#### Liaisons Attending ACNM

- Chris Sutherland willing to speak OHIO STATE
- Dawn Wright likely a cheerleader
- Kalissa Morgan- willing to speak UNIV OF NEW MEXICO
- Bayyinah willing to speak UNIV OF PENN
- Amber Johnson (cheerleader) -
- Lisa Marie Morgan Bethel University
- Samantha Roberts willing to speak baystate

#### Introduction-Amber (1 minute)

Hello ACNM Board and welcome to all attendees. My name is Amber Johnson and I represent Marquette University in Milwaukee, WI! It is an honor to stand before you and present the current experiences of student midwives from across the country. This year's ACNM student liaisons represent 22 nurse-midwifery education programs. We also represent a variety of backgrounds spanning differences in race, age, career history, and stages in life. We genuinely believe that the concerns and solutions we present today reflect the diversity within the student nurse-midwifery body. After listening to our student peers through surveys and discussion groups, we have found 8 themes that are most important to students, with two

being specific to how students interact with ACNM. Those themes include: preceptors, clinical sites, curriculum, school/work/life/balance, DNP, new grad finances & entry to practice, and ACNM Student Membership & Annual Conference.

### Preceptors - Kalissa (1 minute)

Hello, my name is Kalissa Morgan, and I am from the University of New Mexico. I will discuss preceptors.

Finding adequate, high quality clinical learning opportunities remains a primary concern of many student midwives. This is a vital component of midwifery education and essential to creating competent and confident new-entry practitioners.

Some students report positive clinical experiences and preceptor relationships. However, others report some preceptors judge them more than they teach, bully and belittle them, or treat them as unpaid staff. Many students report racism, microaggressions, and a lack of respect from preceptors. Students report some preceptors teach a medical model of care more than midwifery. Students would like

preceptors to teach midwifery in an inclusive manner that incorporates respect for all people, consent-based care, and trauma-informed care.

#### We recommend ACNM:

- Establish a preceptor match system via a listserv or ACNM Connect Community.
- Provide training for midwifery preceptors, including how to communicate, teach, provide constructive feedback, and identify professional biases.
- Give incentives to midwives to precept. For example, discounted ACNM membership fees.

## Clinical Sites - Lisa Marie (2 minutes)

Hello, my name is Lisa Marie Morgan and I represent Bethel University. I will discuss clinical sites.

Securing clinical sites continues to challenge midwifery students. Covid-19 restrictions, continued preference for medical residents and insurance barriers are the biggest hurdles. Particularly for students in programs whose schools do not assist students in finding clinical placements or paying

preceptors. The challenge is heightened for students who must travel long distances or relocate - especially for students with family and work obligations.

Placements in community birth sites fall short of student demand. And yet, students placed in community birth, low-volume and rural sites struggle to get a sufficient volume of experiences. This often means more time, money, and energy spent trying to achieve equivalent experiences as students placed in hospitals. In short, one of the most important components of midwifery education, places one of the greatest burdens on students.

## We recommend the following:

- Write a partnership statement with ACOG/ACGME/CREOG encouraging directors of all institutional facilities that employ midwives to allow midwifery students to complete clinical opportunities and eliminate Covid barriers to educational experiences.
- Advocate for equal learning opportunities for midwifery students, residents, and medical students, and prioritize low-risk patients for midwifery students.

- Direct the ACNM Policy Committee common insurance standards for educational institutions and clinical facilities to remove bureaucratic barriers to clinical sites.
- Create an ACNM midwifery partnership designation and recognition to be awarded to institutions that accept midwifery students.
- Create centralized resources and policies for community birth clinical sites and out-of-state restrictions

## Curriculum- Bayyinah

My name is Bayyinah Muhammad. I attend the University of Pennsylvania. I will address the curriculum.

As students preparing to step into our new professional roles, we desire our curriculum to adjust to changes in the world at large, evidence-based practice, and the midwifery community. The midwifery curriculum is vital to ensuring that midwifery students are properly equipped upon graduation with the skills needed to meet the needs of the families they will be entrusted to care for. We encourage Directors of Midwifery Education across the country to assess their programs and determine whether or not these points are being addressed.

Students and faculty are increasingly discussing how racism in medicine and midwifery directly contributes to disparities in maternal care, particularly for Black birthing people. More focus on this is warranted and desired by students. Students have expressed having to conduct individual research outside of the classroom because no antiracist framework is in place in their curriculum. Learning consistently and directly about racism and its impact on maternal health and outcomes while creating space for discussing potential solutions as future colleagues are needed.

We found that SOME schools do a great job of being holistic and inclusive on SOME topics. However, across ALL schools present in the drafting of this report, the sentiment prevailed that curricula consistency throughout theory and clinical practice in addressing race, equity, and LGBTQI+ issues is lacking

## We recommend the following to:

**ACME** 

 ACME develop additional criteria to hold educational programs accountable re: antiracist curricular content in addition to student, faculty, and staff diversity

- Increase focus on community-based midwifery care with out-of-hospital birth clinical experiences. Midwifery students are predominantly taught hospital-based midwifery care.
- Hold schools accountable for including race, equity, and LGBTQI+ content in curriculum

#### We recommend the following to:

#### **AMCB**

 Remove pelvimetry from AMCB board examination due to lack of supporting evidence and racist origins.

#### We recommend the following to:

#### **DOME**

- Increase curriculum focus on health policy and advocacy work pertaining to midwifery and maternal health outcomes at the national and local level.
- Increase LGBTQI+ content in curriculums that lack streamlined content. Schools with elective courses that address LGBTQI+, while a great option, still require individual student onus and interest.
- Mandate protection of clinical time. Expectations to miss didactic to attend clinical experiences is inappropriate.
- Move beyond high-stakes exams and instead utilize a variety of assessment strategies to allow students to demonstrate competency.

 Increase access to part-time midwifery education programs to decrease barriers for prospective midwives who need to maintain an income or care for family in addition to school.

## School/Work/Life Balance - Kalissa

I will discuss school-work-life balance.

Midwifery students nationally experience challenges balancing school requirements with the necessity of earning an income and maintaining obligations to family life and personal well-being.

Many midwifery students are parents. It is advantageous to our profession to include students from diverse career and personal backgrounds. However, many midwifery students who are parents feel the structure of midwifery school does not support family life and there is an implicit expectation that midwifery students are childless and can support themselves with personal savings or a partner's income. Single parents especially feel strained.

Midwifery school is expensive. Several students, including BIPOC students, report the need to earn an income during

school. This is challenging to obtain during midwifery school's rigorous academic work, unpredictable clinical hours, and last-minute clinical placements.

#### We recommend ACNM:

- Continue to promote and provide scholarship opportunities to students.
- Increase communication between ACNM, midwifery schools, and students regarding scholarship opportunities.
- Increase scholarship opportunities for first-year students, as this may improve retention of first-year students and attract those hesitant to pursue a midwifery education due to financial constraints.
- Provide and promote scholarships with alternative ways of assessing students' aptitude besides letters from professional references.

## **DNP- Dawn 1:25**

My name is Dawn Wright, I am a student at University of Colorado and I will be speaking on the subject of doctorate education. Midwives who choose to pursue a terminal degree and those who choose to end their education at the master's level are equally vital to the future of our profession. Students

acknowledge the current maternity care shortage, express concerns regarding the financial burden of pursuing a doctorate degree, and recognize that it is not the desired path for all midwives. Therefore, we do not support requiring DNP for entry to practice.

The current ACNM statement entitled "Universal DNP standards for APRNS" is a powerful and necessary message to ensure that multiple paths to earning a midwifery degree remain available. However, the statement does not highlight the added value of Doctorate-educated midwives, marginalizes DNP-educated midwives, and degrades the foundation for new midwives graduating from DNP-only programs to fight for higher salaries.

#### We recommend that ACNM:

- Continue to ensure DOME is aware and honors students' desire to maintain multiple paths of earning a midwifery degree.
- Address the concerns of students regarding cost barriers of DNP programs
- Create separate competencies for DNP-educated midwives.
- Update the DNP Universal standards for APRNs statement to acknowledge the value of DNP educated midwives.

#### New Grad, finances, and entry to practice- Sam Roberts 1:40

My name is Samantha Roberts and I represent the Baystate Medical Center Midwifery Education Program. Three themes emerged in students' anticipation of entering practice as new graduate midwives: professional readiness, finances, and finding employment.

Perceived readiness to enter practice varies among students, but many report feeling underprepared. They have concerns about not receiving sufficient mentorship or adequate clinical experiences, working as a midwife in a medical model of care, and about asserting their scope as a new practitioner in a physician-dominated industry.

Student midwives are aware that some RN's may have equal or higher wages with fewer hours and less responsibility than CNM's. They are also frustrated that our APRN colleagues in other specialties may start at higher salaries after comparable time and quality of training. This financial burden is felt especially by CNM's who want to work in community birth, and CNM's in many states continue to be reimbursed at lower rates than NP's and MD's.

Many students raised concerns surrounding employment as a new graduate, and they worry about a lack of job availability, building competitive resumes, and conducting contract negotiations. Some students desire postgraduate clinical education and mentorship opportunities, however the amount of desire exceeds availability of these opportunities.

#### We recommend that ACNM:

- Continue to lobby for equal reimbursement.
- Advocate for loan repayment opportunities for new grads wishing to pursue community birth.
- Encourage DOME to incorporate role transition into required school curriculum.
- Support funded midwife fellowships programs to help students who desire additional support in transitioning to a provider role.
- Hold monthly student and new-grad coaching forums to assist with licensing processes, obtaining insurance, building professional confidence, and designing competitive resumes and portfolios.
- Update the midwife.org website so it includes easily accessible and direct links to the job search database.

Hello, my name is Christina Sutherland and I represent the Ohio State University in Columbus, Ohio,
I will share our feedback and recommendations about how students interact with ACNM.

#### **ACNM Student Membership:**

(including name/introduction: 1 minute, 50 seconds)

The majority of midwifery students are not members. Many students lack clarity on the purpose of the organization and are uncertain about what membership can offer to students. We applaud ACNM for offering student-level memberships, but some students report that the cost of membership remains a barrier. Students who do become members are often unsure about the best ways to get involved and do not know how to get the most value from their membership. Many students are not aware of local affiliate groups. Some affiliate groups are actively involved with local students, and we applaud those groups for their efforts. Many student members desire mentorship and networking but report frustrating experiences trying to connect. The ACNM website, ACNM Connect, and online resources were said to be challenging to navigate and the overall design and structure of the website to be out-of-date.

#### We recommend the following:

- Task affiliate leadership with strengthening relationships with their local midwifery schools and designating a liaison to promote ACNM to students & midwifery schools in each affiliate.
- Offer midwifery students a free trial membership and offer free annual memberships to those who self-identify a financial barrier.
- Create a new student membership welcome packet and include information on local affiliate groups.
- Create a nationwide student affiliate group.
- Update the design of the ACNM website and restructure ACNM Connect.
- Create a learning platform specifically targeted at new graduates.

# ACNM Annual Conference: (Chris Sutherland) (1 minute, 30 seconds)

Midwifery students are hesitant to attend the annual conference because they are uncertain of its value. The cost is very high, even at reduced student member rates, and many student-interest events, such as the board review, are held before the main conference, which lengthens hotel costs to a full week. The conference is also typically held at a time of year which is difficult for many to attend, conflicting with

commencement ceremonies and other end-of-school-year events. Many students report that they would like to see more student-focused activities and more opportunities for networking, job-searching, career coaching, and general support and connection with peers and mentors.

#### We recommend the following:

- Continue to email students with highlights of student-interest events and consider offering more student-focused activities for future conferences.
- Hold the annual conference at a time of year that does not conflict with commencement ceremonies.
- Shift student-interest events to the main conference days and do not place in time slots that conflict with other student-interest events.
- Task affiliate leadership to work with local student liaisons to invite students to attend affiliate-level annual conferences.
- Reduce or eliminate the cost of the board review.
- Create and highlight more opportunities for students to connect with peers and mentors.

Conclusion- Bayyinah

Thank you for allowing us the opportunity to present to you today. We appreciate the work that ACNM has done to increase student engagement and value, and hope that our recommendations will help spearhead further efforts.

Thank you to Selena Wells for being our representation on the board. Thank you to all schools and student liaisons that contributed, even those not on the stage today. And a huge thank you to Denise Gonzalez and Erin Morelli for wrangling the troops with great guidance, grace, and patience. It has been an eye-opening experience this week to see the business of ACNM being conducted.

We are excited to see that the suggestions we have made to the board reflect almost all of the goals in ACNM's strategic plan. Specifically the areas of Diversity, Equity, & Inclusion; Membership Engagement & Support; Policy, Advocacy, & Affiliate Support; National Advancement of Midwifery; and Organizational Capacity & Operational Excellence.

Creating this report was a collaborative effort. It is our intention that the suggestions made to the board will improve the lived experience of current and future student midwives and the profession as a whole. We look forward to hearing your

response, working towards changes, and joining the ranks of the midwives that have come before us.

## END FORMAL REPORT - DRAFTS AND DATA COMMENTS BELOW HERE

https://www.midwives.org.au/