Growing Midwifery to Achieve Excellence in Women’s Health

ANNUAL REPORT 2013
Our Vision
Advancing the health and well-being of women and newborns by setting the standard for midwifery excellence.

Our Mission
ACNM works to establish midwifery as the standard of care for women. We lead the profession through education, clinical practice, research, and advocacy.

The American College of Nurse-Midwives (ACNM) is the professional association that represents certified nurse-midwives (CNMs) and certified midwives (CMs) in the United States. With roots dating to 1929, ACNM sets the standard for excellence in midwifery education and practice in the United States and strengthens the capacity of midwives in developing countries. Our members are primary care providers for women throughout the lifespan, with a special emphasis on pregnancy, childbirth, and gynecologic and reproductive health. ACNM reviews research, administers and promotes continuing education programs, and works with organizations, state and federal agencies, and members of Congress to advance the well-being of women and infants through the practice of midwifery.

About the cover: Our 2013 Annual Report cover illustrates the integral relationship between ACNM and midwives. ACNM supports more than 7000 midwives working together to improve the health of women and families in communities everywhere. Membership in ACNM is the easiest and most effective way for today’s midwife to stay rooted in the profession and drive meaningful change in the delivery of women’s health care. Together, we stand tall and proud, drawing strength from our diversity and steadfast in our common mission to establish midwifery as the standard of care for women.
2013 was a great “step forward” year for ACNM and our members and we look with great optimism and excitement to continued progress in the years to come.

Since the beginning of time, midwives have had the privilege to be with women and their families in some of the most intimate and important moments in their lives. While we continue to cherish our traditional role, we are constantly expanding our positive impact on women’s health. Now more than ever, midwives are leading maternal and newborn health initiatives globally, sitting at national policy tables, testifying in state capitals, leading quality improvement initiatives in major health care institutions, conducting and publishing important research, interfacing with the media, and communicating directly to consumers. We are an energized and dynamic public health-oriented profession, well-positioned to lead and serve at a time when women’s health and maternity care are finally beginning to receive the focus they deserve in the national discussion on access to quality, affordable care. Midwives are increasingly viewed as key players in helping to achieve the triple aim of simultaneously improving the health of the population, enhancing the experience and outcomes of the patient, and reducing per capita cost of care for the benefit of communities.

Yes, midwifery is truly an idea whose time has come. We are experiencing double-digit growth annually. Stories abound of the growth of midwifery practices and a renewed interest in promoting normal physiologic birth in all settings. We must nurture these signs of hope and promise until they become the norm in every community across America. There is much work to do.

We hit high notes in many areas in 2013—in our membership numbers; in resources provided to our affiliated state organizations; in global health grant funding; in Annual Meeting attendance; in newly certified midwives; and in the size of our Midwives Political Action Committee. The growing ACNM Benchmarking Project tells the story of the excellent care ACNM members provide to women, and suggests how much more we could do if every woman had access to a qualified midwife, working seamlessly and respectfully within the health system, to the full extent of their education and training. We are fully committed to achieving this vision, and to supporting every ACNM member in their individual professional development and success.

We celebrate the diversity and passion of ACNM members in how we each contribute in our own way just as we also celebrate the awesome collective power of what we are doing and will do together. Our sincere thanks to all of us.
More women than ever are choosing midwives as their women’s health care providers. Midwives focus on what is most important to each woman’s unique situation, working as integrated members of the health care team. With all the changes happening in health care today, the client-centered, midwifery approach to caring for women has risen to new levels of relevance and value.

ACNM responded to our growing profession by expanding our in-house communications and public relations capacity. We welcomed new talent to lead us through the accompanying heightened media activity and need for effective, streamlined communications, all with the goal of addressing the top priority of our members—raising public awareness of midwifery.

Communicating Information, Presenting Options

2013 proved to be another notable year for ACNM’s signature consumer education campaign—Our Moment of Truth™: A New Understanding of Midwifery Care. We published the second survey on Women’s Health Care Experiences and Perceptions, this year spotlighting family planning and contraception. The survey revealed that women do not feel knowledgeable about many of the birth control options available today and have harmful misperceptions about their effectiveness. The survey also found that many women don’t feel they are able to have in-depth conversations with their health care providers to make well-informed decisions on birth control and family planning. Although 64% of women said their health provider presented them with multiple birth control options, 1 in 10 women said they felt pressured to choose one type of birth control method over another, 1 in 10 women shared that they had questions they felt they were unable to ask, and another 1 in 10 women felt their health provider made assumptions about them that led their provider to prescribe a certain type of birth control.

Birth Control Methods: Use vs. Effectiveness

**BIRTH CONTROL PILLS**

- 27.2% of women report using
- Of those using this method, 9% experienced unintended pregnancy

**CONDOMS**

- 20.3% of women report using
- Of those using this method, 21% experienced unintended pregnancy

**WITHDRAWAL METHOD**

- 12.8% of women report using
- Of those using this method, 22% experienced unintended pregnancy

For more infographics and survey materials, visit ourmomentoftruth.midwife.org/2013Survey

ACNM released the Our Moment of Truth Grassroots Toolkit to guide affiliates, midwifery practices, and education programs through local launches of ACNM’s national consumer education campaign. Members may view the toolkit with template press releases, social media posts, scripts for talking with reporters, and more at www.midwife.org/omot-toolkit.

Help ACNM Spread the Our Moment of Truth™ Campaign at the Grassroots Level!

ACNM released the Our Moment of Truth™ Grassroots Toolkit to guide affiliates, midwifery practices, and education programs through local launches of ACNM’s national consumer education campaign. Members may view the toolkit with template press releases, social media posts, scripts for talking with reporters, and more at www.midwife.org/omot-toolkit.

Midwives provide the personalized family planning services that women say they want. However, of the women we talked to, just 1 in 4 were aware that CNMs and CMs offer family planning services, despite this being a specialty for the profession. These findings were especially timely given the implementation of the Affordable Care Act (ACA), which will increase women’s access to contraceptive services.

During National Midwifery Week, ACNM took our survey findings public through a comprehensive media outreach initiative and strategic social media activity. The websites of newspapers in 43 states picked up ACNM’s press release, and the survey received original coverage in Congressional Quarterly Healthbeat, Huffington Post Women, Healthy Mom & Baby, and The American Prospect.
Through new, dedicated *Our Moment of Truth™* social media channels on Facebook and Twitter, survey results reached 18,500 people during the week. These channels opened a new space for both health care providers and women to interact with the campaign and share its message with their friends and family. The channels also allowed for more opportunity, especially for our younger members who are statistically more likely to use social media, to get involved with the campaign.

**Promoting Normal, Healthy Birth**

Midwives are experts at facilitating normal, healthy birth. In 2013, ACNM prioritized equipping members with tools to promote the value of physiologic birth. As a follow-up to the Normal Physiologic Birth Consensus Statement published by ACNM, Midwives Alliance of North America (MANA), and National Association of Certified Professional Midwives (NACPM), these 3 organizations again collaborated to release *Normal, Healthy Childbirth for Women and Families: What You Need to Know*. This new handout takes the original consensus statement and explains what women and families need to know in consumer-friendly language. The document has the support of the March of Dimes and was endorsed by some of ACNM’s closest allies, including Centering Healthcare, Childbirth Connection, Citizens for Midwifery, Doulas of North America, National Certification Board for Midwives, National Certification Board for Women’s Health Consultants, National Association of Certified Professional Midwives, and Lamaze.

**Share Normal, Healthy Childbirth for Women and Families: What You Need to Know with your clients. Download it free at www.ourmomentoftruth.com or order professionally printed copies at www.ShopACNM.com.**

---

**Spread the Word**

about *Our Moment of Truth™* by sharing our Facebook and Twitter accounts with the women in your life! Help bust myths about midwifery while encouraging women to become active participants in their health care.

[www.twitter.com/OMOT_ACNM](http://www.twitter.com/OMOT_ACNM)
ACNM tirelessly advocates for the midwifery profession. Our foremost advocacy goal is for all CNMs and CMs to be recognized as licensed, independent providers, free from requirements for physician supervision and written collaborative agreements. In 2013, our advocacy activities acquired fresh focus under new staff leadership and covered more ground amidst continued development of ACNM’s affiliate structure.

State Initiatives and Progress
ACNM continuously monitored state laws and regulations and supported affiliates in a wide range of legislative activities. States with bills to lessen or eliminate collaborative and supervisory practice requirements included Utah, Kansas, Missouri, Illinois, Kentucky, West Virginia, Maryland, and Michigan. The efforts of the ACNM North Carolina Affiliate to remove supervision requirements resulted in formation of a Joint Legislative Committee to study independent midwifery practice. The committee’s final recommendations could result in a bill for the 2014 session. The Massachusetts Affiliate drafted conforming regulations following their 2012 independent practice victory. Illinois enacted legislation that lessens the requirements for written collaborative agreements, while Nevada passed a bill to eliminate this requirement in its entirety.

Hospital privileging policies sometimes prevent midwives from being able to practice to the full extent of their education and training, and ACNM has ramped up its focus on removing this barrier. This is becoming a critical workforce issue. After analyzing a large ACNM member survey on credentialing and privileging, we are developing a long-term multi-stakeholder strategy to conquer this challenge, based on the experiences of ACNM members who have secured full voting privileges and are medical staff members at their institutions.

Midwives and the National Health Care Stage
ACNM is committed to seeing midwives reimbursed on par with physicians and other health care providers. In 2013 we equipped our affiliates with resources to advocate for fair reimbursement with their state Medicaid programs. We continued to monitor implementation of other aspects of Medicaid expansion and the Affordable Care Act (ACA), and held a joint webinar with the Health Resources and Services Administration (HRSA) to review its impact on midwives. We also analyzed standards set in each state that define the new Essential Health Benefits package, which will be offered by health plans in the Marketplaces. This analysis allowed us to typify coverage of midwifery services and birth centers. The results were released at Midwifery Works! 2013, our annual business education and networking conference.

Log in with your member ID and password to see legislative and regulatory developments related to midwifery practice in each state at www.midwife.org/state-legislative-developments-tracking-system.
How will the ACA impact you and the women and families you serve?
Visit www.midwife.org/Implementation-of-the-Affordable-Care-Act to view key issues and resources for midwives.

Improving Care through Professional Collaboration
Successful collaboration between midwives and obstetrician-gynecologists is critical to making gains in women’s health care in the United States. In 2013, ACNM continued our national-level work with the American Congress of Obstetricians and Gynecologists (ACOG) on issues of shared interest. We also focused on strengthening dialogue and collaboration on the state and regional levels. Sustained progress toward successful collaboration will hinge upon respectful, professional interaction among individual obstetrician-gynecologists and midwives in hospitals, clinics, and universities across the country. In recognition of this ongoing commitment, ACNM was pleased to award ACOG with the ACNM Partner of the Year award.

ACNM also moved forward in discussions with other midwifery organizations in the United States through the US Midwifery Education, Regulation, and Association (US MERA) work group—a collaborative comprised of ACNM, the Accreditation Commission for Midwifery Education (ACME), the American Midwifery Certification Board (AMCB), the Midwifery Education Accreditation Council (MEAC), MANA, NACPM, and the North American Registry of Midwives (NARM). In 2013, the group released a historic joint statement outlining their shared vision and action plan for the future of midwifery in the United States. Inspired and informed by global midwifery standards and competencies adopted by the International Confederation of Midwives (ICM), the group is envisioning and working toward a more cohesive US midwifery presence globally and domestically. Much work still needs to be done, and the consensus achieved in 2013 was an important step forward that paves the way to a future in which every woman will have access to high-quality midwifery care.

In 2013, donations by ACNM members to the Midwives Political Action Committee (Midwives-PAC) resulted in another record-breaking total. Learn more about your Midwives-PAC at www.midwife.org/midwives-pac.

Goal 3: 1000 newly certified midwives per year

The United States needs highly educated midwives ready to serve as women’s health care professionals more than ever. According to ACOG’s 2011 report The Obstetrician-Gynecologist Workforce in the United States, nearly half of US counties have no obstetrician-gynecologist. Compounding this obvious shortage, even more women will seek women’s health care services as they obtain coverage under the ACA. CNMs/CMs are uniquely positioned to fill this void. In fact, a 2013 World Health Organization team found that midwives and other health care professionals provide high quality care that is comparable to physicians, and for some specific services, they outperform physicians.
Continued Growth
Since 2010, ACNM had the foresight to prioritize increasing the number of newly certified midwives to fortify the midwifery workforce. In 2013, the midwife community welcomed 539 new CNMs/CMs to the profession—an 88% rise since 2007 and the sixth consecutive year of increase. According to the ACNM 2013 Midwifery Education Trends Report, which covers statistics through the year 2012, the number of qualified applicants to ACME-accredited midwifery programs continues to rise, with a 26% increase from 2008 to 2012. The number of admitted students also increased each year from 457 in 2008 to 807 in 2012.

Supporting New Midwives
ACNM demonstrated heightened commitment to student and new graduate members by developing new exam preparation courses and focusing on improving transition to practice. For the first time, students will be able to prepare for the AMCB certifying exam through online modules prepared by ACNM, to be released in 2014. We also provided a specific track of education sessions and workshops relevant to new graduates at the ACNM 58th Annual Meeting & Exhibition.

Advancing the Midwifery Workforce
For the first time, the US Bureau of Labor Statistics released data on CNMs as a unique profession. At the same time, the ACNM Midwifery Workforce Task Force highlighted the current state of the women’s health care workforce and emphasized the potential for midwives to address workforce shortages by organizing an ACNM-sponsored invitational briefing in Washington, DC. Participants from private and public foundations as well as federal programs and nonprofits gathered for the briefing. This resulted in a contractual arrangement among ACNM, AMCB, and the HRSA National Center for Health Workforce Analysis (NCHWA) to include CNMs/CMs among the professions that NCHWA tracks. The Midwifery Workforce Task Force is working to identify additional key parameters, beyond the core questions tracked by NCHWA, for studies regarding the midwifery workforce and to foster such studies at the state and national level.

Boosting Federal Funding
ACNM CEO Lorrie Kline Kaplan represented ACNM in testimony before the House of Representatives Committee on Appropriations of the Subcommittee on Labor, Health and Human Services, Education and Related Agencies, urging 3 main areas of federal funding: Title VIII of the Public Health Service Act, the National Health Service Corps, and the National Institute for Nursing Research. Funding for these programs helps establish new educational programs, aids in the growth of existing programs, provides tuition support for midwifery students, funds maternity-related research and research training, and places midwives as primary care providers throughout the nation.

ACNM continued to promote improved federal policy related to midwives teaching medical residents and midwifery students. Language to improve federal policy in these areas was included in the House’s Maximizing Optimal Maternity Services for the 21st Century Act of 2013, also known as the MOMS 21 bill. We continue to seek a champion for the issue in the Senate.
ACNM upholds the most rigorous clinical practice standards in the midwifery profession and showcases our members’ knowledge and expertise in helping women make the best health decisions.

Evidence-Based Care
In 2013, we further equipped members to initiate change in their community hospitals and clinics by advocating a shift toward evidence-based maternity care practice. The Physiologic Birth Task Force Toolkit Subcommittee unveiled preliminary work on a new independent website called BirthTOOLS—an acronym that stands for Tools for Optimizing Outcomes of Labor Safely. BirthTOOLS will help clinicians initiate change in their facilities and is tied to national initiatives to improve safety and quality. This much anticipated resource will enable the ACNM community to elevate our voices and expertise at a critical time when collaborative improvement efforts are gaining steam across the country.

The forthcoming BirthTOOLS website will provide resources to help maternity care providers advocate for evidence-based care in their facilities.

Quality Improvement
ACNM strongly supports quality measurement to improve care. Access to reliable data is increasingly imperative for ACNM to showcase the excellent outcomes our members achieve and leverage new opportunities in our transforming health care system. In 2013, we commissioned a technical analysis of ACNM’s role in data collection, building on the success of the ACNM Benchmarking Project and enhancing collection of key quality data by CNMs and CMs. The resulting multiyear project will facilitate quality improvement among maternity care providers and across all birth settings based on the standardized collection of perinatal data. In addition to funds committed by ACNM, funding for the initial phase of the project has been secured through the generous matching support of the American Midwifery Certification Board and a grant from the Transforming Birth Fund. ACNM’s technology partner is Maternity Neighborhood. ACNM also continues to participate in the Women’s Health Registry Alliance to collaborate with other women’s health organizations when possible on data collection.

ACNM is committed to increasing member presence and action on quality-related clinical activities. ACNM served on the workgroup behind the recommendations in a new *Journal of the American Medical Association* article that subcategorized term pregnancy into early term, full term, and late term, and discouraged “term” as a stand-alone designation as it refers to a wide gestational age range with a broad spectrum of risk for the infant and mother.
ACNM is a member of the multi-stakeholder Council on Patient Safety in Women’s Health Care—a group that strives for safe health care for every woman through multidisciplinary collaboration. We also hold a seat on the Steering Committee for the National Partnership for Maternal Safety—a multi-stakeholder consensus effort that aims to reduce US maternal morbidity and mortality by organizing existing evidence-based materials in ways that facilitate implementation within birthing facilities.

**Advocating for Change**

ACNM joined forces with the American Association of Birth Centers (AABC) to hold a congressional briefing highlighting midwifery-led care and freestanding birth centers as viable strategies to improve outcomes for moms and babies while reducing health care costs. We also allied with Childbirth Connection to spotlight Quality Care for Moms and Babies, a bill that would foster development of quality measures related to maternal and infant care and support development of quality collaboratives focused on maternity care. ACNM members joined our call to action to support the bill during Midwifery Advocacy Month in August when members meet with legislators in their home towns during the Congressional recess. We also called on members to support the MOMS 21 bill, which would improve maternal health outcomes in the United States by harnessing the best evidence in maternity care delivery.

**Journal of Midwifery & Women’s Health**

With a focus on evidence-based practice, ACNM’s peer-reviewed *Journal of Midwifery & Women’s Health* (*JMWH*) presents new research and current knowledge across a broad range of clinical and interdisciplinary topics, including maternity care, gynecology, primary care for women and newborns, public health, health care policy, and global health. ACNM members ranked *JMWH* as one of the most valued benefits of ACNM membership, second only to ACNM’s advocacy to Congress and federal agencies.

In 2013, the *JMWH* impact factor—one measure of the importance of a journal within its field—increased to 1.254, a record high. *JMWH* content was frequently accessed in 2013, with a total of 453,744 abstracts and 232,398 full-text articles downloaded by readers. Of particular note, the seminal National Birth Center Study II, which was published in *JMWH*, garnered impressive media coverage, including a TIME editorial and original coverage on About.com, Cafemom’s The Stir, Mothering.com, Lamaze International’s Science & Sensibility, and Childbirth Connection’s Transforming Maternity Care.

As a membership organization, ACNM serves CNMs and CMs with the utmost professionalism and dedication. Recruiting more members into the organization makes ACNM stronger and more effective in our activities to support midwifery. From 2009 to 2013, the number of student members grew 58% to a total of 1063 in 2013. We also had record student participation at the ACNM 58th Annual Meeting in Nashville—twice the number of student participants as in previous years. We continue to support the success of all of our members, but especially these new midwives who represent the future of the profession.

**Ensure the effectiveness and efficiency of ACNM**

**Goal 5:**

**MEMBERSHIP GROWTH, 2004–2013**

![Membership Growth Chart]

In 2013, the *JMWH* impact factor—one measure of the importance of a journal within its field—increased to 1.254, a record high. *JMWH* content was frequently accessed in 2013, with a total of 453,744 abstracts and 232,398 full-text articles downloaded by readers. Of particular note, the seminal National Birth Center Study II, which was published in *JMWH*, garnered impressive media coverage, including a TIME editorial and original coverage on About.com, Cafemom’s The Stir, Mothering.com, Lamaze International’s Science & Sensibility, and Childbirth Connection’s Transforming Maternity Care.
Enhancing the Value of Membership

In 2013, we conducted a comprehensive membership survey to assist us in understanding what our members most value, and advise us on how we can continue to refine and improve our services. The top 5 benefits of ACNM membership are advocacy to Congress and federal agencies, the *Journal of Midwifery & Women’s Health*, advocacy to state legislatures and regulators, encouraging public awareness of midwifery, and maintaining standards of practice. Several ACNM services and resources showed impressive gains in popularity, including information and analysis on national and state legislation and regulation, discounted online continuing education via the ACNM Live Learning Center, and advocacy tools.

Supporting ACNM Affiliates

ACNM and our members are committed to enhancing our capacity to confront state-level issues related to midwifery practice. Members placed higher value on ACNM affiliates in 2013 compared to 2012—the first year of ACNM’s completed affiliate structure.

MEMBERSHIP DUES REMITTED TO ACNM AFFILIATES

<table>
<thead>
<tr>
<th>Year</th>
<th>Dues Remitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>$197,000</td>
</tr>
<tr>
<td>2012</td>
<td>$349,364</td>
</tr>
<tr>
<td>2013</td>
<td>$394,171</td>
</tr>
</tbody>
</table>

ACNM members have invested nearly $1 million in building their affiliate organizations since 2011.

ACNM created a new national office position to support affiliates and to improve communication and collaboration throughout the affiliate network and with the national office. ACNM provides significant support to affiliates working on legislative and regulatory issues. Our goal is to have strong organizations in every state that engage members and continue to increase the visibility of midwives.

Refining Professional Resources

The ACNM 58th Annual Meeting was our most highly attended in more than a decade with a total of 1930 participants. This premier event continues to offer new levels of professional rigor and quality in line with members’ professional development needs. We also continue to attract new corporate support, which supports ACNM’s work to advance the profession and the success of our members.

Diversification and Inclusion

Our nation’s population is more diverse than ever, but midwifery continues to lack diversity. ACNM must become a more diverse and inclusive organization. ACNM’s Diversification and Inclusion Task Force created the initial framework for a long-range initiative to transform the profession and ACNM.

The ACNM Diversification and Inclusion Task Force seeks “to promote a culture of inclusion within ACNM and the profession of midwifery, in which diversity is respected, sought, and embraced.”


ACNM released new leadership materials for ACNM affiliates, including a guide to navigating crisis communications. View this and other resources at [www.midwife.org/Affiliate-Officer-Resources](http://www.midwife.org/Affiliate-Officer-Resources).
ACNM and our members are key players in the global agenda to reduce infant mortality and improve maternal health. Through our grant-funded Department of Global Outreach and our volunteer-driven Division of Global Health, we work with world health partners, including the US Agency for International Development, the Department for International Development/UK aid, Laerdal Global Health, and Johnson & Johnson, to systematically improve the quality of care in developing countries.

The ACNM Department of Global Outreach maintains useful and informative webpages for those interested in global health. Find online courses, free publications, volunteer opportunities, and more at www.midwife.org/global-outreach.

Participating in the global agenda drives the visibility and growth of the profession at home and highlights the needs of the women and newborns we serve. In 2013, we provided opportunities for members to get involved in global health through Survive & Thrive—an innovative global development alliance aiming to reduce preventable maternal and child deaths in developing countries by mobilizing US professional associations with USAID, the private sector, and civil society organizations. Through Survive & Thrive, ACNM senior clinician members began work to implement the popular Helping Babies Breathe training program in Malawi, update clinical practice with the Afghan Midwives Association, work with the Eastern Central Southern African Health Communities (ECSA-HC) to strengthen professional associations in member countries, and develop materials to be used in the global push to end newborn death. Special thanks to ACNM member volunteers Lauren Arington, Melissa Avery, Terri Clark, Jody Lori, Amy Nacht, and Helen Welch.

In 2013, ACNM was invited to a symposium prior to the third Women Deliver conference held in Kuala Lumpur to review progress and renew commitment to advancing midwifery. Input was solicited from more than 200 midwives and their organizations and a second global call to action emerged from the symposium, again stating that skilled, competent midwives could avert more than two thirds of the maternal and neonatal deaths in the world.
**A.C.N.M. Foundation**

The **A.C.N.M. Foundation** is the only 501(c)(3) nonprofit organization that promotes excellence in health care for women, infants, and families worldwide through the support of CNMs and CMs. For more than 45 years, the Foundation has worked with donors to establish funds that support leadership development, educational grants, research, community projects, policy development, and international experiences.

**Growing Midwifery**

Our 2013 activities demonstrate our dedication to the growth of midwifery. Numerous midwifery students benefited from Foundation scholarships to pay for their education. Sharing in ACNM’s commitment to diversification of the midwifery workforce, we awarded 3 Midwives of Color-Watson scholarships for basic midwifery education and the Sandy Woods Scholarship for Advanced Study, given to a midwife of color enrolled in doctoral education. We enthusiastically support midwives fulfilling leadership positions in health care, education, global health, and anywhere they choose to work. In cooperation with the Frances T. Thacher Midwifery Leadership Endowment and the Midwifery Business Network, we awarded 5 Thacher Fellowships for midwives to attend Midwifery Works! 2013, ACNM’s annual business networking and education conference. The W. Newton Long Award enabled a midwife to complete her capstone project on stress reduction among midwives. The Jeanne Raiser International Award for Midwifery supported a midwife for her global health experience in Somaliland, East Africa.

**Fostering Collaborative Care**

In an effort to further promote effective collaboration between midwives and obstetrician-gynecologists, we partnered with ACNM and the Midwifery Business Network to give the Louis M. Hellman Midwifery Partnership Award to a physician who has been a champion supporter of midwifery practice.

The Foundation’s most prestigious recognition, the Dorothea M. Lang Pioneer Award, went to 2 midwives in recognition of their stalwart efforts to assure liability insurance and hospital privileges for midwives after facing their own privileging challenges in Nashville in the early 1980s.

At the ACNM 58th Annual Meeting & Exhibition, we sponsored the annual Therese Dondero Lecture, presented by David Grimes, MD, who gave a gripping presentation highlighting the underpinnings of misogyny in women’s health. ACNM members gave a record high of donations at the Foundation booth and supported a hugely successful annual fundraiser at the Nashville City Club.

**Preserving Our Heritage**

We were pleased to debut “Midwifery Living Legacies,” featuring highlights of 16 video interviews conducted by the Foundation’s OnGoing Group, which was renamed the Midwifery

---

**Board of Trustees:**
Elaine M. Moore, CNM, MSN, President • Frances T. Thacher. CNM, MS, FACNM, Vice-President • Ellen Martin. CNM, MS, FACNM, Treasurer • Bridget Howard. CNM, MSN, Secretary • Mary Kaye Collins. CNM, MN, JD, FACNM • Denise McLaughlin. CNM, MPH • Tonia L. Moore-Davis. CNM, MSN • Kathryn Osborne. CNM, PhD, FACNM • Tanya Tanner. CNM, PhD, MBA, FACNM • Cathy Collins-Fulea. CNM, MSN, FACNM, ACNM Vice-President – ex-officio • Jan Kriebis. CNM, MSN, FACNM, ACNM Past President – ex-officio

**Executive Director:**
Lisa L. Paine, CNM, DPh, FACNM

**Mary Breckenridge Donors:** Mary C. Akers, Karen Baldwin, Royda Ballard, Georgia Blair, Ginger Breedlove, Mary Kaye Collins, Janeen Cook, Elizabeth Cooper, Candace Currie, Niva Neves Fisch, Jennifer Foster, Carolyn Gogot, Mary-Thakky Gillmor-Kahn, Barbara W. Graves, Laraine H. Guyette, Julie Harrison, Kathryn S. Harrod, Denise Henning, Elizabeth Hill-Karbowski, Marsha Jackson, Jennifer Kaye, Peter & Tina Johnson, Holly Kennedy, Julia Lang Kessler, Joyce King, Tekoa King, John Koontz, Jan Kriebis, Cara KoobsWhatch, Dorothy Lang, Frances E. Liko, Lisa Kane Low, Ellen Martin, Michael McCann, Denise McLaughlin, Judith S. Mercer, Elaine Moore, Jacques L. Moritz, Lorrie C. Morris, Patricia Murphy, Linda Nanni, Kathryn Osborne, Pamela Reis, Joyce Roberts, Jo-Anna L. Rone, Georgia Rose, Suzanne M. Smith, Cecilia Stearns, Susan E. Stone, Ginnie S. Swenket, Tanya Tanner, Frances Thacher, Joyce E. Thompson, Deborah S. Walker

**Corporate and Foundation Donors:**

**2013 SCHOLARSHIPS AND AWARDS**

**20th Century Student Interview Awards**
Sage Beaman, Toni Nicole King, Sally Manson, and Sarah Weinstein

**Clinical Stars Award**
Susan Imanse, Sophia Kyerematen, Careen Mauro, Elaine Moore

**Dorothea M. Lang Pioneer Award**
Victoria H. Butler, Susan Sizemore

**Edith B. Wonnell, CNM, Scholarship**
Crystal Steward

**Excellence in Teaching Awards**
Kerby Adam, Marie-Annette Brown, Erin Brown, Anne Cochran, Maria Conran, Mamie Gudies, Lisa Hanson, Tonia Moore-Davis, Blake Rainie, Vema Raynor, Jenna Shaw-Battista, Katie Ward

**GlaxoSmithKline TUMS Calcium for Life Scholarship**
Sarah Quirk

**Jeanne Raiser International Award for Midwifery**
Heather Sevick

**Louis M. Hellman Midwifery Partnership Award**
Paul Kastel, MD

**Midwives of Color-Watson Scholarships**
Laketa Edwards, Adrianne Crawford, Tia Thompson

**Sandy Woods Scholarship for Advanced Study**
Olga Laza

**Staff Appreciation Award**
Cara Kinzelman

**Thacher Community Grants**
Choices in Childbirth, Vanderbilt School of Nursing, Volunteer Doula Program

**Thacher Fellowships for Midwifery Leadership Development**
Holly Christensen, Sharon Holley, Sheila Mathis, Jessica Schwartz, Karen Swift

**Varney Participant Awards**
Bronwyn Fleming-Jones, AlexAnn Westlake

**W. Newton Long Award**
Erin Wright
A.C.N.M. Foundation (continued)

Legacies Project. The video helps preserve midwifery’s heritage and shows appreciation for midwives 65 years of age and older for their significant contributions.

For the Foundation to continue to provide top-quality programs, the support of individuals who share our vision is essential. In 2013, we received numerous memorial and honorary donations and a record number of donors joined the Mary Breckenridge Club with annual donations of $1000 or more. The Charles Engelhard Foundation continued to support the Frances T. Thacher Midwifery Leadership Endowment, which focuses on midwifery leadership development and women and midwives with chronic disease and disability. Hologic, Inc., gave an unrestricted education grant to develop a web-based faculty training program to expand the hands-on training in intrapartum sterile speculum and specimen collection for RNs. Since inception this training program has reached more than 1100 RNs at 59 sites nationwide.

We recognize the generosity of all our donors. To make a donation or learn more about our programs, contact fdn@acnm.org.

Financial Report

In 2013, ACNM continued to demonstrate financial stability and modest programmatic growth while taking advantage of continued strong performance of ACNM’s investment portfolio to fund strategic initiatives and fuel future organizational growth. While as planned, this funding strategy resulted in an operating loss for the organization, we believe that this strategy is crucial to successfully positioning the midwifery profession, the organization, and our members for the future. ACNM’s strategic funding activities are guided by an annual review of strategic priorities and funding capability.

RBC Wealth Management continues to serve as the investment advisors for ACNM. RBC associates work closely with the ACNM Finance and Audit Committee (FAC) to ensure that reserve funds are invested in alignment with the financial and investment policies of the College.

As a result of above-average earning in our investment accounts in 2013, ACNM ended the year with a net investment gain of $529,537—a 20% gain compared to a 13% gain in 2012. ACNM remains committed to safeguarding the investments of the College by adhering to financial policies designed to maximize returns over the long-term.

Total combined (temporarily restricted and unrestricted) revenue increased by $1.0 million (19%), while unrestricted operating revenue in 2013 were down 1% compared to 2012. ACNM experienced growth in membership dues revenue and Annual Meeting revenue, but this growth was offset by a reduction in grant revenue received by ACNM’s Department of Global Outreach. To continue to expand ACNM’s organizational capacity and protect the organization from the volatility inherent in grant-funded programs, ACNM’s strategy is to continue to expand our membership base while also developing new programs and services to support our members and diversify our revenue streams.

Operating expenses similarly decreased by 2% in 2013 compared to 2012 but exceeded unrestricted revenue, resulting in a planned net operating loss of $585,303 (9% of 2013 total expenses). ACNM made a strategic decision to utilize $333,000 of its operating reserves to support the following projects: strategic communications and public relations (including ACNM’s Our Moment of Truth™ campaign), development of a strengthened data collection platform to support midwifery practice benchmarking and future patient-level data collection, and BirthTOOLS (ACNM’s normal physiologic birth toolkit) in fiscal year 2013. These expenditures were absorbed by ACNM’s investment gains noted above.
Approximately 65% of total expenses continue to support core member services such as professional practice programs and resources, legislative and regulatory advocacy, promotion of the midwifery profession, and individual member assistance. ACNM also allocated new resources in 2013 to expand ACNM’s staffing in communications, public relations, and national office support to our affiliate organizations; upgrade our accounting system; support the development of a long-term initiative on diversification and inclusion; and conduct a strategic plan for publications as well as for data collection technology. ACNM strives to provide superior services to our members and exceptional representation for the profession while positioning the organization for continued growth.

ACNM’s 2014 $5.9-million balanced budget includes continued support for these core activities as well as additional resources toward strategic communications, normal physiologic birth consumer statement and toolkit strategy, midwifery data collection initiative, and consultancy to update ACNM’s research agenda. We continue to explore new revenue opportunities consistent with our mission while ensuring that our expenditures produce value for the College and our membership. We are financially sound to continue to pursue our mission.

Finally, it must be noted with great appreciation that the financial position of the College is positively impacted by the many dedicated members who serve on divisions, committees, taskforces, and in other volunteer positions within the College. Many members work countless hours without compensation, providing tremendous value not directly reflected in the financial statements. ACNM extends its thanks to its members for their continued commitment to midwifery and to ACNM.

ACNM’s audited financial statements for 2013 and previous years are accessible for members upon request to the Finance Department.
The 2013 ACNM Team

The success and progress of ACNM is largely due to the vision, commitment, and hard work of the ACNM Board of Directors and our dedicated staff and members who serve on divisions, committees, task forces, as representatives to other organizations and initiatives, and in other volunteer positions within the College. The Board of Directors is featured on page 2; staff and volunteer leadership are listed below.

ACNM NATIONAL OFFICE STAFF

Executive Office
Chief Executive Officer
Lorrie Kline Kaplan
Executive Assistant
Carol Ann Ross
Manager, Information Technology
Fausto Miranda
Manager, Continuing Education and Meetings
Melinda Bush
Senior Staff Researcher
Keri Schulein
Advocacy & Government Affairs
Director
Jesse Bushman
Affiliate Relations Manager
Christy Levine
Federal Lobbyist
Patrick Cooney
Manager, State Government Affairs
Cara Knezelman
Communications
Director
Clare Lynam
Graphic Designer
Rebecca Feldbush
Media Relations, Social Media, & Marketing Specialist
Damiris Hay
Senior Writer and Editor
Melissa Garvey
Writer and Editor
Barbra Elenbaas
Finance & Administration
Vice President
Meredith Graham
Finance Manager
Sandra Gray
Financial Specialist
Sujata Chavan
Senior Accountant
Holly Burns
Global Outreach
Vice President
Suzanne Stalls
Program Coordinator, Secretariat
Veronika Schlecht
Program Manager
Kiev Martin
Senior Technical Advisors
Diana Beck, Patrice White
Technical Advisor
Anna Maria Speciale
Technical Advisor, Ghana
Cheryl Jemmott
Membership
Director
George Hamilton
Membership & Marketing Coordinator
Judy Barlas
Membership & Licensing Coordinator
Andre Owens
Professional Practice & Health Policy
Director
Tina Johnson
Departement Coordinator
Monica Greenfield
Senior Education Policy Advisor
Elaine Gember
Senior Practice Advisor
Eileen Euhdin Beard
Journal of Midwifery & Women’s Health
Editor-in-chief
Francis E. Likis
Deputy Editors
Patty Akins Murphy and Tekoa L. King
Managing Editor
Brittany White
Accreditation Commission for Midwifery Education
Executive Director
Heather L. Maurer
Administrative Assistant
Jaime Sampson
ACNM AFFILIATES
View officers for 50 states, District of Columbia, Puerto Rico, Uroformed Services, and Indian Health Service/Tribal health settings at http://www.midwife.org/state-affiliate-map.

DIVISIONS AND COMMITTEES

Division of Education
Chair: Melissa Willman
Vice Chair: Lynnece Rooney
Section Chairs: Jessica Brumley, Heather Clarke, Kim Dau, Aggie Hoegeer, Kate Fouquier, Lynnece Rooney, Nicole Rouhana

Division of Global Health
Chair: Jody Loni
Section Chairs: Wreath Carner, Catherine Carr, Katrina Nardini, Diana Spalding

Division of Research
Chair: Lisa Hanson
Section Chairs: Mary Barger, Robin Jordan, Carrie Klima

Division of Standards and Practice
Chair: Lisa Kane Low
Section Chairs: Andrea Christianson, Mamie Guidera, Denise Henning, Diana Jolles, Karen King, Karen Nguyen, Tanya Tanner

Archives Committee
Chair: Cecilia Jeffit

Awards Committee
Chair: Cathy Collins-Fulea

Bylaws Committee
Chair: Connie Swentek

Committee for the Advancement of Midwifery Practice
Chair: Shwama King

Ethics Committee
Chair: Mary Kaye Collins

Executive Committee
Chair: Ginger Breedlove

Financial Advisory Committee
Chair: Joan Sager

Government Affairs Committee
Chair: Laura Jenson

Midwives of Color Committee
Chair: Heather Clarke

Midwives-PAC
Chair: Heather Bradford

Nominating Committee
Chair: Kathleen Brown

Personnel Committee
Chair: Cathy Collins-Fulea

Program Committee
Chair: Patricia Sullivan

ACNM REPRESENTATIVES TO EXTERNAL ORGANIZATIONS
Melissa Avery, Emalie Gibbons Baker, Mary Barger, Eileen Beard, Diane Bohn, Ginger Breedlove, Stacey Brosnan, Barbara Carmine, Cathy Collins-Fulea, Sarah Coulter Danner, Kim J. Cox, Leslie Cragin, Kim Dau, Michele R. Davidson, Susan Delphy, Ana Delgado, Diana Dowdy, Frances Ganges, Carolyn Gegot, Mamie Guidera, Barbara Hackley, Lisa Hanson, Carol Hayes, Karen Harris, Cheryl Heitkamp, Denise Henning, Sally Hersh, Elizabeth Hill-Karpkovski, Sharon Holley, Elizabeth Howard, Katie Huffling, Cecilia Jevitt, Lynn Johnson, Tina Johnson, Diana Jolles, Caron Jones, Ira Kantrowitz-Gordon, Deborah Karsnitz, Holly P. Kennedy, Tekoa King, Cara Knezelman, Carrie Klima, Jan Kriebis, Miri Levi, Patricia Loftman, Lisa Kane Low, Deborah Morrison Martin, Cydney Afhat Menihan, Tonia Moore-Davis, Patricia Akins Murphy, Amy Nacht, Cynthia Nypan, Katharine O’Dell, Karen Perdion, Marilyn Pierce-Bulger, Robbee Prepas, Nicole Rouhana, Kathy Ruhl, Mavis Schoom, Maureen Shannon, Jenna Shaw-Battista, Joan Slager, Suzanne Stalls, Lisa Stephens, Kai Tao, Deborah Walker, Jan Weingard Smith, Helen Welch, Claire Westdahl, Tammy Wittern, Ruth Zielinski

AWARD WINNERS

ACNM AWARDS
Hattie Hensmeyer Award:
Tekoa L. King

Kitty Ernst Award:
Terrah Stroda

Louis M. Hellman Midwifery Partnership Award:
Paul Karteil

Book of the Year Award:
Linda Orla Robinson, Henci Goer, and Amy Romano

Distinguished Service Awards:
Alice Bailes, Colleen Conway-Welch, Janet Engstrom, Julie Gorwoda, Lisa Kane Low

2013 Outstanding Preceptor Awards:
Lauren Abrams, Robin Bigby, Melanie Dossey, Susan Greene, Jacqueline Greenfield, Lindsay Kragle Giffith, Audrey Groff, Susan Hodgson, Karen McConnell, Erin McMahon, Margaret Montgomery, Crystal Murphy, Rita O’Reilly, Verna Raynot, Anne Segouin

Media Award
PBS Call the Midwife series

Organizational Partner
American Congress of Obstetricians and Gynecologists

Public Policy Awards:
Heather Bradford, Kim Dau

Video Contest Winner
Publicity Committee of the Washington State ACNM Affiliate

JMWH AWARDS
Best Research Article of the Year Award:
Cara Osborne, Jeffrey L. Ecker, Kimberly Gaukrobe, Ellice Lieberman

Best Review Article of the Year Award:
Katrina Afer Thorsbensen, Deborah L. Brenbaum

Mary Ann Shah New Author Award:
Jeanne Murphy

DIVISION OF RESEARCH AWARDS:
Best Poster Award:
Susan M. Yount, Judith Butler, Sandra Macon, Stephanie Bevill

Student Challenge Poster Award:
Laura Sanderson

Podium Best Research Presentation:
Lisa Kane Low

2013 ACNM FELLOWS
Mary Carol Akes, Sharon M. Bond, Cynthia B. Flynn, Irene Gelbaum, Mamie Guidera, Linda Hunter, Deborah Brandt Karsnitz, Carrie S. Klima, Lonne C. Morris, Linda Nanni, Julia C. Philippi, Catherine Moore Salam, Maria S. Valenteth-Welch, Angela Wilson-Liverman, Susan Marie Yount

Page 16 | 2013 Annual Report • American College of Nurse-Midwives