



**International Confederation of  
Midwives Triennial Report  
June 2017 – June 2020**



International  
Confederation  
of Midwives

Strengthening Midwifery Globally

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## Message from the President



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## Dear Members, Midwives, Partners and Friends,

As this triennium has progressed, our investment in ICM, guided by the key strategic directions of **Quality, Equity and Leadership** as determined by Council in Toronto 2017, has started to bear fruit for the 143 Member Associations that make up ICM and for the women we serve.

As a member organisation we have started to redress the balance of our core work, which is to support the growth of our Midwives' Associations, with our developmental work through the engagement of our partners. Key to this shift has been our investment in building bridges, knowing we can only achieve our vision through collaborative teamwork. Teamwork between all who have a vested interest in optimising the sexual and reproductive healthcare and rights of women through midwifery: our members, the Head Office staff, women's organisations, our partners and the Board. After all, we are in this together and therefore need to do it together as one.

During this Triennium we have worked to accomplish the key strategic directions of **Quality, Equity and Leadership**:

- **Locally** with our Midwives Associations in countries
- **Regionally** within the six ICM regions, through collaboration with all of our Member Associations
- **Globally** on behalf of the more than 1 million midwives represented by our Member Associations
- **Collaboratively** with our partners at local, regional and global levels

This report sets out the actions we took towards achieving our strategic directions and the progress we have made. It provides us with an opportunity to reflect and consider the lessons learned. As with previous triennial reports, this one also sets a platform for the next triennium and will inform ICM Council Delegates in June 2020 as they determine the directions for ICM for 2021 – 2023.

The global Covid-19 pandemic has confirmed how uncertain the future is and how important it is for us to be flexible, to think in long term sustainable strategies that are geared towards the needs of the midwives in our six ICM Regions.

This triennium has been a trying one because of ICM's financial uncertainty within a world where the key role of midwives is becoming clearer by the day. As the 2017 – 2020 triennium comes to a close I want to take the opportunity to thank the Board, the Head Office staff led by our Chief Executive Sally Pairman, our partners and women worldwide for trusting us and coming on board for an exciting and purposeful journey towards a world where every woman has access to quality care of a midwife for herself and her new-born.

Warm regards,

**Franka Cadée**  
ICM President







## Message from the CEO



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It is with much pride that I have undertaken the role of Chief Executive Officer during this triennium.

The dedicated ICM Head Office Team has continued to work unrelentingly to ensure that midwives are embedded in strategic plans, health policies and health worker and gender equity campaigns around the world.

During this Triennium ICM has actively funnelled its focus, expertise, and resources towards the three strategic directions of Quality, Equity and Leadership. Much has been achieved, both internally through strengthened operational processes and activities at Head Office, and externally through increased focus on advocacy and raising the profile of midwives and midwifery globally.

Though challenges in the sexual, reproductive, maternal, newborn, and child health spaces persist, I am optimistic about ICM's ongoing capacity to confront them. I am particularly proud of ICM's leadership in raising awareness of the essential role that midwives have in providing respectful, high quality and safe care to women, their babies and their families across the childbirth continuum.

Midwives are supported by ICM's professional framework that emphasises the integration of education, regulation and strong midwives' associations to build and support a competent midwifery workforce. But there are additional important elements that need to be in place if midwives are to reach their full potential – leadership, an enabling environment and gender equity – and we will explicate these in the final six months of this triennium.

We have much planned for 2020 Year of the Midwife and despite the challenges we all face from the Coronavirus Pandemic, we are excited at the opportunities 2020 will still bring for midwives and for women. More than ever before we want to use this important year to recognise the work of midwives globally and to unite midwives and women's groups towards a more woman-centred maternal and newborn health services and a gender equal world!

The Pandemic has created many challenges for midwives and our members and we are working hard to provide support and resources that are practical and useful. The Pandemic has also caused us to delay our Triennial Congress in Bali until 2021. It is important for ICM's organisational activity that we still hold the Triennial Council meeting in 2020 and we will now do this using various technologies that, as far as possible, allow Council Delegates to discuss and continue to give appropriate consideration to decisions that must be made.

I want to thank the ICM Head Office Team for their energy, commitment and support during these three years since I took up this role. I also want to acknowledge and thank the ICM Board and the Executive Committee, especially Franka Cadée, for their support. I am proud and excited to be working alongside all of you to achieve better resources, respect and visibility for midwives and to build a stronger midwifery profession globally.



**Kia Kaha, Dr Sally Pairman**

# About Us

ICM is a 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 143 Midwives' Associations across 124 countries, ICM has established itself as the leading representative body of midwives globally.

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 other UN Agencies; 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 and non-governmental organisations, and civil society groups such as White Ribbon Alliance; donors such as Laerdal Global Health, the Bill and Melinda Gates Foundation, Johnson and Johnson, Sanofi Espoir Foundation, Direct Relief, the MacArthur Foundation, WHO India 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 2017, 2018 and 2019.

## 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







At a global level, **ICM** is a key stakeholder and partner towards the achievement of the **United Nations Sustainable Development Goals (SDGs)** by 2030.

# ICM Governance and Operations

## ICM Board, Standing Committees, Head Office Team

### Our Board

The Board of ICM is comprised of the President, Vice-President and Treasurer and 10 members from six Regions: Africa (2), the Americas (2), Western-Pacific (1), South-East Asia (1), Eastern Mediterranean (1) and Europe (3). Members are appointed for a three-year term with the possibility of standing for one further term. The main role of the Board is governance, with specific focus on the direction of the organisation and achievement of the strategic goals.

### Our Standing Committees

ICM has five standing committees comprising elected and appointed members, to advise the Board and to carry out specific activities on behalf of the Board.

- The Education Standing Committee (ESC) advises the Board on matters relating to midwifery education;
- The Research Standing Committee (RSC) advises the Board on matters relating to midwifery Research;
- The Regulation Standing Committee (RegSC) advises the Board on matters relating to midwifery regulation;
- The Finance and Resource Committee (FiRe committee) advises the Board on the discharge of its fiduciary responsibilities in finance and resource management
- The Scientific Professional and Programme Committee (SPPC) is responsible for planning and organising the Scientific Professional programme of the Triennial Congresses.

### Our Head Office Team

The ICM Board employs the Chief Executive who in turn employs the ICM staff. The ICM Head Office is based in The Hague in the Netherlands and most staff work from there.

### 2017 – 2020 Global Context

Over the past three years, ICM has had a strong internal 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 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 Sustainable Development Goals (SDGs) by 2030. ICM's work impacts on all 17 goals but

in particular we focus on SDG 3 – *Good Health and Wellbeing* and SDG 5 – *Gender Equality*. ICM recognizes 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 is also a core partner in sexual, reproductive, maternal, newborn, child and adolescent health (SRMNCAH) partnerships that seek to break down silos across governmental and civil society movements to improve health outcomes for women, girls, newborns, and their families across the childbirth continuum. These include the former United Nations (UN) Secretary General Ban ki-Moon's Every Woman Every Child (EWEC) initiative and the UN Partnership for Maternal, Newborn and Child Health (PMNCH). ICM provides professional expertise and consultation to key policy documents and strategic partnership initiatives that set the policy framework at global level.

### **Strategic Directions 2017-2020**

Building on the work of the previous triennium (2014 - 2017) ICM has, during this triennium, harnessed the energy, enthusiasm and insights of midwives and our stakeholders around the world to lead the call of midwives and women at global, regional and local levels for strengthened midwifery services that are woman-centered, accessible, respectful and high quality.

As set out in the 2017 – 2020 strategic plan ICM's objectives for this triennium were as follows:

#### **Quality**

1. Demand an enabling environment through which midwives can provide quality midwifery services.
2. Deliver global standards, resources and tools for education, regulation and association to build the capacity, competence and professionalism of midwives
3. Deliver as the experts on midwives and midwifery, quality advice to stakeholders.

#### **Equity**

1. Demand equitable access for midwives to midwifery education, regulation and continuing professional development.
2. Demand equitable access to midwife-led midwifery services for women.
3. Deliver equitable access to services and facilitate equitable opportunities for participation in ICM for Member Associations

#### **Leadership**

1. Demand participation of midwives at the highest level of policy and decision making at global, regional and local levels.
2. Deliver effective midwifery leadership and expertise.





# Strategic Direction, **Quality**



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ICM successfully maintained this strategic focus and adopted a targeted approach to driving progress in these areas during each year of the triennium. Identified objectives were embedded in subsequent strategies and work plans across all work areas. While all three strategic directions informed priorities and activities in each year, we also focused more heavily on one strategic direction per year. In 2017 this was Quality, in 2018 it was Leadership and in 2019 it was Equity. The following section provides details on what was achieved under each strategic direction.

### **Strategic Direction - Quality**

Quality midwifery care is respectful, focused on the needs of women and their newborns, with safe evidence-based care provided by skilled, knowledgeable and compassionate midwives. ICM also considered how quality applied to it as an organisation.

Over this triennium we continued to build a reputation of expertise and excellence, endeavoring to guide all midwives to provide quality and respectful care and to uphold the human rights of childbearing women.

### **Advocacy**

To achieve this ICM worked with its Member Associations to build greater advocacy capacity in-country to extend the influence of midwives within national policy discussions and development with the ultimate outcome of achieving quality midwife-led and woman-centered maternity services.

Newsletters were increased from quarterly to monthly and distributed to all Member Associations and partners. From 2018 they also included an advocacy toolkit with social media resources appropriate for each international advocacy day such as International Woman's Day. Providing these resources made it easier for our associations to advocate effectively and join in global conversations pertinent to midwifery. This activity aligned with our strategic plans to lead the way in global advocacy efforts to raise demand for midwives.

ICM ran advocacy workshops for members at its regional conferences in Dubai (Eastern Mediterranean, Western Pacific and South East Asia regions combined) and Paraguay (the Americas region) in 2018 and in Namibia (Africa region) in 2019. By the end of 2019 ICM had produced an Advocacy Toolkit that incorporated the learning activities and advice of the workshops into a resource that Midwives' Associations could use to guide and further develop their advocacy skills. We reported an increase in social media activity across the triennium including around the annual celebration of International Midwives Day (IDM) on 5th May. IDM themes were:

- 2017 *"Midwives, Mothers and Families: Partners for Life"*
- 2018 *"Midwives leading the way with quality care"*
- 2019 *"Midwives - Defenders of Women's Rights"*

ICM used IDM in 2017 to launch a new film titled “*A midwife Like ME*”, which was produced in collaboration with Medical Aid Films. The film demonstrated how dedicated and skilled midwives can help women have the best experience before, during and after childbirth, encouraging them to make their own informed decisions around normal birth practices.

In 2018 ICM and its members were key contributors to ‘*What Women Want*’, a global advocacy campaign to improve quality maternal and reproductive healthcare for women and girls and strengthen health systems. Launched by the White Ribbon Alliance (WRA) on April 11, 2018—International Maternal Health and Rights Day—‘*What Women Want*’ set out to query one million women and girls worldwide—from capital cities to rural villages—about their top priority for quality maternal and reproductive health services WRA published the results of the 1.2 million respondents in 2019 and fourth on the top 20 list of demands was ‘increased competent and better supported midwives and nurses’. Another six demands on the top 20 list related to maternal and newborn health services, including the number one demand – for respectful and dignified care.

ICM, with funding from the New Venture Fund, was able to support the Tanzania Midwives Association (TAMA) at 2018 International Day of the Midwife celebrations in Morogoro, Tanzania. This included meeting with representatives of the Tanzanian Government to advocate and raise awareness for the benefits of investing in midwives in Tanzania.

## Understanding the impact of Communications and Advocacy




Week of IDM	2017	2018	2019	Day of IDM	2017	2018	2019
Number of Tweets:	99	186	45	Number of Tweets:	79	102	11
Number of Retweets:	712	1,220	445	Number of Retweets:	493	657	302
Number of Impressions:	107k	189k	1.2k	Number of Impressions:	58,200	98,400	801
Number of Likes:	714	1,847	772	Number of Likes:	479	1000	412



Week of IDM	2017	2018	2019	Day of IDM	2017	2018	2019
Number of Engagements:	5k	18,866	31k	Number of Engagements:	3k	17k	28k
Reactions:	4111	14k	25k	Reactions:	2292	13k	22k
Comments:	125	1.6k	2.2k	Comments:	91	2.9k	2k
Shares:	791	3.3k	4.2k	Shares:	566	1.5k	3.5k





While we have much to  
be proud of this triennium,  
there is more to do.

### **Organisational strengthening**

We introduced new systems to the ICM Head Office to better manage records and data and we developed and implemented new systems and approaches for project management and time management. We employed experienced project managers, not necessarily midwives, and finance managers dedicated to large projects to ensure they are delivered on time and on budget. With support from an evaluation expert provided by the Gates Foundation we began to develop more robust approaches to monitoring and evaluation that is being implemented across all projects.

In 2018 ICM moved to new offices with more versatile space for meetings and working groups. Staff share an open plan office leading to better information flow and new technology has allowed ICM to hold virtual videoconferencing Board meetings, working groups, and meetings with advisory groups, Member Associations and partners. An online learning platform (Moodle) has been established to support ICM's Consultancy Service and the delivery of online resources for Member Associations and to support ICM's Midwifery Education Development Pathway (MPath) programme.

### **Building the capacity, competence and professionalism of midwives**

Across the triennium ICM has worked with partners on projects that aligned with ICM's Strategic Directions, specifically in developing standards, resources, tools and approaches to building the capacity, competence and professionalism of midwives.

### **Expanding Quality Midwifery Services and Strengthening Midwifery Services (SMS) – funded by the Bill and Melinda Gates Foundation**

In 2017 the *Expanding Quality Midwifery Services* programme came to a close. This programme ran from 2015 – 2017 with two significant achievements:

- Implementation of ICM's Midwifery Services Framework (MSF) in six countries; and
- Development of ICM's Global Midwifery Education Accreditation Programme (MEAP)

ICM's Midwifery Services Framework is a mechanism for any country that wants to establish or strengthen its midwifery services within the context of its sexual, reproductive, maternal and newborn health services (SRMNH). The MSF serves as a process for evaluating how the core components of ICM's current midwifery professional framework (education, regulation and association) are in place in a country, identifying gaps, prioritising actions and establishing and implementing workstreams to address identified gaps.

ICM's MEAP offers accreditation approval based on an independent assessment of an institute's pre-service midwifery educational programme(s) to determine the extent to which it meets ICM Global Standards for Midwifery Education. Successful accreditation will serve as a benchmark for

midwifery educational programmes that aim to meet international standards.

The follow-up programme, *Strengthening Midwifery Services* (SMS), commenced in 2018 and is due to be completed in 2021. The SMS programme focuses on four interrelated components:

1. Midwifery Services Framework (MSF) Phase 2 - reviewing and revising the ICM Midwifery Services Framework (MSF): based on the lessons learned from the six-country pilot in 2015-17 (Afghanistan, Bangladesh, Kyrgyzstan, Ghana, Lesotho, and Togo), we are:
  - Revising and updating the MSF process and tools, including update of the *Midwives' Association Capacity Assessment Tool* (MACAT);
  - Providing technical advice and support to three front-runner countries (Afghanistan, Bangladesh, Kyrgyzstan) where implementation gaps remain that can be addressed by ICM;
  - Training new MSF facilitators; and
  - Testing the revised MSF in one new country (yet to be finalized - shortlisting process is underway);
2. Midwifery Education Accreditation Programme (MEAP), we are:
  - Implementing and evaluating the ICM mechanism to accredit pre-service midwifery education programmes against the ICM global standards for midwifery education, with three new midwifery education programme providers in Bangladesh, Rwanda, and Somaliland;
  - Revising and updating the MEAP process and tools;
  - Training new MEAP accreditation experts; and
  - Identifying points of intersections with MPath, and the MSF;
3. Midwifery Education Development Pathway (MPath), we are:
  - Developing tools and resources to assist midwifery education programmes to increase their capacity and strengthen their curriculum and programme delivery to meet the ICM global education standards;
4. Essential Competencies for Midwifery Practice:
  - Translating (in French and Spanish) and disseminating (through the ICM member Midwives' Associations and the ICM network of partners) the Essential Competencies for Midwifery Practice developed in the first Gates project;
  - A workshop on clarifying, explaining, and discussing the competencies and their integration into curricula and standards of practice; and
  - Developing a global standard and process for assessing individual midwife competencies regardless of the educational route to registration as a midwife.

Along the way we also identified points of intersection and complementarity between the various SMS sub-projects and considered how we can maximize SMS impact by leveraging these intersections. For example, in previous work, MPath and MEAP were treated as two separate



work areas. However, moving forward, we now understand that MPath can both guide midwifery schools on how to identify and address deficits/weaknesses and help midwifery schools prepare for undertaking the MEAP. We understand that midwifery regulators can be enablers or they can put up barriers to strengthening midwifery curricula and that MPath will need to be supported by regulators as well as midwifery educators if it is to be effective.

The ICM Midwifery competencies are essential elements of pre-service midwifery education programmes, the MEAP, regulatory processes and continuing education/continuing competence processes. There is scope to better highlight these linkages and to develop resources and tools that will guide how the competencies can be used and assessed most effectively. The MSF itself is likely to link to MPath, MEAP and Competence Assessment as mechanisms that can be incorporated into workstreams that aim to strengthen aspects of the midwifery education and workforce in a country.

We have found gaps within the individual programme areas of the project (MSF, MEAP, MPATH, Competencies). They link to the current ICM midwifery professional framework that identifies three pillars (education, regulation, midwives' associations), underpinned by the competencies and by research, as necessary elements of an effective and robust midwifery profession. However, more could be done to actively **strengthen midwives' associations** and to integrate the **competencies** across all pillars. Missing from the current framework are the elements of midwifery leadership, the enabling environment and gender equity.

This discussion of the intersections and the gaps highlights for us the need for ICM to further develop and articulate its professional framework for midwifery as a guide for midwives, stakeholders, governments and funders. We intend to revise the professional framework in the latter half of 2020.

### **Strengthening Midwifery Education in French-Speaking Africa – funded by the Sanofi Espoir Foundation**

This four-year project commenced in 2015 and was completed at the end of 2019. Midwife educators and Midwife Preceptors in Madagascar, Cote Ivoire and Comoros have been trained in competency-based education (CBE) methodologies and supported by mentors as they begin to use these new teaching methods. Midwifery curricula have been reviewed and updated in the three countries to incorporate CBE learning and teaching methods. The CBE teachers are now able to teach and mentor others to incorporate CBE into their teaching practices with the aim of improving pre-service midwifery education and developing the competence of midwife students and new graduates.

The project contributed to the development of competent midwives and thus increased wom-

en's access to quality midwifery services. New tools were developed to teach midwife educators how to mentor other educators and preceptors as they begin to include CBE methods into their teaching practice and support of students in clinical areas. The mentorship component also contributed to the development of *ICM Guidelines for Mentoring for Midwives* funded by UNFPA in 2019.

### **Strengthening Midwifery in Mexico – funded by the MacArthur Foundation**

Between November 2016 and May 2018 ICM worked with two Midwives' Associations in Mexico to orientate the associations and stakeholders in Mexico with the ICM Education, Regulation and Association standards and resources; to create alliances within the Mexican midwifery movement; and to connect Mexican midwives and stakeholders with global midwives and activists seeking to similarly improve access, cultural competence, and the availability and quality of midwifery services worldwide. The project aligned closely with strategies of the government of Mexico to increase the availability of midwives across the country, whilst improving their integration into the health system.

Following the success of this project, ICM received a second grant from the MacArthur Foundation, to enable ICM to continue working with the Midwives' Associations in Mexico from 2018 until 2020. This second project has a strong focus on advocacy and multi-stakeholder collaboration to support midwives to raise the profile of midwives with the public, with women and with the government and to keep advocating for improvements to midwifery education and regulation and integration of midwifery services into the wider maternal and newborn health services. The Advocacy Toolkit and workshops developed by ICM with support from UNFPA are being used as resources in Mexico.

### **50,000 Happy Birthdays Project -funded by Laerdal Global Health**

Building on the 10,000 Happy Birthdays Project in Malawi and Zambia (2014 – 2017), ICM in partnership with Laerdal Global Health, commenced the 50,000 Happy Birthdays Project in 2018 that will be completed in April 2020. This project aims to contribute to saving more lives at birth, reducing morbidity and to ensuring a better birth experience for women and their families by strengthening midwives' competencies and respectful maternity care. ICM is working closely with the Midwives' Associations in Rwanda, Ethiopia and Tanzania to build their capacity as Project Managers, as providers of continuing professional development, and as strong advocates for their profession and for women.

ICM supported these Midwives' Associations to train midwives, other healthcare providers and students using the simulation-based Helping Mothers Survive (Jhpiego) and Helping Babies Survive (American Academy of Paediatrics) training modules and the Low-Dose, High-Frequency (LDHF) approach. Multi-disciplinary training and frequent, short post-training practice sessions



Our challenge **for the next triennium** is to secure **ICM** as a **global** leader for **midwifery** for another **100 years**.

were encouraged to improve skills development and communication between Midwives, Nurses and Doctors caring for women and newborns at the time of birth. The project has also been supported by Latter Day Saint Charities and Novametrics.

At the time of writing the project is being evaluated but early results show reductions in maternal and neonatal mortality, still births and maternal deaths from eclampsia. Through this project, ICM has also built capacity of the Associations in project management, networking/resource mobilisation and provision of continuing professional development to the health workforce. Learnings from the Happy Birthdays projects and new features such as the integration of the Safe Delivery App (developed by Maternity Foundation) will be taken forward to an extension programme in 2020 – More Happy Birthdays in Rwanda – funded by Latter Day Saint Charities.

### **Strengthening Midwifery Globally with UNFPA**

Throughout the triennium UNFPA has continued to support ICM to strengthen midwifery globally by focusing on increasing the professionalisation of midwifery and strengthening national midwives' associations. Each year UNFPA and ICM agree an Annual Workplan, funded by UNFPA. These workplans have resulted in several new tools to strengthen midwifery that can be applied nationally and regionally.

In 2017 the main focus was on developing midwife educators in French-speaking Africa and Arab States to be able to use Competency Based Education (CBE) methods in their teaching (co-funded by Sanofi). The Workplan in 2018 enabled:

- publication of ICM's Midwife Leader Series;
- development of the three-hour advocacy workshops delivered at ICM's regional conferences in Dubai and Paraguay;
- translation of ICM's Midwifery Education Development Programme (MEAP) into Spanish;
- initial development of ICM's Midwifery Education Development programme (MPath) (co-funded by BMGF) that involved analysis of ICM's existing resources;
- development of a three-hour Respectful Maternity Care (RMC) workshop and delivery at ICM's regional conferences in Dubai and Paraguay;
- initial development of ICM's Midwifery Consultancy Service (co-funded by J & J) including development of core online modules and the supporting operational policies and processes;
- initial development of ICM's Mentoring Guidelines through literature review and consultations.



Some of these resources were developed further in the 2019 Workplan. Other achievements included:

- Development of an Advocacy Toolkit for Member Associations to support and guide their advocacy activities in-country;
- Two additional online modules were developed for the MPath programme (co-funded by BMGF) that is still under development and is expected to be launched later in 2020;
- A Respectful Maternity Care toolkit was developed with guidelines and resources for associations to be able to run RMC workshops in-country;
- Additional online modules were developed to support the ICM Midwifery Consultancy Service that is expected to be launched later in 2020;
- A Guideline on Mentoring for Midwives was developed, including an agreed definition of mentoring.

The UNFPA Workplan in 2019 also supported ICM's participation in the Midwifery Symposium held in Vancouver prior to the Women Deliver conference and ICM's participation in gathering data for the upcoming State of the World's Midwifery (SoWMy) Report that will be published in 2021. We expect that some of the activities in development will continue in the 2020 Work Plan, such as ongoing data collection for SoWMy 2021, dissemination of newly developed resources (Mentoring Guidelines, RMC Toolkit, Advocacy Toolkit), and further planning for MPath. New activities will include development of advocacy resources for Year of the Midwife 2020.

### **Midwives' Kits and Midwives' Map – funded by Direct Relief**

In 2019 ICM and Direct Relief commenced a second project to create and distribute essential midwifery equipment to three Midwives' Association and to monitor the distribution and utilization of the Midwives Kits. A similar project was undertaken in 2015.

Direct Relief and ICM partnered on the Midwives' Map project in 2017 whereby Direct Relief produced an online interactive map for ICM's website that displays the locations of ICM's member Midwives' Associations around the world and delineates key midwifery education, regulation and health related indicators. Further work was begun in 2019 where the data collection process for the Midwives Map was adapted to include ICM's data collection for the SoWMy 2021. Eventually the information contained in the final SoWMy Report 2021 will be displayed also through the Midwives Map on the ICM website, providing a further mechanism for dissemination and for Midwives' Associations and others to access country-specific data in one place.

### **ICM Capacity Development, Awards and Sponsorships – funded by Johnson and Johnson**

Johnson and Johnson have continued to support ICM throughout this triennium with sponsorship of ICM's Triennial Congresses (2017 and committed for 2020) and sponsorship of the ICM's

annual Education, Research and Marie Goubran Agent of Change Awards. Two new awards were added for 2019 – the Touch Ambassador Award and the Midwives in Action Award. These awards enable individual midwives to undertake projects in their countries that will strengthen midwifery education, research and newborn care, especially care of babies' skin. Prize winners are funded to attend ICM's regional or global conferences, depending on the year of the award.

In 2017 Johnson and Johnson provided ICM with an operational support grant. This was used to support ICM's communications activities during the triennial Congress in Toronto; to develop the ICM website, including its security features; and to partially fund staffing salaries for communications and for a Midwife Advisor to support the Johnson and Johnson/ICM Young Midwife Leaders Programme in 2017/2018.

Further support to develop capacity within ICM was provided in 2018. The 18-month grant was used for resource mobilization (including stakeholder engagement and joint advocacy), planning for an ICM Midwifery Consultancy Service (subsequently co-funded by UNFPA and still in development with expected launch later in 2020), and the delivery of two side events – one during the World Health Assembly and one during the United Nations General Assembly to raise the profile of ICM and midwifery leadership. The capacity development programme helped to sustain ICM's operational and key advocacy efforts, raised the visibility and value proposition of midwives among stakeholders and supported planning to increase ICMs internal capacity and meet global demand for technical midwife expertise.

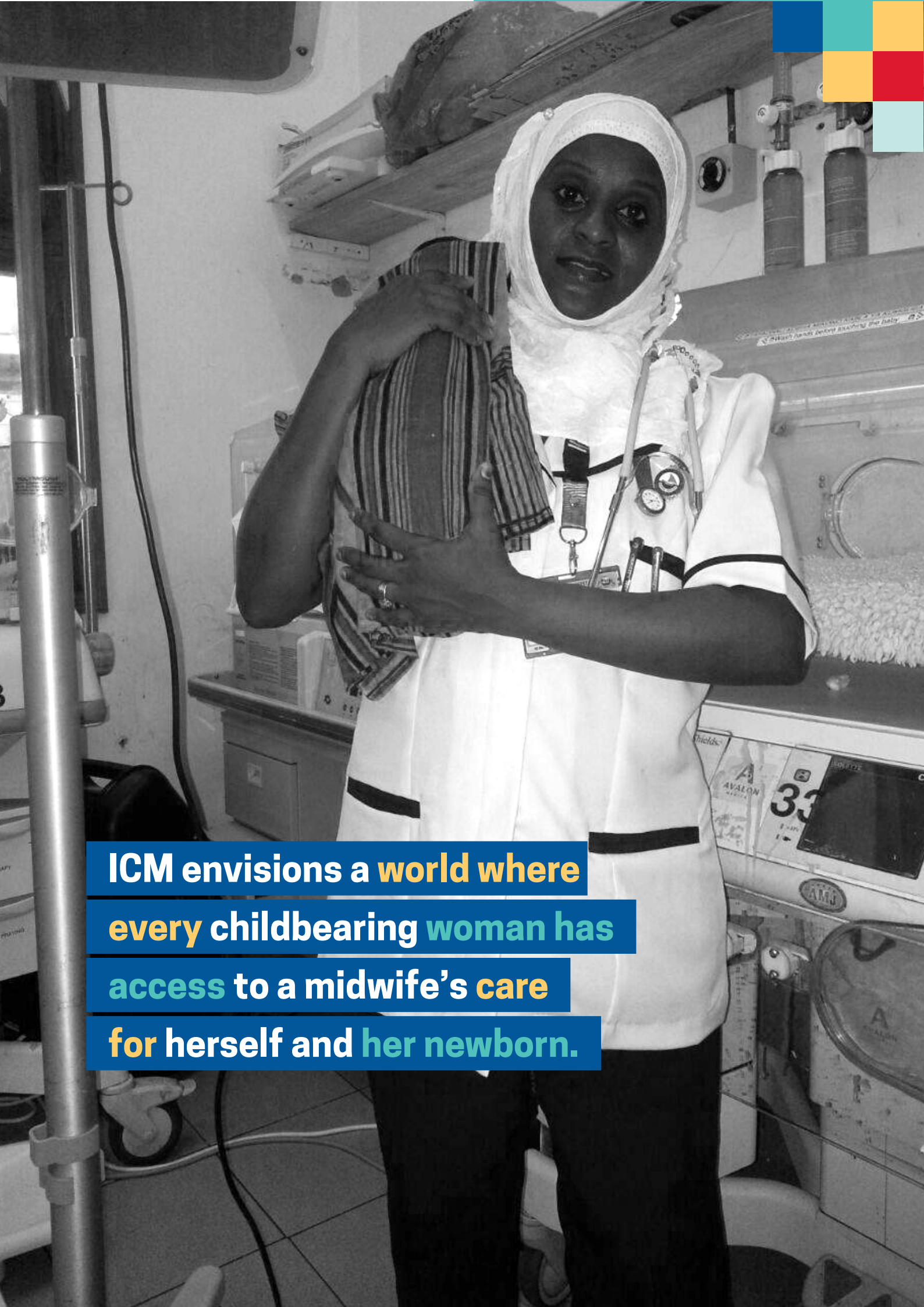
### **Curriculum Development for India – funded by WHO India**

In 2019 ICM, at the request of WHO India, developed two midwifery curricula for India – a six-month programme to develop new midwife educators (followed by 12 months of structured mentorship), and an 18-month Nurse Practitioner in Midwifery programme to develop registered nurses to become midwives. These curricula were specifically designed for the India context and to support the plans of the India government to develop and scale up midwife-led services across India. The curricula were submitted to the India Nursing Council in August 2019.

### **ICM Competencies**

In January 2019 ICM released the updated Essential Competencies for Midwifery Practice, the completion of a review process that began in 2014. The updated competencies are organised into a framework of four interrelated categories; general competencies that apply to all aspects of a midwife's practice, and competencies that are specific to care during pre-pregnancy, antenatal, labour, birth and the postnatal period.

The updated competencies are written as holistic and integrated statements that reflect the ICM's Philosophy and Model of Midwifery Care in addition to the ICM Definition and Scope of Practice of a Midwife. As such the competencies promote:



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

- the autonomy of midwives to practise within the full scope of midwifery practice and in all settings
- the role of the midwife to support physiology and promote normal birth
- the role of the midwife to uphold human rights and informed consent and decision making for women
- the role of the midwife to promote evidence-based practice, including reducing unnecessary interventions
- the role of the midwife to assess, diagnose, act, intervene, consult and refer as necessary, including providing emergency interventions.

### Midwifery Expertise

Throughout the triennium ICM has continued to provide technical advice to partners and stakeholders and is increasingly building its capacity in this regard. ICM representatives have provided advice to numerous technical working groups, strategic coordination groups and multi-professional developments across the triennium including:

- Every Newborn Action Plan
- Every Woman Every Child Advocacy
- Global Midwifery Coordination Group
- Global Midwifery Advocacy Group
- The International Childbirth Initiative – 12 Steps to Safe and Respectful MotherBaby-Family Maternity Care (2018)
- WHO/UNFPA/Unicef/ICM/ICN/FIGO/IPA Joint Statement on Definition of Skilled Health Personnel providing care during childbirth (2018)
- Two publications and an editorial on Midwifery Services Framework published in Midwifery Journal 2018
- WHO's Maternal and Perinatal Death Surveillance and Review (MPDSR) working group
- WHO Working Group on updating recommendations on intravenous tranexamic acid for treatment of postpartum haemorrhage
- WHO/ICN/ICM Triad in 2018
- ICN/ICM/Nursing Now Joint Statement on NCDs
- WHO/ICM/UNFPA "Framework for Action - Strengthening Midwifery Education for Universal Health Coverage 2030", published 2018
- WHO Technical Advisory Group developing new education materials on essential newborn, childbirth and family planning care

Additionally, ICM representatives were invited speakers to numerous midwifery and multi-disciplinary conferences during the triennium – 20 in 2018, 19 in 2019 and invitations are at a similar level in 2020.





## Strategic Direction, Leadership



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## Strategic Direction – Leadership

In 2018 ICM committed to leading the way in a global advocacy effort to raise demand for midwives. We reinforced our leadership position as the expert on midwives and midwifery by engaging in strategic alliances and relationships, including with other professional associations. ICM also lead midwives globally in driving forward policy and in advocating for midwives and midwife-led services to ensure the best outcomes for women and their newborns. We were proactive and engaged on behalf of our members, and we ensured that Member Associations were supported to lead in the advocacy for women and midwives in their own countries.

To this end we placed significant resources and emphasis on building not just the communications and advocacy capacity of ICM Head Office, but also that of Regional Board members and Midwives' Associations, so they were well positioned to lead within their communities, countries and regions.

## Advocacy and Events

'Midwives Leading the Way' was the advocacy call of 2018, providing the overarching theme for the regional conferences and other ICM-hosted events. We provided social media toolkits throughout the year for all Midwives' Associations and saw our online engagement soar.

For International Day of the Midwife in 2018, ICM launched the 'Midwifery Leadership Showcase' to highlight the work and impact of some exceptional midwife leaders around the globe. Funded by UNFPA, the series of profiles were published on a weekly basis by ICM from May until September and then published in a booklet in September 2018.

In May 2018 ICM hosted, for the first time, a side event alongside the WHA - an evening reception titled 'Midwives Leading the Way' celebrating midwifery leadership and attended by approximately 100 people. The President and CE spoke alongside Joy Marini (J & J), Anneke Knuttson (UNFPA), Katja Iversen (Women Deliver), Elizabeth Iro (WHO) and Her Excellency Mrs Toyin Saraki (ICM Global Goodwill Ambassador). Speakers addressed the importance of midwifery leadership in governments, development agencies, NGOs and the private sector.

Alongside UNGA in September 2018, ICM hosted a stakeholder's meeting with our core partners to seek feedback from partners in relation to programmes and partnerships we deliver collaboratively to identify strengths and areas for improvement for ICM. Partners also spoke about how they would support ICM to raise the profile of midwives.

Following the stakeholder meeting we held a reception, attended by over 100 people. The reception, titled 'Midwifery Champions' brought together and showcased the work of midwifery leaders and national and global influencers from government, civil society and international development agencies engaged in ending preventable maternal and newborn morbidity and mortality. The evening was opened by Lauren Moore, Vice President, Corporate Citizenship at Johnson and

Johnson and speakers included Dr Edna Adan (Director and founder of the Edna Adan Maternity Hospital, Somaliland), Christy Turlington-Burns (CEO and Founder of Every Mother Counts) and Her excellency Toyin Saraki (ICM Global Goodwill Ambassador).

ICM's participation in the Partnership for Maternal, Newborn and Child Health (PMNCH) has provided further opportunities for leadership and advocacy. During 2018 the President, Franka Cadée was a Board member and CE, Sally Pairman, was an alternate member for ICM at PMNCH Board meetings and she, along with ICM Lead Midwife Advisor Ann Yates represented ICM at the PMNCH Partners Forum in Delhi in December 2018. In July 2019, ICM co-hosted the PMNCH Board meeting in The Hague together with the Bernard van Leer Foundation and the Dutch Foreign Ministry. Since January 2019 President, Franka Cadée, has been a member of the Executive Board of PMNCH, representing and chairing the Health Care Professional Associations (HCPA) Constituency. She is also part of the Humanitarian and Fragile settings working group of PMNCH. In November 2019 the PMNCH Board Meeting was held alongside ICPD25 in Nairobi, where Franka Cadée attended a meeting of over 10,000 delegates renewing their commitment to Sexual and Reproductive Health and Rights (SRHR), 25 years after the first ICPD Cairo in 1994. She presented a statement from participants at ICM's Africa region conference, held earlier in the month, reiterating midwives' commitment to SRHR.

## Programmes

Most of ICM's projects promote and develop leadership alongside their other activities with one focusing directly young midwife leaders. The Young Midwife Leaders (YML) programme, funded by the Johnson and Johnson Foundation, commenced in 2019 and runs until the end of 2020. Ten Young Midwife Leaders were selected from over 70 applications and each received mentoring through the programme. The mentors and mentees were both afforded the opportunity to benefit from mentorship training. The leadership programme also utilised interactive online leadership development, a webinar series and projects.

The YMLs established an online community of practice and will be working to extend this to include young midwives from across all regions of ICM in 2020 as a component of their group project. Each YML is also undertaking an individual project to support their Member Association. A webinar series giving the YMLs insight into midwife leaders across the globe will run in 2020 and the Young Midwife Leaders will also host a session at the ICM Congress in Bali in June 2020. Most YMLs have also had opportunities to participate in regional or global activities with support from ICM. For example, one has become a SheDecides Champion, others helped facilitated ICM's RMC workshops at regional conferences, and still others will be involved in activities during Year of the Midwife and the Nurse in 2020.





## Strategic Direction, Equity



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## Strategic Direction - Equity

ICM operates with equity at its core. Through her members, ICM draws on a geographically, culturally and socially diverse set of perspectives to fulfill our mission to *Strengthen Midwifery Globally*. This rich diversity is fundamental to the work and output of ICM. A commitment to equity has embodied our work and guides us in identifying creative solutions to issues throughout the triennium and will continue to do so for the future.

## Representation

Organisationally this commitment to equity can be seen by the increased representation and leadership of regional Board Members in their regions. The development of a 'decision tree' process has underpinned decision-making about ICM representation and resulted in many more Board Members, staff and individual midwives contributing their expertise in a variety of forums globally, regionally and nationally and ensuring the presence and profile of ICM and midwifery is kept to the forefront.

## Advocacy

We have continued to advocate for women's access to well-educated and fully qualified midwives and for midwives to be valued and recognised for their essential role in meeting women's needs. A consistent message has been the need for midwives to have equitable access as other health professionals to resources for their work.

## Inclusiveness

We have proactively increased translation of ICM documents, newsletters, advocacy toolkits and social media message from English to French and Spanish to better include our non-English speaking members. Another important strategy to improve equity has been the initiation of regional conferences.

## Regionalisation

Three regional conferences were delivered in 2018 and 2019, co-hosted with Member Associations. The first was held in Dubai in September 2018 to launch ICM's three new regions – Eastern Mediterranean, South East Asia and Western Pacific. Opened by Princess Muna Al-Hussein of Jordan and attended by over 200 midwives, the theme of the conference was "*Midwives leading the way for quality and equity*".

The second conference was held in Paraguay in November 2018 and opened by Dr Julio Mazoleni, the Minister of Public Health and Social Wellbeing of Paraguay, with the same conference theme of "*Midwives leading the way for quality and equity*". This conference was attended by approximately 400 midwives from North, South and Central America with simultaneous interpretation for English and Spanish speaking presenters during plenary sessions and some workshops.

The third regional conference took place in Namibia in September 2019 with the theme “*Midwives leading the way for quality and equity in Africa*”. The conference was highly successful with attendance from more than 300 midwives and well supported by partners and sponsors. For the first time we ran pre-conference workshops including a UNFPA strategy launch, Young Midwife Leaders workshop, Respectful Maternity Care workshop and a Laerdal Global Health Essential Care in Labour and Birth workshop.

A key feature of all regional conferences was the inclusion of regional meetings of the Midwives’ Associations and ICM Board and staff members. These enabled improved communication and better understanding of national, regional and global issues and built closer connections between associations, Board members and the ICM Head Office Team. Each sub-region developed a Work Plan that set out agreed and shared activities for each region in support of the overall ICM triennial strategy.

The Europe region did not hold a regional conference because of pre-planned conferences in the triennium but the associations did attend a regional meeting in Iceland in May 2019 just before the Nordic region conference. Again, participants shared information from national, regional and global perspectives and the three sub-regions of Europe each developed a Work Plan for shared activity to support ICM Strategy.


### Global Advocacy for Equity

Throughout the triennium ICM leveraged all opportunities to advocate for equity – for women and girls, for midwives and for maternity services.

The ICM Triennial Congress in Toronto, Canada, June 2017 marked the completion of one triennium and the beginning of the next. At this Congress:

- the ICM Council elected a new Board and set the strategic direction for the triennium.
- Approximately 4,200 midwives from around the world participated and celebrated the progress made in ICM’s mandate to strengthen midwifery globally and create better sexual, reproductive, maternal and newborn health (SRMNH) outcomes.
- The event included a March for More Midwives through Downtown Toronto.
- ICM also took the opportunity to host a high-level meeting to hear feedback from key partners and to garner support for its work.

**The Women Deliver conference**, ‘The Power of Us’, held in Vancouver in June 2019 provided several opportunities for ICM to call for equitable access for midwives to education, regulation, professional development and an enabling environment that supports their work.



The global Covid-19 pandemic  
has confirmed how uncertain the future  
is and how important it is for  
us to be flexible.



- ICM co-hosted with UNFPA and in collaboration with WHO, UNICEF, Jhpiego, the Canadian Association of Midwives and Laerdal Global Health, a one-day symposium prior to Women Deliver.
- Titled ‘Empowered Midwives, Transformed Communities’ the symposium identified that strengthening a workforce entirely dedicated to the woman’s life cycle gives women the power to manage their lives and wellbeing.
- A range of experts, specialists and policy makers discussed the enabling environment and supportive professional collaboration that is needed for the effective functioning and delivery of a woman-centered, midwife-led model of care that enables normal physiologic labour and childbirth with no unnecessary or excessive interventions.
- ICM facilitated a session on the ‘Enabling Environment for Midwives’ that teased out the various aspects of the environment needed to support midwives to provide quality care.
- We proposed a model that included three overlapping dimensions – professional, practice (workplace) and economic/social – the barriers to which are primarily gender inequity and lack of human rights.
- ICM intends to take this work forward to the next triennium, beginning with the development of a policy document to guide governments and partners about the enabling environment that midwives need in order to deliver respectful and high-quality midwifery care that can create a lifetime of good health and wellbeing beyond the childbirth continuum.
- The seminar ended with a call to Action signed by key partners and supported by professional associations including FIGO, ICN, IPA and Association of Anaesthesiologists.
- The Women Deliver conference itself saw several Board and staff members involved in various presentations with partners such as SheDecides, Maternity Foundation, Laerdal Global Health, the Canadian Association of Midwives and Jhpiego, all of which contributed to ICM’s advocacy for equity and quality midwifery services.
- ICM in partnership with FIGO co-hosted an ‘invitation only’ round table discussion under the Chatham House Rule on the topic, ‘Is the Midwife – Obstetrician relationship a danger to women?’ Building from an earlier session facilitated by ICM at the FIGO Congress in 2018, this session sought to create a safe space for midwives and obstetricians to openly and productively address the roles of gender, class, hierarchy, patriarchy and level of education as causes of frictions between the two professional groups. This session provided a beginning step for the professions to explore the factors that can be barriers to respectful relationships and the ways in which these could be addressed.

Beyond the Women Deliver conference, Regional Board members in South America, Central America and South East Asia were also involved in regional meetings that focused on civil rights, gender discrimination and how to overcome barriers to quality midwifery services.

## Reflections and future directions

The 2017 – 2020 triennium has been a period of major change for ICM, both strategically and operationally. The strategic directions of quality, leadership and equity have enabled us to refocus on our core work – strengthening our Member Associations. They need to be recognised and valued in their countries as the ‘experts’ on midwifery, confident to participate at the decision-making table and partnering with women to advocate for gender equity and improved maternal and newborn health services that meet women’s needs. Every individual midwife is a leader in bringing this about.

While we have much to be proud of this triennium, there is more to do. We have identified the need to further develop our professional framework for midwifery to incorporate the essential dimensions of gender equity, the enabling environment and leadership. There is still much to do to strengthen the original three pillars of education, regulation and association and we have identified new resources and new programmes we want to develop for this end.

Regionalisation has been successful and we need to continue to develop this and find ways to help Midwives’ Associations to communicate and collaborate across their regions.

Our partners tell us that they have increased confidence in ICM and that they recognise and appreciate our efforts in raising the profile of midwives and midwifery. They have also acknowledged our effort to strengthen ICM as an organisation and to deliver on our commitments. This bodes well for future partnerships.

Our financial situation has been a significant challenge and we know that we need to find ways to generate our own income and reduce our reliance on external funding through projects grants and partner support. We also need to find ways to operate more sustainably, to increase our use of virtual technology and reduce our travel. ICM has a huge reach with 143 Member Associations in 124 countries by April 2020. But its Head Office Team is very small and its operating budget is always extremely tight.

For all this we can be proud of our increased visibility and of the ever increasing recognition by partners and governments that midwives are the health professionals most needed for maternal and newborn health services everywhere if the SDGs are to be achieved in 2030. The WHO’s announcement that 2020 is the Year of the Nurse and the Midwife has provided us with another platform through which to share our messages and show our worth. The Coronavirus Pandemic is bringing the important work of midwives into even more focus as the life experiences of pregnancy, birth and new parenthood continue, and midwives selflessly carry on supporting and caring for women in the face of significant challenges and risks to their own health and safety. The ICM is incredibly proud of the extraordinary work that Midwives’ Associations across the world are doing to support midwives and women in their communities during these challenging times.

As we look to the next triennium we will celebrate 100 years in 2022. Our challenge for the next triennium is to secure ICM as a global leader for midwifery for another 100 years.

# Triennial Financial Summary

The following table summarises ICM's financial position across the triennium. The complete financial statements are available in the relevant ICM Annual Reports. The table below shows that over the triennium ICM's expenses have exceeded the income and as a consequence, ICM's General Reserve has been reduced. The main factors that contribute to this poor financial result during the triennium are:

- Not all member associations have paid their fees, some over a period of years. On average about 5% of the membership fees (appr. € 50,000 in 3 years) is not received by ICM.
- ICM depends on income from grants to cover part of ICM staff and general (office) costs. In the period 2017-2019 the total budgeted income from grants was approximately € 6.1 million. In reality this income was € 5.1 million. As a result, part of staff salary costs and approximately € 100 K overhead costs were not covered. The reasons for the difference between budgeted and actual income from grants were:
  - Late approval and late receipt of funding for some grants, leading to later than expected commencement of projects
  - Delays in execution of some projects
- To mobilise more resources staff and some consultants spent time writing grant proposals. This staff time cannot be offset from external funding sources and therefore becomes a core cost for ICM. Not all proposals were successful, but those that were will led to new grant income in 2020.
- Regional conferences were a new initiative during the triennium. Two conferences resulted in a loss while one made a small profit. ICM Head Office staff costs in running these conferences were not able to be offset from conference income and therefore were included in ICM core costs. A regional conference fund was established with € 50,000 diverted from each of the General Reserve and the Safe Motherhood and Development Fund.
- Congress income is intended to be invested in activities of ICM related to the coming Congress. The result (capitation fee and profit minus ICM expenses) from the Congress 2017 in Toronto was € 47,228 (Prague € 204,442). Therefore, the Congress Reserve was not 'topped up' as much as expected. The reserve has been used to cover costs related to the Bali Congress with a balance of € 37,359 at the end of 2019. Not all costs of ICM staff could be offset from the Congress reserve resulting in an unbudgeted increase of core costs. The Congress reserve now needs to cover Congress costs for a further year due to the postponement of the Congress until 2021. The reserve will not be 'topped up' until 2021, and only if there is a positive result from the Congress.

The result of the factors outlined above has been deficits in each year of the triennium and depletion of ICM's General reserves to cover these losses.

ICM is not financially secure and at this moment is not in a position to invest in its own infrastructure or operations. ICM remains strongly dependent on funding from donor organizations and ICM triennial congresses to carry out core activities in support of our members. ICM is working on activities to generate its own income and the proposed change to the ICM Membership Fee structure and increase in membership fees is considered essential to ensuring the long-term financial sustainability of ICM.

	<b>Actual 2017 (Euro)</b>	<b>Actual 2018 (Euro)</b>	<b>Actual 2019 (Euro)</b>
<b>Income</b>			
Membership Fee income	354,640	371,867	375,274
Income subsidies/ grants	1,869,979	1,415,571	1,801,563
Income Fundraising activities		-	1,400
Income Funds and Reserves	510,873	171,114	168,755
Other income	20,325	1,563	5,000
<b>Subtotal Income</b>	<b>2,755,817</b>	<b>1,960,115</b>	<b>2,351,992</b>
<b>Expenses</b>			
Personnel costs	1,074,355	1,160,023	1,299,183
Board and representation	85,498	93,945	97,870
Professional Services	73,031	71,300	168,197
General Office cost	124,070	110,324	128,587
Cost events and programme	1,066,810	592,384	749,232
Cost Funds and Reserves	380,072	234,289	155,206
<b>Subtotal Expenses</b>	<b>2,803,836</b>	<b>2,262,265</b>	<b>2,598,275</b>
<b>Operational Result</b>	<b>-48,019</b>	<b>-302,150</b>	<b>-246,283</b>
Depreciation	-8,470	-10,220	-11,976
Financial income	1,175	6,523	15,323
Financial cost	-29,508	-5,858	-5,011
<b>TOTAL RESULT</b>	<b>-84,822</b>	<b>-311,705</b>	<b>-247,947</b>
<b>Appropriation of the result</b>	<b>Result 2017</b>	<b>Result 2018</b>	<b>Result 2019</b>
General reserves	-46,424	-215,278	-139,931
Safe Motherhood Fund	-66,217	-48,619	4,713
Regional Conference Fund		-43,493	-30,147
Congress fund	47,228	-88,896	-79,259
Dorothea Lang Fund	-11,996	-3,826	-1,558
Marie Goubran Fund	-7,412	1,421	-1,486
Swiss Midwives Association Fund			-279
<b>Total Appropriation of the result</b>	<b>-84,822</b>	<b>-311,705</b>	<b>-247,947</b>



<b>Funds and Reserves</b>	<b><i>Balance end of 2016</i></b>	<b><i>Balance end of 2017</i></b>	<b><i>Balance end of 2018</i></b>	<b><i>Balance end of 2019</i></b>
General reserves	501,493	455,069	239,791	99,860
Safe Motherhood Fund	277,336	211,119	162,500	167,213
Congress Interpretation Fund	4,610	4,610	4,610	4,610
Membership Assistance Fund	9,132	9,132	9,132	9,132
Regional Conference Fund		-	43,493	13,346
Congress fund	158,286	205,514	116,618	37,359
Dorothea Lang Fund	35,526	23,530	19,704	18,146
Marie Goubran Fund	7,477	65	1,486	-
Swiss Midwives Association Fund	279	279	279	-
	<b>994,139</b>	<b>909,318</b>	<b>597,613</b>	<b>349,666</b>



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