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ICM Mission statement
To strengthen member associations and to advance the profession of midwifery globally by promoting autonomous midwives as the most appropriate caregivers for childbearing women and in keeping birth normal, in order to enhance the reproductive health of women, and the health of their newborn and their families. (May 2008)

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Momentum in May!

ICM Vice President Frances Day-Stirk describes recent action among midwives - and she urges them ‘to believe’

In many parts of the world the month of May holds significance - be it Mother’s Day or, in temperate countries, the first signs of spring - signalling new life. May also holds significance for midwifery associations in membership of ICM and for midwives. The 5th day of May, the International Day of the Midwife, is marked out for celebration and commemoration: celebration of all that is good about midwives and midwifery and commemoration of the millions of lives of women and their children lost through childbirth related deaths. And it is almost one year since ICM Council last met in Glasgow in last May. It has been a year that has seen the profile of midwifery heightened significantly, as outlined by the ICM President in the previous issue of this journal (JM 2008; 21: 51). This achievement results from a combination of the ICM’s continuing strategy as well as global recognition of the significance of midwives in achieving Millennium Development Goal (MDG) 5. It is a huge privilege to be serving as ICM Vice-President at a most exciting time in the history of the globalisation of midwifery - a time when the lack of progress towards MDG5 has galvanised global leadership.

The 2009 theme for the International Day of the Midwife (IDM), The World needs midwives now more than ever, and the poster illustration encompass the message that the ICM wants all governments, and international policy- and decision-makers to heed the call and take action: all Member Associations and midwives, in their turn, are needed to campaign and lobby in their own countries on behalf of the world’s women. This was emphasised in the press release message that midwives are central to achieving the maternal and newborn specific MDG goals 4 and 5 and also key players in reaching the equally important MDG 6, relating to the fight against disease.

The ICM website demonstrates the unprecedented scale of activities around IDM 2009, including Mother Night in the Netherlands, the WHO postcard and UNICEF message (ICM 2009). Midwives and mothers figured strongly in the UK at the launch of a report from the All Party Parliamentary Group on Population Development and Reproductive Health, which focused on maternal morbidity with its stark message made clear in the title ‘Better off Dead?’ (APPG 2009).

The high-profile launch by Sarah Brown was planned to coincide with the IDM and also with the ‘From Pledges to Progress’ event hosted by the Royal College of Midwives and Women and Children First UK.

What else has happened in May? In preparation for the G8 summit, the Maternal Mortality Campaign, chaired by Sarah Brown, moved on to meeting European Commissioners in Brussels. Again there was clear support for access to midwifery competency skilled health professionals to work in liaison with community health workers. This campaign was then profiled at the World Health Assembly in May www.number10.gov.uk/Page19362, which was attended by the ICM Secretary General and Treasurer.

MDG5 – reducing maternal mortality - is at the heart of all the MDGs and yet it is the most under-funded with a paltry annual global expenditure of approximately £2.4 billion. Consider and compare this to the sums that governments can find when there is a will. Not very long ago, £17 billion was swiftly raised to bail out two Belgian banks; MDG 5 targets of universal access to family planning services and reduction of the maternal mortality rate by three-quarters by 2015 could be met if wealthy nations allocated an additional £13bn in aid, according to the World Health Organization (Duff 2008). The stark differences are evident as the world becomes increasingly interconnected - where the impact of recession in the west reverberates in every corner of the globe. So too does the opportunity to influence and as innovative financing systems are considered this must be in the context of targeted accountable aid and tangible outcomes linked to indicators.

In an article in the UK’s Guardian newspaper Romesh Gunesekera, writing on the military situation between the Sri Lankan army and the Tamil rebels, recalled a Bengali poet Sunil Gangopadhyay’s poem that made him think: what should I believe in now? What can I believe in? What must I believe in?

This made me think about maternal mortality and the issues around safe motherhood that tax and challenge us all: global, regional and national leaders, NGOs like the ICM, Midwifery Associations and midwives. What if his idea was borrowed and adapted to maternal mortality: What must we (midwives) believe in now? What can we believe in? What must we believe in?

- We must believe that maternal health will improve by 2015 and there will be significant reduction in preventable maternal death and disability.
- We must believe that those who have the power will ensure that the lives of future generations of women and infants will not be brought to this point of suffering again.
• We must believe that everyone will acknowledge that women’s reproductive rights matter and gender discrimination is wrong.
• We must believe that aid will flow into countries in most need and that it will go directly to support universal free health access to women and children.
• We must believe that in-country leaders will commit to funding maternal and child health services and systems
• We must believe that sufficient ICM competent midwives will be trained and found gainful employment
• We must believe that the health and reproductive rights of women will be recognised and implemented globally
• We must believe that girl children will enjoy education opportunities equal to boys
• We must believe that women will not have to cross the bridge alone.

Midwives, mothers and mortality appear to be reaching a tipping point. We must be prepared to believe ‘we can’. We must keep up the momentum.

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ICM 2009 www.internationalmidwives.org/ accessed 10 May 2009 @22:30

ICM news

ICM Vice President Frances Day-Stirk represented the ICM at a high-profile event on the day following the International Day of the Midwife, when parliamentarians, celebrities and key players in worldwide maternal health came together at the UK’s House of Commons.

The occasion was the launch of a report bleakly titled ‘Better Off Dead?’ describing the severe toll of maternal morbidity across the world.

Christine McCafferty, MP, Chair of the All-Party Parliamentary Group on Population, Development and Reproductive Health (APPG) carried out the launch of the APPG Hearing Report on Maternal Morbidity in collaboration with the White Ribbon Alliance (WRA), IPPF and Marie Stopes International, at the same time celebrating International Day of the Midwife on Wednesday 6 May 2009.

Guests of honour included Sarah Brown, wife of the British Prime Minister Gordon Brown and Patron of the WRA and Geri Halliwell, UNFPA Goodwill Ambassador.

The report gave facts and figures on women’s illnesses and injuries related to pregnancy and childbirth. These leave 10–20 million women and girls every year with long-term physical, psychological, social and economic problems. Many women are abandoned, ostracised and alone.

The complications include: obstetric fistula, perineal damage, prolapsed uterus, stress incontinence, puerperal infection and sepsis, haemorrhage, pre-eclampsia and fits, anaemia, infertility and ectopic pregnancy, depression and suicide. Maternal morbidity has root causes in gender inequality and violence.

Baroness Tonge, Chair of the APPG, said: ‘Among] the health-related Millennium Development Goals (MDGs), MDG 5 to improve maternal health is the one with the least progress. For every maternal death, there are 20 women who suffer long-term illness and disabilities. These are often devastating to the woman ... some might even be better off dead. However, there is hope. We greatly reduced morbidities in the UK within a generation by ensuring universal access to family planning and safe abortion, skilled birth attendance, and basic and comprehensive emergency obstetric care. Women in developing countries deserve the same; they should not be abandoned to suffer in silence’.

Frances Day-Stirk (centre) with Janet Fyle of the RCM and Lord Patel

International Midwifery Volume 22 – Number 2 June 2009
News from ICM and partners

New ICM logo launched

The new logo for the ICM, chosen at the Council meeting in 2008, has now received a finalised design and the strapline ‘Strengthening midwives globally’. In due course the logo will appear on all ICM publications and documentation. Members may obtain the artwork from ICM HQ in The Hague.

Congratulations to Lao from the ICM Asia Pacific Region

In April 2009, Karen Guilliland, ICM Board Member for the Asia Pacific region, wrote to UK midwife Della Sherratt who is working in the People’s Democratic Republic of Lao for UNFPA and had reported that the Lao Ministry of Health will launch a 2-year mid level midwifery education programme in September 2009:

‘The ICM sends its warmest greetings and congratulations to the Lao government on the re-establishment of training for midwives. Beginning with the mid-level midwife is a first but very important step in achieving the end goal of having a midwife in every health delivery point in Lao.

‘The ICM knows that a well educated midwife is the most effective workforce in reducing maternal and perinatal mortality and congratulates the government on its short and long term policies which will help to achieve this.

‘The world’s midwives will be celebrating with you as you mark International Midwives Day for the first time. It gives us great encouragement to hear and see support for midwifery in Lao. It helps all of us to try harder to reach the urgent goal of improving the health and lives of the world’s mothers, babies and families.’

ICM welcomes European master’s course for midwives

Glasgow Caledonian University (GCU) has unveiled plans for the first European masters course for midwives.

The MSc Midwifery course is funded by the EU’s Lifelong Learning Programme and was developed by five universities across Europe. The course was created in response to calls for wider access to continuing education at masters level for qualified midwives, from bodies including WHO, the European Midwives’ Association and the ICM.

Working midwives will be taught internationally accepted and accredited additional skills. They will also be able to qualify for leadership roles in midwifery research, education and practice and to take on further study in fields such as clinical research and cutting-edge teaching and learning strategies.

Professor Valerie Fleming, from GCU’s school of nursing, midwifery and community health, (who was formerly a mentor on the ICM’s Young Midwifery Leaders programme) said: ‘[The] university is delighted to be working with our partner institutions to share our wealth of experience and expertise with midwives from across Europe and beyond.’

GCU has been working with Berlin’s Charite-Universitaets-medizin, Medizinische Hochschule Hanover, Academie Verloskunde Maastricht and the University College of Health Studies, Ljubljana, for 18 months to develop the joint course. The programme will start with a summer school at Glasgow with additional core modules to be taken at each student’s home institution.

To apply, midwives must have completed their midwifery education, hold an academic degree and have a knowledge of English.

National Safe Motherhood Day in India celebrated by WRA

ICM’s partner organisation White Ribbon Alliance marked National Safe Motherhood Day in India on April 11, with the campaign theme ‘Quality Maternal Health Care - Every Woman’s Right!’ Padmashree Shovana Narayan, the Kathak Maestro and WRA’s Champion for Safe Motherhood, gave a performance called “Bhroon ki Pukar” highlighting the issue of needless maternal deaths. The focus was on the plight of children who have lost their mothers.

Message from the editor

This is my last issue of ‘International Midwifery’ as I am moving from my post at ICM to take a campaigning role in the UK’s National Childbirth Trust, a woman’s organisation that supports parents and lobbies government for improved maternity services.

I have greatly enjoyed my time in the editorial role, especially the contact with midwives from all over the world; it has been my pride and pleasure to help make their endeavours more widely known.

This particular issue highlights positive midwifery action in every ICM region: the rapid spread of the ICM/UNFPA ‘Investing in Midwives’ programme across Africa; a new midwives’ association and better recognition for midwives in China; another new association in the smaller but equally dynamic country of Guyana; and a report from the Normal Birth Research conference in the UK, at which I was delighted to be present.

I leave with sincere best wishes to every ICM member and every reader for good fortune in these endeavours and all others to come.

Elizabeth Duff
Launch of ‘Investing in midwives’ in southern Sudan helps drive towards MDGs for 2015

Dr Jemima-Dennis Antwi, ICM Regional Midwifery Advisor for Anglophone Africa, sets the scene in a part of the world where the need for midwives is crucial.

With seven years to the 2015 review deadline for Millennium Development Goal (MDG) #5 for reduction of maternal mortality, Southern Sudan has posted the highest maternal mortality ratio in the world standing at a staggering 2,054 deaths for every 100,000 live births. Southern Sudan has hardly any midwifery workforce to provide skilled attendance at birth or referral to effective obstetric emergency response when needed. An analysis conducted in 2007 revealed that there were only eight professional midwives in the whole of Southern Sudan. A year later, 37 community midwives, the first ever to undergo a formal midwifery education in Southern Sudan, graduated in 2008. Currently there are only 23 other student community midwives in training. These numbers are grossly inadequate for the country to respond to the highest maternal and neonatal mortality ratios in the world. Investing in professional midwives by developing the foundations for a sustainable and effective midwifery workforce in Southern Sudan is long overdue.

Taking the vision forward

The UNFPA/ICM initiative aims to take this vision forward and to secure the highest political commitment and strategic support for investing in professional midwifery in Southern Sudan; therefore over the three-day period 13–16 May 2009 the UNFPA Southern Sudan programme and the International Confederation of Midwives, in collaboration with the Government of Southern Sudan, launched the programme ‘Investing in Midwives’ under the theme ‘Southern Sudan needs midwives now more than ever’.

On day one, the ICM/UNFPA /MoH GOSS Directorate of Nursing and Midwifery comprising Dr Jemima Dennis-Antwi (ICM Regional Advisor for Anglophone Africa), Dr Dragudi Buwa (Head of UNFPA in Southern Sudan), Magda Armah (RH-Program Specialist,UNFPA) and Janet Michaels (Director-General for Nursing and Midwifery-MoH) held a press conference to advocate for access to midwifery care for every pregnant woman, nursing mother and newborn in Southern Sudan. The team, led by Dr Dragudi Buwa, met separately with HE the Vice President, Lt Gen Dr Riak Machar Teny and later with Ministers, HE Dr Luka Monoja, Minister for Cabinet Affairs, HE Dr Monytueli Weijang, Minister of Health, HE Mary Kiden Kimbo, Minister for Gender, Social Welfare and Religious Affairs, HE Prof Job Dhurai, Minister of Education, and HE Madam Rebecca Garang de Mabior, Presidential Advisor on Gender and Human Rights (Immediate Past First Lady). These meetings aimed at securing, at the highest political level, the full understanding of the benefits of professionalisation of midwifery and the impact this will have on the health of the mothers and babies of Southern Sudan.

Commitment, blessing and support

The team met the President of Southern Sudan, HE Salva Kiir Mayardit for 30 minutes, briefed him on the programme and the impending launch and secured his utmost blessing and support for the programme.

Day two, the day of the launch, HE the Minister of Health flagged off a huge and colourful march from the MoH headquarters across town to the venue of the launch with full participation from the MoH GOSS.
During the launch, the ICM Regional Advisor for Anglophone Africa gave a keynote address. In the address, she outlined the background to the ICM/UNFPA partnership and the critical importance of having qualified midwives deployed to facilities accessible to communities to ensure better and quality services. She also informed the invitees about the three major outputs of the programme and sought the cooperation of government to ensure success. Key government and UN dignitaries then spoke and committed full support to the aspirations of the launch. The Vice President closed the session with the remark ‘I now declare the programme officially launched in Southern Sudan’. The student midwives had the opportunity to present their requests to the highest political presence.

**Strategic and collaborative efforts**

As a symbol of appreciation and thanks, and for building long-term strategic and collaborative efforts to ensure continued commitment to the programme, the Vice President presented awards and gifts to individuals who have strived in their positions to make contributions to the cause of mothers and babies in Southern Sudan, and secondly, for having taken time to participate in order to give the occasion the importance and relevance it deserves.

With the assistance of HE the Adviser to the President on Gender and Human Rights, HE the Vice President received a gift, a token of appreciation for the immense political support demonstrated. The gifts had the inscription ‘Southern Sudan needs midwives now more than ever’ to continuously remind the dignitaries of the political support extended.

Day Three was celebrated by visits to the clinical environment in Juba Teaching Hospital and discussions were held with clinical staff on how this programme would benefit the healthcare sector and the need for them to give their utmost best to save the lives of mothers and their newborns.
International Day of the Midwife, 5 May 2009: The world needs midwives, now more than ever

Australia
The Australian College of Midwives Incorporated (ACMI) announced that this year the theme for International Midwives Day (IMD) would be ‘Aboriginal Midwives for Aboriginal Women’. The ACMI has developed a scholarship trust fund for Aboriginal and Torres Strait Islander women to study to become midwives. All proceeds from merchandise sold on International Midwives Day (including hand-crafted quilts with traditional designs such as those pictured above) will be donated to the trust fund to support these women to reduce the costs of undertaking their studies.

Also in Australia, the Australian Nursing Federation (ANF) celebrated International Midwives’ Day (IMD) this year by acknowledging the important role midwives play in improving maternal health in Australia and throughout the world.

Ged Kearney, ANF Federal Secretary, said that International Midwives Day focuses attention towards the contribution and commitment shown by midwives to the health and wellbeing of mothers and babies.

"Every year Australia's midwives expertly assist mothers to safely birth their babies, caring for mothers, their newborn and families with professional kindness and skill. The World Health Organisation recognises midwives as the most appropriate health professionals to safely manage a mother's maternal care and the birth of their babies. Their incredible contribution should be applauded by government, the media and the community."

The ANF pointed out that although the contribution of Australian midwives is well recognised, particularly following the recommendations in the federal government's maternity services review, Australian midwives still need action to enable mothers and babies to receive the full benefits of their professional skills.

"Australia has some wonderful examples of midwifery services that are collaborative and use a multidisciplinary approach to maternity care; these models of care must be available to all mothers and their babies ... particularly in rural and remote areas. Australia needs the skills of midwives now more than ever."

More about the Australian College of Midwives is at www.midwives.org.au and the Australian Nursing Federation at www.anf.org.au

Canada
In Canada, midwives celebrated an announcement from the Saskatoon Health Region that 21 babies have been born since February when midwives’ services in this province were first paid for by health insurance. About half of those babies were born at home in the care of one of four legislated midwives.

Saskatchewan is the seventh of the eight Canadian provinces that have a registered midwife programme to cover maternity care through public health insurance.

A study conducted by Statistics Canada in 2007 for the Public Health Agency of Canada found women who used a midwife as their primary caregiver rated their birthing experience as very positive 71% of the time, as opposed to 53% of the time when cared for by doctors or nurses alone. Supporters say midwives not only help ease a mother's concerns, they also relieve doctors of the workload for uncomplicated births.

Cathy Chicoine, who was the first mother to deliver with the aid of legislated midwives, said midwifery is about ‘wholeness, community and well-being.’

Ethiopia
The Ethiopian Nurse Midwives Association (ENMA) is the professional association representing midwives and the profession of midwifery in Ethiopia, since its establishment in 1992. Currently ENMA has over 500 member midwives throughout the country and it is a member of the International Confederation of Midwives. Its goal is the reduction of maternal, infant and child morbidity and mortality in Ethiopia through provision of quality care.

One of the activities of ENMA is celebrating IDM at the country level to update midwives and discuss strategies to strengthen the association for the realisation of its goal and objectives. Therefore this year we celebrated the 17th annual conference of IDM at the country level by the theme of ‘The world needs midwives NOW more than ever’. 
On May 05, 2009, at the Ghion Hotel, Addis Ababa, ENMA organised and conducted the day in collaboration with UNFPA and EPHA (Ethiopian Public Health Association). The event included the launch of its country UNFPA/ICM midwifery programme which is focused on the strengthening of the national association and capacity building of midwives. In all 284 midwives from all regions of the country and around 50 invited guests participated.

After a welcoming address from ENMA president Sister Aster Bethe, keynote addresses were presented by UNFPA, UNICEF & WHO representatives followed by official opening speech offered by the federal ministry of health (FMoH) representative.

Dr Jemima-Dennis Antwi, ICM Regional Midwifery Advisor-Anglophone Africa, amplified the theme of the day by giving different examples and experiences of African countries, in relation to the midwifery programme, she explained why the midwifery programme is being initiated and which countries are enrolled in the programme.

Guyana

Wednesday May 6, 2009 was a historic day for Guyana and midwives when a 'Midwives Association' was launched and the International Day of the Midwife celebrated. The venue was the Guyana Nurses Association Hall situated in Lacytown, Georgetown.

Guyana, the only English-speaking country in South America, shares borders with the following countries: Suriname, Venezuela and Brazil. To its north is the Atlantic Ocean. It has a population of 751,223 (2002 data) and there are approximately 400 midwives in both the public and private health sectors who provide midwifery services in hospitals and communities.

The main speaker at the launch event was Dr Bheri Ramsarran, Hon. Minister within the Ministry of Health, who praised the Guyana Nurses Association for this undertaking. Other speakers were Dr Janice Woolford, Director MCH Services and Ms Patrice La Fleur, Assistant Representative UNFPA (Guyana). Dr Woolford, a registered nurse/midwife and medical doctor, Obstetric Unit, Georgetown Public Hospital Corporation; Dr Mario Aguilar, Sexual and Reproductive Health Adviser for UNFPA Caribbean; June Cato, Obstetric Unit, GPHC; Ms Veronica Douglas, Health Visitor. The moderator was Ms Marjorie Arjune, Senior Departmental Supervisor, GPHC.

The Midwives Association will work towards the strengthening of midwifery services and maternal and child health care by supporting measures that will improve the standards of practice, education, regulation and personal development of the midwife in Guyana.

Above article written by Grace Bond, Guyana Midwives Association, forwarded to, Debrah Lewis, ICM Board

Lao PDR

The IDM in Lao PDR was celebrated on 11 May 2009, at the National Mother and Child Hospital (MCH). The event was supported by UNFPA Lao PDR in collaboration with WHO, UNICEF and other partners. Over 50 participants from relevant government and international organisations attended the celebration. In addition congratulatory letters were read out from the ICM Asia Pacific Representative and from a number of neighbouring countries in the Asia Pacific region. This event draws attention to the roles of midwives in keeping mothers and babies safe and to achieve the Millennium Development Goal 5 for reducing the rate of mothers dying in childbirth by three-quarters by 2015.

The reason for celebrating this year is that, recognising the important role midwives play, Laos Ministry of Health will open a new programme later in the year to prepare specialist midwives, initially to work close to women in the community. Next year it aims to open another programme for existing nurses to be upgraded to hospital-based midwives. The recent National Assessment of Skilled Birth Attendance calls for a re-introduction of specialist midwifery as it was found that many nurses lacked adequate midwifery skills due to limited hands-on practice (in turn due to low utilisation of services - only 18% of women have a health care provider at birth.). To thank those who did practice midwifery in the past, floral tributes were given to a number of the retired midwives.

Della R Sherratt, International Skilled Birth Attendance Co-ordinator, Lao PDR, UNFPA Country Office, dellassherratt@yahoo.co.uk
Nepal
In Nepal one woman dies every four hours from complications related to pregnancy and childbirth. The Ministry of Health and Population developed and endorsed the National Skilled Birth Attendants policy in July 2006 as a part of the overall strategy to reduce the maternal death by 75%. The percentage of deliveries by skilled birth attendants has doubled from 9% in 1996 to 19% in 2006, as per the National Demographic and Health Survey, 2006. The implementation of the policy started in 2007; with support from UNFPA and others, the systematic training of skilled birth attendants started and to date altogether 900 health service providers have been trained.

On the IDM 2009, UNFPA pledged its support and urges the government, international partners, NGOs and private institutions to continue the joint efforts to increase the number of deliveries assisted by skilled birth attendants.

Sierra Leone

A midwife from the Sierra Leone Midwives Association helps with awareness-raising on the street, accompanied by her five-month-old breastfed twins!

The aims of the day in Sierra Leone were to sensitise midwives on the existence of the association, introduce the association to the Sierra Leonean community and create awareness about high maternal and infant mortality rates.

Media coverage included radio and television broadcasts by the President of the Taskforce, Mrs Elizabeth Decker. In her address Mrs Decker admonished the midwives to get involved in the rebirth process of the Sierra Leone Midwives Association and pleaded for renewed political commitment to the course of the midwifery profession.

There was market place and street sensitisation including an awareness-raising visit to Tombo Fishing and Waterloo communities.

On 5 May, after the street sensitisation, several midwives had audience with the Minister of Health and Sanitation who pledged his support to the association.

The Sierra Leone Midwives Association Task Force is working hard to put back the association on the map. Currently the Task Force members are busy making contacts - midwife to midwife - to bring more midwives on board, following which a general meeting is called to share with every one what going on.

The month of May has lots of maternal and child health activities going on. There is a national event called ‘Mami en Pikin Welbodi week’ which is intended to sensitise the wider public on maternal and child health interventions.

The Sierra Leone Midwives Association says “this is just the beginning”!

Solomon Islands

Gizo Hospital hosted a big function to mark IDM on Tuesday 5 May. Western Province’s health director Dr Gunter Kittel said they have so far trained 24 midwives and are dedicated to have more of them trained.

Director of Nursing Charles Sigoto, being the first male midwife of the Solomon Islands, addressed in his key speech the uttermost importance of the work of the midwives. “Safe motherhood, high quality antenatal and postnatal care will remain a priority in our Primary Health Care,” Mr Sigoto said. He also stressed the point that it is intended to post midwives not only at the hospital and Area Health Centers but also at the Rural Health Clinic level.

The matron Numali Tutuo welcomed all participants. The midwife representative for Western Province Nena Tokefono addressed the importance of the celebration.

The function also coincided with a reproductive health workshop, aimed at addressing adolescents about the present growing concerns about sexual health. Dr Kittel said the workshop was headed by Serah Ben from the Ministry of Health.

Swaziland

Speakers during the commemoration of IDM, which took place on 5 May at Bethel Court, highlighted the urgent need for more skilled midwives to be deployed into the hard-to-reach rural areas in Swaziland in order for the country’s high maternal and infant mortality rates to be reduced.

The global theme for the IDM 2009, a day commemorated annually on May 5, was ‘The world needs midwives, now more than ever, to achieve universal access to sexual reproductive health services to attain Millennium Development Goals 4, 5 and 6’.

The guest speaker Deputy Director of Health Services, Rejoice Nkambule, represented by the Deputy Chief Nursing Officer Mavis Nxumalo, noted that the high maternal mortality rate is a result of challenges including non-functional low level health facilities and an unreliable public transport system to tertiary hospitals: “Additionally, we have limited health facilities that provide maternal health care services and skewed distribution in skilled practitioners towards the urban areas thus preventing a significant number of women in the rural areas from accessing sexual reproductive health services,” she said.

WHO representative Edward Maganu who was also represented by the organisation’s Family Health Planning Officer, Dudu Dlamini, emphasised the need for improved access to maternity care services: “There is need to ensure that every woman has access to quality maternity care and that it is as close to home as possible. This suggests an urgent need for a maternity care strategy to provide the right mix and distribution of skilled maternity care providers to provide the service”, she pointed out.

The event was attended by nurse midwives from all the regional hospitals and some clinics and health centres, officials from the ministry of health and its departments as well as officials from government partners including the World Health Organisation (WHO), United Nations Population Fund (UNFPA) and United Nations International Children’s Emergency Fund (UNICEF).
The first official celebration of the International Day of the Midwife in the People’s Republic of China

Chinese midwife Zhang Jing, of the Nursing School of Hangzhou Normal University, announces this important and ground-breaking event in China

The International Confederation of Midwives (ICM) has designated 5 May as the ‘International Day of the Midwife (IDM)’ since 1992. Midwives in the world have celebrated it for 16 years. However, it is even more a special day this year for Chinese midwives because they have, for the first time, obtained officials’ approval and support to organise their own celebration.

The theme for the event was 'The world needs midwives now more than ever'. The event symbolised the progression of Chinese Midwifery and highlighted the recognition of its importance from Chinese Authority.

At present, midwifery in China is not an independent profession, nor can Chinese midwives work to their full potential because of the lack of adequate recognition and legislation. Since 1996, midwifery in mainland China has been marginalised by medicine and nursing; few people understand the meaning and role of a midwife, let alone the International Day of the Midwife. In this context, it is a milestone for Chinese midwives to acquire approval and recognition from the local government for this celebration.

A memorable moment in Chinese midwifery history

This celebration took place in Shenzhen, China. It was organised by the midwives and hosted by the Shenzhen Nursing Association of Obstetrics and Gynaecology. Around 200 Shenzhen midwives and about 20 midwifery specialists came together from all over the country to mark this memorable moment in Chinese midwifery history and to discuss the future development of their profession.

Each head of the Health Department of Guangdong province and that of Shenzhen, made a speech in the meeting. They supported the midwives to celebrate their own festival and called for action and commitment to reduce maternal and infant mortality. The leaders also acknowledged the solidarity and contribution of midwives.

In this series of activities, a spokeswoman of Feng Yajuan, the representative of ICM Asia Pacific Regional, introduced the function and organisation of the ICM and described midwifery development in Hong Kong, which broadened the midwives’ perspective and helped them know more about international midwifery.

Cheung Ngai Fen, professor of Hangzhou Normal University gave a wonderful lecture about a recent research project ‘the first midwife-led normal birth unit in China’. The idea of this project is to promote normal birth, improve maternity care and enhance midwives’ professional and social status. The efforts made were to increase midwives’ confidence to work for their profession and maternity care with great zeal.

Seventeen midwives who have been working in the front line of maternity care for more than 20 years were honoured during the ceremony. Midwives also displayed their versatile talent by presenting various excellent performances: a well-organised research proposal, brilliant humorous pieces and some touching singing. During the celebration, many midwives broke down in tears for this historical moment, recalling both happiness and sadness in their profession.

A platform for Chinese midwives to work together

This event provided more people with comprehensive understanding about midwives’ characteristic work and their contribution; and motivated midwives’ morale and confidence. It also set up a platform for Chinese midwives to work together and to exchange ideas. Throughout the ceremony, many senior Chinese midwives pledged to give their commitments to strengthen and to advance Chinese midwifery. They were keen to use their privilege and position to support and to advance the profession.

As long as human beings exist, the need for midwives will never end. Corresponding to the IDM theme ‘The world needs midwives, now more than ever’, Chinese midwives are taking positive action for the quality of maternity care and national health. They are preparing to work as hard as it takes to ensure Chinese women have access to their care and to accomplish their important historical mission in the society.

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Midwives entertain the audience with a humorous sketch
The new mission of the International Confederation of Midwives (ICM) includes reference to the midwife’s responsibility in promoting normal birth, and clearly this encompasses research around normal birth to ensure a strong evidence base for the practice. The availability of such research was robustly demonstrated at the 4th Research Conference on Normal Labour and Birth, held at the attractive venue of Grange-over-Sands in the UK’s Lake District.

The American College of Nurse Midwives, the Canadian Midwives Association, the Midwives Alliance of North America and the Royal College of Midwives (RCM) of the UK – all ICM members – were associate hosts with the University of Central Lancashire’s Research in Childbirth & Health (ReaCH) group. This popular event attracted participants from Australia, Brazil, Canada, China, Egypt, Germany, Ireland, Japan, Lebanon, the Netherlands, New Zealand, Nigeria, Norway, Sweden, Taiwan, the UK and USA.

Cathy Warwick, General Secretary of the RCM, greeted delegates and welcomed the theme of collaboration and partnership – ‘together we are strong’, she asserted. Cathy then introduced Hannah Dahlen of the Australian College of Midwives, and the University of Sydney, who gave the first keynote address. Hannah asked, are we ‘undone by fear?’ or ‘deluded by trust?’ and explored these concepts in a rollercoaster presentation that was moving, humorous and inspiring. She kept faith with ‘audience expectations of any Australian speaker’ by introducing sharks (the object of more fear than anything else, ever) and kangaroos (to be avoided on a road-trip undertaken as an alternative to safer but fear-ridden flying). She iterated that the worst fear is often of fear itself, and cited De Becker’s view that ‘worry will buckle under vigorous interrogation’. However, fear should not be denied as it can tell you something useful; Darwin noted that the most fearful may be those who survive. She closed with the comment that courage is not the absence of fear but the triumph over it, and a typically Australian metaphor: ‘if the surfers always fear the sharks, they will never swim with the dolphins!’.

Frances Day-Stirk, ICM Vice-President, titled her keynote ‘Defining, debating, directing: where do we go from here?’. She conveyed greetings from the ICM executive, and asked delegates to consider how relevant normal birth is in the four ICM regions of the world. She quoted Aristotle’s definition of ‘natural labour’, based on a pregnancy at full term, the fetus in the right position, a speedy labour and ‘the child alive’; the WHO definition from its Care in Normal Birth document; and the current ICM definition of ‘A unique dynamic process in which fetal and maternal physiologies and psychosocial contexts interact... the woman commences, continues and completes labour with the infant being born spontaneously at term ... without surgical, medical, or pharmaceutical intervention, but the possibility of referral when needed’.

Another keynote came from medical anthropologist Robbie Davis-Floyd, who gave a ‘gallop through’ the crucial points of her forthcoming book on birth models that work. All such models must demonstrate sustainability, replicability and financial viability. Aspects of Dutch midwifery and the New Zealand and Canadian systems were highlighted, along with pioneering models such the Albany practice in London, UK, with its 48% home birth rate; the set-up at the St George’s Hospital in Sydney, Australia, established by Pat Brodie and Caroline Homer; and an exemplar of partnership between traditional and professional midwives in Samoa.