FIGO), International Paediatric Association (IPA), and the International Council of Nurses (ICN); government organisations such as the Swedish Development Agency (Sida), non-governmental organisations such as the Partnership for Maternal, Newborn and Child Health (PMNCH), and civil society groups such as White Ribbon Alliance; donors such as Laerdal Global Health, the Bill and Melinda Gates Foundation, Johnson and Johnson, Direct Relief, the MacArthur Foundation, Latter Day Saint Charities and the New Venture Fund.

This Triennial Report is an opportunity for ICM to assess its progress and achievements against its Strategy and to identify what still needs to be achieved. We have also reflected on what we have learned and how we want ICM to move forward to the future, the challenges we can already see and how we will address them. More detail about activities and projects carried out during this triennium can be found in the Annual Reports for 2021, 2022 and 2023.

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ICM’S VISION

ICM envisions a world where every childbearing woman has access to a midwife’s care for herself and her newborn.

ICM’S MISSION

To strengthen Midwives’ Associations and to advance the profession of midwifery globally by promoting autonomous midwives as the most appropriate caregivers for childbearing women and in keeping both normal, in order to enhance the reproductive health of women, the newborns and their families.
Governance & Operations

BOARD AND HEAD OFFICE TEAM

Over the past three years, ICM has maintained a strong focus on ensuring that we support the capacity building of midwives, midwives’ associations and health systems around sexual, reproductive, maternal and newborn health (SRMNH) to ensure that all women and gender diverse people have access to competent and professional midwives who are appropriately educated, skilled, regulated and supported to provide quality midwifery care across all settings. At a global level, ICM is a key stakeholder and partner towards the achievement of the United Nations 2030 Sustainable Development Goals (SDGs). ICM’s work impacts on all 17 goals, but we focus on SDG 3 – Good Health and Wellbeing and SDG 5 – Gender Equality. ICM recognises the strategic importance of advocating for midwives to work close to where women live if women and their families are to equitably access quality midwifery services as a key component of achieving Universal Health Coverage.

ICM has made significant changes to its Governance structure over this triennium to ensure greater representation, equity, and inclusion for the global midwives’ community. To address equity the Council decided to have one Board Member from each region (a shift from 10 to 6), effective from the June 2023 Board elections. To support these Board Members the Head Office has established Head Office Regional Teams (HORTs) who liaise closely with all Member Associations in the region, facilitating communications and networking and supporting regions to address their specific needs. Alongside the HORTs, operational Regional Professional Committees (RPCs) will bring together midwifery educators, regulators, researchers, leaders, and practitioners to help implement ICM’s Professional Framework in each region and to help inform regional work plans. Additionally, the ICM By-Laws were replaced with Board-approved Governance Policies, and the Executive Committee was disbanded. An Independent Election Committee (IEC) was appointed to support the Board election process by assessing Board Member nominees against a competency framework to ensure elected Board Members have the necessary competencies to govern ICM. The IEC is also charged with selecting the ICM Treasurer, who no longer needs to be a midwife. Finally, the requirement for the President of the ICM Board to have once sat on the ICM Board no longer applies, and future Presidential candidates need only to have served on at least one ICM Council meeting in the last triennium, as is currently the case for the Vice-President. This governance reform has been implemented to ensure that the ICM Board reflects the diversity of its global membership and that those serving are equipped with the necessary competencies to fulfill ICM’s mission.

ICM has experienced significant growth, especially over the past two years, which has necessitated strengthening our internal systems, processes and technologies. With the number of team members more than doubling over this triennium, we have devoted considerable resources to developing Human Resources policies, diversity and equity training, and improving internal communication tools and processes. Through our increased staff resources we have developed plans that crosscut our Operational Plan, including a Gender, Justice, Equity, Diversity, and Inclusion (G-JEDI) plan, a Sustainability Plan, and a Monitoring, Evaluation, and Learning (MEL) plan. We are particularly committed to ensuring that G-JEDI and sustainability principles are integrated into all ICM work and processes, recognising that midwifery is a profession that is predominantly female and that many midwives come from historically marginalised communities. By creating a more equitable and inclusive profession, we can improve outcomes for women and families everywhere.

The ICM Head Office Team, based in The Hague, Netherlands, is comprised of several teams, including the Office of the Chief Executive, Programmes and Partnerships, Advocacy and Communications, Finance and Operations, and Midwives. The Head of each team forms the Leadership Team, working closely with the Chief Executive in planning and implementing the operations of ICM and supporting the Board in its governance role. The increased capacity of the Head Office Team has enabled significant progress on our strategic priorities, some of which are highlighted in this report. Our monitoring and evaluation of the implementation of our operational and cross-cutting plans and programmatic work demonstrates our commitment to innovation and helps to showcase ICM’s influence on improving health outcomes for women and their newborns through access to care from professional midwives.
2021-2023
Global Context

THE 2021-2023 TRIENNIAL HAS BEEN MARKED BY THE CONTINUED IMPACT OF THE COVID-19 PANDEMIC ON MIDWIVES, WOMEN, AND MIDWIFERY GLOBALLY.

Midwives have been at the forefront of the pandemic response, providing essential maternal and newborn health care services and supporting women during pregnancy, birth and postpartum but also by supporting reproductive health more generally. However, the pandemic has also posed significant challenges for midwives, including shortages of personal protective equipment (PPE), staff, and resources, as well as increased workloads and stress. Pushback on hard-fought gains in sexual and reproductive health and rights, but also for women’s rights more generally, have made the triennium challenging for women and midwives.

THE 2021-23 TRIENNIAL HAS ALSO SEEN MIDWIVES ALL OVER THE GLOBE PROVIDING SUPPORT, EMERGENCY HEALTHCARE, AND RELIEF TO WOMEN, CHILDREN, AND FAMILIES IN HUMANITARIAN CRISIS.

Midwives are often the first and only healthcare professionals available to women and families in times of conflict, disaster, and displacement. In recent years, midwives have been providing essential care to those affected by humanitarian crises including in and around Ukraine, in Yemen, in Pakistan, in Afghanistan and in Syria and Türkiye. Midwives operating in these contexts face significant challenges, including a lack of resources, security concerns, and limited access to training and support. ICM continues to support member associations inaffected regions to contact their ministry of health and insist that their perspectives be included in maternity and reproductive-health related discussions at the regional and national level.

THE ICM RECOGNISES THE CRITICAL ROLE THAT MIDWIVES PLAY IN HUMANITARIAN CRISSES AND DISASTER RESPONSE.

The ICM has issued statements calling for the protection of midwives and women in conflict zones and advocating for increased support, resourcing and protection for midwives working in humanitarian crises. ICM also works to provide training and resources to midwives operating in these contexts, including guidelines for emergency obstetric and newborn care in crisis settings.

Despite these efforts, more support is needed to ensure that midwives and midwifery associations are equipped to provide essential care in humanitarian crises. The issues are compounded by the shortage of 900,000 midwives identified in the State of the World’s Midwifery report (2021), further exacerbated by the impact of Covid-19 on midwifery education globally. The ICM advocates for increased investment in building and strengthening the global workforce of midwives as well as funding for midwifery education, training and support in crisis-affected areas and the integration of midwives into emergency response planning and implementation. It is crucial to recognise the vital role of midwives in promoting maternal, newborn and reproductive health and wellbeing not only in times of crisis and to support them in their efforts to provide life-saving care to all women, newborns, and families.

In summary, the global context for midwifery remained complex in this triennium and will remain so in the coming years with the COVID-19 pandemic, high maternal mortality rates, humanitarian crises and pushbacks to reproductive health and rights posing significant challenges. However, ICM is committed to promoting the importance of universal access to professional midwives and integrated midwifery services in preventing avoidable maternal and newborn mortality and morbidity and improving health outcomes globally.
2021-2023 Strategic Priorities

In creating its 2021-2023 Strategic Priorities, ICM engaged in extensive consultation with key partners and donors, including our 143 Midwives’ Associations and the more than 1 million midwives they represent. This comprehensive approach was a way for ICM to ensure that we represent the needs and aspirations of the communities we serve. From this consultation process, ICM developed the following strategic priorities:

These strategic directions have enabled ICM to work towards the achievement of the Sustainable Development Goals and have positioned ICM as a convener of this global effort as well as an expert in creating, advising, influencing, and enabling midwives to practice their profession.

Overarching Goal: Position ICM as an expert in creating, advising, influencing, and enabling the profession of midwifery globally.

Cross-cutting:
Promote gender equality by employing a gender lens and prioritisation across all elements of the strategic plan.

1. Drive innovation and sustainability for the future of midwifery.
2. Develop, strengthen, and support the rollout of a new professional framework for midwifery.
3. Foster a movement for midwifery, enabling and strengthening partnerships, advocacy, and communications for midwifery, with women’s voices at the centre.

Over the triennial period, the International Confederation of Midwives (ICM) has made significant progress towards its first strategic priority of driving innovation and sustainability for the future of midwifery. ICM has focused on several key areas including ensuring a sustainable organisation, utilising digital tools to support midwives and their associations, facilitating an agile ICM, and building the next generation of midwives while leveraging the knowledge and wisdom of older generations.

1.1 Ensure a sustainable ICM, including human, social, economic, and environmental elements
1.2 Utilise and promote more digital and mobile tools and knowledge management resources to reach and support midwives and their associations (including at different stages of their professional development, and in different country contexts, digital access, and languages)
1.3 Facilitate an agile ICM that is constantly learning and responding to the needs of its members in new and improved ways
1.4 Foster and build the next generation of midwives while leveraging the knowledge and wisdom of older generations, fostering cross-generational learning

Regarding the sustainability of the organisation, ICM has achieved notable growth and progress. The Head Office Team has grown considerably over the triennial period, with nearly 30 members of staff located across four of ICM’s six regions. ICM has also invested in internal processes and defined, revised, and implemented operational policies and procedures that reflect its values and objectives. In addition, ICM has established an organisational structure that supports member associations and has effectively increased its capacity.
for applying for, gaining, and successfully implementing projects, many of which are conducted in partnership with local member associations.

To this end, ICM also appointed its first Chief Midwife in 2023. The new Chief Midwife will be a member of the Leadership Team, working closely with the Chief Executive to promote and represent ICM’s midwifery expertise. She will lead initiatives essential to the growth of midwifery globally including regionalisation and midwifery leadership. ICM has strongly advocated for all countries to appoint a Chief Midwife, and this milestone is an opportunity for ICM to model what this critical leadership role can do to elevate midwives and midwifery locally, regionally and globally.

1.2 Utilise and promote more digital and mobile tools and knowledge management resources to reach and support midwives and their associations (including at different stages of their professional development, and in different country contexts, digital access, and languages)

In terms of utilising digital tools to support midwives and their associations, ICM has also achieved significant progress. The organisation has implemented an e-learning programme that is well-received by member associations globally. Launched in 2022, the ICM eLearning platform hosts a set of interactive, online resources and eLearning modules for midwives, member associations, midwife educators, and regulatory authorities. ICM has also developed this member-only eLearning platform in response to needs identified by its member associations.

Regional meetings and workshops are held online for ICM member associations three times a year with interpretation services available as needed. ICM has also created robust IT systems, including an internal project management system, to support its operations. ICM continues to provide new digital channels to member midwives’ associations to connect midwives both within their respective regions and internationally.

ICM has also initiated work on a website redesign that will improve accessibility and ease of use for ICM members by the end of 2023. The new website will include a re-imagined ICM members-only section that will enable ICM Council members to efficiently fulfill their Council obligations and connect with one another. The overall plans for the new website aim is to address the diverse needs of its users by creating a more modern, engaging, and dynamic platform that provides greater functionality and ease of use, higher quality translations, and, ultimately, help drive an innovative and sustainable future for ICM.

1.3 Facilitate an agile ICM that is constantly learning and responding to the needs of its members in new and improved ways

Facilitating an agile ICM that is constantly learning and responding to the needs of its members in new and improved ways is another key area of progress. ICM has implemented the results of the biennial survey in its Member Benefits package, advocacy, and other work, and we have responded to the needs that our member midwives’ associations express. Notably, over this period, ICM has increased its advocacy support for member associations in need, writing to health authorities to advocate for women and midwives.

We have also helped member associations respond to conflict situations in Yemen, Ukraine, and Afghanistan, as well as after natural disasters in Pakistan and Türkiye. These efforts included, through grant funding from Direct Relief (DR), the launch of the ICM/DR directly into Ukraine Humanitarian Fund. This fund aims to provide direct financial assistance to ICM Member Associations in Europe, particularly in Ukraine’s neighboring countries, who are supporting the refugee and humanitarian response and supporting and complementing existing state initiatives.

The war in Ukraine and resulting refugee crisis marks the first time ICM is able to provide targeted funding to its MAs in need and the beginning of a long-term partnership between ICM and DR that will bolster the support MAs are able to provide during humanitarian emergencies. This difficult but necessary work has demonstrated that ICM’s MAs need capacity building support to prepare and deal with humanitarian disasters, and funding to do this essential work directly. Over the next triennium, ICM aims to better support its MAs, by directly funding their tailored, and local responses to providing essential maternity and reproductive health services in humanitarian emergencies.

1.4 Foster and build the next generation of midwives while leveraging the knowledge and wisdom of older generations, fostering cross-generational learning

Finally, ICM has made strides in building the capacities of the next generation of midwives while leveraging the knowledge and wisdom of older generations. We have continued the successful Young Midwife Leaders (YML) programme—funded by Johnson & Johnson and the New Venture Fund —and have implemented a new, complementary Executive Midwife Leaders (EML) programme. As part of an added feature to the 2021-2023 YML programme, the EML training is aimed at the executives of the ICM’s member associations (MAs). Five selected pilot countries—who have a participant in the YML programme and who meet selection criteria —were invited to select one member of their MA’s executive leadership to also join the YML programme. This participation on behalf of MA executives will inform future YML programme design and development by better incorporating the needs of MAs. In addition, leadership development of MA executives will help develop and expand the capacity of their respective MAs. These programmes aim to foster cross-generational learning and ensure that the future of midwifery is in capable hands.
2.1 Promote midwifery as an autonomous profession with a distinct philosophy and approach to care

2.2 Facilitate an enabling environment for midwives

2.3 Strengthen midwifery education, regulation, associations, leadership, and model of care

2.4 Synthesise and drive research, evidence, and essential competencies for the profession of midwifery

Significant work was also done on achieving Strategic Priority 2 during this triennium, focused on developing, strengthening, and supporting the rollout of a new Professional Framework for Midwifery. Completed in 2022 the Professional Framework for Midwifery built from the earlier three pillar framework that focused on education, regulation, associations and the underpinning elements of the essential competencies for midwifery practice and midwifery research. The new Professional Framework identifies 10 inter-related elements that must be in place for a strong midwifery profession and it articulates what makes midwifery unique from other health professions – our philosophy and model of care. The 10 elements are Midwifery Philosophy, Essential Competencies for Midwifery Practice, midwifery education, midwifery regulation, Midwives’ Associations, research, midwife-led continuity of care model of practice, midwifery leadership, enabling environment, and commitment to gender equality and justice, equity, diversity and inclusion. The Professional Framework for Midwifery has been developed in collaboration with midwifery experts from around the world and is intended to be used as a reference tool by midwives, midwifery educators, policymakers, and other stakeholders. The Framework provides a common language and understanding of midwifery practice, which can help to strengthen the profession and improve the quality of care provided to women and their families.

Across the triennium ICM has collaborated with member associations to help them advocate for an autonomous midwifery profession, separate from nursing. This has included extensive workshops that focused on exploring the Professional Framework and providing guidance as to how to leverage its contents in their national and regional advocacy, such as the importance of having the scope of practice of a midwife defined in policy and regulation.

2.2 Facilitate an enabling environment for midwives

ICM has collaborated with global partners such as the World Health Organization (WHO) and the United Nations Population Fund (UNFPA), as well as national partners like those in Zambia, to create opportunities for the development of midwifery in countries. In 2021 ICM, in collaboration with Ariadne labs, produced a policy brief and implementation guidelines for in-country ministries of health and Midwives’ Associations to address the policies, structures, systems, and resources that are needed to optimise a professional midwife workforce appropriately integrated into maternal and newborn health services and able to provide high quality midwifery care.

Zambia responded to an Expression of Interest to undertake ICM’s Midwifery Services Framework (MSF) in Zambia and was accepted as a pilot country in 2020. ICM’s Midwifery Services Framework serves to develop and strengthen Sexual Reproductive Maternal Newborn and Child Health (SRMNH) services in a country. It is a step-by-step, evidence-based approach, which supports the implementation and integration of a midwife-led model of care into a country’s health system. ICM’s Enabling Environment Policy Brief (2021) was utilised and tested as a component of MSF.

Delayed by Covid-19 and in-country elections, implementation of MSF commenced in 2022. ICM collaborated with its member association, the Midwives’ Association of Zambia (MAZ), in the implementation of the MSF. A major achievement came early in 2023, when Zambian Minister of Health, Sylvia T. Masebo, outlined a commitment to ensuring women have access to well-trained and well-regulated midwives within the country’s newly launched 2022-26 National Health Strategic (NHS) Plan. The MSF priorities continue to be implemented by MAZ, the Zambian Ministry of Health and ICM to achieve the country’s objectives for midwifery and maternal and newborn health services.

2.3 Strengthen midwifery education, regulation, associations, leadership, and model of care

ICM has collaborated with partners to strengthen midwifery education through the Alliance to Improve Midwifery Education (AIME), established in 2021. This is a global initiative, led by UNFPA and initially funded by the Johnson & Johnson Foundation. Core partners are UNFPA, ICM, WHO and UNICEF and many other partners such as Laerdal Global Health (LGH), are members. AIME aims to improve quality of care for women, newborns and their families through strengthening midwifery education, training and the professionalisation of midwives. AIME’s strategy includes coordination and collaboration with a wide range of
ICM's third Strategic Priority for this triennium focuses on fostering a movement for midwifery, enabling and strengthening partnerships, advocacy, and communications for midwifery, with women's voices at the centre. In this triennial period, ICM has made significant progress in achieving the sub-priorities of this strategic priority.

3.1 Leverage advocacy and communications to influence and educate policymakers and wider audiences on the impact of and need for midwives

One major accomplishment in terms of advocacy and communications to influence and educate policymakers and wider audiences on the impact of need for midwives has been the launch of the PUSH Campaign. The PUSH Campaign is an multi-partner iniciative launched by the...
International Confederation of Midwives (ICM) to promote and protect the rights of women and newborns to quality midwifery care worldwide. The campaign seeks to raise awareness of the role of midwives in providing respectful and woman-centred care, reduce the global shortage of midwives, and advocate for the integration of midwifery into universal health coverage policies.

Some of the key achievements of the PUSH Campaign include:

- The development of a global social media campaign to raise awareness of the role of midwives in providing quality care, and to mobilise support for the campaign.
- Collaboration with key partners and stakeholders.
- Campaign launch in New York City during UNGA.
- Regional consultations and collaborations with midwives in Africa and South-East Asia with our Regional Coordinators.
- Development of advocacy e-learning module and video.
- The production of a series of advocacy materials, active and regular digital communications.

Overall, the PUSH Campaign has been a key driver of ICM’s efforts to foster a movement for midwifery, enabling and strengthening partnerships, advocacy, and communications for midwifery, with women’s voices at the centre. Through its activities and initiatives, the campaign has helped to raise the profile of midwifery and promote the role of midwives in ensuring safe, respectful, and quality care for women and newborns worldwide.

Additionally, ICM has delivered SMART advocacy and Advocacy 101 workshops in Mexico, Bangladesh and Zambia, providing midwives’ associations and midwives with the advocacy skills required to educate policymakers and wider audiences on the importance of midwives in maternal and newborn health care.

3.2 Utilise effective and equitable relationships to build and support the profession of midwifery and expand the influence of ICM

ICM has continued to collaborate with other healthcare professions through the Partnership for Maternal, Newborn, and Child Health (PMNCH) Healthcare Professional Association, building relationships and understandings to support collaborative practice between the professions engaged in maternal and newborn health care. The HCPA collaborated on a joint response to a challenge laid down by WRA asking how the professions would implement respectful care.

Ongoing collaboration with the International Federation of Gynecology and Obstetrics (FIGO) has also enabled dialogue and the development of joint position statements, for example, on Postpartum Haemorrhage (PPH). In 2023 ICM and FIGO will collaborate on two panels at the IMNHC in Cape Town sharing their perspectives on how gender inequality affects female midwives and obstetricians and how leadership impacts both professions.

ICM’s President and Chief Executive regularly attend international events, ensuring representation and ongoing dialogue with stakeholders.

3.3 Build up partnerships between women and midwives, from the individual level, to the community level, to the global level (women’s rights and empowerment, woman-centered, respectful care, and gender equality)

ICM has prioritised building partnerships between women and midwives, from the individual level to the global level, promoting women’s rights and empowerment, woman-centred and respectful care, and gender equality. These have been the focus of the Advocacy 101 and SMART Advocacy trainings, as well as being at the centre of the PUSH Campaign activities.

3.4 Support partnerships between midwives (support for MAs, mentorship, strong regional support, twinning)

ICM has continued to support partnerships between midwives, with a particular focus on midwife associations (MAs). Through mentorship and strong regional support, midwives have been able to form networks, share knowledge and expertise, and work towards building a sustainable and strong profession. The Twin to Win Pilot Project has further facilitated partnerships between midwives from different regions and countries.

The goal of the Twin to Win project is to create a sustainable and equitable platform for knowledge sharing and professional development for midwives. The twinning model provides opportunities for knowledge exchange, capacity building, and peer support, and it helps midwives in both HICs and LMICs to improve the quality of care they provide.

The Twin to Win Pilot Project is an important initiative for ICM in achieving its strategic priority of fostering a movement for midwifery and strengthening partnerships. It has the potential to create sustainable partnerships between MAs and to facilitate knowledge exchange, capacity building, and peer support, ultimately leading to improved quality of care for women and newborns.

In 2022, ICM also recruited candidates to form the first Regional Professional Committees. The purpose of each Committees is to support ICM to strengthen the midwifery profession regionally and in alignment with the ICM Professional Framework. As operational committees, the Regional Professional Committees will help to build positive working relationships and networks between midwife educators, midwife regulators, midwife researchers, emerging leaders and Midwives Associations (MAs) within regions. The Regional Professional Committees will help communicate and implement ICM’s work plans for strengthening midwifery education, regulation, research, and practice across and between ICM’s six regions.

3.5 Strengthen partnerships between midwives and other stakeholders, including global and national policymakers, other health professionals (obstetricians, paediatricians, nurses), traditional caregivers, other health workers and associations, and partners across sectors (SRHR, Women’s Rights, UHC, etc.)

ICM has continued to strengthen partnerships between midwives and other stakeholders, including global and national policymakers, other health professionals, traditional caregivers, and partners across sectors via the PUSH Campaign. Similarly to sub-priority 3.2, ICM has continued to work with various stakeholders from other health professions, from other professional organisations, from rights groups, especially those in the field of sexual and reproductive health and rights, donors and humanitarian organisations.
Donors and Partners

Projects and collaborations with ICM’s donors and partners have allowed ICM to work towards achieving our Strategic Priorities and Outcomes, and specifically have contributed to:

- ICM’s Professional Framework
- Building ICM’s and our Member Associations’ capacity
- Realising ICM’s Theory of Change
- Retaining and developing strategic partnerships, coalitions and campaigns

In this triennium, ICM’s project and consultancy income was over 5.5 million USD.

BILL AND MELINDA GATES FOUNDATION

<table>
<thead>
<tr>
<th>PROJECT</th>
<th>BUDGET &amp; TIMELINE</th>
<th>HIGHLIGHTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Next Phase of ICM</td>
<td>Budget: $4.5 million, Timeline: 2023-2026</td>
<td>ICM negotiated a longer term, core grant from the Foundation to continue to strengthen its organisational capacity and to develop and implement the new triennium strategy (2024-2026)</td>
</tr>
<tr>
<td>Strengthening Midwifery Globally</td>
<td></td>
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</tbody>
</table>
| Strengthening Midwifery Service (SMS)        | Budget: $4.8 million, Timeline: 2018-2022 (no cost extension granted for 2023) | The SMS project has enabled ICM to support its member associations, national governments, and other local, regional and global stakeholders to improve midwifery services, thereby improving maternal and newborn health outcomes. ICM created and piloted several tools and resources which resulted in:
- Strengthening capacity of its member associations
- Improving quality of midwifery education
- Supporting national governments to improve their maternal and newborn health services
ICM’s own organisational capacity was also strengthened as a result of this project. |
<p>| Midwife-led Birthing Centre (MLBC)           | Budget: $0.9 million, Timeline: 2021-2023                                       | ICM is leading a research project to find out ‘what works’ and ‘why’ in relation to midwife-led birthing centres (MLBCs) in low- and middle-income countries (LMICs). The overall objective of this study is to provide evidence to support the scaling of MLBCs in LMICs. By identifying where MLBCs have been established and understanding the components that need to be in place for them to be successful, we can identify opportunities for making them available to more women in more countries. |</p>
<table>
<thead>
<tr>
<th>PROJECT</th>
<th>BUDGET &amp; TIMELINE</th>
<th>HIGHLIGHTS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ukraine Disaster Relief Support</strong></td>
<td>Budget: $0.6 million  Timeline: 2022-2023</td>
<td>When humanitarian emergencies occur, midwives are well-positioned to deliver primary health services, including quality and respectful maternal and newborn care. In March 2022, ICM conducted some preliminary needs assessment with the ICM Midwives Associations (MAs) in the Eastern Europe region to find out about their needs and their involvement in the Ukrainian crisis. Through these initial consultations several urgent needs have been identified in the Ukrainian neighbouring countries where MAs operate. Following this, ICM applied for and received funding from Direct Relief, to provide direct financial assistance to ICM Member Associations in Europe working with the Ukrainian refugees. ICM is supporting MAs in Estonia (Estonian Midwives Association), Hungary (Hungarian Midwives’ Association), and Romania (Independent Midwives association of Romania) to provide help (materials, hospital equipment, counselling support) to thousands Ukrainian mothers and pregnant women refugees who have been displaced because of the War.</td>
</tr>
<tr>
<td><strong>PUSH Campaign</strong></td>
<td>Budget: $0.2 million  Timeline: 2022-2023</td>
<td>Launched in 2022, the PUSH Campaign is a decade-long global multi-partner campaign that centres midwives to reduce maternal and neonatal mortality, advance reproductive justice, and shift underlying gender norms that undervalue women's rights, lives, and work. The Campaign ties together Sustainable Develop Goal (SDG) 3, focused on good health, and SDG 5, focused on gender equality, to elevate midwives in funding and policy priorities and build public awareness of the unique and integral role midwives play in achieving better outcomes for women and newborns and upholding reproductive rights – all critical components to advancing gender equality. PUSH focuses on positioning midwifery as a women's rights issue, rather than just a health issue, through a brand identity that is new, fresh, and exciting.</td>
</tr>
<tr>
<td><strong>Core financial support to Implement ICM’s Triennial Strategy 2021-2023</strong></td>
<td>Budget: $3.08 million  Timeline: 2020-2023</td>
<td>Sida provided ICM with its second core grant which has helped ICM to strengthen its organisational capacity to implement the 2021-23 strategic priorities. (The first Core grant was from Direct Relief in 2020).</td>
</tr>
<tr>
<td><strong>BMS Association Strengthening (UNFPA Bangladesh)</strong></td>
<td>Budget: $60,000  Timeline: 2023-2026</td>
<td>ICM aims to support BMS during 2023-2026 in becoming strong and financially sustainable. ICM believes that BMS with a strong institutional capacity and robust leadership and advocacy, will raise the profile of midwives and midwifery, increase the engagement and influence in health policy decision-making and planning processes, support the implementation of the ICM’s Professional Framework for Midwifery and enable high-quality SRMNH care in Bangladesh.</td>
</tr>
<tr>
<td><strong>ICM Midwifery Education and Congress Sponsorship (UNFPA Global)</strong></td>
<td>Budget: $0.44 million  Timeline: 2021-2023</td>
<td>ICM has been collaborating with UNFPA during the 2021-2023 triennium with focus on (a) coordinating a global approach to strengthening the midwifery profession and improving the quality of care by midwives, (b) strengthening quality midwifery education while building synergies with other global partners, and (c) jointly advocating for midwives and their profession.</td>
</tr>
</tbody>
</table>
**LATTER DAY SAINT CHARITIES**

<table>
<thead>
<tr>
<th>PROJECT</th>
<th>BUDGET &amp; TIMELINE</th>
<th>HIGHLIGHTS</th>
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</thead>
<tbody>
<tr>
<td>More Happy Birthdays (MHB)</td>
<td>Budget: $0.2 million</td>
<td>The MHB project expanded on the 50KHB activities by combining the HMS and HBS suite of skills-based training and low dose high frequency (LDHF) practice with Maternity Foundation's innovative Safe Delivery Application (SDA) as an effective capacity development and performance support framework. An additional 1500+ providers were trained from 106 newly identified health facilities. Additional emphasis was placed on collaborating with the Rwanda Society of Obstetricians and Gynecologists (RSOG) and Rwanda Paediatric Association (RPA) to align training for all MNH providers. There was a greater emphasis on capacity building of the Midwives' Association.</td>
</tr>
<tr>
<td>Budget: $0.2 million</td>
<td>Timeline: 2021-2022</td>
<td></td>
</tr>
</tbody>
</table>

**ANONYMOUS DONOR**

<table>
<thead>
<tr>
<th>PROJECT</th>
<th>BUDGET &amp; TIMELINE</th>
<th>HIGHLIGHTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young Midwife Leaders 3.0</td>
<td>Budget: $0.25 million</td>
<td>YML is one of the ICM's major long-term investments into delivery of our strategic priorities and our commitments to strengthen midwives globally. Funds from this anonymous donor provided match funding to ensure ICM could fulfill its ambition of expanding the project to more early career midwives.</td>
</tr>
<tr>
<td>(YML 3.0)</td>
<td>Timeline: 2021-2023</td>
<td></td>
</tr>
<tr>
<td>PUSH Campaign</td>
<td>Budget: $0.1 million</td>
<td>Launched in 2022, the PUSH Campaign is a decade-long global campaign that centres midwives to reduce maternal and neonatal mortality, advance reproductive justice, and shift underlying gender norms that undervalue women's rights, lives, and work. is a decade-long global campaign that centres midwives to reduce maternal and neonatal mortality, advance reproductive justice, and shift underlying gender norms that undervalue women's rights, lives, and work. Funds from this anonymous donor provided invaluable contribution to ensure PUSH Campaigns visibility across various global events.</td>
</tr>
<tr>
<td></td>
<td>Timeline: 2022-2023</td>
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</table>

**MACARTHUR FOUNDATION**

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<thead>
<tr>
<th>PROJECT</th>
<th>BUDGET &amp; TIMELINE</th>
<th>HIGHLIGHTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strengthening Midwifery in Mexico</td>
<td>Budget: $0.2 million</td>
<td>ICM secured support from the MacArthur Foundation to strengthen the MA’s (Asociación De Parteras Profesionales) advocacy capacity. As a first step, we worked with the MA to complete a baseline assessment of advocacy skills and competency. We developed a series of workshops, attended by 50 midwives each, based on the advocacy skills needing development: 3 focused on skills building, and 2 were on analysis and evidence. The project aimed to respond to the objectives of the MacArthur initiative, as well as government recommendations and strategies suggested by midwives in Mexico. Both aim to increase the availability of midwives in Mexico and to improve their integration into the health system thereby contributing to improved access, availability, and quality of midwifery services for women and their newborns in the country. In 2022, we supported the APP (Asociación de Parteras Profesionales), to conduct an advocacy needs assessment exercise, focused on advocacy planning, conducting advocacy, and advocacy processes, which would later inform a strategy and package of resources to support APP to advocate for a stronger midwifery profession that can improve health outcomes for women, newborns and families. As a result of this work, APP, with technical support from ICM, developed an advocacy plan with the priority areas for advancing midwifery in Mexico. APP also developed a virtual platform for midwives, which helps midwives separated by geography to feel a sense of community, share information, gain insights from their colleagues, and encourage one another. It is facilitated by APP at the highest level, keeping its membership updated on the execution of the advocacy plan as well as skill-building opportunities.</td>
</tr>
<tr>
<td></td>
<td>Timeline: 2018-2022</td>
<td></td>
</tr>
<tr>
<td>PROJECT</td>
<td>BUDGET &amp; TIMELINE</td>
<td>HIGHLIGHTS</td>
</tr>
<tr>
<td>------------------------</td>
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</tr>
</tbody>
</table>
| Young Midwife Leaders 3.0 (YML 3.0) | Budget: $0.15 million  
Timeline: 2021-2023 | YML is one of the ICM's major long-term investments into delivery of our strategic priorities and our commitments to strengthen midwives globally.  
YML identifies and cultivates leadership among early-career midwives with clear ambition to solve some of the biggest challenges they face in their daily work and within their communities. We aim to empower, galvanise, and motivate this selected group of outstanding midwives to lead their respective MAs and become leaders at regional and international level. |
| PUSH Campaign          | Budget: $0.3 million  
Timeline: 2022-2023 | Launched in 2022, the PUSH Campaign is a decade-long global campaign that centres midwives to reduce maternal and neonatal mortality, advance reproductive justice, and shift underlying gender norms that undervalue women's rights, lives, and work. The Campaign ties together Sustainable Develop Goal (SDG) 3, focused on good health, and SDG 5, focused on gender equality, to elevate midwives in funding and policy priorities and build public awareness of the unique and integral role midwives play in achieving better outcomes for women and newborns and upholding reproductive rights – all critical components to advancing gender equality. PUSH focuses on positioning midwifery as a women's rights issue, rather than just a health issue, through a brand identity that is new, fresh, and exciting. |
Reflections and Future Directions

AS WE CONCLUDE THIS TRIENNIAL REPORT, IT IS IMPORTANT TO REFLECT ON THE PROGRESS MADE TOWARDS ACHIEVING OUR GOALS, BUT ALSO ACKNOWLEDGE THAT THERE IS STILL WORK TO BE DONE. THE JOURNEY TOWARDS IMPROVING MATERNAL AND NEWBORN HEALTH IS A MARATHON, NOT A SPRINT, AND WE MUST CONTINUE TO WORK TOWARDS THIS GOAL SUSTAINABLY AND PERSISTENTLY.

One of the challenges ahead of us is the need to create frameworks to support member midwives’ associations in fragile and humanitarian settings. This is particularly important given the rise in conflicts, climate change, and natural disasters that have affected many communities around the world. We need to ensure that midwives have the necessary support and resources to provide quality care to women and their newborns in these settings.

Furthermore, as we look to the future, it is essential that we continue to promote the midwife-led model of care globally. Research shows that universal coverage of care by midwives who are educated and regulated to ICM’s global standards, working as part of a team and in an enabling environment, could avert 2/3 of preventable maternal and newborn deaths and still births. Good quality midwifery care improves over 50 other outcomes. Midwives also have a key role in providing other sexual and reproductive health services. When working autonomously across their whole scope of practice midwives can bring their philosophy and respectful, individualised approach to care to each woman, baby and family they work with. Quality services can be achieved when midwives are effectively integrated into health systems that fully utilise their skills as members of the wider health team. It is, therefore, imperative that we advocate for the integration of midwife-led services in national health systems and ensure that midwives are recognised and respected for their expertise and contribution to maternal, newborn and reproductive health.

Finally, we must also focus on growing as a sustainable ICM. This involves building strong partnerships with our members and stakeholders, strengthening our organisational structure and governance and ensuring that our financial resources are managed effectively. By doing so, we can ensure that ICM remains a strong and effective voice for midwives globally and continues to make a positive impact on the lives of women and their newborns.

The progress made in the last triennium has been significant, but there is still much to be done. We must remain committed to our goals, recognise the challenges ahead of us, and continue to work towards creating a world where all women, gender diverse people and newborns have access to quality midwife-led care.

Triennial Financial Summary

The table below summarises ICM’s financial position across the triennium 2020-2022. The complete financial statements are available in the relevant approved ICM Annual Reports.

The summary shows that over the triennium, ICM’s income has exceeded the expenses and consequently, ICM’s general reserve and the Congress Fund improved significantly. The main factors that contributed to this positive financial result during this period are:

- In 2019 the Council approved a new membership fee structure, commencing in 2020. Due to this new structure the membership fee increased from €375K in 2019 to €444K in 2022. A transition plan was agreed to ease members into the new fee structure considering the increase of fees and the Covid-19 pandemic.
- Due to Covid-19 pandemic the Triennial Congress 2020 in Bali was postponed and as an alternative, in 2021 ICM organized a virtual Congress. This was a success and a positive result of €373,585 was achieved, which was not only much better than the Congress 2017 in Toronto (€47,288), but also much better than expected. In 2022 it was again possible to physically attend meetings and events, which resulted in the board and representation expenditure returning to normal levels.
- In 2022 Bill and Melinda Gates Foundation confirmed a reinvestment through a new core grant, “Next Phase of ICM Strengthening Midwifery Globally”, which grants ICM with core funding of $4,500,000 from 28 October 2022 to 31 December 2026.
- Besides the core support from stakeholders ICM received circa €5.0 million in project related funding. With this funding ICM was able to achieve the strategic goals and to implement several activities in multiple countries. Due to COVID-19 limitations it was not possible to physically attend meetings, workshops, representation, etc. Virtual technologies replaced face-to-face meetings, reducing costs, and also contributing to the positive result. In 2022 it was again possible to physically attend meetings and events, which resulted in the board and representation expenditure returning to normal levels.

Whilst ICM is very dependent on grants from donors, we are working on activities to generate our own income to ensure the long-term financial sustainability of ICM. These include potential fee-for-service activities and consultancies.
## Summary Statement of Income and Expenditures

### 2020-2022

<table>
<thead>
<tr>
<th></th>
<th>Actual 2020</th>
<th>Actual 2021</th>
<th>Actual 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>EUR</td>
<td>EUR</td>
<td>EUR</td>
</tr>
<tr>
<td><strong>INCOME</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership Fee</td>
<td>366,755</td>
<td>400,674</td>
<td>444,249</td>
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<tr>
<td>Grants Core funding</td>
<td>211,680</td>
<td>777,831</td>
<td>840,568</td>
</tr>
<tr>
<td>Grants Project funding</td>
<td>1,415,685</td>
<td>1,407,933</td>
<td>1,932,871</td>
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<tr>
<td>Other income</td>
<td>14,564</td>
<td>1,467,721</td>
<td>150,947</td>
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<tr>
<td><strong>TOTAL INCOME</strong></td>
<td>2,008,685</td>
<td>4,054,159</td>
<td>3,368,635</td>
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<tr>
<td><strong>EXPENDITURE</strong></td>
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<tr>
<td>Personnel cost</td>
<td>854,705</td>
<td>1,384,266</td>
<td>1,472,369</td>
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<tr>
<td>Board</td>
<td>27,416</td>
<td>31,679</td>
<td>62,435</td>
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<tr>
<td>Representation</td>
<td>3,696</td>
<td>131</td>
<td>64,767</td>
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<tr>
<td>Professional Services</td>
<td>266,430</td>
<td>231,231</td>
<td>203,281</td>
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<tr>
<td>General office cost</td>
<td>115,914</td>
<td>173,622</td>
<td>111,840</td>
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<tr>
<td>Events and programme</td>
<td>730,693</td>
<td>1,775,188</td>
<td>1,082,546</td>
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<td><strong>TOTAL EXPENDITURE</strong></td>
<td>1,998,854</td>
<td>3,596,117</td>
<td>2,997,238</td>
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<tr>
<td><strong>OPERATIONAL RESULT</strong></td>
<td>9,830</td>
<td>458,042</td>
<td>371,397</td>
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<tr>
<td>Financial (income)/cost</td>
<td>4,159</td>
<td>19,780</td>
<td>13,028</td>
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<tr>
<td><strong>TOTAL RESULT</strong></td>
<td>13,989</td>
<td>477,822</td>
<td>384,425</td>
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### Funds and Reserves

<table>
<thead>
<tr>
<th></th>
<th>Balance end of 2020</th>
<th>Balance end of 2021</th>
<th>Balance end of 2022</th>
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<tbody>
<tr>
<td></td>
<td>EUR</td>
<td>EUR</td>
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<tr>
<td><strong>FUNDS AND RESERVES</strong></td>
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<tr>
<td>General Reserve</td>
<td>158,311</td>
<td>291,576</td>
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<tr>
<td>Safe Motherhood Fund</td>
<td>169,130</td>
<td>141,161</td>
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<td>Congress Interpretation Fund</td>
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<tr>
<td>Membership Assistance Fund</td>
<td>9,132</td>
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<td>Regional Conference Fund</td>
<td>1,227</td>
<td>918</td>
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<td>Congress Fund</td>
<td>8,312</td>
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<td>Dorothea Lang Fund</td>
<td>17,542</td>
<td>16,792</td>
<td>15,297</td>
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<tr>
<td>Chapel &amp; York</td>
<td>-</td>
<td>-</td>
<td>39,577</td>
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<tr>
<td><strong>TOTAL FUNDS AND RESERVES</strong></td>
<td>363,654</td>
<td>841,476</td>
<td>1,225,901</td>
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### Appropriation of the Result

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<thead>
<tr>
<th></th>
<th>Actual 2020</th>
<th>Actual 2021</th>
<th>Actual 2022</th>
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<tbody>
<tr>
<td></td>
<td>EUR</td>
<td>EUR</td>
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</tr>
<tr>
<td>General Reserve</td>
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<td>133,265</td>
<td>359</td>
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<tr>
<td>Safe Motherhood Fund</td>
<td>1,918</td>
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<tr>
<td>Congress Interpretation Fund</td>
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<td>Regional Conference Fund</td>
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<td>Congress Fund</td>
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<td>373,585</td>
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<td>Chapel &amp; York</td>
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<td>39,577</td>
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<tr>
<td>Dorothea Lang Fund</td>
<td>-604</td>
<td>-750</td>
<td>-1,494</td>
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<td><strong>TOTAL APPROPRIATION OF THE RESULT</strong></td>
<td>13,989</td>
<td>477,822</td>
<td>384,425</td>
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</table>