

President's Report

by Mary Ann Shah, CNM, MS, FACNM

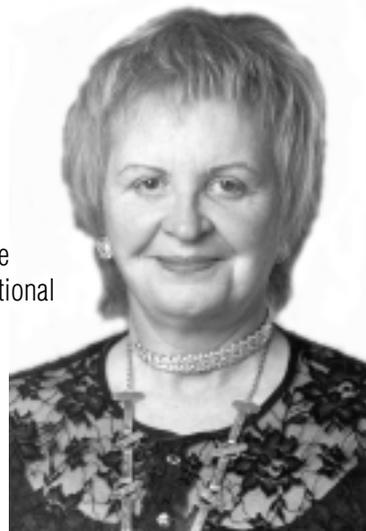
2002 was a very busy and productive year for the ACNM. We take collective pride in the many accomplishments of the Divisions and Committees, the Board of Directors (BOD), and the National Office staff who are the eyes, ears, hands, and hearts of the College. Thank you one and all.

In May 2002, the Core Competencies for Basic Midwifery Practice were revised and, for the very first time, the time frames for newborn care (the first 28 days of life) and women's health care (the perimenarcheal through the postmenopausal years) were specifically delineated. These changes will significantly affect each and every CNM/CM practitioner, educator, researcher, and administrator.

On October 1, 2002, the Joint Statement between the ACNM and the American College of Obstetricians and Gynecologists was revised for the fifth time in three decades. It is hoped that this new version will serve as an impetus to greater mutual understanding and support between CNMs/CMs and physicians for generations to come. Its simplicity is perhaps its greatest asset. By not dictating specific protocols, professional account-

ability is placed where it rightfully belongs . . . on the individual provider of care.

I represented ACNM at the 26th Congress of the International Confederation of Midwives (ICM) in Vienna, Austria, a Pan American conference on professional midwifery and self-regulation in San Miguel de Allende, Mexico, and the annual meetings of the Canadian Association of Midwives, ACOG, and MANA. It was so enlightening for me to network with so many midwives, physicians, nurses, and other women's health care providers who share our commitment to safe motherhood, reproductive health, and the provision of safe,



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Executive Director's Report

by Deanne Williams, CNM, MS, FACNM

As citizen's of the world, certified nurse-midwives and certified midwives were buffeted by the widespread uncertainty that characterized 2002. With a downturn in the economy, a rising number of uninsured women and children, decreasing reimbursement for services, preparations for war and a crisis in availability of affordable professional liability insurance,

it took commitment, careful planning, and luck for midwives and physicians to stay in practice.

Preserving the **hallmarks of midwifery** under such pressure was even more difficult.

The ACNM Board of Directors, members and staff tackled these challenges with the tenacity and passion of our foremothers. I believe that the women who planted the seeds for this profession would be proud if they

read this annual report!

ACNM takes very seriously our responsibility to **COMMUNICATE** the values of the profession to consumers, professional colleagues, policy makers, the media and business associates. With an average of 2,000 single user visits per day, the ACNM Web site has become the premier source of information on midwifery in the US with many international visitors as well. Members have access to ACNM documents and expert advice night and day. Eighteen press releases on topics critical to the profession were posted and quotes from midwives in the print and television media are becoming the norm. **Speak out for Midwifery** exponentially increased the number of policy makers and media contacts who received timely information from our members. Our new consumer Web site, www.GotMom.org, is filled with the best breastfeeding advice and support a midwife has to offer. **Every Baby**, the award winning ACNM consumer magazine, sold in record numbers from magazine racks and over 250,000 copies were distributed to an estimated 1 million readers.

As an **ADVOCATE** for the profession and the women we

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"We pledge to continue our efforts to seek resolutions to the many challenges that lie ahead.."



President - from page 1

competent, compassionate, and satisfying care to women.

The BOD has formulated the following strategic priorities for 2003 (in alphabetical order):

- Advance and sponsor activities that develop business and leadership skills for midwives
- Assess and evaluate the need for restructuring the organization to meet evolving membership needs
- Expand leadership in women's health locally, nationally and globally
- Expand membership opportunities, participation, recruitment and retention
- Expand the capacity for grass roots activities that support the practice of midwifery
- Identify and address barriers to midwifery education
- Promote and disseminate research that provides quantitative and qualitative evidence which supports midwifery practice and education.
- Promote marketing and image building strategies.
- Promote the hallmarks of midwifery as the standard for women's health care
- Pursue legislative remedies that address barriers to practice with a focus on Medicare reimbursement
- Strengthen coalitions around areas of common concern with consumers, physicians, midwives, nurses and other groups

The BOD is well aware that many legislative, political, economic, and social barriers still confront the women we care for and our profession. We pledge to continue our efforts to seek resolutions to the many challenges that lie ahead as we prepare for our 50th anniversary in 2005.

Executive Director - from page 1

serve, ACNM is the #1 resource on midwifery practice legislation. Our legislative efforts include: adequate reimbursement for midwifery services, tort reform legislation, prescriptive authority for CNMs in the only two states where this is not a reality (PA and GA), legal recognition of certified midwives, removal of direction and supervision language from ten state laws, changes in the EMTALA law to recognize midwifery practice and assurance that a master of science degree in nursing is not required to practice midwifery. Regular electronic communication with legislative liaisons, staff and board member presentations at local meetings and personal consultation expanded the number of knowledgeable, savvy and tenacious individuals who work on these important issues.

The **PROFESSIONAL IMAGE** of midwifery has also been enhanced by our grant funded work in 18 countries and the ACNM-MCH Providers Partnership intergenerational adolescent health project-THRIVE. The *Journal of Midwifery & Women's Health*, under the leadership of Tekoa King, CNM, MS Editor in Chief, completed a number of improvements designed to elevate the status of the journal. Now available online, articles appearing in JMWH are more widely distributed than ever before. Likewise, our expanded list of CNM/CM public relations liaisons widely increased the number of news stories referencing midwife experts. Midwives gave public testimony and received awards for their contributions to society.

Most important, the **HEART OF MIDWIFERY** is ever strong as evidenced by generous donations to our Blankets for Babies™ Campaign and the A.C.N.M. Foundation. CNMs and CMs also joined national campaigns to help pregnant smokers quit, increase access to care for women with disabilities, safeguard mental health benefits, eliminate violence, and decrease maternal mortality.



Regional Reports

Region I

The 2002 -2003 year saw the torch of energetic and thoughtful leadership passed from Ruth Keen who organized a highly successful regional meeting at the end of her tenure, and who tirelessly traversed the region to ensure participation by all the midwives of New England. The region thanks Ruth for her dedication and commitment.

It has also been a year of great accomplishment across the region. The Eastern and Western Massachusetts chapters have been collaborative partners with the Massachusetts Department of Health to study teen health with the assistance of an ACNM-MCH THRIVE grant. Massachusetts midwives pursued legislative initiatives to create a board of midwifery and improve access to care through managed care contracts and physician collaboration regulations. Midwives in Maine and Vermont revitalized Peer Review, while New Hampshire midwives worked to reestablish communication throughout the state with a new online discussion group and Public Relations liaison. Midwives in Vermont and New Hampshire participated in a collaborative effort to encourage VBAC deliveries in community hospitals. In Connecticut, members brought a lap top computer to chapter meetings to encourage letter writing for legislative initiatives. The Rhode Island chapter held regular meetings and utilized educational offerings to generate interest in chapter activities.

Midwives in Region I faced many of the same challenges as colleagues nationwide: physician collaborators dropping out of practice; hospital-based services being restructured to respond to diminishing reimbursement rates; and changes in the political landscape for health care providers. In the next year,

midwives will continue to derive strength and hope from colleagues, while continuing to provide safe and satisfying care for women and families across Region I.

Region II

The practice of midwifery is strong in Region II where members are committed to strengthening the profession locally and on a national level. There are 1,676 licensed CNMs/CMs in the region who practice in almost 500 sites. The 8 education programs have close to 300 students and graduated close to 100 new midwives in 2002. Seventy-three percent of the CNMs/CMs in the region are members of the American College of Nurse-Midwives.

We have come a long way since 1954, on the eve of the formation of our College, when there were about 400 nurse-midwives in the United States and only 11 of the 136 who responded to a national questionnaire were practicing clinical midwifery. Our region had one midwifery practice and one education program. Both were at Maternity Center Association in New York City.

Midwives in New York, New Jersey and Pennsylvania contributed thousands of dollars annually to hire lobbyists to achieve legislative and regulatory goals. In New York midwives support local chapters and a statewide organization, NYSALM, in their efforts to further the practice of midwifery. In Delaware and Puerto Rico, where our numbers are too small to support a lobbyist, busy midwives developed the expertise and added this work to their busy clinical schedules.

Throughout the region midwives had a seat at the table when legislative and regulatory decisions were being made. Recently proposed regulations in New Jersey permit licensure for CMs. In

Puerto Rico the Secretary of Health signed an amendment to the code that permits licensed nurse-midwives, guided by the Standards of the ACNM, to practice all obstetric and gynecologic procedures permitted in health care facilities. Finally, Region II along with the other five regions of the College and staff at the national office continued the quest for a solution to the national professional liability crisis that affects both midwives and our consulting physicians.

Region III

The past year has been a busy one for Region III members who took action to increase their share of the market and influence legislation that supports the full role of nurse-midwives. A highlight of the year for Region III was hosting of the ACNM Annual Meeting, during which one hundred-plus midwives filled the room of the Region III Meeting to share their achievements and challenges.

Electronic communication became a necessity to manage chapter activities in 2002. Web sites maintained for South Carolina, www.scmidwives.com, North Carolina, www.ncmidwives.org, and Florida, www.flmidwife.org, allow individual chapters to create their own pages within the site. Region III members increased their use of "Speak out for Midwifery" on the ACNM Web site to send letters to state and national legislators. Midwives throughout the region were encouraged to sign up for the e-Midwife discussion groups accessible through the ACNM Web site.

On the legislative front, the Georgia chapter continued to work diligently to gain prescriptive authority despite resistance from the local medical association. Legislative priorities for the Region included authorization to prescribe controlled substances in Florida,



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strong..."**



Louisiana, and Mississippi, and the updating and removal of supervisory language in North Carolina, Tennessee, and South Carolina. Coalitions with other ARNPs have been strategically critical to achieve legislative success in most states of the region.

As part of a dedication to lifelong learning, many chapters sponsored seminars, workshops and continuing education activities including the Breast Feeding Promotion (Tampa Bay), Emerging Issues for Midwives (Louisiana, Mississippi, SE Florida), and Centering Pregnancy (North Carolina, Florida, Georgia). Contraceptive updates and many other seminars were supported by pharmaceutical partners. The region enjoyed chapter and site visits from the Regional Representative and the ACNM's Senior Political Analyst and Communication Manager who provided continuing education sessions. A "With woman, for a lifetime" silver commendation was awarded to Woman Care, Inc. of St. Petersburg for fourteen years of service, innovative midwifery care, commitment to student education and support of ACNM.

Region IV

Region IV is comprised of ten states, including Washington, D.C., 14 chapters, ten midwifery education programs, and over 1,400 ACNM members. Despite the large numbers, many areas of concern were shared throughout the area in 2002. Tort reform, professional liability coverage and the generation of momentum for coordinated state legislative activities took center stage. While these commonalities were not surprising, the level of accomplishment each state and chapter reached, despite challenges to midwifery practice locally and regionally, was amazing.

Specific examples of accomplishments include:
Michigan midwives reorganized their three state chapters to

form an executive committee that is charged with maintaining communication, coordinating strategies for legislative activity and targeting barriers to practice. In addition, Hutzel Hospital celebrated over 20 years of midwifery practice when they were awarded the Golden "With women, for a lifetime®" commendation in July 2002. Illinois celebrated 30 years of midwifery practice in the state with a dinner celebration that honored the University of Illinois Nurse Midwifery Practice with the "With women, for a lifetime®" and the University of Illinois Midwifery Education Program with the "Midwifing students, for a lifetime" commendations in September 2002.

Indiana hosted two statewide meetings which provided opportunities for celebration of midwifery within the state as well as discussions regarding legislative activity related to direct entry midwives. The HealthNet Community Practice received the "With women, for a lifetime" commendation in October 2002. Ohio midwives participated in tort reform legislative activities within the state, implemented a statewide benchmarking project, and elected a state representative who is responsible for providing a uniform, cohesive voice on midwifery issues. Virginia focused on tort reform activities, direct entry midwifery practice and increased resources to respond to legislative activities. West Virginia midwives held another successful retreat and continued to monitor tort reform activity to preserve current midwifery protections. Maryland coordinated legislative activity and activated these processes to support "Right to Breastfeed" legislation. Also in 2002, Kate Schwob was awarded the Regional Award for Excellence for her continued service to women and their families in the D.C./Maryland area.

Wisconsin worked to implement the new state practice act, which removed supervisory language from the law, governing midwifery practice. Kentucky hosted a visit from ACNM's Senior Policy Analyst to assist in grassroots organizing to address barriers to midwifery practice in the state. Washington D.C. elected a new chapter chair and addressed challenges to midwifery practice through regulatory bodies.

Region V

Region V, extending from the Canadian to Mexican borders, encompasses 15 states, 24 chapters with about 1,190 members, and nine ACNM DOA accredited midwifery education programs. Chapters in Minnesota, Colorado, Arizona, and Kansas used electronic communication or innovative meeting planning, to meet their distance challenges. Chapters in New Mexico, Minnesota and Arizona participated in national or international community service projects. Most chapters were active in state and national legislation dealing with such issues as prescriptive privilege, scope of practice, antitrust, and reimbursement.

The year also brought growth as the region welcomed a new chapter, V-19 Four Corners, whose entire membership is employed by the Indian Health Service in New Mexico and Arizona. Regrettably, the Pikes Peak, CO; Oklahoma; West Texas; and Mid-Missouri chapters became inactive. Five long-lived practices in Texas, Minnesota, Colorado, and Arizona were awarded "With women®" commendations.

The Regional Representative visited

chapters in Tucson, Phoenix, and Tuba City, AZ; Albuquerque, NM; Salt Lake City, UT and Austin, TX. Members attending those meetings earned 0.1 CEU for discussing Emerging Issues in Midwifery, with a focus on local, state, and regional issues.

Region VI

In a year that saw the reactivation of chapters and longevity and dedication rewarded, the midwives of the region set and accomplished an amazing agenda epitomized by recognition, growth, and connectivity. Under new regional representation, chapters had a strong presence at the annual meeting rewarding the excellence in their ranks, and providing a vocal mix to the forums. Members stayed connected through local e-mail discussion lists which were active with regular postings. Chapter chairs stayed informed through dedicated contact with the regional representative.

Region VI was, unfortunately, hit hard by the professional liability crisis this year as practices in Nevada, Oregon, Washington, and California were threatened. Nevada midwives faced intense pressure, a near walkout and withdrawal

of the state's largest insurance carrier. Despite the odds, they persevered and were included in gubernatorial support for tort reform

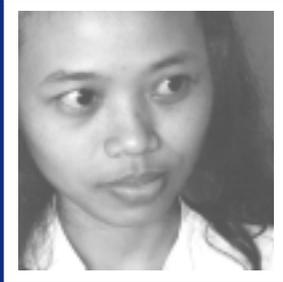
Midwives in Alaska worked hard toward the goal that every woman who gives birth at the Alaska Native Medical Center has a midwife at her bedside. Taking public relations in hand, Alaska midwives ran public service announcements on television and radio during Nurse-Midwifery Week. Washington launched their own Web site and discussion list to deliver timely updates. In California, midwives are organized under the California Nurse-Midwives Association (CNMA) and have become a solid voice in the Golden State. They conducted fundraising activities, student outreach, and formed a committee to explore ways to support and reach out to home birth midwives in the Bay area. Great things are happening in the nation's westernmost states and territories. Midwives are charged and ready for a prosperous and progressive 2003.

Focus on the 50th Anniversary

Working with the PR Committee, the 50th Anniversary Task Force has completed a plan to celebrate in 2005, and the years leading up to it. Partnering with the various divisions, committees, JMWH, and others, members can anticipate an outstanding celebration at the annual meeting, and all year in 2005.



Professional Highlights



"Because of the high visibility we have established, our 7,000 members have the impact of 70,000!"



Professional Services

The ACNM Professional Services department supports members through personal assistance, the development of education resources, and advocacy at the federal and state levels. With a goal of responding to all member inquiries, staff offers expert guidance on business and policy matters through regular communication in-person, chapter visits, education sessions, and a myriad of publications.

Through the Web site, ACNM provided a 24-hour resource to deliver information, facilitate problem solving, and connect members with clients, policymakers, and the media. "Speak Out for Midwifery" makes advocacy easier and helps members develop their skills as strong advocates at the federal and state level. The department also interacts on a regular basis with insurers, state regulatory agencies, other organizations, the media, physicians, hospitals, clinics, billing personnel, women and families.

The number of resources and the depth of services available to members increased in 2002. New Resources and Bibliographies (R&Bs) were created on topics ranging from billing and coding for midwifery services and professional liability, to recruiting future midwives. ACNM published new and revised handbooks on payment for services, quality management, and state action and advocacy and launched www.GotMom.org, a consumer-focused Web site that promotes breastfeeding.

ACNM's reach grew exponentially through the work of coalitions including a national three-year 40 million dollar breastfeeding promotion effort with the Department of Health and Human Services and the Ad Council; cosponsorships of National Alcohol Screening Day (NASD), and the initiation of plans for a women in depression project.

The ACNM Resource Packet for education program directors, which published lessons learned about developing education paths for foreign educated midwives helped launch a new option

at the Institute of Midwifery. ACNM's presence was felt at the local level as staff visited 10 chapters, attended 22 local functions, and gave presentations to more than 250 members around the nation. These "on the ground" activities were instrumental in gathering and disseminating information to generate support for several issues, including professional liability, Medicare, and prescriptive authority. Through this outreach and collaboration with members locally, important victories were achieved in Wisconsin, California, Colorado, Michigan, New Jersey, and Puerto Rico.

On Capitol Hill, ACNM worked with several large advocacy groups to address numerous crucial issues affecting midwives. The Nurse Reinvestment Act to allocate funds toward combating the nursing shortage, defeat of an antitrust bill, passing the tort reform bill in the House, and introduction of a Medicare Bill. ACNM also worked on legislation to expand SCHIP coverage.

Division of Education

The ACNM Division of Education (DOE), composed of five sections-Continuing Education; Continuing Competency Assessment; Education; and Consumer Education and Policy, supports and promotes educational endeavors for, and by, CNMs and CMs.

Major accomplishments during 2002:

The revision of the Core Competencies for Basic Midwifery Practice, guided by Susan Huser, Chair of the Education Section. The Second Joint Clinical Symposium on Women's Health, "Blending Traditions in the 21st Century," in Honolulu, HI was sponsored by ACNM and the National Association of Nurse Practitioners in Women's Health and cosponsored by The Family Planning Services Section of the Hawaii State Department of Health, and the Center for Health Training. Continuing Education Section Chair, Diane Angelini, coordinated all materials for continuing education approval.

The Continuing Education Reader Panel implemented a 15-day turnaround policy for reviewing continuing education offerings, thus cutting review time in half. This new policy ensures notice of approval well before the education program

date. The largest Continuing Competency Cycle (CCA) cycle to date (1998/02) concluded August 31, 2002 with a record enrollment of 1,636 participants.

The DOE would like to thank Maureen Kelley, CNM, PhD, FACNM, outgoing division chair, and all outgoing governing board members for their hard work. A special acknowledgment goes to Diane Angelini, CNM, EdD, FACNM, outgoing Chair of the Continuing Education Section for her tireless efforts on behalf of the Continuing Education Section. DOE also welcomes Peter Johnson, CNM, PhD, FACNM as the new Division Chair.

Nominating Committee

The Nominating Committee solicits consent to serve forms; composes the annual ballot in accordance with the bylaws, and maintains records of the year's activities.

The committee has seen a definite increase in member activity, as demonstrated by 100% attendance on conference calls, and the diverse and inclusive slate prepared for the 2003 election. The committee is considering a change of timeline, the possibility of a President-elect position and exploring electronic voting as a means to raise voter turnout for ACNM elections.

Program Committee

The Program Committee selects the education program content and assists at the business sessions for the Annual Meeting of the College. The 2002 meeting in Atlanta drew 1529 attendees including 341 exhibitors, students and guests. In a change from previous years, the committee introduced "premier sessions" in the program to highlight nationally-known speakers, revised the time frame for all educational sessions to 90 minutes except for premier speaker slots; and revised the committee's standing rules and procedures.

Public Relations

Groundwork laid in previous years began to gel in the public relations arena in 2002. The focus of the yearlong effort was knowledge-capturing, publicizing, and sharing, and reaping its benefits.

The PR Committee launched WebClips, a weekly e-newsletter outlining current women's health care topics and research in the media. Through a regular column in *Quickening*, the committee shared public relations and marketing tips.

Working with National Office staff, the committee promoted the PR Liaison program with the goal of placing one in each chapter. By the year's end, more than 40 had been recruited. PRimer was launched as a how-to guide for getting media coverage, marketing midwifery, and employing public relations at all levels.

Building on the ACNM Media Expert program launched in 2001, the committee added several new categories based upon media input, and expanded the pool of reviewers. The committee allied with the JMWH to give media experts the opportunity to be considered as a journal reviewer or author. A database was created to more efficiently track and manage this information.

During the Annual Meeting, the committee hosted a session on public relations for midwives, which was made available to local chapters throughout the year and will repeat in 2003. Two television stations sent camera crews to the annual meeting to record interviews and capture midwives on film.

Nurse-Midwifery Week's focus on breastfeeding afforded the best chance for the College to promote the chosen theme. The PR Committee was instrumental in securing experts to support the production of *www.GotMom.org*, ACNM's breastfeeding information Web site.

Media successes. ACNM members

were quite visible in the media offering the midwifery perspective to current debates. Reporters from *The Boston Globe*, *Parents* magazine, *New York Daily News*, the *Atlanta Journal-Constitution*, NPR, and *Working Mother* turned to ACNM when they needed women's health information.

Fit Pregnancy magazine recognized the value of midwifery care and the midwives who provide it when they selected the top ten hospitals in which to have a baby—utilizing the availability of midwives as one criterion for selection. They also identified 5 best loved midwives and top birth centers in the US.

Facts & Figures 2002

- ACNM fielded more than 300 media inquiries, and pitched more than 400 story ideas
- More than 13 million people were exposed to articles featuring ACNM
- Converted into advertising dollars, the space, airtime, and inches or all of the news articles promoting ACNM's mission equals \$104,972 - up 600% from 2001(\$17,722).
- ACNM appeared in the news in a major broadcast or article every 1.8 days

Midwives of Color

The Midwives of Color Committee implemented numerous measures to communicate with members and other ACNM groups in 2002. Responding to numerous requests for special groups seeking information on an array of all midwife ethnicities and nationalities—the committee worked to develop a membership profile to gather data and contact information. To help gather this information, the committee solicited members for information on nation of origin; language



“Midwives had a seat at the table when legislative and regulatory decisions were being made.”



proficiency, and interest in serving as a media spokesperson.

Still seeking members, the committee worked for greater participation from every ethnic group within the College to work on recruitment, scholarship fundraising and developing effective mentoring programs and professional development opportunities.

Membership

Membership continued to grow in spite of an uncertain economic climate. A member get a member campaign was launched in 2002 and will continue in 2003. Member involvement is critical to the growth of the organization. Preparations were made for major changes in online services in 2003.

ACNM Membership As of December 31, 2002

Active	5188
Active-Retired/Disabled	141
Active-First Year	266
Active-Life	190
Associate	466
<u>Student</u>	<u>788</u>
Total	7108
Friends of the College	60

Students

The Annual Meeting served as the primary setting for planning for the committee. Student representatives developed

and presented their annual report to the BOD and membership. Students formed subcommittees and addressed communication, clinical sites and preceptors, and opportunities for students to educate the public about midwifery. A formal description of the responsibilities of the student representative as outlined by the committee was revised and distributed.

E-mails and letters were sent to current student representatives and educational programs regarding the selection of the student representatives for the year 2002-2003, encouragement to attend the 2003 annual meeting, information on participating as a page, and a list of all opportunities available for students at annual meeting. Several submissions were published in the Student Corner section of *Quickening*.

Restructuring

The Ad Hoc Committee on Restructuring ACNM transitioned to a new chair this year. Active staff and volunteer participation created opportunities for identifying concerns related to member needs and effective functioning by our professional staff. Topics range from regional and chapter organization, the voting structure of the College, and the need to enhance outreach efforts. The committee thanks Kay Sedler, immediate past chair, for her commitment to making reorganization a priority for the ACNM.

PAC

MIDWIVES-PAC is a legal entity within ACNM, but it is fiscally distinct from ACNM. It exists to raise funds to support candidates for elective office. Such support provides an opportunity to present our issues in person.

The learning curve for MIDWIVES-PAC Board members has been long and fairly steep; but, has allowed them to look more closely at administrative costs and identify an economical way to outsource the day to day management of financial transactions. In 2002, MIDWIVES-PAC set up an administrative fund to help defray some of the administrative expenses and make more PAC

dollars available for direct contributions. Bylaws were amended regarding membership on the PAC Board of Directors with the intent to bring in two new members per year. In 2002, MID-WIVES-PAC raised \$80,742, and contributed \$33,550 to political campaigns.

Division of Research

The Division of Research (DOR) contributes to knowledge about the health of women, infants and families and advances the profession of midwifery by promoting the development, conduct and dissemination of research. In 2002, the DOR restructured into six sections with work plans to guide their activities. The DOR produced content for the ACNM Web site on the Division mission, structure, and projects with links to membership interest forms and calls for research forums and poster sessions abstracts.

The Development of Research Section focused on DOR annual meeting activities, growing the culture of research in ACNM, and the Research Heritage Project for the ACNM 50th Anniversary Celebration. It will showcase historic highlights of midwifery research, discuss current trends and challenges in midwifery research, and describe the midwifery research agenda.

Additionally, members developed a list of current doctoral students and doctorally prepared midwives in ACNM. The International Section helped build linkages with the Research Standing Committee of International Confederation of Midwives,

the ACNM International Health Committee and international research bodies.

At the ACNM Annual Meeting, the DOR hosted two research forums featuring eight papers, and a poster session with 13 posters. Awards and cash prizes were given for Best Forum Presentation, Best Poster, and Best Student Research Project. The DOR also sponsored a Scholar's Colloquium featuring noted women's health researcher Dr. Nancy Fugate Woods, who discussed her program of research about women in mid-life.

The Data & Information Management Section promoted use of the Minimum Data Sets (MDS) and the formation of Practice Based Research Networks. The Women's Health Care MDS was pilot tested and midwives were encouraged to use BirthWrite, a midwife-friendly software that incorporates the MDS variables. The Survey Advisory Section advised ACNM on survey issues, reviews and approved requests to conduct surveys at the Annual Meeting. Members developed a Midwifery Research Agenda and conducted a survey of midwifery education programs on their evidence-based practice content

The Membership & Networking Section connected members to projects and Sections and networked with other organizations and disciplines. The Promotion/Dissemination of Research Section published a column in *Quickening*, and worked with ACNM national office to highlight significant midwifery research to ACNM members and the public.

Improving Services to Women and Families

Professional Growth

Every year, visits to CNMs/CMs increase-reaching more than 5 million in 2002. Since 1965, the number of CNMs in the US has grown more than 1,400 %.

Global Outreach

The Department of Global Outreach shares the core mission of ACNM, and extends our reach internationally by providing technical assistance to projects including THRIVE, PRIME II, and the CARE FEMME Project. Home Based Life-Saving Skills (HBLSS) emerged as a major project as field tests in India and Ethiopia, through the PRIME II project and Save the Children, respectively, were completed and evaluations prepared. HBLSS

complements the existing Life Saving Skills (LSS) program by linking the home and community (where most births occur) with the referral facilities.

ACNM staff and consultants provided technical or programmatic assistance in 18 countries during 2002 including: Tajikistan through CARE and Save the Children; Ethiopia through Save the Children and CARE; Vietnam through NGO Networks for Health; Indonesia and Bangladesh through JHPIEGO; Nicaragua, India, and Mali through the PRIME II project and Intrah, University of North Carolina; Bangladesh through PRIME II, AMDD, MNH and JSI; Guinea and Ghana through



Setting Standards



“Helping members develop skills as strong advocates at the federal and state levels.”



Division of Accreditation

The purpose of the DOA is to plan, implement, evaluate and monitor the accreditation process of nurse midwifery and midwifery education programs.

The US Department of Education granted the DOA an expansion of scope to include the preaccreditation and accreditation of direct entry basic midwifery programs for the non nurse and renewed the DOA's recognition as a national accrediting agency for all categories of nurse midwifery education programs for five years.

After a thorough investigation, the Governing Board decided against the DOA becoming an institutional, as well as programmatic, accrediting agency. The DOA conducted nine comprehensive education program reviews, reviewed annual monitoring reports from 44 education programs and conducted the necessary follow up. The DOA organized an international conference in collaboration with the International Confederation of Midwives (ICM) to determine present and future trends in accreditation. A data management project covering education program data was implemented.

The Board of Review (BOR) completed the revision of the BOR Operational Guidelines.

The Chair, DOA, participated in two Alliance for Nursing Accreditation meetings. The DOA is one of fourteen organizations which endorsed the Alliance Statement on Distance Education.

Heartfelt appreciation is extended by the DOA Governing Board to all of the Divisions volunteers; with special acknowledgments to Teresa Marsico who continues on the Governing Board but has stepped down as the Site Visit Panel Coordinator.

Archives

The Archives Committee serves to establish, maintain and preserve the material of historical significance to the ACNM for reference by members, midwifery students, and individual researchers approved by the Board.

2002 saw the completion of the transfer of over 80 boxes of materials from off-site storage to the National Library of Medicine (NLM). The committee is working to purge those boxes of non-archival documents and preparing them for processing.

The ACNM collection now has its second online finding aid which can be accessed via the NLM Web site www.nlm.nih.gov (go to library services/ history of medicine division). The collection now has 21 boxes from (1945-94) MS C 330 and a second finding aid MS C 330a that contains 40 boxes from (1946-76). We continue to work with the 50th Anniversary Task Force on the 2005 celebration. The committee will be a full participant in the anniversary providing interesting historical trips through time, and serving as a historical resource. In order to fund the costly job of archival processing, the committee continues to look for long term sources of funding.

Bylaws

The Bylaws Committee maintains congruency with the bylaws of ACNM by reviewing proposed national bylaw amendments and chapter bylaws. Revisions of chapter bylaws and other documents are reviewed as requested by the ACNM Board of Directors.

The committee worked to establish several new chapters and reactivated others, with particular assistance with incorporation. The committee also assisted numerous chapters by guiding them through bylaws revisions with particular focus on consistency with the national bylaws. There was discussion about removing chapter status under certain conditions and ACNM's role and authority relating to special interest groups under the national bylaws. Both are under current consideration by the committee.

Working with the Ad Hoc Committee on Restructuring on bylaw issues has been an important component of work as well as assisting with historical information and documents in preparation for the ACNM 50th anniversary.

Division of Standards and Practice

The Division of Standards and Practice (DOSP) promotes development, communication and review of midwifery clinical practice to influence health policy affecting midwifery practice, promotes quality in practice and communicates information about relevant professional liability issues.

The Business Section developed a consultant list for CNMs/CMs who are starting independent practices and negotiating contracts. They are participating on the ad hoc committee on restructuring to provide a business development perspective. The Clinical Practice Section developed four new Clinical Bulletins: Water Immersion for Labor and Birth, Vaginal Delivery after Cesarean, Abnormal and Dysfunctional Uterine Bleeding and Hormone Replacement. The section also created a new pathway for developing, revising and/or the retirement of clinical practice documents to help clarify the new document proposal process, Clinical Bulletin format, and review and revision responsibilities.

The Home Birth Section developed a database of home birth practices and worked on a Home Birth Clinical Bulletin, and the revision of the Home Birth Handbook. Political and Economic Affairs Committee (PEAC), is responsible for board political action and grass roots efforts. Since this charge extends outside of the DOSP, the section held meetings with the policy sections of the DOE, DOR, and DOW to coordinate efforts of all the divisions. They have been working hard stimulating grass roots efforts to support

passage of the Medicare bill.

Working with National Office, the Professional Liability Section revised certain sections of the Risk Management Handbook, which are now available for sale at ACNM's online bookstore www.ShopACNM.com. The Quality Management Section continued their benchmarking project and requested grant funding to expand.

The Ad Hoc Committee on CM Licensure joined the DOSP this year and worked to promote an understanding of the practice of midwifery by Certified Midwives within and outside of the profession. This was an exciting year for Certified Midwives as Delaware has licensed its first ACC non-nurse Midwife and New Jersey advanced legislation permitting certified midwives to practice with limited prescriptive privileges.

Division of Women's Health Policy and Leadership

The Division of Women's Health Policy and Leadership worked on member recruitment and the development of working objectives. The governing board attended the THRIVE leadership training with THRIVE grantees in March and were linked as advisors to one of the mini-grant teams.

The Policy Development Section developed a women's health policy agenda for the College. A short questionnaire was sent to College leaders to solicit input for the policy agenda. Section members examined other professional organizations' focus on Healthy People 2010 goals. The section chair convened a meeting of the ACNM Division Chairs, Policy Section Chairs, and National Office staff to discuss how these groups could communicate about policy issues. As a result a policy discussion list was established to address

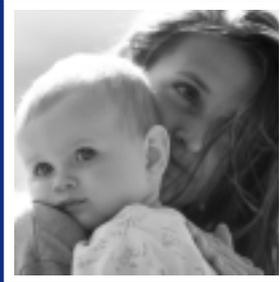
rapid turnaround issues and a biannual policy meeting to discuss proactive policy concerns will be convened at the opening of each new Congress.

The Leadership Section responding to its overall charge "to enhance the capacity of CNMs/CMs to exercise leadership," deemed that increased educational opportunities should be expediently promoted. Working toward that, the section sponsored two sessions on leadership at the annual meeting; proposals were submitted for the 2003 meeting; and a regular discussion list featured called Leadership Moments a new column in *Quickening* to address career development in leadership roles and leadership theory in practice is planned. The establishment of databases that inform the Leadership Section about the work of midwives in leadership positions is proposed.

The Emerging Issues and Developing Trends Section was charged with identifying emerging trends in women's health for the purpose of timely intervention and on-going action plans. The section identified environmental health as an emerging issue for 2002, and worked to bring together a group of expert consultants. Violence against women is the subject of continuing work to develop a female genital cutting policy statement.

The Networking Section worked with the national office to track official liaisons and to develop a list of potential representatives for meetings and organizations. Training materials for new liaisons were developed and a liaisons' meeting is planned for the 2003 Annual Meeting. The Public Information Section worked on Web page development for the Division and devoted energy to seek sources of funding for public information materials.

A.C.N.M. Foundation



**“ACNM members
were visible in the
media offering the
midwifery
perspective to
current debates.”**



Mission

The A.C.N.M. Foundation, founded in 1967, is a 501(c)(3) nonprofit organization that supports the provision of high quality maternal and well-woman healthcare services through the practice of midwifery. Funded by annual contributions from members, clients, corporations and private foundations, the A.C.N.M. Foundation awards grants and supports projects that advance midwifery practice, research and education.

Assuring a lifetime of quality midwifery care for women

Certified nurse-midwives (CNMs) and certified midwives (CMs) are leaders in achieving low rates of infant mortality and low birth weight. The success is attributed to superior prenatal care, evidence-based labor and delivery practices, and focusing on each woman's needs. Midwives support less medically invasive approaches to labor and delivery which leads to significant cost savings and increased patient satisfaction.

Scope of Activities

The A.C.N.M. Foundation is especially dedicated to assisting midwives in developing the myriad of skills necessary to provide high quality healthcare for women and their families in today's challenging health care environment. The Foundation does this through the support of three core areas:

Midwifery Practice

The Foundation supports projects that help midwives to become effective leaders, provides tools and materials for midwives to use in educating women about health issues and disseminates information that assists midwives in managing their practices.

Midwifery Research

The Foundation funds research projects and graduate fellowships. Recently funded projects include a study of the elements that make midwifery care unique; the creation of a data

set for nurse-midwifery/midwifery care; and a pilot study on the safety of vaginal birth after cesarean section.

Midwifery Education

The Foundation awards scholarships to student nurse-midwives and midwives, supports opportunities for students to gain valuable leadership skills, and recognizes excellence in teaching and mentoring.

Leadership in Women's Health

The Foundation supports projects which prepare midwives to advocate for quality women's health in individual practices, national policy and international health care development. A grant from the Charles Englehard Foundation will provide funding for three years of leadership development. Six midwives will attend the "Leadership in the Twenty-First Century" at the Kennedy School of Government. It is expected that the graduates of this program will lead activities in health policy within ACNM and the nation as advocates for women and families. The Charles Englehard Foundation Grant, in combination with a grant from the Service Director's Network enabled eight practicing midwives to attend the Midwifery Business Institute in 2002. The Business Institute teaches skills necessary to develop, restructure and enhance midwifery practice. The Charles Englehard Foundation provides funds for at least eight additional awards to the Institute in the remaining two years of the grant.

Dorothea M. Lang Pioneer Award

The Dorothea M. Lang Pioneer Award was given for the first time in 2002. The premier award given by the ACNM Foundation, the award is named for a midwife who has modeled excellence in midwifery and moved the profession forward in clinical practice, legislation and education for the benefit of women and their families. The award recognizes the pioneers in midwifery and recognizes their innovative, often heroic, contributions to the profession.

A.C.N.M. Foundation Leadership

A.C.N.M. Foundation Board of Trustees
2002

Nancy Jo Reedy, CNM, MPH
President
Fort Worth, Texas

*Suzanne M. Smith, CNM, MS, MPH,
FACNM*
Vice President
Brooklyn, NY

Ellen Martin, CNM, MS, FACNM
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White Plains, New York

Frances Thacher, CNM
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Barbara Fitchitt, CNM
Columbia, Maryland

Teresa Marsico, CNM, MEd, FACNM
Manasquan, New Jersey

Elaine Moore, CNM
Nashville, Tennessee

Lisa Veach, CNM
Grand Haven, MI

2002 Awards

**Ortho-McNeil Pharmaceutical/
A.C.N.M.**

**Foundation Fellowship for Graduate
Education**

Karen Baldwin, CNM

Columbia University Teachers College,
New York, NY

"The Effect of the Centering Prenatal Care
Model on the Knowledge, Self
Esteem, Health Locus of Control, and
Preception of Participation and
Satisfaction of Pregnant Women"

Leadership Development Award

Diana R. Caplan, CNM
Director of Research, Holy Family
Services
Weslaco, TX

Maureen Chrzanowski, MSN, CNM, FNP
Certified Nurse Midwife and Family Nurse
Practitioner Advantage Health
Grand Rapids, MI

Margaret Holcomb, MS, CNM
Certified Nurse Midwife
Troy, NY

Nancy Mathias, RN, CNM, MSN
President, Service Director and Partner in
Certified Nurse-Midwifery Practice
Charlotte, NC

Rosemary Meganck, MS, APN, CNM
Director of Nurse Midwifery Service,
Saint Anthony Hospital
Chicago, IL

Pam Richard-Tarke, MS, CNM
Certified Nurse Midwife/Service Director
Kaiser Permanente
Atlanta, GA

Jan Salstrom, CNM, MSN
Certified Nurse Midwife, Clinical
Instructor
East Carolina University
Greenville, NC

Catherine Tanksley, CNM, MSN
Private Practice
Brooklyn, NY

Varney Participant Awards

Catherine Gordon, SNM
University of Kansas
Anna Maria Speciale, CNM
Yale University

Basic Scholarship Awards

The **TUMS Calcium ForLife Consumer
Health Care Scholarship supported by
GlaxoSmithKline**
Lauren Schmidt, SNM
Vanderbilt University School of Nursing

Edith B. Wonnell, CNM Scholarship

Catherine Gordon, SNM
Kansas University Medical Center

**A.C.N.M. Foundation Memorial
Scholarship**
Bridget Bahneman, SNM

University of Minnesota

The ACNM Memorial Scholarship is
made in honor of the following
midwives who were remembered with
recent gifts to the Foundation:

Trudy Friedman, CNM
Charisse Banfield, CNM
Sue Camp, CNM
Agnes Chan, CNM
Sister Betty Dougherty, CNM
Judy Flanagan, CNM
Pat Jones, CNM
Linda Sloan Locke, CNM
Asoka Roy, CNM
Mary Ann McKee, CNM
Maura Pilet, CNM
Louisa Chapmon Whitlock, CNM
Sally Yeomans, CNM
Mary Keller, CNM

Other 2002 Activities and Accomplish- ments

Midwifery students from 24 educational
programs honored instructors and
preceptors with the **Excellence in
Teaching Award**.

Thirty Student Nurse-Midwives received
**Wyeth Pharmaceutical Student
Reporter Awards**.

The **Charles Engelhard Foundation**
donated \$52,000.

Corporate Supporters

MedaSonics
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*Os-Cal, GlaxoSmithKline Consumer
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Ralph Smith & Son
The CNM Group
Wyeth Pharmaceuticals
*TUMS Calcium ForLife, GlaxoSmithKline
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Wyeth Pharmaceuticals

Major Donors

The Campbell Family Foundation Inc.
The Charles Engelhard Foundation
Dorothy T. Gilbert
*John & Frank Sparacio Charitable
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Joseph Keller
Ortho-McNeil Pharmaceutical
Watson Pharmaceutical, Inc.

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Anonymous and Anonymous II, CNM
Anita Barbey, CNM
Deborah Bash, CNM
Elizabeth Berryhill, CNM
Barbara Brennan, CNM
Helen Varney Burst, CNM
Terry Capton-Snell, CNM
E. Jean Downie, CNM
Thelma Finch, CNM
Nivia Fisch, CNM
Barbara Fitchitt, CNM

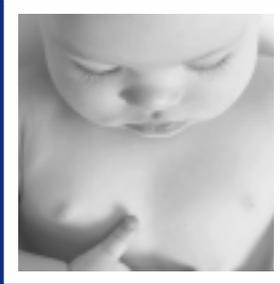
*Rebecca
FitzGerald,
CNM*

Martha Groggle, CNM
Janice Hammond, CNM
Susan Hetherington, CNM
Timothy R. J. Johnson, MD
Erica Kathryn, CNM
Judith Katz, CNM
Marcy Kiefer, CNM
Elizabeth Korb, CNM
Janice Kvale, CNM
Elizabeth MacMillan, CNM
Teresa Marsico, CNM
Ann Mason, CNM
Jeanne McDermott, CNM
Lonnie Morris, CNM
Barbara Norton, CNM
Leslie Olivas, CNM
Gabriela Olivera, CNM
Lisa Paine, CNM
Whitney Pinger, CNM
Jacqueline Reid, CNM
Joyce Roberts, CNM
Jeanine Sacco, CNM
Mary Ann Shah, CNM
Suzanne Smith, CNM
Pamela Spry, CNM
Susan Stapleton, CNM
Margaret Taylor, CNM
Joyce Thompson, CNM
CNEP

2002 Mary Breckinridge Donors

Royda Ballard, CNM
Deborah Bash, CNM
Donna Belcher, CNM
Helen Varney Burst, CNM
Kim Campbell, CNM
Terry Capton-Snell, CNM
Eunice Ernst, CNM
Barbara Fitchitt, CNM
Barbara Graves, CNM
Holly Kennedy, CNM
Kathleen M. King, CNM
Teresa Marsico, CNM
Kathleen Martin, CNM
Linda May, CNM
Jeanne Raisler, CNM
Nancy Jo Reedy, CNM
Jo-Anna Rorie, CNM
June Sangala, CNM
Mary Ann Shah, CNM
Helen Smith, CNM
Suzanne Smith, CNM
Gwen Spears, CNM
Pam Spry, CNM
Susan Stapleton, CNM
Frances Thacher, CNM
Deanne Williams, CNM

Statement of Financial Position



“Enhancing the capacity of CNMs/CMs to exercise leadership.”



December 31 2002

ASSETS

CURRENT ASSETS

Cash and cash equivalents	\$655,235
Investments	\$2,566,316
Accounts receivable	\$364,810
Prepaid expenses	\$230,899
<i>Total Current Assets</i>	<i>\$3,817,260</i>

PROPERTY AND EQUIPMENT

Equipment	\$337,574
Furniture	\$53,802
<u>Less, accumulated depreciation</u>	<u>(\$280,386)</u>
<i>Property and Equipment, Net</i>	<i>\$110,990</i>

OTHER ASSETS \$99,051

TOTAL ASSETS \$4,027,301

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES

Capital lease	\$15,348
Accounts payable and accrued expenses	\$407,986
Accrued salaries and benefits	\$128,498
Deferred membership dues	\$1,116,951
<u>Other deferred revenue</u>	<u>\$261,930</u>
<i>Total Current Liabilities</i>	<i>\$1,930,713</i>

LONG-TERM LIABILITIES

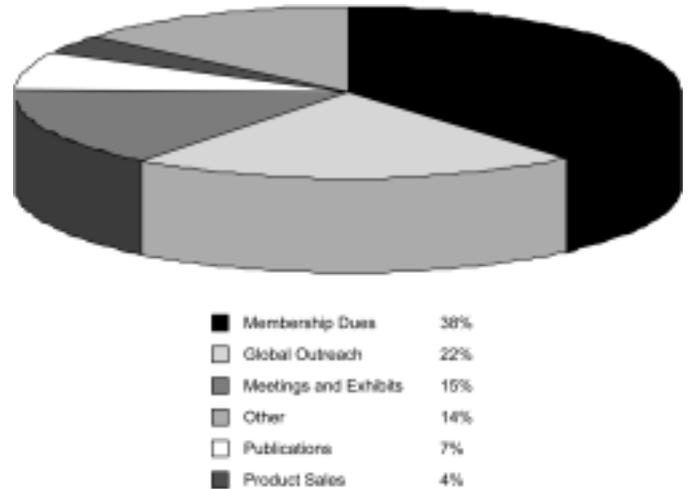
Capital lease \$13,846

TOTAL LIABILITIES \$1,944,559

NET ASSETS, UNRESTRICTED \$2,082,742

LIABILITIES AND NET ASSETS \$4,027,301

Sources of Revenue



Treasurer's Report

The Financial Advisory Board (FAB) is composed of the Executive Director, ACNM Department Directors, Past Treasurer Ellen Martin, Board of Directors (BOD) representative Amy Levi, and appointed ACNM member Barbara Douglass. The FAB meets with the Treasurer at least twice yearly to confer and advise the BOD on all budget preparation and financial matters.

The College received a favorable financial audit. However, ACNM incurred a deficit and funds from our reserves were used to balance the losses without decreasing services to members. The losses occurred

despite an overall reduction in expenses, and were related to decreased revenue from annual meeting attendance, fewer contracts in our grant funded work and unrealized losses on investments. In November, legal proceedings resulted in the restructuring of our lease, which eased financial obligations for the years 2002, 2003 and 2004. The College is not immune from the economic pressures affecting the country as a whole as members, supporters, charitable donors and advertisers looked closely at every dollar spent. Recognizing that our members are under economic duress, the BOD authorized investment in a system that allows online payment of dues in installments, and

Statement of Activities

For the year ended December 31 2002

Uses of Revenue



Member Services	39%
Professional Services	37%
Global Outreach	22%
Divisions & Committees	2%

OPERATING REVENUE

Membership Dues	\$1,653,147
Global Outreach	\$675,997
Meetings and exhibits	\$638,320
Domestic Programs	\$266,277
Publications	\$307,491
Product sales	\$153,605
Contributions and sponsorship	\$172,161
Mailing list rental	\$83,383
Division of Accreditation	\$78,120
Continuing Competency Assessment	\$69,508
Subscriptions	\$74,062
Advertising	\$89,522
Continuing Education Division	\$6,600
Interest	\$4,439
Other	<u>\$7,431</u>
Total Operating Revenue	\$4,280,063

OPERATING EXPENSES

Member services	\$1,790,471
Professional services	\$1,706,904
Global Outreach	\$1,043,564
<u>Divisions and committees</u>	<u>\$113,310</u>
Total Operating Expenses	\$4,654,249

CHANGE IN NET ASSETS FROM OPERATIONS (\$374,186)

OTHER CHANGES IN NET ASSETS

Gain on re-negotiation of lease	\$534,825
Loss on investments	<u>\$554,237</u>
	<i>(\$19,412)</i>

TOTAL CHANGE IN NET ASSETS (\$393,598)
NET ASSETS, BEGINNING OF YEAR \$2,476,340
NET ASSETS, END OF YEAR \$2,082,742

other improvements to keep our systems operating efficiently. The decreased amount of rent due will further reduce the tension inherent in maintaining a balanced budget, despite the difficult economic conditions.

The FAB reviewed our investment management strategy and allocations on three occasions. On recommendation from the FAB, the BOD adopted new financial investment guidelines, a new investment advisor and a new investment strategy through a managed mutual solutions account with diversification appropriately matched to the investment goals of the College. This transfer was accomplished in the

spring of 2003. The ACNM PAC, which was supported through a start up loan to from the College, has continued planned repayment.

Division and Committee members utilized their budgeted funds wisely, and National Office staff stretched their budgets to accomplish more than they had envisioned. Our members who serve on committees and task groups contributed many hours without compensation, which further stretched our allotted funds. As a result the College continues to be able to accomplish much despite the austerity which prudence mandates.

ACNM Liaisons

These nurse-midwives have served as official representatives of the American College of Nurse-Midwives during 2002-2003. We gratefully acknowledge their contributions on behalf of our profession.

- Lynette Ament, CNM, PhD - Health Resources and Services Administration, Bureau of Health Professions Policy Fellowship in Primary Health Care
- Mary Barger, CNM, MPH, FACNM - Healthy People 2010
- Mary Brucker CNM, DNSc, FACNM - Editorial Board of Medscape, Women's Health
- Patricia Burkhardt, CNM, DrPH - National Coalition to Support Sexuality Education
- Sarah Coulter Danner CNM - US Breastfeeding Committee
- Elaine Germano, CNM, DrPH - CDC/ACOG, Maternal Mortality Study Group
- Emalie Gibbons-Baker, CNM - Smoke Free Families Partnership
- Barbara Hughes, CNM, MS, MBA, FACNM, Teresa Marchese, CNM, PhD, FACNM, Joan Slager, CNM, MSN, and Kathleen Martin, CNM, JD, FACNM (alternate) - ACOG/ACNM Liaison Task Force
- Barbara Hughes, CNM, MS, MBA, FACNM - National Perinatal Association; Newborn Channel Advisory Board
- Peter Johnson, CNM, PhD, FACNM, Betty Carrington, EdD, CNM, FACNM Alliance for Nursing

Accreditation

- Teresa Marchese, CNM, PhD, FACNM - National Commission on Quality Assurance Health Care Practitioner Advisory Board; AMA, JCAHO, NCQR, Perinatal Expert Panel
- Jane Mashburn, CNM, MS - National Birth Defects Prevention, International Clearinghouse for Birth Defects Monitoring Systems Collaborative Meeting
- Marion McCartney, CNM, FACNM - Coalition for Improving Maternity Services (CIMS); Baby Friendly USA
- Patricia Aikins Murphy, CNM, DrPH, FACNM - Society for Women's Health Research
- Anthonia Obichere, CNM - AWHONN/Pfizer, Women and Heart Disease
- Lisa Paine, CNM, DrPH, FACNM - National HPV and Cervical Cancer Campaign
- Patricia Paluzzi, CNM, MPH, DrPH - AMERSA/HRSA Faculty Development Program, Faculty Advisory Committee; Strategic Planning Advisory Committee.
- Mary Ellen Rousseau, CNM - NIH Scientific Workshop, Menopausal Hormone Therapy
- Mary Ann Shah, CNM, MS, FACNM and Joyce Roberts, CNM, PhD, FACNM - delegates to the International Confederation of Midwives
- Lisa Summers, CNM, DrPH - Centers for Disease Control and Prevention DES Education Campaign
- Donna Vivio, CNM, MPH, MS - National Strategies for Health Care Providers Initiative; National Review Board for the Pesticide Information Gateway Project; National Environmental Education & Training Foundation
- Deborah Walker, CNM, DNSc, FACNM - March of Dimes National Prematurity Campaign

The following individuals were nominated by ACNM to serve in their current capacity:

- Dorothea Lang, CNM, MPH, FACNM and Teresa Marsico, CNM, MEd, FACNM - Representatives for ACNM and the International Confederation of Midwives to the United Nations
- Joyce Thompson, CNM, DrPH, FACNM - Director of the International Confederation of Midwives Board of Management

Every Baby Magazine



Every Baby magazine, in its second year, continued to exceed all expectations. The magazine is designed as every woman's complete guide to the joys of pregnancy. Believing in the power of words to influence how one experiences pregnancy and birth, each word was chosen carefully. In 2002, ACNM was repeatedly contacted by interested parties wanting more copies as those on magazine stands sold out, store after store. B was again recognized with an award for its depth and presentation, bringing the honor tally to three in only two years.

CNM Births Reach 10%

In 2001, midwives reached a major milestone surpassing all previous years attending ten full percent of the vaginal births in the US. Previous years produced the frustratingly close 9.5% in 2000, and 9.4% in 1999.

