2020 Student Report

Thank you for the opportunity to present this report to the American College of Nurse-Midwives and to be a collaborative voice for change as part of this highly respected organization. We thank the planning committee of this unique Annual Meeting and extend our deepest appreciation for all of the hard work you have done to make this virtual event a reality.

We, the student liaisons, wish to recognize the work that ACNM has accomplished this year including:

- Expanding the core competencies to include midwifery’s diverse history, abortion care and referral, and transgender and gender non-conforming (TGNC) care
- Collaborating with our interdisciplinary colleagues, such as in the joint statement “Patient-Centered Care for Pregnant Patients During the COVID-19 Pandemic,” written with the American College of Obstetricians and Gynecologists, American Academy of Family Physicians, and Society for Maternal-Fetal Medicine
- Continuing to advocate for federal funding for advanced practice nursing students including the Midwives for MOMS bill and reauthorization of Title VIII’s Nursing Workforce Development Program
- Hosting student-centered ACNM Town Halls such as: “Midwifery education and student well-being during the COVID-19 pandemic.” This was an invaluable opportunity for midwifery students and leaders in midwifery to come together to address questions and concerns
- Increasing membership by 5% and gathering data about the membership that will aid ACNM in becoming more welcoming, inclusive, and diverse
- Creating a task force designed to explore the challenges surrounding student clinical placements

COVID-19 Response:

The global spread of COVID-19 has unforgivingly changed the lives of individuals across the world. The pandemic affects all of us, but not equally. Those who have been historically marginalized by our broken healthcare system are experiencing the worst effects of COVID-19, yet have the least access to care. There is much uncertainty surrounding the future of healthcare and midwifery in the context of COVID-19, but what is certain is that midwives are needed now more than ever to close gaps in healthcare disparities.

Many of us are working on the frontlines of this pandemic while continuing our didactic midwifery education. As student midwives, we are eager to return to clinical, so that we can continue developing our skills and enter practice as safe and competent midwives. We understand that COVID-19 has challenged the delivery of midwifery education. However, it has created an opportunity to expand support of midwifery education and grow the midwifery field to care for our most marginalized. We suggest that instead of seeking a return to “normal” that ACNM leads by example in changing the way healthcare is delivered.
In the short term, students are asking: When will we be welcomed back into clinical settings? Will we get enough hours to feel prepared to graduate? Will we be able to access the student loans we rely on if our credit load decreases or if we cannot complete clinical hours during the course of a semester? How many clinical hours will be replaced with telehealth training and virtual simulation? We ask for guidance on how to plan for these uncertainties.

We ask ACNM to consider the following actions to help students during and after the COVID-19 pandemic:

- Effective, timely and concise communication with students including monthly Town Hall meetings to answer ongoing questions and provide updates
- Support students’ desire for community by encouraging state affiliates to hold frequent meetings to engage students, facilitate networking with local midwives, and share community resources
- Advocate for the appropriate use of telehealth in midwifery education programs and develop guidelines with consideration for student clinical requirements

**Preceptorship:**

ACNM has long acknowledged the shortage of midwifery preceptors and clinical sites available across our country. The challenge of finding adequate clinical learning opportunities remains a primary concern of many student midwives. Surveyed students from schools across the country reported both the need for preceptors and for clinical sites within a reasonable travel distance to the student. Even in major metropolitan areas, the supply of preceptors does not meet the demand. Nearly every program, even those that guarantee clinical placement, has difficulty securing sites for all students. As a result, students are forced to temporarily move (sometimes across states), or to delay their graduation (sometimes by more than a semester). This creates undue financial, personal, and professional burden to those pursuing a midwifery education. We feel this deficit must be resolved.

Currently only one-third of midwifery education programs financially reimburse preceptors. This inequity perpetuates the challenge of preceptor and clinical site procurement, especially for students who must secure their own clinical education opportunities. Without financial incentive, many sites may be unable to afford training student midwives, even if they have a desire to do so. Students responsible for finding their own clinical sites report being declined opportunities because of exclusivity contracts with other midwifery programs. These contractual agreements create ethical dilemmas, as students are accepted to clinical sites not based on suitability for the practice, or even merit, but instead by what school they attend. Students whose programs do not pay preceptors are at a distinct disadvantage in these scenarios.

We ask ACNM to consider the following actions:

- A concrete timeline and outline of ACNM’s plan for improving preceptor and clinical site availability
- Equity in the clinical placements that are available, particularly among students who are required to find their own clinical opportunities
• An update on ACNM’s top priority of lobbying for education funding. If midwifery educational opportunities are funded more similarly to the medical education model, clinical sites will be more incentivized to precept student midwives.

Technology and Online Learning Opportunities:

Changes made to midwifery practice and education in response to COVID-19 highlighted the need to utilize technology in new ways. Navigating these changes can be challenging. We ask that ACNM take an active role in assisting students and midwives with technology resources.

The existing virtual learning resources provided by ACNM as well as access to previous annual conference courses support midwifery education and keep us connected with ACNM. Students appreciate the virtual educational resources ACNM already provides and feel that this platform could fill the gaps in new competencies that are not yet included in midwifery education programs.

We as students appreciate the ability to communicate and connect with our professional organization and colleagues via ACNM Connect. However, we feel the frequency and format of emails can be burdensome and not conducive to participation. We suggest the development of a central platform to improve collaboration and participation.

We ask ACNM to consider the following actions:
• Improve user interface, particularly of discussion board posts and ACNM Connect
• Expand online educational resources, including maintaining access to past Annual Meeting courses, the BirthTOOLS kit, Evidence Based Practice: Pearls of Midwifery, and the Online Learning Center
• Implement live and recorded educational webinars specifically addressing the new core competencies such as abortion care, care of LGBTQIA clients, and care of patients in rural settings

Diversity & Inclusion:

We thank ACNM for addressing some of the concerns brought up in last year’s student report regarding diversity in midwifery. We are particularly grateful that knowledge of the diverse history of midwifery has been added to the core competencies of midwifery care and that ACME requires all midwifery programs to discuss diversity, inclusion, health disparities, and implicit bias. We further acknowledge that the creation of the diversity toolkit will be instrumental in improving clinical experiences and contribute to the reduction of racism and implicit bias in healthcare. Despite these improvements, these changes can be slow to be incorporated into programs and practice. We feel it is imperative to continue the discussion of lack of diversity in our profession.

Based on ACNM membership data from 2019 only 8% of almost 7,000 members identify as midwives or student midwives of color. Black, American Indian, and Alaska Native people have a significantly increased risk of maternal and infant morbidity and mortality due to complications related to pregnancy.
and childbirth, as compared to white people in the United States. Research shows improved health outcomes and increased participation in healthcare when patients have healthcare providers of the same ethnicity, race, or cultural background.

Institutional racism and lack of workforce diversity further perpetuate the health disparities that contribute to the unnecessary and preventable deaths of minority people. We request that ACNM continue efforts to increase the number of midwives of color in order to reduce maternal deaths and improve health outcomes across minority populations.

In the words of Angela Davis, “In a racist society, it is not enough to be non-racist, we must be antiracist.” In the spirit of antiracism and equity, we ask that ACNM take the following actions:

- Provide standardized and mandatory preceptor training to address the presence of racism and bias in clinical education and clinical settings
- Increase knowledge of the midwifery profession on the state level by promoting midwifery to minority high school, associate degree, and BSN students
- Respond to the 2019 student report request to address gender inequities by educating midwives on the appropriate care for LGBTQIA patients and by intentionally recruiting gay, lesbian, nonconforming, and transgender providers and preceptors

**Membership and Annual Conference:**

Choosing to become a member of ACNM benefits both the individual practitioner and the profession as a whole. The ACNM Annual Meeting, in particular, is an excellent opportunity for professional development and networking opportunities.

Unfortunately, the cost of membership is not affordable for many students. Only half of current midwifery students are ACNM members. ACNM student membership dues are anywhere from 3-20 times the cost of comparable professional organizations. Reducing the financial burden on student midwives can increase student membership, thereby engaging student midwives early on and illuminating the value of being a part of their professional organization throughout their careers.

We echo the request of the 2019 student report to make attendance at the annual meeting more affordable for students. Particularly this year, in the midst of a pandemic, student finances are uncertain and unstable. The transition to a virtual meeting had the potential to reach more students as it did not require traveling or lodging expenses. In a national poll, the majority of students reported feeling frustrated that the cost of attendance remained high. Therefore, they decided not to attend.

ACNM missed an opportunity to engage with future leaders in our field by failing to make the 2020 meeting more affordable for students, who make up nearly a quarter of ACNM membership. Cost of midwifery education and professional membership are primary concerns across all schools represented in this report. It is unfortunate that many students will miss the opportunity to attend the virtual meeting as well as the benefits of membership, due to financial concerns.
We ask ACNM to consider the following actions:

- Reduce cost of student membership in order to foster long term engagement of members beyond their educational years
- Make the annual meeting more affordable for students, especially if in an online format, through additional scholarship and volunteer opportunities
- Give students a voice as voting members of ACNM

Conclusion:

We thank ACNM for creating an opportunity for students to voice our concerns and recommendations to increase student involvement in our professional organization. We are grateful to have a professional organization that values the input of the future leaders, and prioritizes our participation in decisions about educational and professional development opportunities. Thank you.

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