Commitment to Strengthening Midwifery – The Time is Now!
Message from ICM President, Bridget Lynch

The last few months have been extraordinary on the world stage in regard to commitments to reduce maternal and infant mortality globally. In June, the G8 made maternal, newborn and child health a priority during their meeting in Canada. In September, in New York, UN Secretary General Ban Ki Moon launched *Every Woman, Every Child*, the global strategy for women’s and children’s health. This initiative calls for commitments on the part of donor countries, foundations, business, professional associations, academics and low-resource countries within a cohesive global strategy.

More than 40 billion dollars have been committed by donor countries and foundations over the next five years to reduce maternal and infant mortality in 49 low-resource countries. Low and middle income countries have committed to improving their health care systems, and many of these countries have specifically committed to further develop the midwifery workforce.

ICM is well positioned to contribute to this global initiative. Many governments are looking for guidance in the education and regulation of midwives. ICM Task Forces are in the process of completing global standards for education and regulation, and the ICM Essential Competencies for Basic Midwifery Practice are also in the final stages of being updated. These will be essential documents for governments and policy makers in strengthening midwifery and creating a more cohesive midwifery profession globally.

Road to Durban Campaign
Highlighting the Role of Midwives Globally

This month marks the launch of the ICM *Road to Durban* campaign. This campaign will highlight the role of midwives in all our countries on International Day of the Midwife, 5 May 2011. Our Member Associations are being called upon to start now to organise 5 kilometre walks in capital cities and towns across each of our countries.

Midwives, the women and families we care for, our supporters and local dignitaries are invited to walk together to highlight the plight of marginalised mothers and their families and to emphasise the role of midwives in improving maternal and newborn health. During this walk and the rallies that follow, we will also be identifying the particular issues facing women and their newborns in sub-Saharan Africa.

Imagine thousands of midwives and supporters around the globe walking thousands of kilometres on International Day of the Midwife to improve maternal and newborn health. Imagine the energy and connectedness of these events which we will share over the internet as they happen. Let’s work together to make this campaign a global success!

The campaign will culminate in Durban, South Africa, the day before the opening of the 29th ICM Congress. On 18 June 2011, the midwives attending the Congress, our families and our global supporters will walk five kilometres into Durban. This march will highlight the need for a strong and visible midwifery workforce in sub-Saharan Africa to reduce maternal and infant morbidity and mortality.

Come to Durban and let’s make that march the largest march of midwives the world has ever seen!
This ICM Congress promises to be a historic event for ICM. It is the first time we are hosting a Congress in sub-Saharan Africa. It will feature an outstanding Scientific Program from midwifery researchers globally, as well as panels with our global partners from the UN and international NGOs.

Our speakers will include First Ladies from Africa and other women of distinction. We will also be launching our new global standards and revised competencies.

At the same time, this is also a politically significant Congress. The eyes of the world are on midwives for the first time as a key workforce to reduce maternal and newborn morbidity and mortality.

This is a Congress where the midwives of the world must demonstrate our strength, unity and commitment to work together to strengthen midwifery and achieve Millennium Development Goals 4, 5 and 6 in sub-Saharan Africa.

The midwives of Africa cannot do this alone. They need the midwives of the world to gather with them, to highlight their visibility and to strengthen the profession.

The Road to Durban Campaign and the ICM Congress are a golden opportunity to make midwifery highly visible in all our countries and to show the world that midwives care for women and their newborns wherever they live. Make your plans to come to Durban and be counted as a midwife who is committed and cares for the women and newborns of the world.

Bridget Lynch
President
International Confederation of Midwives

Find out more about the Road to Durban
"Primary Health Care: Many Perspectives - One Goal" - VIII Conference of the Global Network of the World Health Organization (WHO) Collaborating Centres for Nursing and Midwifery, Sao Paolo, Brazil, July 28-30, 2010

The Global Network of WHO Collaborating Centers for Nursing and Midwifery in Sao Paulo, Brazil hosted the meeting of Collaborating Centres followed by the conference "Primary Health Care: Many Perspectives - One Goal". This eighth conference was organised by Dr Isabel Amélia Costa Mendes and Dr Carla A. Arena Ventura. The goal of the VIII Conference was to discuss national and international guidelines for the establishment of policies and practical strategies, with a view to concreting actions by nursing and midwifery professionals at different complexity levels, in the light of the primary health care renewal movement. It is the first time that this event, which is held every two years, has taken place in Brazil. In attendance were over 500 professionals from more than 20 countries.

The International Confederation of Midwives was invited to be part of the first plenary session and was represented by Vice-President, Frances Day-Stirk, sharing the platform on Challenges for Nursing and Midwifery to Achieve Primary Health Care Goals with David Benton (International Council of Nurses), Joyce Thompson (University of Michigan), Maria Goretti David Lopes (Nurses Association Brazil), Silvina Malvarez, (PAHO). The session was coordinated by Miriam Hirchfeld (Yezreel Valley College, Israel).

http://www.primarycareconference.com/program.html

With a focus on the Midwifery Challenges in the delivery of primary health care, Frances addressed the role of the midwife as a primary care provider, maternal mortality, socio-economic factors, and the three pillars of strengthening midwifery – education, regulation and association development. Her presentation reflected on the concept of PHC, MDGs, challenges affecting midwifery and the work of ICM in addressing these challenges. The renewal of WHO’s primary health care goal “Primary care, now more than ever” was linked to the IDM theme ‘The world needs midwives now more than ever’. Hilda Bonilla, of the Chile Midwives’ Association and Valdecyr Herdy Alvez, President of ABENFO, also participated. Dr Jemima Dennis-Antwi (Regional Midwife Adviser Anglophone Africa) represented the ICM and also presented an abstract. Her account follows:

On the evening of July 28th at the opening session, Princess Muna Al-Hussein from Jordan (a very strong advocate for MNCH) gave the keynote address. By video link, Margaret Chan, WHO Director-General, shared her vision and expectations for primary health care improvements within health systems of the world and urged all countries to re-consider the tenets of the primary health care concept and their relevance to health promotion in contemporary times.

Pre-conference workshops held on 28 July 2010 were on a range of topics, two of which are highlighted:

1) Nursing, midwifery, the environment and how the environments at home, workplace, office and community affect the health of health professionals and their patients. Nurses and midwives were urged to champion causes to reduce the danger that substances pose to their work and their environments.

Best practices were shared from the US and nursing and midwifery educators were urged to critically look at including a session on the issue in education to create the needed consciousness.

2) A workshop on ‘Changes in Midwifery Education to Achieve Safe Motherhood’ was led by Professor Joyce Thompson (University of Michigan School of Nursing and a consultant to ICM) and other colleagues. Their presentations reflected on healthy women, issues affecting women’s health, the MDGs, midwifery model of care and the essential competencies for midwifery education for safe motherhood.

The actual conference was held from 29-30 July with morning plenary sessions and afternoon poster and simultaneous sessions. Dr Dennis-Antwi also showcased the work of ICM ‘Investing in Midwives Programme’, a poster presentation on Standardisation of Midwifery Education and Practice for Optimal Maternal and Newborn Health.

Key outputs, lessons and recommendations:

1) Midwives and nurses need to continually reflect on the basics of the PHC concept and its relevance to MDG achievements.

2) Interactions with key speakers at the conference revealed that there are very few WHO collaborating centres in Africa, thereby limiting the opportunities for Africa midwifery and nursing visibility internationally.

There is a key role for ICM leadership in working with its structures and the WHO to expand visibility and to keep focus on PHC concept in its midwifery model of care.
There is the need for Professional Associations to have as one of their mandates, the critical participation in and contribution to all policy decision-making on issues impacting on maternal and newborn health because of the indispensable roles they play in preparing and nurturing women to successfully assume their natural positions as “bringers and sustainers of God’s gift of life”. This role must be closely guarded by midwives and used as a powerful tool for profiling quality midwifery as the panacea to improved MNH.

My observations made in the six sub-Saharan African countries where I have had the privilege to work including Ethiopia, Ghana, the North and South Sudan, Uganda and Zambia show that in instances where the Professional Associations exist as autonomous and recognised national bodies representing all cadres of midwives, they have in their modest ways contributed to policy decision-making and multidisciplinary care.

Assuming national recognition, have allowed such associations the opportunity to 1) sit on boards and committees relevant to MNCH 2) participate in round table discussions both nationally and internationally, 3) been represented at levels of midwifery regulation such as Nursing and Midwifery Councils 4) broadened their horizon on topical issues through continual medical education though limited and most importantly to begin to issue position statements and communiqués to inform and influence policy.

Giving the case of Ghana, the Midwifery Association has existed since the 1930s and was established in response to a governmental policy to improve safe motherhood through a District Midwifery Initiative that provided financial access to midwives to establish private practices to increase access to skilled attendants. The Ghana Registered Midwives Association has in recent years been able to influence policy to ensure that they will be given due recognition to provide a wide range of midwifery and basic curative services under the umbrella of the Ghana Health Insurance Scheme. Similarly in Uganda, the Private Midwives Association has over the years organised itself as a formidable private sector organisation capable of collaborating with development partners in the roll out of policy into practice. Similar stories could be told of associations in Benin and Ivory Coast.

With the advent of the ICM/UNFPA Investing in Midwives Programme in Africa, Asia and Latin America launched in 2009, the programme has as one of its mandates to strengthen Midwives Associations to advocate for and implement the scaling up of midwifery services in countries. The drive to achieve this mandate is leading to an increasing and commendable momentum in Anglophone and Francophone Africa in the rekindling of dormant associations and expansion of membership across regions, states and counties. This includes talks to separate midwifery groups from Nursing Unions though an uphill task; forging of unified associations where splinter groups exist; inclusion of midwifery in policy statements where only nursing appears as well as the development of midwifery strategic plans to address reproductive health policies by strengthening midwifery systems.

Though there have been these modest strides, I believe that Midwifery Associations in sub-Saharan Africa are yet to feel empowered enough to harness their strength as a potential driving force to not only participate in policy decision-making but rather to be the initiators and promoters of Governmental policy, to raise appropriate questions on emerging policies and their relevance to midwifery practice, to use research evidence to recommend alternative and workable policies favourable to MNH and to seek for strong representation as equal partners in health care decision-making at Governmental level. There is tremendous work to be done in this area of assertiveness.

With the world’s increasing attention on midwives and midwifery care as the most essential human resource and services capable of making a marked impact on the current maternal and infant mortality rates, midwives in sub-Saharan Africa must act now. This is our chance to strategically position ourselves as a strong professional workforce locally, regionally and internationally to stimulate, participate in and drive policy discussions and decision-making in maternal and newborn health.

To do this, associations need to address the following:
- Ensure strong leadership and accountability to drive the agenda of autonomous midwifery education, regulation and legislation guided by basic acceptable standards
- Lobby and work towards autonomy from nurses associations to address midwifery issues but at the same time recognise the need for teamwork and collaborate with related professions to ensure that MNH issues are addressed appropriately
- Learn the rules of the game by being responsive rather than reactive to their environments
- Capacity building (prepare its members professionally for quality work)
- Continually advocate
- Mentor young midwives as future leaders through role modelling and offer of opportunities to develop all members
- Be interested in related professions and their work and how it impacts on midwifery to ensure synergy and adequate representation.

**Articles and Updates**

**Symposium on Strengthening Midwifery**

**Saving Lives, Promoting Health of Women and Newborns:**

*The role of Professional Associations in Policy Development and Multidisciplinary Care*

*By Dr Jemima A. Dennis-Antwi, ICM*
ICM/UNFPA Programme for Investing in Midwives and Others with Midwifery Skills to Accelerate Progress Towards MDG 5

By Dr Jemima A. Dennis-Antwi, ICM

26-27 March 2010, Lilongwe-Malawi
A campaign-planning meeting on health, co-hosted by Fair Play for Africa campaign, Oxfam, Save the Children and the White Ribbon Alliance was held at the Sunbird Capital Hotel in Lilongwe-Malawi on 25-26 March 2010.

The purpose of the meeting was to bring together creative campaigners on maternal and newborn health to look at the successful movements taking place within African national contexts, explore linkages between campaigns and how through a concerted effort, campaigns can be targeted at politicians and policy makers through national, continental and international forums on improving the state of the African people.

The Anglophone Regional Midwife Advisor (ARMA) represented ICM to share ICM work in Africa and the various campaigns running in the programme countries under the theme “The World Needs More Midwives Now More Than Ever” and the International Day of the Midwife celebrations held annually. The meeting offered the opportunity for about 35 participants working in various African countries, UK and USA to reflect on campaign messages, appropriate media, policy review proposals and discuss how to lobby governments and health stakeholders to honor their financial pledges with respect to the Abuja declaration and more.

According to the African Science Academy Development Initiative (ASADI), Sub-Saharan Africa is off-track to achieve the Millennium Development Goals (MDGs) for maternal and child health by 2015.

Each year:

- 265,000 mothers die due to complications of pregnancy and childbirth
- 1,243,000 babies die before they reach one month of age
- 3,157,000 children, who survived their first month of life, die before their fifth birthday.

This toll of more than 13,000 deaths per day accounts for half of the world’s maternal and child deaths.

Additionally, 880,000 babies are stillborn and remain uncounted and untracked. The region also carries 90% of the world’s malaria deaths, two-thirds of people living with HIV/AIDS globally and 26% of the world’s underweight children.

The Health Campaigners Meeting was organised to create a forum for sharing ideas, experiences and plans regarding effective national and continental level messaging on the Abuja commitment and the need for health workers to make more efforts to save mothers and newborn lives.

2010 provides the right opportunity to advance the agenda on maternal and newborn health at a number of key events at African Union level: at the AU conference on Maternal Health in April; the AU Health Ministers Meeting in Geneva in May and the AU Summit in July 2010.

The conferences will provide health campaigners with the opportunity to hold African governments to account, particularly in the context of 2010 as the target year for the Abuja Commitment on Universal Access to HIV and AIDS, TB and Malaria services.

The meeting was highly participatory in nature and provided participants with insights on progress made so far in key pledges made by African governments in the following areas:

CARMMA: The African Union initiated ‘Campaign on Accelerated Reduction of Maternal Mortality in Africa (CARMMA) was reported to be ongoing with just about nine launches so far. Most countries were yet to launch their initiatives therefore the impact of this campaign was found to be minimal on reduction of maternal mortality rate (MMR).

15% Campaign (Abuja Declaration): This commitment has been largely unmet in most African countries. The most impressive have so far been around 10%. The current campaign, led by the Africa Public Health Alliance, is pushing for Governments to implement MDGs 3-6 together because of their connection to each other. They are also proposing for a 15% - plus commitment by Governments to represent health, social investments, education, water and increased employment. The focus is to include Finance ministers in all meetings in order for them to be witnesses to the commitments that Presidents make in their presence so that the commitments will be binding and can be followed-up.

Participants at the meeting discussed invaluable issues, shared information, strategies and opportunities that ICM could independently or in collaboration with stakeholders such as WRA and Save the Children implement to raise more international attention and commitment to the work and critical role of the midwife in achieving MDGs 4 and 5. The discussions emphasised the need for ICM to adopt a more intensive means at drawing political attention to the importance of the midwife in addressing MDG 5 especially.
The lecture on fetal monitoring was also important as we have the opportunity to perform the stress test and fetal monitoring, but the midwives need to be more cognisant of the irregularities in the strips when monitoring patients and be able to read the strips and act accordingly.

The refresher climaxed in the creation of a yellow bouquet as each midwife shared a praise for the midwife that mentored them and each midwife assisted in creating a bouquet; a lovely arrangement of yellow daffodils. This bouquet was then presented to retired Sr. TCN Bowe Clarke. She came to share the historical midwife tale which was very informative and experiential. Ms. Bowe Clarke also presented a framed picture of a mother and baby to the Department of Obstetrics.

The Midwifery refresher workshop was a welcomed activity as older midwives met the younger midwives; new friendships were fostered and old friendships strengthened. Midwives reminded of our commitment as practitioners to be a decision-making team and collaboration needed for success from Public Health, from the clinics hospital and public and private sector as all our efforts impact the Nation.

In conclusion, the aim of the Midwives Refresher was to create a team of practitioners who by networking could assist in strengthening their practice, not only reclaim their position in this participative decision making heath care arena and be accountable as their role is significant in the determination of National Health Indicators. This is a necessary mechanism, if the country is to succeed in reducing the maternal and neonatal statistics because it cannot be done individually but with collaboration and communication, respect and team work can be ultimately achieved with one vision united mission.
Report on the Sarawak Midwives Association Biennial General Meeting and Midwives Conference

On the 24th July 2010, the Sarawak Midwives Association (SMA) conducted the Biennial General Meeting at the local Hotel in Kuching. It was attended by 120 members from all over the state of Sarawak. The meeting was convened by the President of the SMA Ms. Hajjah Rosena Ghani. The business session and reports from all the branches were presented. This year SMA is very fortunate to have Ms Sylvia Fung, ICM Board Member, Asia Pacific Region to share with us the ultimate aims and objectives of the International Confederation of Midwives (ICM), in which the SMA is affiliated with.

A dinner was held at a local hotel and members were entertained with songs and dances. The theme was - night of magnificent colors.

The whole day on the 25th July 2010, an Educational Midwifery Conference was held. There were 230 participants. We were fortunate again to have Ms. Sylvia Fung sharing on the development of Midwifery as a Profession, while Ms. Ma Tsui Mai, Vice President of the Hong Kong Pediatric Nurses Association talked about the role of the Midwife in neonatal resuscitation.

Other topics were also given by our own obstetrician on obstetrical emergencies as an update for our members. The importance of EQ in midwifery, basic skills in midwifery to ensure safe practice and a research paper regarding expectation of a midwife were also given by our own local speakers. The highlight of the message and the emphasis was towards safe and skillful midwifery practice for the safety of the mother, neonates and their families.
CONFERENCES AND EVENTS 2010

- **6–19 November 2010**, Montreux, Switzerland. First Global Symposium on health systems research.
- **10–11 November 2010**, Limassol, Cyprus. Nursing and Midwifery National Conference, CYNMA.
- **22–26 November 2010**, Libreville, Gabon. 11th SAGO Congress. 11ème Congrès de la Société Africaine de Gynécologie Obstétrique (SAOG).
- **23–26 November 2010**, Uerj, Brazil. 1st Brazilian Congress of Neonatal Nursing. [www.abenfo.org.br](http://www.abenfo.org.br)

2011

- **16–17 April 2011**: GH/Innovate 2011 Global Health & Innovation Conference
  Presented by Unite For Sight, 8th Annual Conference, Yale University, New Haven, Connecticut, USA
  Conference registration is now open.
- **25–27th of May 2011**, The Swedish Association of Midwives will celebrate 300 years with educated, examined and licensed midwives and the association's first 125 years.
  Read the First Call for Abstracts
- **19–23 June 2011**, Durban, South Africa. ICM Triennial Congress: Midwives Tackling the Big Five Globally

Links to the conferences above can be found on our Home Page at
http://www.internationalmidwives.org

ICM 29th Triennial Congress: Durban, 2011