

Position Statement

Collaboration and Partnerships for Healthy Women and Infants

Background

Midwives worked in partnership with women, families and communities to achieve good outcomes for pregnancy and birth. However, effective health promotion and disease prevention within maternity and newborn care cannot be accomplished by a single professional, community or policy-making group. Multi-professional collaboration plays a vital role in the provision of high-quality sexual, reproductive, maternity and newborn care.

Many women, gender diverse people and newborns continue to suffer unnecessary mortality and morbidity because there is delay in seeking midwifery care, no access to the next level of health services when complications arise, or no medication available at community level to prevent or treat complications. Midwives must work in partnership with other health professionals, policy makers and global agencies to ensure quality, timely and accessible reproductive, maternal and infant health care globally.

ICM supports the demand for continuity of care through pregnancy, childbirth and postpartum, and collaboration with other health professionals that may be needed to ensure that care is quality, timely and accessible. This collaborative chain links community health workers to family and community-based primary care provided by professional midwives, and also with district and regional hospital-based care from professional midwives and medical specialists. At each level of care, a woman or gender diverse person should be valued provided with culturally safe care. This includes receiving quality care, timely consultation and referral to doctors and other specialists when necessary. Collaboration between midwives, other health professionals and consumer groups, as well as between ICM and other international partner organizations, should be constructive and focused on the needs of women, newborns and families at every level.

As autonomous health professionals, midwives, are responsible for the care they give directly during pregnancy, childbirth, postpartum and the newborn period, but for the timely consultation and/or referral to the next level of care when needed.

We acknowledge that, in many parts of the world, community health workers refer women to midwives when pregnancy complications are suspected.

ICM believes that everyone benefits when there is continuity and collaboration among the range of health care providers across community, district and regional settings. It is critical that such collaboration is based upon mutual trust and respect. The power of partnerships goes beyond what each individual, group or agency can do alone, thereby maximising the effectiveness of strategies to promote sexual, reproductive, maternal and newborn health.

Position

ICM recognises critical role continuity of care has in optimising pregnancy, childbirth and postpartum outcomes. At the same time, inter-professional clinical collaboration needs to be supported by partnerships at the local level, as well as at national associations and international agencies. The ICM encourages all midwives to:

- Work collaboratively with other health care providers providing sexual, reproductive, maternal and newborn care;
- Promote respect, trust and open communication among all levels of health care providers as the hallmarks of midwifery care that result in the best possible health outcomes.

ICM is also interested in establishing and strengthening partnerships that will promote the health and wellbeing of women and newborns, and the advancement of midwife-led care, in keeping with the following principles:

- Partners share the common goal or purpose of promoting the health of women, newborns and childbearing families in keeping with the ICM Vision Statement.
- Each partner brings a special expertise to the table with a commitment to listen, learn and respect others' views and suggestions for joint actions.
- Shared leadership, based on the required expertise for a given strategic goal, along with teamwork, is the norm.
- Each partner commits resources to support individual participation in the group or coalition, in keeping with financial guidelines and priorities of the partner agency.

Recommendations

Member Associations are encouraged to offer assistance and advice to midwives in practice, education, policy and management to ensure that sexual, reproductive, maternal and newborn

care is available in their communities, countries or regions, based on continuity and collaboration.

Related ICM documents

- o ICM. 2008. Core Document. Vision Statement.
- o ICM. 2023. Core Document. International Definition of the Midwife.
- o ICM. 2014. Core Document. International Code of Ethics for Midwives.

Other Relevant Documents

- o Bruce T, McKane S. Community-Based Public Health: A Partnership Model. Washington, DC, USA: American Public Health Association, 2000.
- o Guta YR, Risenga PR, Moleki MM, Alemu MT. Community-based maternal and newborn care: A concept analysis. *Curationis*. 2018 Sep 26;41(1):e1-e6. doi: 10.4102/curationis.v41i1.1922.
- o Liberati EG, Tarrant C, Willars J The SCALING Authorship Group, *et al*
- o Seven features of safety in maternity units: a framework based on multisite ethnography and stakeholder consultation *BMJ Quality & Safety* 2021;**30**:444-456.
- o UNFPA (2021) The State of the Worlds Midwifery Report
- o World Health Organization & The Partnership for Maternal, Newborn and Child Health. (2017). Progress in partnership: 2017 progress report on the Every woman every child global strategy for women's, children's and adolescents' health. World Health Organization. <https://apps.who.int/iris/handle/10665/258504>.

Adopted at Glasgow Council meeting, 2008

Reviewed and adopted at Prague Council meeting, 2014

Reviewed and adopted at Bali Council meeting, 2023

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