



## NACPM News - September 2008

### President's Letter

Dear NACPM Members,

Every woman in the United States should have access to health care, including comprehensive maternity care! Every woman who desires a midwife for her care should have access to a qualified midwife! Midwifery services in all settings should be covered by insurance!

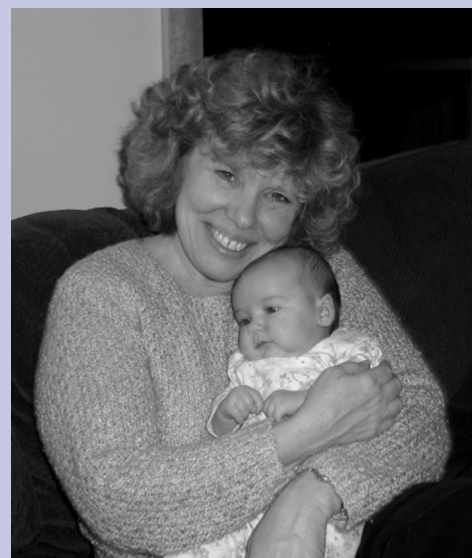
NACPM is laying the foundation for a campaign for federal recognition for CPMs, a key step in assuring that all women have access to qualified midwives and that midwives are compensated for their services. In addition to increasing reimbursement for CPMs, this campaign will aim to increase employment opportunities, funding for education and research and support for birth centers.

The Board began our campaign fundraising efforts last year by approaching colleagues and supporters who immediately saw the potential of this effort and contributed \$7,000 for capacity building for the organization. With this early support, we were able to secure a \$25,000 grant of seed money for six months to engage consultants and begin laying the foundation for the campaign.

The NACPM Board of Directors, working closely with our consultants, established priorities for gathering information, created survey instruments, and began conducting detailed interviews with leading midwives in key states. By the end of June, twenty percent of the states had been surveyed and another twenty percent were identified for the next round of work. The survey includes information on the number of midwives and birth centers, the legal status of CPMs, details about licensure, reimbursement, organizational capacity, and involvement in the health policy arena. As preliminary results are analyzed, a profile is emerging of the strengths in various states that can be built upon and areas where support and technical assistance could strengthen state associations.

The Board has also been examining the national landscape, identifying potential partners, supporters, and assessing potential opposition. Training for the Board has been provided by the consultants on topics such as coalition-building, decision-making models, organizational structure, and effective means of influencing Congress and health policy-makers –anticipating the time when NACPM will invite other organizations to join their campaign for federal recognition of CPMs.

Meanwhile, NACPM has strategically joined several national coalitions formed to address women's health issues, national health care reform, and/or the recognition of all qualified health care professionals. (See: NACPM



*NACPM president, Mary Lawlor*

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Works with National Coalitions). Within the midwifery movement, NACPM has also been at work, strengthening ties with NARM, MEAC, and MANA through the process of co-authoring the landmark "Issue Brief on Certified Professional Midwives in the United States." (See: Organizations Celebrate the CPM Issue Brief) These groups are in the process of formalizing this collaboration in order to coordinate the distribution of the Issue Brief for greater impact. The collaboration on the Issue Brief followed a day-long meeting of the joint boards in Phoenix in the spring of this year that set the stage for future increased cooperation among the organizations to achieve our common goals.

Next steps for NACPM include representing CPMs effectively in national coalitions in the debate over the future of health care, building membership and strengthening our internal capacity to direct the national campaign for recognition of CPMs, providing support and technical assistance to state associations in order to strengthen their capacity to participate in health care reform initiatives and the national campaign, and pursuing funding adequate to support the success of the campaign.

NACPM is alive and well! We played an important role in bringing national midwifery organizations together in support of the CPM credential this spring and are being sought out as an increasingly valuable voice on behalf of CPMs in state and national policy. But we need your support and invite your active participation in our work. If you are not already a member, now is the time to join! If you are a member, consider an extra gift with your renewal this year. And if you are not a CPM but are a supporter, you can become a "Friend of NACPM." Together, we can create a better future for mothers and families!

We wish you a happy fall and look forward to seeing many of you at the MANA conference in October!



Mary Lawlor, CPM, LM, MA  
President, NACPM

## **NACPM Works with National Coalitions to Support CPMs**

Working with national coalitions is an effective way to include the CPM perspective in national activities, to educate and inform the Board about the work of other organizations, to make a difference beyond our usual sphere of influence, and to bring the perspective of groups, whom we might not otherwise interact with, to our work. We have worked and consulted with the following groups during the past year:

**Universal Health Care Action Network (UHCAN):** NACPM continues to consult with Becky Martin, UHCAN's Education and Outreach Coordinator, about opportunities for CPMs to be involved in health care reform. [www.uhcan.org](http://www.uhcan.org)

**Coalition for Patient's Rights (CPR):** NACPM endorsed this group's powerful statement to counter efforts by the AMA Scope of Practice Initiative to limit patient's choice of health practitioners, and is using the new CPR coalition process to join this group. [www.patientsrightscoalition.org](http://www.patientsrightscoalition.org)

**Integrated Health Policy Consortium (IHPC):** IHPC's policy agenda focuses on creating and sustaining a patient-centered, cost-effective integrated national health care system that gives consumers access to all forms of health care, including direct-entry midwifery. Mary Lawlor, CPM, is now a member of the IHPC Steering Committee. [www.ihpc.info](http://www.ihpc.info)

**Raising Women's Voices for the Health Care We Need (RWV):** Mary Lawlor attended the RWV national conference in November, 2007, and spoke on a panel on CPM involvement in health care reform. [www.raisingwomensvoices.net](http://www.raisingwomensvoices.net)

**National Women's Law Center (NWLC):** NACPM regularly participates in the Health Reform Matters monthly conference calls organized by the National Women's Law Center. [nwlc.org/reformmatters](http://nwlc.org/reformmatters)

**Health Care for America Now!:** NACPM has joined the Health Care for America Now! Campaign, a national grassroots campaign organizing millions of Americans to win a guarantee of quality, affordable health care for all. [www.healthcareforamericanow.org](http://www.healthcareforamericanow.org)

**American Association of Birth Centers (AABC):** The NACPM Board met with Cynthia Flynn, CNM, President of AABC in July 2008 to discuss our mutual goal of increasing women's access to midwives. Mary Lawlor, CPM, will speak on a panel on midwifery in the U.S. at the AABC Conference in September, 2008, and Cynthia has contributed an article to the Fall 2008 NACPM News.

### **Join/Renew Your NACPM Membership Online!**

NACPM now offers a fast and easy way to join or renew your NACPM membership online at [www.nacpmcommunity.org](http://www.nacpmcommunity.org)! You can fill out your registration form and pay with your credit card in just minutes. Join or renew your membership today! Donations to NACPM are always appreciated!

## Missouri Supreme Court Upholds Midwifery Law

Molly Remer, Editor, CfM News

The Missouri Supreme Court decision on June 24, 2008 was a tremendous victory for Missouri families, who have been working for 25 years to gain legal access to professional midwives. The decision makes legal Certified Professional Midwives (CPMs) and removes the threat of prosecution for professional midwives who assist families who choose out-of-hospital birth.

In a 5 to 2 ruling, the Court upheld a law that legalizes Certified Professional Midwives (CPMs) who practice in the state. The Court determined that the physician groups that brought the suit to overturn the law lacked standing because their only interest in the case was economic.

“The Missouri Supreme Court made the right decision today, and we are very excited,” said Mary Ueland, Grassroots Coordinator for Friends of Missouri Midwives (FOMM). “Now, we can commence with creating a system in Missouri where CPMs are part of a team of caregivers, where mothers are truly informed and able to determine their own birth preferences, and where midwives can appropriately transport when the need arises, without fear of reprisals, and without intimidation and harassment of the parents.”

In February, an amicus curiae (friend of the court) brief was submitted by: Citizens for Midwifery (CfM), Midwives Alliance of North America (MANA), **National Association of Certified Professional Midwives (NACPM)**, Our Bodies Ourselves, and The National Birth Policy Coalition (NBPC)

The amicus brief submitted by this group of national organizations urged the Court to reverse the injunction against the midwives law and made the case that increasing access to trained and qualified CPMs and out-of-hospital birth is beneficial to Missouri citizens. We deeply appreciate the support advocates offered from all around the country.

## Organizations celebrate the CPM Issue Brief

Mary Lawlor, CPM, LM, MA

President, NACPM Board of Directors

Certified Professional Midwives (CPMs) are a strong and growing group of maternity care professionals, and NACPM, MANA, MEAC and NARM celebrate the release of **An Issue Brief: Certified Professional Midwives in the United States**. This document is the result of an historic collaboration among the organizations that played essential roles in the formation of the CPM credential and in the ongoing support for the profession. It is the first comprehensive description of the profession and will be useful to CPMs and to women and families, as well as to legislators and policy makers who need to know about the contribution that CPMs are making to maternity care in our country.

The release of the ACNM February 2008 revision of the issue brief, Midwifery Certification in the United States, prompted our organizations to think deeply about the CPM credential. It caused us to look freshly at the development of midwifery in the United States and the role played by the new generation of direct-entry midwives who emerged in the 1970s to serve those women who were rediscovering normal birth and choosing to give birth at home. Researching and authoring the brief increased our appreciation of the strength and integrity of the credential and the wisdom of multiple educational routes to certification. A close reading of the recommendations from several key sources, both governmental and private, that describe the urgent need for health care reform, strengthened our belief that CPMs have a significant contribution to make in improving the maternity care system for women. We are excited to share this Issue Brief with you.

Did you know that?

- In early 2000 there were 500 CPMs and today there are more than 1400.
- 1 in 9 of all nationally-certified midwives in the U.S. today is a CPM.
- 24 states use all or part of the NARM credentialing process
- NARM is accredited by the National Commission for Certifying Agencies (NCCA) that accredits over 200 professional credentials including the CNM.
- NCCA considers it a strength for their accredited certification programs to have an education evaluation process for candidates who have been educated outside of established pathways, such as the Portfolio Evaluation Process developed by NARM .
- Midwifery schools accredited by MEAC currently produce almost one-half of all new CPMs annually.
- In 2008, MEAC-accredited institutions and programs had combined enrollments of more than 500 midwifery students.
- There are currently 10 MEAC accredited programs or institutions and at least five new or proposed that have expressed their intent to apply for pre-accreditation in the coming year.
- In 2007, a Washington State Department of Health cost/benefit analysis showed that Licensed Midwives, attending just 2% of the births, saved the state health care system \$2.7 million over two years .
- In 2006, the White Ribbon Alliance for Safe Motherhood national workgroup recommended that CPMs should be engaged in local and regional disaster planning efforts, that “homebirth skills” are essential for all maternity care providers and that information should be provided on how to prepare for birth outside the hospital.

Read about all of this and more in the Issue Brief at [www.nacpm.org](http://www.nacpm.org).

## Birth Centers: An Important Option for Women

*Cynthia Flynn, CNM, PhD,*

*President, American Association of Birth Centers*

Most of you know that the maternity care system in the U.S. is broken, and that objective measures of the performance of the system show that our outcomes are becoming worse. For women who choose hospital birth, the cesarean rate has skyrocketed well above WHO guidelines and our maternal mortality rates are increasing, while our infant mortality rate remains the worst of all developed countries. Those of us who support a woman's right to a safe out-of-hospital birth do so in part because we know the statistics for low-risk women favor out-of-hospital options.

Birth centers and home birth are both wonderful options for childbearing families choosing an out-of-hospital birth. A birth center can be the ideal setting for families who are either not candidates for home birth or are not comfortable with home birth. Perhaps they live too far from emergency services should they be required. Perhaps they don't have much space but they do have lots of other children, which limits the privacy they want. On the positive side, maybe they want the luxury of a large jetted tub with an in-line heater, which is not usually available at home. Or they want to go to a "special place" to have their baby. For whatever reason, some families are just more comfortable going to a birth center than having their baby at home.

The American Association of Birth Centers (AABC) is a national multi-disciplinary membership organization dedicated to the development and maintenance of the birth center model as a place for the practice of midwifery, where childbearing women receive safe, satisfying and cost-effective care. We offer workshops on how to start a birth center and will provide technical support for developing and establishing member birth centers; we provide an online Birth Center Directory, we sponsor research about birth centers and midwifery care; we have developed the AABC Uniform Data Set (UDS) - an online data registry for collecting data on birth by all providers in all settings for research and for your own practice; we review state regulations about birth centers and provide advice to midwives and regulators; we sponsor a great annual convention, a newsletter and e-lists for birth centers to educate each other; and currently AABC has hired legal counsel for birth centers in Texas who have been informed that Medicaid will no longer pay its half of the birth center facility fee.

AABC also owns the Standards that are used by the Commission for the Accreditation of Birth Centers (CABC). The CABC is separate from AABC per federal law, much as the NARM Board is separate from NACPM. Reasons that birth centers voluntarily choose accreditation include:

to obtain this mark of quality and adherence to national standards, to obtain the expertise in continuous quality improvement and problem-solving of the experienced midwives who come for the review, and to obtain reimbursement from some private payers who require it or malpractice carriers who give a better rate for accredited centers.

We welcome anyone who supports the birth center concept to join AABC. Our membership includes consumers, health professionals of all kinds, and birth center owners (we have LM's, CPM's, CNM's and a few MDs), whether their birth centers are accredited or not. In recent years, our Board has included every type of AABC member listed above. CharLyn Daughtry, LM, CPM, founder of three birth centers in Florida has served on the AABC Board since 2003, and joining the board in September is Dana Brown, CDM, CPM, Executive Director of the Alaska Family Health & Birth Center in Fairbanks, AK, who will be joining the AABC Board in September. We would love to have more active participation from the CPM community in setting standards, developing policy, and preserving this out-of-hospital choice.

AABC would really appreciate your support . Visit [www.birthcenters.org](http://www.birthcenters.org) and learn about membership and what we have to offer. If you would like to contribute to the Birth Center Defense Fund, here is the link with more background information: <http://www.birthcenters.org/news/breaking-news/?id=72>. Join us!



*Cynthia Flynn, CNM doing a newborn exam*

## **New Contributions from Childbirth Connection** *Reported to NACPM from Carol Sakala, PhD, MSPH, Director of Programs, Childbirth Connection*



Childbirth Connection is a not-for-profit organization founded in 1918 as the Maternity Center Association. Its mission is to improve the quality of maternity care through research, education, advocacy and policy. In support of this mission, Childbirth Connection is publishing two new reports that will be of great interest

to midwives and other maternity care providers who believe in the innate capacity of women to give birth and their infants to be born, whose goal is to minimize unnecessary interventions and to effectively support women and families.

### **Milbank Report**

In September, 2008, the Milbank Memorial Fund will issue a Milbank Report, Evidence-Based Maternity Care: What It Is and What It Can Achieve. The report examines trends in maternity care in the United States, and presents a framework for evidence-based maternity care. Central to this report is the principle of delivering effective care and avoiding harm, and the use of best evidence both about the physiology of childbirth as well as evidence of the effects of interventions. It describes the barriers to change in practices that exist and outlines policy options that support the alignment of practice with evidence. These policy recommendations were developed in collaboration with members of the Reforming States Group, who are state-level policy makers involved with health issues. The authors, Carol Sakala and Maureen P. Corry, bring to the report long-term involvement with evidence-based maternity care, including nearly a decade of experience with Childbirth Connection's national program to promote such care.

### **New Mothers Speak Out**

*Listening to Mothers I (2002) and Listening to Mothers II (2006)*, research projects of Childbirth Connection, were the first systematic national studies of U.S. mother's perceptions of their childbirth experiences. Childbirth Connection has just

released their new follow-up survey, *New Mothers Speak Out*. Mothers from the *Listening to Mothers II* survey, who gave birth in US hospitals in 2005, were interviewed six months later and asked to describe their postpartum experiences. Together these three surveys represent the first time that the frequency of practices and experiences of birthing and postpartum women have been surveyed at the national level, and they offer a unique opportunity to understand the many dimensions of the childbearing experience in the United States.

*New Mothers Speak Out* demonstrates that mothers who gave birth in U.S. hospitals experience significant social, medical and emotional challenges. Their birth experiences involve high rates of medication, testing, and surgery, and their postpartum experiences involve little systemic support and inadequate policies and services. Childbirth Connection points out that this survey identifies many opportunities to improve circumstances for this large population during a crucial time in the lives of women, infants and families. All three survey reports and related

reference materials are available at [www.childbirthconnection.org/listeningtomothers/](http://www.childbirthconnection.org/listeningtomothers/).

“...mothers experience significant social, medical and emotional challenges. Their birth experiences involve high rates of medication, testing, and surgery, and their postpartum experiences involve little systemic support and inadequate policies and services.”

### **Transforming Maternity Care: A High Value Proposition**

In celebration of its 90th anniversary, Childbirth Connection has launched its new Maternity Quality Matters Initiative and will host a national symposium in April, 2009. The symposium will result in a blueprint for transforming maternity care in the US that answers the question, “Who needs to do what, to, for, and with whom to improve the quality of maternity care within the next five years?”

Leaders within key healthcare sectors have been invited to participate collaboratively over a period of 8 months in the development of a strategic plan for improving maternity care quality and value that is achievable, evidence-based, and inclusive of perspectives of the broadest possible range of stakeholders while giving priority to needs and interests of childbearing women and families. These recommendations will be presented and discussed during the symposium, to take place in Washington, DC on April 3, 2009, and will be widely disseminated thereafter for continued discussion and policy deliberation.

**In recognition of NACPM's commitment to representing CPMs in national health policy forums, board member Suzy Myers has been invited to participate in this landmark process as part of the Maternity Care Clinicians & Health Professions Educators stakeholder group.**

## Women, Midwives and Health Care Reform

By Becky Martin, NACPM Project Consultant



Alert! Applications from women in Colorado seeking individual-market (non-group) health insurance policies have been denied because they had prior cesarean births. States with hard-won consumer protections laws and mandates requiring insurance companies to provide coverage for specific procedures and providers (examples include mammograms, newborn hearing screenings, PKU tests, birth centers, midwives, chiropractors) are being overturned in the name of allowing more “consumer choices.” Some current reform proposals would allow pregnancy to be designated as a “pre-existing condition” which would lead to coverage exclusions and allow insurance companies to refuse to pay for conditions they deem pregnancy related. These are just a few of the issues, policies and pieces of legislation currently under consideration that are impacting the lives of women and their families as the efforts to reform health care in America move forward.

Although several efforts are underway to push back against health care reforms that would leave even more Americans at the mercy of health insurance companies, more voices are needed to join the call for quality, affordable health care that allows people to access the health care providers of their choice. It’s time for an American solution to our health care crisis – it’s

time for our leaders to make quality, affordable health care for all a priority!

NACPM is the leading voice for CPMs and health care reform! NACPM has joined the Health Care for America Now! campaign and Mary Lawlor was an invited speaker at the Raising Women’s Voices for the Health Care We Need national conference. NACPM also regularly participates in the Health Reform Matters monthly conference calls organized by the National Women’s Law Center. There are many more interesting opportunities for midwives and their advocates to get involved in the health care reform efforts that are going on in

“ It’s time for an American solution to our health care crisis – it’s time for our leaders to make quality, affordable health care for all a priority! ”

states across the country and nationally. To learn more plan to attend the workshop hosted by NACPM at the MANA 2008 conference in Traverse City, Michigan: “Change is Coming – What You Need to Know about the Elections and Health Care Reform.” This workshop is specifically designed for midwifery advocates who want to make sure that women will have improved access to midwives in the years ahead and that midwives will be adequately compensated for their work! Participants will use tools to compare and evaluate health reform proposals both federally and in their own states, including the platforms of the Presidential candidates. The facilitators will discuss specific strategies for national

political action to improve or assure access to midwifery care.

More info on women and health care reform is available at these websites:

Universal Health Care Action Network  
[www.uhcan.org](http://www.uhcan.org)

Health Care for America Now!  
[www.healthcareforamericanow.org](http://www.healthcareforamericanow.org)

Raising Women’s Voices for Health Care We Need – a joint project of Avery Institute for Social Change; MergerWatch; National Women’s Health Network  
[www.raisingwomensvoices.net](http://www.raisingwomensvoices.net)

National Women’s Law Center - Reform Matters: Making Real Progress for Women and Health Care

[www.nwlc.org/reformmatters](http://www.nwlc.org/reformmatters)

### Legal Notice (request from MEAC)

The following schools have applied for accreditation or reaccreditation by the Midwifery Education Accreditation Council (MEAC):

- National Midwifery Institute  
P. O. Box 128  
Bristol, VT 05443-0128
- National College of Midwifery  
#209 State Road 240  
Taos, NM 87571
- Midwives College of Utah  
1174 E. 2700 S, STE 8  
Salt Lake City, UT 84106-2671
- Nizhoni Institute of Midwifery  
3802 Alameda Way  
Bonita, CA 91902

Written comments will be accepted by MEAC at:  
PO Box 984 La Conner, WA 98257  
or email:  
[info@meacschools.org](mailto:info@meacschools.org)  
until October 31, 2008.



## **NACPM Joins National Quality Forum**

Suzy Myers, CPM, LM, MPH  
NACPM Board of Directors

This year, NACPM became a voting member in The National Quality Forum (NQF), joining more than 400 other organizations in this not-for-profit membership organization created in 1999 to develop and implement a national strategy for health care quality measurement and reporting.

In response to several Institute of Medicine reports in the 1990's highlighting significant gaps in how healthcare quality was being measured and implemented, the U.S. Congress allocated funds to National Quality Forum to provide national leadership and direction to this effort. Established as a public-private partnership, the NQF has broad participation from all parts of the health care system, including national, state, regional, and local groups representing consumers, public and private purchasers, employers, health care professionals, provider organizations, health plans, accrediting bodies, labor unions, supporting industries, and organizations involved in health care research or quality improvement.

Beginning in the fall of 2007, and continuing as this newsletter goes to press, NQF engaged in a project to achieve national voluntary consensus on a set of effective, well-specified performance measures to assess the quality of perinatal services. NACPM, along with more than 30 other organizations, has participated in this process by offering comment, critique and voting on proposed perinatal performance measures. Our involvement has given voice to the need for measures that affect the care of the majority of healthy women and babies, such as those that capture normal birth, decision making processes, women's experience of maternity care, and discourages use of interventions without demonstrable benefit. Whatever measures are ultimately adopted, they will be voluntary, but could conceivably be required one day by institutions and individuals that choose, provide and purchase care.

This is a time when midwives must be active participants in key health policy forums and NACPM has identified NQF as a priority. In support of our mission to ensure that CPMs achieve their appropriate place in the delivery of maternity care in the United States, NACPM's membership and participation gives us the opportunity, not only to represent the perspective of CPMs, but also to learn about and participate in this important national organization that is developing and endorsing standards for improving the quality of healthcare in the United States.

## **NACPM Supports the Big Push for Midwives!**

Mary Lawlor, CPM, LM, MA  
President, NACPM Board of Directors

Midwives and advocates held an historic summit meeting in Chicago in November 2007 to launch the Big Push for Midwives, a nationally coordinated advocacy campaign to achieve the goal of regulation and licensure of CPMs in all 50 states. Mary Lawlor, CPM, represented NACPM at the summit and participates in an on-going advisory committee for the Big Push. Childbirth activists from the campaign's participating states are pooling their resources and experience to optimize advocacy efforts for CPMs in 2008.

The Big Push does not dictate the message but works with local midwives and consumers to develop effective local messaging and strategy for successful legislative efforts to license CPMs. They provide advocacy training, research and communication services, media relations and on-line fundraising. The goal of the Big Push is to push back against the attempts of the American Medical Association Scope of Practice Partnership to deny American families access to legal midwifery care and to fully integrate the Midwives Model of Care into the health care systems of our states. Learn more and offer your support at [www.thebigpushformidwives.org](http://www.thebigpushformidwives.org)!

### **NACPM BOARD OF DIRECTORS**

Mary Lawlor, CPM, President  
Dolly Browder, CPM, Secretary  
Suzy Myers, CPM, Treasurer

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Members and others are invited to submit articles of interest to CPMs for consideration for publication. Deadlines for submission will be listed at [www.nacpm.org](http://www.nacpm.org).

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## Join NACPM NOW!

NACPM is working hard for you and the women you serve! NACPM urgently needs the support of your membership to build the strength to accomplish these goals. Join or renew online now at [www.nacpmcommunity.org](http://www.nacpmcommunity.org) or download the registration form at [www.nacpm.org](http://www.nacpm.org) and join by mail. We appreciate your support!

Take a tour of the NACPM website at  
[www.nacpm.org](http://www.nacpm.org)  
to see our new look and improved function!

### NACPM Offers At-A-Distance CEUs

The NACPM informative full-day workshop on *The Newborn* is now available on DVD with MEAC approved at-a-distance CEUs! These DVDs present 5 speakers in 1-2 hour presentations on various important topics on newborn care, including Joseph Chilton Pearce. Purchase of the DVDs and easy instructions are available at "CEU-DVDs" at [www.nacpm.org](http://www.nacpm.org).

### Friends of NACPM:

It is now easy to donate to NACPM on-line at [www.nacpmcommunity.org](http://www.nacpmcommunity.org). Your support is greatly appreciated!

### Join us at MANA 2008 in October

Plan to attend the NACPM-sponsored workshop: "Change is Coming – What You Need to Know about the Elections and Health Care Reform." This workshop is specifically designed for midwifery advocates who want to make sure that women will have improved access to midwives in the years ahead and that midwives will be adequately compensated for their work.

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