

ANNUAL REPORT 2021

BUILDING AN EQUITABLE
& SUSTAINABLE FUTURE



Introduction

2021 was a year of growth, change, and rising to challenges for ACNM. The 2021-2024 Strategic Plan was implemented, shifting ACNM's priorities to adapt to changes in membership, the midwifery profession, and the current landscape for maternal health care. [ACNM's 2021-2024 Strategic Plan](#) puts our shared vision, mission, and values into action, positioning ACNM to be a catalyst for midwifery capacity, education, advocacy, and practice in the United States.

Diversity, Equity, & Inclusion remained ACNM's number one strategic goal and priority. The organization took a holistic approach to addressing change, working with a Diversity, Equity, Inclusion, & Belonging (DEIB) partner to create a DEIB Strategic Plan that incorporates member feedback and previous work to develop meaningful goals and initiatives.

As the COVID pandemic stretched into its second year, ACNM faced the challenge of keeping members engaged and supported. ACNM expanded learning opportunities, created a new membership category for retired midwives, and supported midwives of color through a revamped mentorship program and other affiliate activities. While membership was flat, ACNM ended 2021 with no net loss of members and a more stable foundation on which to anchor an achievable growth strategy.

ACNM participated in over 350 virtual meetings with hill staff, representatives, senators, and various federal agencies to continue building support for and educating about the value of midwives and midwifery to the care continuum. To support future advocacy efforts and the national advancement of midwifery, the new Scope of Practice was released that includes gender-inclusive language. ACNM received landmark grant awards to support projects on equity in midwifery education and a much-needed midwifery workforce study. Internationally, work continued in Madagascar and Afghanistan, protecting and advancing midwifery work abroad.

ACNM, as an organization, made significant strides in 2021 to secure human resources, financial resources, expanded and improved technology and volunteer expertise to advance the strategic plan. ACNM increased financial resources and made improvements in Information Technology, grew staff expertise, focused on non-dues revenue, and continued to collaborate with other partners and stakeholders on advancing midwifery and maternal healthcare.

Our partners also had a successful year. The A.C.N.M. Foundation awarded close to \$300,000 in scholarships, grants, and awards to individual midwives in support of their strategic goals and priorities. The Accreditation Commission for Midwifery Education held interest meetings with six different groups planning to start new midwifery education programs, and reviewed nine programs for pre-accreditation and/or accreditation. The *Journal of Midwifery and Women's Health* released an influential new virtual issue, [Health Care for Transgender and Non-Binary Individuals](#) and the 2021 editorial resource on [language to promote equity](#).





STRATEGIC GOAL 1:

Diversity, Equity, & Inclusion

We began 2021 with a strong focus on Diversity, Equity, Inclusion, and Belonging (DEIB). ACNM began applying a holistic approach to addressing change rather than focusing on one-off projects that would not address the deeper transformation required to create top-to-bottom change both within the organization and impacting the profession.

In the spring of 2021, we engaged a DEIB expert to partner with key volunteer stakeholders to create a multi-year strategic plan, reach a consensus on our collective goals, develop initiatives around those goals, and determine how we would measure success. The project included looking back at previous reports prepared by consultants engaged by ACNM, deploying a survey to seek input from members and non-members, conducting stakeholder focus groups, and taking into account other work that had been done to date. ACNM formed the DEI Strategy Team which included members of the ACNM Board, DEIB Committee, and ACNM staff who collaborated with our DEIB expert to synthesize that information and form the goals and initiatives for the DEIB Strategic Plan.

Special thanks to Lucinda Canty, PhD, CNM; Kathryn Carr, CNM, MSN, FACNM; Helena Grant, MS, CNM, LM, CICP; Colleen Donovan-Batson, CNM, MS; Michelle Drew, CNM, MPH, FNP, DNP; Charlotte Morris, CNM, FACNM, MS, MSN, DNP; Cara Krulewitch, CNM, PhD, FACNM, FAAN; Michelle Palmer, CNM, FACNM, MSN; Jaye Clement, MPH, MPP; and Theresa Coley-Kouadio, CNM, FACNM, ARNP for their excellent work. The final plan was presented to the ACNM Board and approved during its December meeting. Details of the plan can be found on the [ACNM DEIB page](#).



Additional work in 2021 by ACNM in concert with the ACNM DEIB strategy included:

- ACNM's release of an [apology letter](#) and a [Truth and Reconciliation Resolution](#)
- Implementation of a racial equity lens tool to ensure that any item brought before the ACNM Board of Directors takes this perspective into account
- Regular BIPOC student meetings held throughout 2021
- Doubling the Racism and Health Disparities content from the previous year and adopting Dismantling Racism in Midwifery as the theme of the 2021 ACNM Annual Meeting and Exhibition
- Providing free publication bundles to 50 recent graduates and new midwives of color

In 2022, ACNM continues to further the DEIB strategy as a demonstration of its commitment to a more diverse and equitable midwifery profession.



STRATEGIC GOAL 2:

Member Engagement & Support

As the Covid pandemic stretched into its second year, ACNM faced the challenge of keeping members engaged and supported in the absence of live meetings which, in ordinary years, have provided valuable face-to-face interactions. Our members love being together and were still able to find connection and community through well-attended virtual meetings. In addition, engagement in our online community Connect was strong.

Annual Meeting

The 66th Annual Meeting & Exhibition pivoted from an in-person meeting to a completely virtual event and was still able to attract over 1,400 attendees, sponsors, and exhibitors, surpassing our goals for attendance and sponsorships. The event attracted such keynote speakers as Shafia Monroe, speaking on “Dismantling Racism in Midwifery: Acknowledging Racial Trauma in Midwifery,” and a moderated conversation with Angela Davis on reproductive and racial justice and courage in the face of uncertainty. Even though it was a virtual event, the Annual Meeting gave attendees the opportunity to polish professional and clinical skills, learn the latest evidence-based research, share knowledge and experiences, and celebrate the work that midwives are doing to advance maternity and women’s health care. The Annual Meeting offered over 85 CE credits, with sessions and workshops on racism and health disparities, clinical, research, academic education, global midwifery and ‘Midwifery Matters,’ topics on the practice, life, and impact of midwives.

Midwifery Works and LEAD

Midwifery Works is the professional development conference produced by ACNM and designed by the Midwifery Business Network. This highly affordable conference focused on helping midwives acquire and enhance their business and management skills, offering over 12 CE credits and post conference workshops to the 166 attendees. Education sessions included topics like “Midwifery Paradox in the US: Nurturing Others but Not Always Each Other” with Rhonda Johnson, and “Daring Leadership for Midwives” with Suzanne Wertman.

ACNM was pleased to present the Midwives LEAD (**L**earn, **E**ngage, **A**scend, **D**eliver) Leadership Development Program in Memphis. With notable speakers like Denise Smith, Nikia Grayson, Michelle Munroe, and Amber Price, this program was designed to engage midwives in a unique professional development experience that framed leadership as the ability to enhance personal and professional performance, build relationships, cultivate excellence, and sustain energy for productive influence, agency, and motivation to enact positive change. The 31 attendees (accepted in a competitive process) engaged with their peers and gained critical leadership knowledge and skills for today’s healthcare environment. The attendees have had follow-up community-building monthly meetings facilitated by Division of Organizational Capacity chair Michelle Munroe.

Expanded Learning Opportunities

ACNM tripled the number of online learning events from prior years and introduced more consistent educational content for members throughout the year. ACNM finalized an ambitious and comprehensive strategy for providing state-of-the-practice midwifery education in both live and on-demand formats.

ACNM led 32 online webinars with 30 continuing education credits available for attendees. Webinars featured a variety of speakers: midwives, gynecologists, nurse-practitioners, and representatives of organizations dedicated to eradicating diseases. Topics ranged from immunization in pregnancy, breastfeeding troubleshooting, human trafficking, and post-partum pelvic pain. Several sessions were devoted to eliminating bias as well as caring for unique communities such as veterans. Many of the 2021 webinars are available for viewing on the ACNM [Online Learning Center](#). In addition to the online webinars, ACNM offered several rounds of [The Midwife as Surgical First Assistant](#) training, a combination of videos, tests, and an all-day live-on-video workshop with hands on training and supervision by the instructors.

Keeping Retired Midwives Engaged

ACNM launched a new member category to better engage our retired community. The Active-Retired category was launched in Summer 2021 to provide an affordable membership level for midwives who, while retired from practice, remain a vital source of energy, experience, and history.

Supporting Midwives of Color

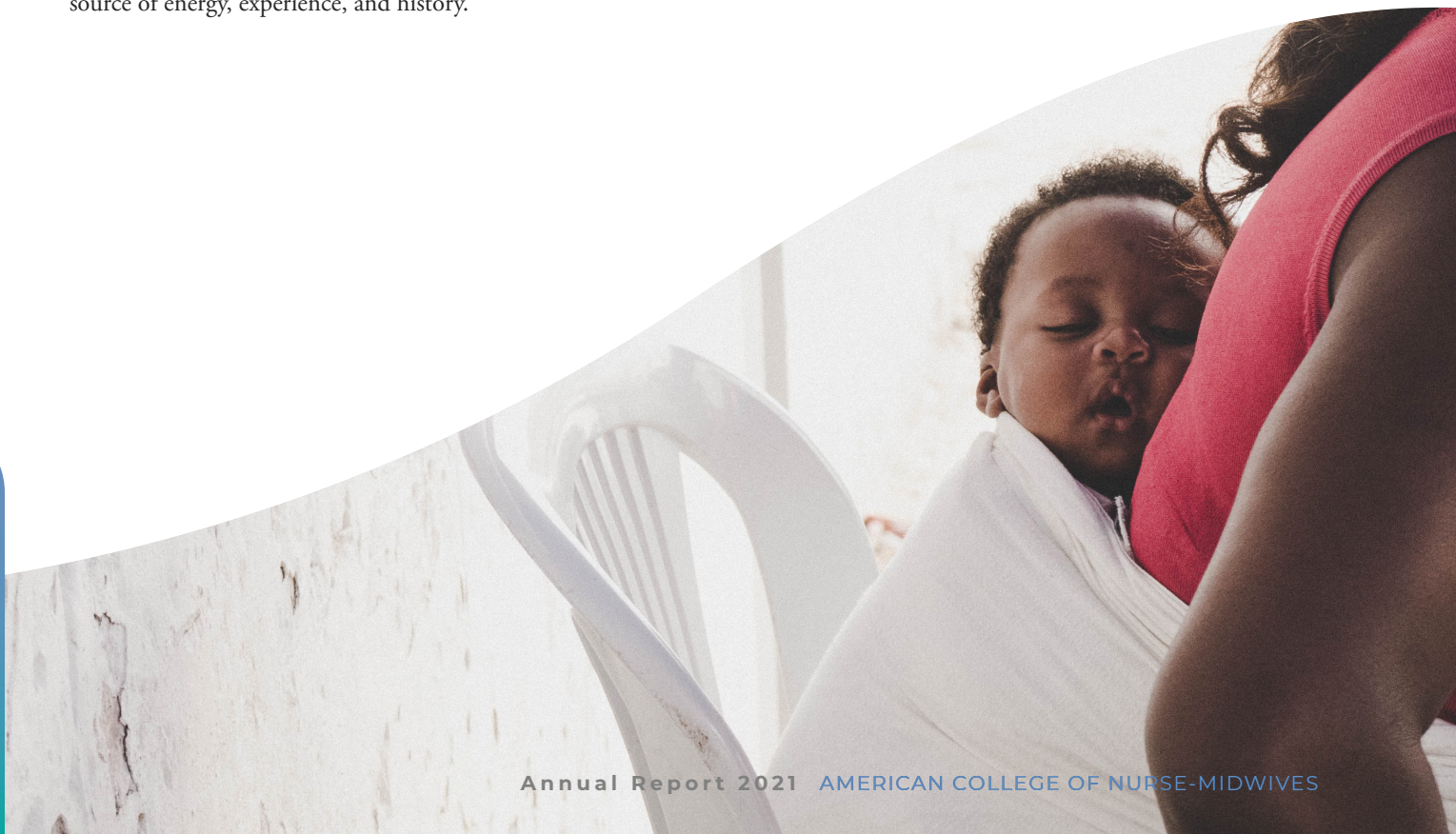
The Midwives of Color Committee, in collaboration with the ACNM membership team, embarked on a redesign of their mentoring program to maximize successful matches between mentors and mentees. To streamline this and other mentoring programs, ACNM invested in a technology solution to automate many of the more time-consuming tasks involved in mentor matching while also putting more control in the hands of the participants.

California and Washington state affiliates initiated a BIPOC appreciation venture by offering a 100% discount on affiliate dues for all members identifying as BIPOC. The initiative has been extended through the end of 2022.





Several affiliates participated in summer, fall, and end of year dues sales, partnering with ACNM to grow membership.

Supporting Affiliates and Caucuses

In 2021 ACNM conducted webinars that provided affiliate leaders with clarity on ACNM's strategic goals, guidelines on preserving working materials for the daily operation of affiliates and negotiating archival preservation of meaningful documents. Additionally, in September of 2021, ACNM supported the Midwives for Universal Health Caucus by conducting a webinar focusing on the impact of patients declining medically necessary intervention because they cannot afford it.



Communications and Membership Statistics

SOCIAL MEDIA FOLLOWERS	ISSUES OF <i>MIDWIFERY NOW</i>	WEBSITE TRAFFIC 
 28,824 (-6%)  18,629 (+5%)  7,497 (+9%)	Issues: 52 (+5%) Open Rate: 31.3% (+2.15%)	Visitor Sessions: 534,877 (+5%) # Pages Visited: 1,818,581 (average 3.4 pages per visit)

2021 MEMBERSHIP BY CATEGORY

Data from 12/31/2021

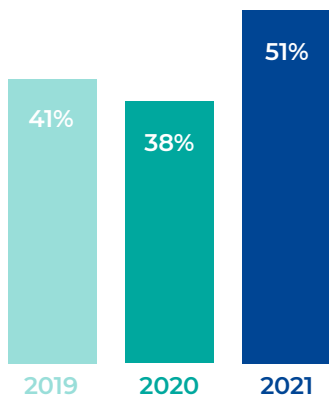
Total Count	6821
Active	3118
Student	1656
Active-Supporting	269
Active-Retired (new July 2021)	299
Active-New Midwife	564
Active-Advancing	481
Active-Life (incl 65+ & 55-64)	294
Associate	140

With a slight increase in 2021 compared to 2020, membership was generally flat. Good news: no major net loss and 2021 saw the retention rate return to pre-pandemic level of 75%.

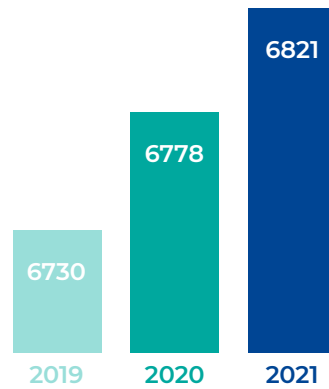
In 2021 there was an attrition of 1630 members across categories. This was offset by 1220 new joins and 453 rejoins resulting in a net gain of 43 members. 300 of the 453 rejoins happened in the last 60 days of the year as a result of a targeted reclamation campaign. This serves as an indicator that those efforts should continue as a part of our growth strategy.



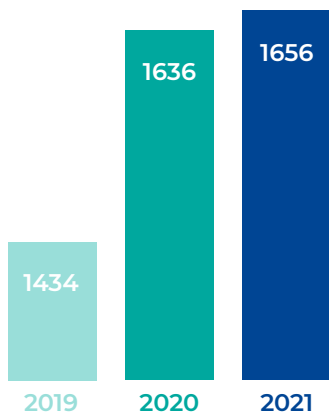
MARKET SHARE OF CNMS AND CMS



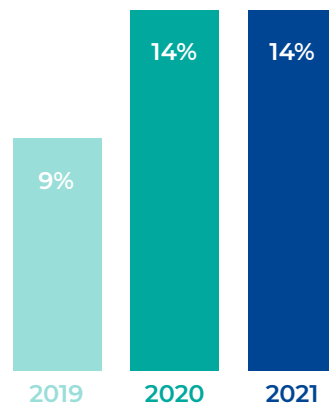
TOTAL ACNM MEMBERSHIP



ACNM STUDENT MEMBERS



PERCENTAGE OF MEMBERS IDENTIFYING AS BIPOC





STRATEGIC GOAL 3:

Policy, Advocacy, and Affiliate Support

At the federal level, ACNM members and staff participated in over 350 virtual meetings with legislators, Hill staff, and various agencies within the Department of Health and Human Services (HHS) to continue building support for and educating about the value of midwives and midwifery to the care continuum. We continue to brand ACNM and the profession on Capitol Hill and have made great headway in being seen as a valuable resource in the maternal health space for those in charge of influencing and implementing policy. Our ultimate goal is to mainstream midwifery, so we can increase access to midwifery care.

Improving access to evidence-based midwifery care helps ensure that all women, birthing people, and babies are served by a maternal health system that delivers safe, timely, and patient and family-centered care. Midwifery is part of the solution to addressing the maternal health crises. To ensure access to midwifery care, we must establish midwifery as a standard of care for women and gender-diverse people in the United States.

ACNM continues to advocate at the state and federal level for removal of barriers that prevent midwives from serving the community by:

- Removing supervision and collaborative practice requirements as a condition of practice
- Ensuring parity in payment, access, and recognition of midwifery credentials
- Establishing a robust and diverse midwifery workforce

Inaugural Health Policy Summit and Hill Day

The 2021 Virtual Health Policy Summit took place on Sunday, November 13, 2021 and included live plenary sessions, on-demand education sessions, and networking events. ACNM's 2021 Virtual Hill Day took place on Monday, November 14, 2021. ACNM members attended over 100 virtual meetings with congressional legislators and health policy staffers to educate them about midwives,



midwifery-led care, and how to improve maternal health outcomes and address racism and inequities within our nation's care continuum. This event helped elevate the strategic priorities of the college and the immediate needs of midwives and midwifery practices nationwide.

A Busy Legislative Year

January 2021 saw the swearing in of the 117th session of Congress and the reintroduction of several maternal health initiatives in both the House of Representatives and Senate to address maternal mortality and morbidity, address racism and racial inequities in healthcare, and improve access to a robust maternal health workforce in underserved areas. ACNM worked hard to garner support for the following bills:

■ **Midwives for MOMs** - Midwifery supporters Representatives Lucille Roybal-Allard (D-CA) and Jamie Herrera Beutler (R-WA), and original cosponsors, Katherine Clark (D-MA) and Ashley Hinson (R-IA) and Senators Ben Ray-Lujan (D-NM) and Lisa Murkowski (R-AK) introduced the [*Midwives for Maximizing Optimal Maternity Services \(MOMS\) Act*](#) in both the House and Senate on May 19, 2021. This bipartisan, bicameral legislation seeks to improve maternal health outcomes by increasing access to high-quality, evidence-based midwifery care and nationally certified midwives nationwide. The Midwives for MOMs Act establishes two new funding streams under Title VII (Health Professions and Training Programs) and



Title VIII (Nursing Workforce Development Programs) of the Public Health Service Act specifically for accredited midwifery education programs. The Midwives for MOMS Act aims to increase the number of midwives educated by accredited midwifery programs through a Health Resources and Services Administration (HRSA) administered grant program that will directly support student midwives, establish and expand midwifery programs, including within Historically Black Colleges and Universities and other Minority Service Institutions, and ensure support for increasing the number of preceptors at clinical sites to mentor students training to become CNMs, CMs, or CPMs. The legislation takes deliberate steps to address the health disparities that disproportionately impact Black, Brown and Indigenous mothers and pregnant and birthing people by prioritizing grant funding to midwifery programs that effectively demonstrate a focus on strengthening and increasing racial and ethnic representation with the goal of creating a more diverse and equitable midwifery workforce.

■ **BABIES Act** - This bipartisan and bicameral legislation (H.R. 3337 / S. 1716) was introduced in the House by Assistant Speaker Katherine Clark (D-MA-5) with co-sponsors Rep. Jaime Herrera Beutler (R-WA-3), Rep. Lucille Roybal Allard (D-CA-40) and Rep. Ashley Hinson (R-IA-1). In the Senate it was introduced by Senator Ben Ray Lujan (D-NM). Birth centers have promising results to both support the health of infants and mothers while also resulting in cost saving. From 2013 to 2017, the Centers for Medicare and Medicaid Services (CMS) conducted the Strong Start for Mothers and Newborns Initiative. This project funded three models of prenatal care for Medicaid and CHIP beneficiaries and found that birth centers, a midwifery model of care, resulted in lower rates of preterm birth, lower rates of low birthweight, lower rates of C-section, and cost savings of \$2,000 per mother-infant pair. The BABIES Act would build off the Strong Start Initiative by creating a demonstration payment program under Medicaid. The legislation provides guidance to develop a prospective payment

system (PPS) that would reimburse birth centers for prenatal care, perinatal care, and postpartum mother and infant care. By providing a model of cost coverage for freestanding birth centers, we can continue to use cost-effective, creative solutions to improve maternal mortality and infant outcomes.

■ **Black Maternal Health Act of 2021 (Momnibus)** - On February 7, 2021, Congress reintroduced a sweeping package of twelve maternal health-related bills that seek to address racism and racial inequities disproportionately impacting pregnant and birthing people in the United States. Championed by House Black Maternal Health Caucus co-founders, Representatives Lauren Underwood (D-IL) and Alma Adams (D-NC), and Senator Cory Booker (D-NJ), the Black Maternal Health Act of 2021 seeks to address many of the underlying causes of a broken maternal health care system that disproportionately impacts Black and Brown communities. The 'Momnibus' centers Black and Brown pregnant and birthing people by taking steps to address some of the root causes that have led to the staggering and abysmal maternal health statistics impacting these communities. The 'Momnibus' seeks to invest in training a cadre of perinatal health providers to improve upon and better address the significant disparities in maternal and infant health outcomes found in Black and Brown communities.

■ **Mothers and Offspring Mortality and Morbidity Awareness (MOMMA) Act** - On February 24, 2021, the Senate reintroduced MOMMA Act, critical legislation that seeks to reduce the disparate maternal and infant morbidity and mortality rates, especially among Black and Brown birthing people and infants. Spearheaded by Senators Richard Durbin (D-IL) and Tammy Duckworth (D-IL), the MOMMA Act would, among other initiatives, establish grant opportunities for entities with proven approaches to improving our nation's mortality rate by offering better maternal and postpartum health care. Specifically, the MOMMA Act would invest federal funding in the Alliance for Innovation on Maternal Health (AIM) program, a national partnership of organizations, including ACNM, with goals improving the culture of care to eliminate preventable maternal mortality and severe morbidity across the care continuum. Through the implementation of a comprehensive set of policies to improve data collection, dissemination of information on





effective interventions, and expansion of access to health care and social services for postpartum people, the MOMMA Act is another piece of critical legislation that if realized, can help address escalating rates of maternal mortality and morbidity disproportionately impacting these communities.

ACNM Midwifery “Wins” in 2021

The recent appropriations wins were included in this report because these were supposed to be agreed upon and passed in 2021 - there was a delay this year.

■ After several months of negotiation, Congress finally passed a \$1.5 trillion spending bill funding the federal government through September 30, 2022. Signed by President Biden on March 15, the legislation includes all 12 annual appropriations bills for the current fiscal year (FY 2022) along with \$13.6 billion in financial support for Ukraine. The full bill text can be found [here](#), and the joint explanatory statement for Division H (Labor, Health and Human Services and Labor) can be found [here](#).

■ There are several “wins” for midwifery and maternal health that seek to help improve the people, families, and communities that midwives serve. ACNM is extremely pleased that Congress appropriated \$3.5 million in funding this budget cycle for accredited midwifery education through HRSA’s Scholarships for Disadvantaged Students (SDS) Program. This targeted funding is on its third year and is a precursor to our larger efforts to pass legislation, via the Midwives for Maximizing Optimal Maternity Services Act (H.R. 3352/S. 1697), to permanently authorize an annual funding program for accredited midwifery education programs under Title VII and Title VIII of the Public Health Service Act.

■ The \$3.5 million represents an increase in funding of \$1 million to help provide future economic support for students attending an accredited midwifery program that educate future CNMs, CMs and CPMs. This boost in funding from the previous two appropriations cycles is critical and demonstrates Congress’ commitment to investing in accredited midwifery education and helping to build a more racially and ethnically diverse maternal health workforce. ACNM applauds House Labor, Health and Human Services and Education Appropriations Subcommittee members, Representatives Lucille Roybal-Allard (D-CA) and Jamie Herrera Beutler (R-WA) for their unwavering support for investing in midwifery education and thereby increasing access to a robust and diverse midwifery workforce.

■ Additional information will be forthcoming from ACNM on what this boost in funding means for the current and/or future recipients (i.e., the accredited programs) of HRSA’s SDS grants. The current SDS program funded the following midwifery education programs at \$650,000 per year for the past two years: CSU Fullerton, State University of New York, University of Washington, and Bastyr University. ACNM has yet to determine whether this increase in funding for 2022 will allow additional midwifery programs to apply or whether the funding will be “banked” for the next SDS “notice of funding opportunity” in 2024. Stay tuned!

Funding opportunities for Maternal Health, Midwifery and Nursing Stakeholders within the FY 2022 Appropriations Bill Include:

■ \$20,000,000 in funding for the establishment of a **Rural and Maternal Care Obstetric Training Demonstration**. This new program would provide grants to accredited schools of allopathic medicine, osteopathic medicine, and nursing, and

other appropriate health professional training programs, to establish a training demonstration program to support training for physicians, medical residents, fellows, nurse practitioners, physician assistants, nurses, certified nurse-midwives, relevant home visiting workforce professionals and paraprofessionals, or other professionals who meet relevant State training and licensing requirements, as applicable, to reduce preventable maternal mortality and severe maternal morbidity by improving prenatal care, labor care, birthing, and postpartum care in rural community-based settings.

- \$12,000,000 in funding for the establishment of a new **Rural Obstetric Network Grant Program at HRSA**. This program seeks to establish collaborative improvement and innovation networks to improve maternal and infant health outcomes and reduce preventable maternal mortality and severe maternal morbidity by improving maternity care and access to care in rural areas, frontier areas, maternity care health professional target areas, or jurisdictions of Indian Tribes and Tribal organizations. Details about this new program will be forthcoming.

- \$13,000,000 for **Advanced Education Nursing** to expand training and certification of Registered Nurses, Advanced Practice Registered Nurses, and Forensic Nurses to practice as sexual assault nurse examiners.

- \$1,000,000 within the **National Health Service Corps** to implement requirements contained in the Improving Access to Maternity Care Act, including establishing criteria for and identifying Maternity Care Target Areas and collecting and publishing data on the availability and need for maternity care health services in health professional shortage areas.

- \$12,000,000 in funding for the **Alliance for Maternal Health Safety Bundles (AIM)**.

- \$6,000,000 in funding for **Rural Maternity and Obstetrics Management Strategies**, which supports grants to improve access to and continuity of maternal and obstetrics care in

rural communities by increasing the delivery of and access to preconception, pregnancy, labor and delivery, and postpartum services, as well as developing sustainable financing models for the provision of maternal and obstetrics care.

- \$29,000,000 in funding for the **State Maternal Health Innovation Grants**.

- \$56,000,000 in funding for the CDC's **Safe Motherhood and Infant Health Programs**. This funding allows for the expansion of Maternal Mortality Review Committees and Perinatal Quality Collaboratives to all 50 States and territories, and for increased support to current States and territories, as well as increased support for other programs including Sudden Unexplained Infant Death.



- \$4,000,000 in funding to support the **Maternal Mental Health Hotline**.

- \$25,000,000 in funding to conduct a demonstration program on **Pregnancy Medical Homes**.

- Requires a study of the impact of COVID-19 on the **Rural Nursing Workforce**.

- \$82,081,000 in funding for the **Advanced Nursing Education Program** which supports the traineeships and faculty and curriculum development to increase the number of qualified nurses and APRNs in the primary care workforce.

- \$51,913,000 in funding for the **Nursing Education, Practice, Quality, and Retention Program**, which supports academic, service, and continuing education projects to enhance nursing education, improve the quality of care, increase nurse retention, and strengthen the nursing workforce.

- \$15,000,000 in funding for the **Nurse Practitioner Optional Fellowship Program**, which supports grants to establish or expand community-based nurse practitioner residency and fellowship training programs that are accredited, or in the accreditation process, for practicing postgraduate nurse practitioners (NPs) in primary care or behavioral health. Training specialties

include Certified Nurse-Midwives and family, adult family, adult-gerontology, pediatric, women's health care, and psychiatric-mental health.

- \$26,343,000 in funding for **HRSA's Nursing Workforce Diversity Program**, which increases nursing education opportunities for individuals from disadvantaged backgrounds by providing student stipends, scholarships, and preparation and retention activities.

- \$108,635,000 in funding for the **Nurse Corps Scholarship and Loan Repayment Program**, which supports scholarships and loan repayment assistance for nurses and nursing students committed to working in communities with inadequate access to care.

- \$30,500,000 for the **Nursing Faculty Loan Program**, which supports schools of nursing to provide loans to students enrolled in advanced nursing education programs who are committed to becoming nurse faculty.

Other Maternal Health Wins

- To help improve maternal health and coverage stability and to help address [racial disparities](#) in maternal health, a provision in the [American Rescue Plan Act](#) of 2021 gives states a [new option](#) to extend Medicaid coverage for low-income



pregnant and postpartum people. This new law helps to address the gaps in maternal health coverage for people who have their maternity care covered by Medicaid by affording states the option to expanding coverage from 60 days following pregnancy to 12 months via a state plan amendment.

States that elect the new option must provide full Medicaid benefits during pregnancy and the extended postpartum period. This new option takes effect on April 1, 2022, and is available to states for five years. Currently, 12 states have extended coverage: CA, IL, LA, MD, MI, NJ, NM, NC, OH, PA, SC, TN, and VA. While still optional, this new law is a precursor to federal legislative efforts that seek to make 12-month postpartum coverage under Medicaid mandatory.

- **HHS Announces Efforts to Help Expand Nationwide Access and Coverage for High-quality Maternal Health Services** - December 7, 2021, the White House hosted the first-ever Maternal Health Day of Action with a nationwide call-to-action to address maternal mortality and morbidity. As part of Vice President Kamala Harris's Call to Action to Reduce Maternal Mortality and Morbidity, the U.S. Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), is taking steps to improve maternal health and support the delivery of equitable, high-quality care for pregnancy and postpartum care. CMS intends to propose a "Birthing-Friendly" designation to drive improvements in perinatal health outcomes and maternal health equity. The designation would initially identify hospitals that provide perinatal care, are participating in a maternity care quality improvement collaborative, and have implemented recommended patient safety practices.

CMS will use data that hospitals regularly provide to the Hospital Inpatient Quality Reporting Program's Maternal Morbidity Structural Measure to inform Birthing-Friendly designations decisions. Hospitals will begin submitting this data in May 2022 and CMS will begin posting this data in the fall of 2022. CMS will then post the first round of Birthing-Friendly designations on its website in the fall of 2023.

It is likely that CMS will broaden the criteria it will use to determine Birthing-Friendly designations in the future and ACNM is working with the administration to ensure that access to midwives and midwifery-led care models is one of the data indicators used in the future.

State Wins

■ In 2021, we saw **CMs get licensed in DC, Maryland, AND Virginia!** We also saw laws passed for more practice authority in Virginia, Medicaid reimbursement equity in Connecticut, midwifery led-birth centers in New York, funding for midwifery education in California, and birth center funding in Illinois. Advocacy campaigns for our legislative priorities, including health equity and addressing the national maternal health crisis, continue in Alabama, Arizona, Colorado, Delaware, Georgia, Iowa, Indiana, Kansas, Louisiana, Maine, Massachusetts, Minnesota, Nebraska, Nevada, New Jersey, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Washington state, and Wisconsin.

■ Governor John Carney signed House Bill 21 and companion House Bill 141 into law in 2021, making **Delaware the second state to adopt the APRN multi-state licensure compact.** This compact language retires the restrictive requirement for collaborative practice agreements with physicians. ACNM's Delaware affiliate worked with other APRN stakeholders to reach this measure which has the potential to increase access to midwifery care.

■ **Medicaid will now reimburse services provided by Connecticut CNMs at the same rate paid to physicians.** When the Connecticut General assembly approved the 2022-2023 budget it included funding for pay parity for nurse-midwives working with patients insured by Medicaid. The hard work undertaken by Connecticut ACNM members, allies, and lobbyist Kate Robinson has paid off after many years of advocacy. Stephanie Welsh, CNM, DNP writes, “special thanks to Representative Cathy Abercrombie and Senator Marilyn Moore for “midwifing” this bill through the legislature and budgetary process to make pay parity a reality. We would also like to thank Representatives Toni Walker and Robyn Porter for their support back in the fall of 2018, when they encouraged us to proceed in our efforts.”

■ **The Massachusetts Health Policy Commission released a report about certified nurse-midwives and maternity care in the state.** The data collected complete a powerful picture of the need for increased access to midwifery care. The report made several key recommendations including increasing the numbers of CNMs in practice by improving the public's understanding and awareness of midwifery care and using payment models that are provider-neutral. The commission

also recommended hospitals and payers align policies with the state law that allows CNMs to practice and admit patients without physician supervision. There was also a recognized need to diversify the CNM workforce. Identifying and removing barriers to the establishment and sustainability of freestanding birth centers is also recommended. This report is one that every state could replicate to further access to midwifery care and improve health outcomes.

■ Through careful planning, tireless advocacy and coordinated teamwork the Virginia ACNM affiliate was able to make **Virginia the eighth state in the country to recognize Certified Midwives (CM) and the twenty-eighth state to allow CNMs to practice to the full extent of their education and training and be regulated without physician control.**

■ In May 2021, **Maine enacted a law to require insurance coverage for Certified Midwife services,** further increasing the practice authority of CMs in the United States.

■ In October 2021, California Governor Gavin Newsom signed SB 65, the **California Momnibus Act,** designed to improve maternal and infant outcomes. SB 65 codifies and strengthens the work of the Pregnancy-Associated Mortality Review Committee, which will investigate pregnancy-related deaths and make recommendations on best practices to avoid these preventable tragedies; improves data collection in the Fetal and Infant Mortality Review process; creates a fund to support the midwifery workforce, upon appropriation from the Legislature; establishes a stakeholder workgroup to support implementation of the new Medi-Cal doula benefit; and reduces CalWORKs paperwork requirements for pregnant women.





STRATEGIC GOAL 4:

National Advancement of Midwifery

We know that midwifery in the United States is underutilized and underfunded. Changing perceptions about midwives to positively impact the midwifery practice environment through education, practice, and research is ACNM's goal. As ACNM continues to grow and expand, supporting midwives in a changing landscape is crucial.

The new Scope of Practice was released that includes gender-inclusive language, reflecting our evolving awareness of inclusive and equitable midwifery practice standards. Most notably, ACNM received landmark grant awards from Johnson & Johnson "Our Race to Health Equity" (ORTHE) and the Johnson & Johnson Foundation to support projects on equity in midwifery education and a midwifery workforce study. These projects will not only give us the data needed to bolster the midwifery workforce, but also increase midwifery education programs and subsequently midwifery health care providers and address the recruitment, retention, and graduation of Black, Indigenous, and other midwifery students of color.

ACNM continues its work on multiple other grants, task forces, and projects, engaging with stakeholders in the national advancement work of ACNM and promoting the full scope of the midwife as primary health care providers from across the lifespan.

New Standard Setting Documents

Definition of Midwifery and Scope of Practice of Certified Nurse-Midwives and Certified Midwives: The revision of the ACNM Scope of Practice Document, [*Definition of Midwifery and Scope of Practice of Certified Nurse-Midwives and Certified Midwives*](#), was released in December 2021. About every five years, a Taskforce of ACNM members take on the challenge of updating this standard-setting document. The Scope of Practice (SOP) enumerates the primary clinical functions that define the breadth and depth of midwifery. It is written to align with the Core Competencies document, last updated in 2020, which outlines the basic requisites for graduates of all midwifery education programs. This year, the Task Force, comprised of 28 diverse midwives, was specifically charged by



the ACNM Board of Directors to bring the SOP document into alignment with the gender-inclusive language found in the Core Competencies, reflecting our evolving awareness of inclusive and equitable midwifery practice standards.

Competencies For Doctoral Education in Midwifery: At their December meeting, the ACNM Board of Directors approved revisions to the doctoral level competencies originally developed in 2011 and published in the document "The Practice Doctorate in Midwifery." The review and revision of the document was requested by the BOD at the behest of ACME in anticipation of ACME's development of accreditation criteria for education in midwifery at the doctoral level. In addition, there has been significant evolution in practice/professional doctoral education in the last decade. Several changes to The Practice Doctorate in Midwifery document were proposed. One major alteration was a recommendation to change the title to Competencies for Doctoral Education in Midwifery, bringing the title in closer alignment with other ACNM competency documents – Core Competencies for Basic Midwifery Practice and Competencies for Master's Level Midwifery Education. The change also serves to clarify that these competencies apply to midwifery education that occurs in the context of any doctoral degree (for example, Doctor of Midwifery, Doctor of Nursing Practice, Doctor of Public Health). A new section refers to differences in the practice doctorate and the professional doctorate. The Task Force

decision was to focus upon professional competencies, with the understanding that the definitive clinical competencies were amply addressed in ACNM's Core Competencies document. Thus, those programs which do not encompass clinical care may be thought of as professional doctorates, while those who combine both the Core Competencies and Doctoral Level Competencies may be considered practice doctorates. In addition, the original doctoral competencies in midwifery were considered in the context of advancing expectations for doctoral education and changes in health systems. The competencies were reordered and elaborated to be more specific and congruent with contemporary doctoral expectations in other fields while maintaining flexibility across degrees. Lastly, the document was reviewed and revised to enhance the focus on issues related to equity, diversity, and social justice.

New Clinical Bulletin

The *Journal of Midwifery and Women's Health* published a new ACNM release: Induction of Labor Clinical Bulletin. This is the first clinical bulletin that has author credits. In addition, the journal changed the access point for the tests for CE offerings to the ACNM website. This allows members to keep records of all ACNM-related CEs in our Online Learning Center.

Domestic Grants

■ **Access to Equity in Midwifery Education and Care** (funding announced 2021, project began 2022) - To address disparities in healthy outcomes and structural racism, ACNM has partnered with Johnson & Johnson ORTHE to develop the Access to Equity in Midwifery Education and Care Program. This program focuses on increasing midwifery education programs to increase the number of midwifery health care providers. The program also addresses the recruitment, retention, and graduation of Black, Indigenous and other midwifery students of color. Furthermore, in increasing the number of pathways and programs close attention will be given to Historically Black Colleges and Universities (HBCUs), indigenous/tribal colleges and institutions serving Spanish-speaking students and regions in the US where the gap in outcome disparities is particularly large. Midwifery education and practice works within a larger community and thus any change needs to

engage that community as well. By engaging students, schools, graduates, and clinical sites at the ground level ACNM hopes to synergize its efforts in identifying and addressing barriers and implementing solutions to the complex problem of health equity.

■ **Midwifery Workforce Study** (funding announced 2021, project began 2022) - The Midwifery Workforce Study will conduct a midwifery workforce analysis and identify policy changes needed to expand the midwifery workforce to optimum capacity. The researchers will use data collected by the American Midwifery Certification Board (AMCB) and the Accreditation Commission for Midwifery Education (ACME), to provide the most accurate evaluation of the current midwifery workforce size, capacity, and growth trajectory. Surveys and focus groups will collect information on entry to and exit from midwifery practice. These data will be combined with publicly available data to build a model for an adequate midwifery workforce based on maternal child health outcomes. Analysis of the data by states will identify which state policies facilitate an adequate midwifery workforce that can work to full capacity. Finally, this project will synthesize this information into products, issue briefs, state information sheets, and state score cards, that can be used to advocate for policies that facilitate an adequate midwifery workforce. The grant funded three research fellows who are midwives enrolled in PhD programs.

■ **Alliance for Innovation on Maternal Health (AIM)** - ACNM is a Core Partner of the Alliance for Innovation on Maternal Health (AIM), a national partnership of organizations with the goals of reducing maternal mortality by 1,000 deaths and severe morbidity by 100,000 incidents, improving uptake and content of postpartum care, and providing guidance and implementation strategies on the consistent content and delivery of well-woman care. The purpose of the AIM Program is to equip and empower every state, perinatal quality collaborative, hospital network/system, birth facility and maternity care provider in the U.S to significantly reduce severe maternal morbidity and maternal mortality through proven implementation of consistent maternity care practices. Midwives, in collaboration with representatives from other organizations in the Core Partnership, are developing evidence-based safety bundles focused on the leading causes of maternal morbidity and mortality and



working with state leaders, health departments, and perinatal quality collaboratives, and hospital associations to implement these bundles. Additionally, the AIM Program will provide intensive technical assistance and implementation support to states with the highest rates of maternal morbidity and mortality in our nation.

■ **CDC Immunization Grant** - While the data on the safety and efficacy of vaccines continues to grow, vaccine hesitancy is on the rise. Here at ACNM we believe in the facts and believe that midwives have a moral obligation to promote sound science-based recommendations, this includes the safety of necessity of immunization for mothers and the greater community. For the last 8 years, ACNM has been the recipient of a grant from the Centers for Disease Control and Prevention (CDC) to help improve immunization rates in women. The last two years, ACNM has been working with the American College of Obstetricians and Gynecologists, American Academy of Family Physicians, and Association of Women’s Health Obstetrics and Neonatal Nurses. Under this grant and through ACNM’s partnerships, ACNM has produced a suite of materials for women and midwives to utilize to make informed decision regarding immunization. Additionally, ACNM’s grant work has produced a curriculum on immunizations in pregnancy. This curriculum is free and available to any health care provider.



■ **Fetal Alcohol Syndrome Disorders** - Fetal Alcohol Syndrome Disorders (FASDs) are a leading cause of birth defects and developmental disabilities in the United States and are associated with the consumption of alcohol during pregnancy. Many people of reproductive age may be unaware of the potential risks of alcohol use to their own health or to the health of a developing embryo or fetus. Fear of stigma may also prevent disclosure of alcohol use, particularly during pregnancy. ACNM encourages all certified nurse-midwives (CNMs), certified midwives (CMs) and other reproductive health professionals, to conduct universal alcohol screening as part of routine preconception and prenatal care. To better serve midwives and mothers, ACNM is working through the University of Alaska Anchorage’s Project entitled Women’s Health Nurses & Midwives Collaboration for Alcohol Free Pregnancy (WHNMCP).

■ **Johnson & Johnson: LinkedIn Learning** - ACNM secured a grant from the Johnson & Johnson Foundation in 2020 to create midwifery leadership core competencies and develop 11 courses to test in a digital learning pilot platform: LinkedIn Learning. LinkedIn Learning is a subscription, web-based, asynchronous learning platform that features 14,000 courses and videos from industry-leading experts on a variety of technical topics and power / soft skills. The platform offers content in seven languages and can be optimized for various Wi-Fi connections, including an option to view offline.

■ **Macy Interprofessional Education Grant** - ACNM and ACOG understand the importance of collaborative practice as healthcare professionals learn to become more efficient and effective in the medical field. To help promote and facilitate collaboration, The Josiah Macy Jr. Foundation awarded a grant to ACNM to support The American College of Nurse-Midwives/ The American College Obstetricians and Gynecologists Maternity Care Education and Practice Redesign Project. **The primary goals of this project include:**

- Developing and implementing an Interprofessional Education (IPE) curriculum promotes collaborative practice between obstetrician-gynecologists and midwives and includes core modules, skill-based activities, and inter-professional practice opportunities.
- Aligning accreditation requirements and educational competencies related to UPE for midwifery and obstetrics and gynecology.



- Identifying and resolving barriers to implementing IPE within midwifery and obstetrics and gynecology programs.
- Increasing the number of midwifery graduates long term by exploring ways to add midwifery students to obstetrics and gynecology training locations.

■ **Reducing Primary Cesarean Project** - The Reducing Primary Cesarean (RPC) Project is an ongoing learning collaborative within ACNM's Healthy Birth Initiative (HBI). The RPC Project seeks to reduce the number of Primary Cesarean Births and increase vaginal births. While cesareans can be lifesaving procedures for many who experience abnormalities during labor, there is no substantive evidence that links Primary Cesarean Births to improved health outcomes for birthing parents or their babies. Primary Cesarean Births increase the risk of morbidity and mortality for low-risk women compared to vaginal delivery. ACNM is committed to improving health outcomes for mothers and families across the country. As such, the RPC Project, serves to aid maternity care professionals and health care systems to promote evidence-based practice that supports healthy birth based on each person's unique physiology.

■ **Yellow Chair Foundation**

- At ACNM, our mission is to support midwives, advance the practice of midwifery, and achieve optimal, equitable health outcomes for the people and communities midwives serve through inclusion, advocacy, education, leadership



development, and research. Our values inform our strategic direction. ACNM's commitment to women and their families is shared by the Yellow Chair Foundation. As such, the Yellow Chair Foundation generously has awarded ACNM \$300,000 via the Improving Maternal Health Outcomes by Removing Barriers to Midwifery Care through an Advocacy Lens grant. This operational grant is being used to help ACNM advance its mission and strategic priorities.

ACNM also participated in various work groups, including:

■ **National Partnership for Women and Families** - Raising the Bar: Health Care's Transforming Role - Represented on the subgroup: Employ and Support a Diverse Workforce and participated in the editing and review of *Improving Our Maternity Care Now Through Midwifery report*.

■ **Secretary's Advisory Committee on Infant and Maternal Mortality (ACIMM)** - ACIMM advises the Secretary and the Administrator of the Health Resources and Services Administration on Department programs, including implementation of the Healthy Start Initiative and relevant objectives from Healthy People 2020: Keeping the Nation Healthy. ACNM is represented on the Health Equity Workgroup

■ **COVID-related work** with other organizations such as ACOG, the Society of Maternal Fetal Medicine, and others.



STRATEGIC GOAL 5:

Global Engagement

ACNM continued with its five-year sub-award funded by Management Sciences for Health (MSH)/United States Agency for International Development (USAID), “The Accessible Continuum of Care and Essential Services Sustained (ACCESS) Activity” in Madagascar. Through the ACCESS program, the US government continues providing support to the government of Madagascar in accelerating sustainable health impacts for the nearly 16 million Malagasy people and strengthening the Ministry of Public Health’s stewardship of the health sector. ACNM serves as the coordinating partner for US Clinical Associations (ACNM and the American Academy of Pediatrics). The program was swiftly shifted from in-person workshops to online virtual learning platforms through monthly tele mentoring, an ACCESS U French University portal on maternal and newborn health and planning, and an Alliance for Innovation on Maternal Health (AIM) bundle on Postpartum Hemorrhage (PPH) in two districts.

ACNM also continued implementing a five-year grant funded by MSH/USAID for Afghanistan, “Assistance for Families and Indigent Afghans to Thrive” (AFIAT). ACNM supports a technical assistance package sub-award consisting of revising Afghan medical, midwifery and nursing council strengthening, quality improvement guidelines, reviewing the Afghan National Midwifery Curriculum, and supporting local clinical capacity building teams.



STRATEGIC GOAL 6:

Organizational Capacity & Operational Excellence

ACNM made significant strides in 2021 to secure human resources, financial resources, expanded and improved technology and volunteer expertise to advance the strategic plan.

Increase of Financial Resources and Improvements in Information Technology

We were successful in securing grant funding to underwrite our operational planning. The grant enables the organization to invest dollars in much needed technology upgrades for our internal systems, to include our membership database, learning management system, and financial and reporting systems. These

investments will serve the organization over the next few years, getting ACNM up-to-date on best practices and improving efficiencies.

We were also able to scale back costs by re-investing dollars in long overdue IT solutions that help the organization to upgrade its security settings and data storage while clearing the path for staff to develop a long term IT Roadmap. The Roadmap is scalable and aligns our strategy to budget to keep ACNM on pace with technology changes long term. This is critical to build a stable operational foundation for the organization to grow and build programs.

Growth of Staff Expertise

At the end of 2020, the staff organizational chart was reorganized to align with new ACNM Strategic Plan. The reorganization helps to ensure that staffing expertise and resources align in a way that is complementary to expected outcomes of the plan. In 2021, there were additional staffing hires to add capacity to the National Office staff team, including: a Director of Midwifery Practice, Associate Director of Marketing and Communications, Education Coordinator and Membership Coordinator. Each hire is purposeful in that the expertise directly aligns to goals of the overarching strategic plan.

Non Dues Revenue

In 2021, the organization focused on growing its sponsorship revenue with a goal to increase it by 10% compared to the prior year. We far exceeded that goal and had a 130% increase sponsorship revenue as compared to 2020 with the highest sponsorship revenue the organization has had in more than 10 years.

ACNM Representation and Collaboration on External Projects

We took a critical look at our strategic relationships in 2021 to assess where ACNM should have a seat at the table. Part of our review, included whether we had the capacity and influence to make an impact given the investment of volunteer time, staff time or finances. In some cases, efforts were combined or eliminated if they no longer served ACNM needs given the new Strategic Plan.

We continue to represent the midwifery-led model of care through active liaisons with the following organizations:

- ACOG Committee on Clinical Consensus -Obstetrics
- ACOG Committee on Obstetric Practice
- ACOG-CREOG Council
- ACOG/HRSA Women's Preventative Services Initiative
- ACOG Maternal Mental Health Expert Work Group
- American Academy of Family Physicians
- American Nurses Association
- CDC Advisory Committee on Immunization Practices
- Futures without Violence
- International Confederation of Midwives
- The Joint Commission Perinatal Safety Project
- Maternal Health Expert Advisory Group
- Medicaid and Child Health and Infant Programs Payment and Access Commission (MACPAC)
- National Quality Forum
- NIH Pelvic Floor Disorders Network
- Nursing Alliance for Quality Care
- Planned Parenthood Federation America
- US Breastfeeding Coalition



Financial Statistics

ACNM CONSOLIDATED STATEMENT OF ACTIVITIES (SUMMARY)

For the 12 Months Ending December 31, 2021	2021 YTD Actual	2021 YTD Actual	2021 YTD Actual	2020 YTD Actual	2020 YTD Actual	2020 YTD Actual
	ACNM	PAC	Consolidated	ACNM	PAC	Consolidated
REVENUE AND SUPPORT						
Membership dues	1,559,827		1,559,827	1,676,936		1,676,936
Meetings and exhibits	723,890		723,890	671,601		671,601
grants and contracts	523,674		523,674	597,010		597,010
Publications/Online sales	71,683		71,683	71,349		71,349
Advertising and royalties	327,831		327,831	372,121		372,121
Contributions and sponsorships	160,943	78,634	239,577	144,023	77,957	221,980
Contributed goods and services	0		0	14,674		14,674
Accreditation, divisions, committees fees	414,354		414,354	333,599		333,599
Subscriptions	60,227		60,227	53,760		53,760
Other	597,760		597,760	350,926		350,926
Satisfaction of program restrictions	0		0	0		0
Total Revenue and Support	4,440,189	78,634	4,518,823	4,285,999	77,957	4,363,956
EXPENSES						
Program Services:						
Global outreach	458,930		458,930	257,391		\$257,391
Meetings and exhibits	622,483		622,483	504,977		\$504,977
MPE- Domestic	283,341		283,341	628,392		\$628,392
Membership & communications	511,725		511,725	506,405		\$506,405
Government Relations	354,611		354,611	341,757		\$341,757
Accreditation	205,505		205,505	252,835		\$252,835
Midwifery journal	200,345		200,345	173,044		\$173,044
Committees and Divisions						\$0
Total Program Services	2,636,940	0	2,636,940	2,664,801	0	2,664,801
Support Services:						
Management and general	904,577	71,489	976,066	462,205	66,606	\$528,811
Finance	676,037		676,037	843,620		\$843,620
IT	322,157		322,157	169,416		\$169,416
Total Support Services	1,902,771	71,489	1,974,260	1,475,241	66,606	1,541,847
Total Expenses	4,539,711	71,489	4,611,200	4,140,042	66,606	4,206,649
Change in Assets from Operations	(99,522)	7,145	(92,377)	145,957	11,350	157,307

Financial Statistics

STANDALONE STATEMENT OF ACTIVITIES COMPARED TO BUDGET 2021

	Unaudited Actual YTD 2021	Budget YTD 2021	Budget 2021	Actual vs. Budget Variance	Audited Actual YTD 2020
Revenues	4,440,189	4,791,970	4,791,970	(351,781)	4,286,001
Expenses	4,539,712	4,991,824	4,991,824	(452,112)	4,205,799
Net Profit/Loss	(99,522)	(199,854)	(199,854)	100,332	80,202

CONSOLIDATED STATEMENT OF FINANCIAL POSITION 2021

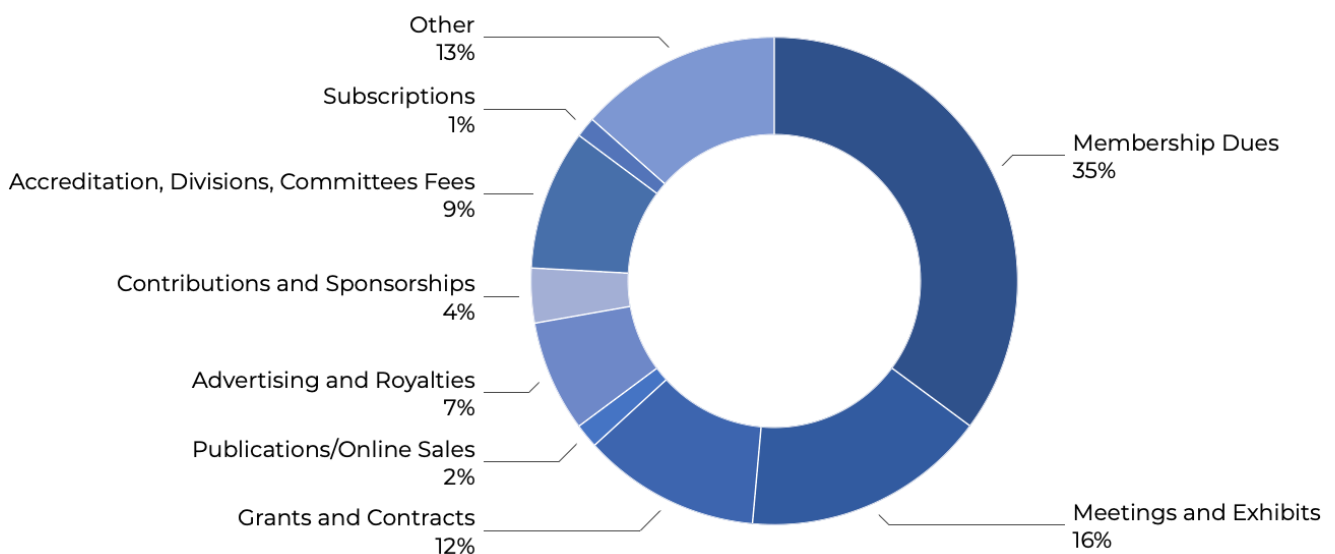
	UNAUDITED 2021	AUDITED 2020
Cash	\$1,150,311	\$ 651,710
Contributions & Accts Receivable, net	90,421	139,171
Prepaid Expenses	157,287	116,070
Inventory	455	455
Investments	1,982,018	1,771,509
Property & Equipment, Intangible & Other Assets, net	626,356	726,268
Total Assets	4,006,848	3,405,183
Liabilities	3,153,048	2,680,337
Unrestricted Net Assets	704,296	641,033
Temporarily Restricted Net Assets	149,505	83,813
Total Liabilities & Net Assets	4,006,848	3,405,183

Financial Statistics

INVESTMENTS 2021

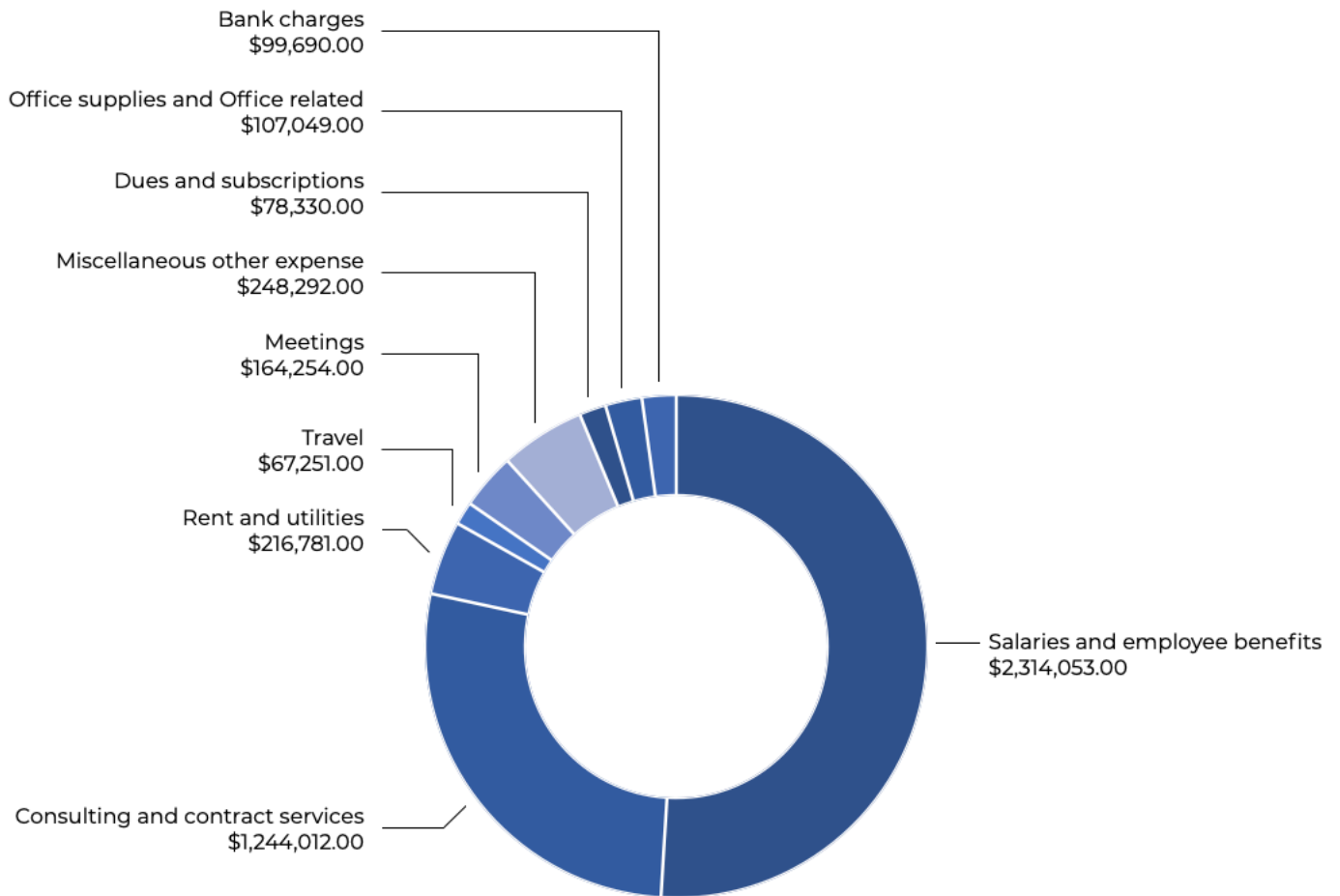
	LONG-TERM RESERVE FUND (LTR)	SHORT-TERM RESERVE FUND (STR)	TOTAL INVESTMENTS
Beginning Balance 1/1/21	\$1,716,746	\$54,763	\$1,771,509
Interest/Dividend Income	61,289	5	61,294
Gains/(Losses)	161,880	—	161,880
Fees	(12,665)	—	(12,665)
Transfers	—	—	—
Ending Balance 12/31/21	\$1,927,250	\$54,768	\$1,982,018
% of Reserve Funds to Annual Budgeted Expenses	30%	—	—

CONSOLIDATED HISTORICAL SOURCES OF REVENUES DECEMBER YTD (IN \$M)

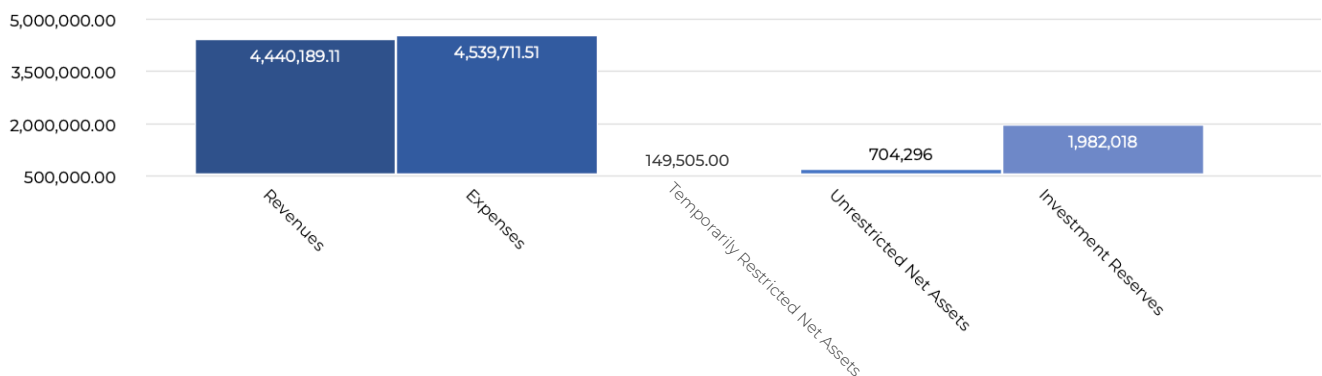


Financial Statistics

CONSOLIDATED HISTORICAL EXPENSES YTD (IN \$M)



HISTORICAL FINANCIAL PERFORMANCE



Thank You

To Our Valued Volunteers

ACNM deeply appreciates its many volunteers. Your contributions allow us to do the work we do as a professional organization. We value you and your commitment to ACNM. More information on the volunteer structure can be found at midwife.org/volunteer.

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ACNM Volunteer Structure

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Affiliate Development & Support Committee: Helene Rippey, CNM, RN, *Chair*

Committee of Midwife Advocates for Certified Midwives: Marian Seliuini, CM, MS, *Chair*

National Government Affairs Committee: Zoe Gutterman, CNM

Political Action Committee: Claire Harper, CNM, *Chair*

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Midwives of Color Committee: Felina Ortiz, DNP, CNM, *Chair*

Students & New Midwives Committee: Erin Morelli, CNM, FACNM and Denise Gonzalez, CNM, *Co-Chairs*

Diversity & Inclusion Committee: Angelita Nixon, CNM, FACNM, *Chair*

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Publications Committee: Eva Fried, DNP, CNM, WHNP, *Chair*

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History & Archives Committee: Winifred Connerton, PhD, CNM, PhD, RN, *Chair*

Bylaws Committee: Alexandra Michel, CNM, FACNM, PhD, *Chair*

Ethics Committee: Ira Kantrowitz-Gordon, PhD, CNM, ARNP, *Chair*

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Networking Committee: Emma Clark, CNM, MHS, MSN, *Chair*

Division of Advancement of Midwifery: Mary Jane Lewitt, CNM, FACNM, *Chair*

Practice Advancement Subdivision:

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Clinical Practice & Healthcare Systems Committee: Kimberly Trout, PhD, CNM, APRN, FACNM, *Chair*

Ultrasound Education Subcommittee: Kristen Ostrem-Niemcewicz, DNP, CNM, FACNM, *Chair*

Business Committee: Christie Bryant, CNM, MS, FACNM, *Chair*

Professional Liability Committee: Katie Page, CNM, FACNM, *Chair*

Quality & Safety Committee: Cathy Emeis, PhD, CNM, FACNM, *Chair*

Education Advancement Subcommittee:

Committee for Advancement of Midwifery Education (CAME):
Suzan Ulrich, CNM, *Chair*

Clinical & Academic Educators Committee: Amy Nacht (Chair)

Continuing Education Committee: Victoria Burslem, CNM, FACNM, MSN, *Chair*

Program Committee: Eileen Thrower, CNM, FACNM, PhD, APRN, *Chair*

Midwifery Works Planning Subcommittee: Christie Bryant, CNM, FACNM, MS, *Chair*

Division of Research: Carrie Klima, PhD, CNM, FACNM, *Chair*

Research Networking Committee: Karen Robinson, PhD, CNM, *Chair*

Research Dissemination Committee: Jenna LoGiudice, CNM, FACNM and Gina Novick, CNM, FACNM, PhD, *Co-Chairs*

Research Survey Committee: Karen Trister Grace, PhD, CNM, MSN, FACNM, *Chair*

Data & Information Management Committee: Ellen Tilden, CNM, *Chair*

Global Research Committee: Nicole Warren, CNM, MPH, *Chair*

Workforce Committee: Kate Woeber, PhD, MPH, *Chair*

Task Forces

Gender Equity Task Force: Jennifer Demma, CNM, *Chair*

Interprofessional Education Task Force: Melissa Avery, PhD, CNM, APRN, FACNM, FAAN, *Chair*

Bullying in Midwifery Task Force: Anna Hanson, FNP-C, MSN, CNM and Letitia Sullivan, CNM, MS, FACNM, *Co-Chairs*

Perinatal Mental Health Task Force: Sara Mertz, CNM, MS, *Chair*

Midwifery Doctoral Level Competencies Task Force: Carol Howe, DNSc, DPNAP, CNM, FACNM, FAAN

Racism in Midwifery Education Task Force: Nichole Wardlaw, CNM, FACNM; Jessica Anderson, DNP, CNM, WHNP, FACNM; Bridget Howard, CNM, MSN; Cara Krulewitch, PhD, CNM, FACNM, FAAN, *Co-Chairs*

Midwifery Residency and Fellowship Program Task Force: Cathy Collins-Fulea, DNP, CNM, FACNM and Cara Busenhart, CNM, FACNM, PhD, APRN, *Co-Chairs*

2021 ACNM Awards and Scholarships

ACNM is proud to recognize the following remarkable midwives, student midwives, affiliates, and midwifery & health care organizations for their excellence and achievements. They exemplify the best in our profession and ourselves

Excellence in Leadership and Innovation Award

Simon Ellis, CNM, ARNP

Lifetime Visionary Award

Peter Johnson, PhD, RN, CNM, FACNM, FAAN

Distinguished Service Award

Karie Stewart, APN, MSN, MPH, CNM

Media Award

Emma Donoghue, PhD, BA: *Pull of the Stars*

Public Policy Award

Holly Smith, CNM, MPH, MSN

Journal of Midwifery & Women's Health Best Research Article of the Year Award

Listening to Women: Recommendations from Women of Color to Improve Experiences in Pregnancy and Birth Care

Molly R. Altman, CNM, PhD, MPH

Monica R. McLemore, PhD, MPH, RN

Talita Oseguera, CNM, MSN

Audrey Lyndon, PhD, RN

Linda S. Franck, PhD, RN

Journal of Midwifery & Women's Health Best Review Article of the Year Award

Consent in Pelvic Care

Stephanie Tillman, CNM

JMWH Mary Ann Shah New Author Award

Women's Contraceptive Perceptions, Beliefs, and Attitudes: An Integrative Review of Qualitative Research

Amy Alspaugh, PhD, CNM

Outstanding Preceptor Award

Jomeka B. Mowery, CNM, WHNP-BC, IBCLC

Julie King, CNM, MSN

Tamika Julien, DNP, CNM, WHNP-BC, CLC

Joyce Garcia-Gonzalez, CNM, MSN

Patricia Haroldson, APRN, CNM, MSN

Donna Grand, CNM, MSN

Esla Aminlewis, CNM, MSN

Emily Malloy, CNM, APNP, IBCLC

Stephanie Goldsmith, CNM, MSN

Catherine Parisi, CNM, MSN

Jaime Thompson, CNM

Christine Weinmeister, MSN, CNM

Tracy S. Abraham, DNP, CNM, APRN-FPA

Carrie Sz Keane, MSN, CNM

Kate Virostko, CNM

Kimberly K. Miller

Phyllis Lynn, CNM, MS

Mari-Carmen Farmer, MSN, CNM, WHNP-BC

Edith Asante, MSN, APRN, CNM

Lauren MacGregor-Banak, APRN, CNM

Sharon Weintraub, CNM, MSN

Jamie A. Hellman, CNM

Excellence in Teaching Award

Anne Cockerham, PhD, CNM, WHNP-BC, CNE, FACNM

Tracey Rippon, MS, CNM

Joan Combellick, PhD, MPH, CNM

Signey Olson, CNM, WHNP-BC

Sharon Weintraub, CNM, MSN

Ronnie Lichtman, LM, CNM, PhD, FACNM

Ginette Lange, CNM, FNP

Ann Forster Page, DNP, APRN, CNM, FACNM

Lydia Apollo, CNM

Eva Fried, DNP, CNM, WHNP

Diane Folk, DNP, CNM

Pamela Pearson, DNP, CNM

Hadja Diallo, MSN, CNM, WHNP-BC

Jennifer Hensley, EdD, CNM, WHNP-BC, LCCE, FACNM

Cara Busenhart, PhD, APRN-NM, CNM, FACNM

Clinical Star Award

Nancy Clark O'Hare, CNM, MS (Region IV)

Health Equity Award

Shirley White-Walker

With Women for a Lifetime Award

Tri-Health Nurse Midwives

Exemplary Affiliate Award

Region I: Maine

Region II: Pennsylvania & Virginia

Region III: Florida

Region IV: Arkansas

Region V: Minnesota

Region VI: Arizona

Region VII: Nevada

2021 ACNM Fellows

In 2021, ACNM bestowed the honor of Fellowship on 81 midwives for their demonstrated leadership, clinical excellence, outstanding scholarship, and professional achievement. We are proud to recognize their outstanding contributions within the profession of midwifery.



Lauren Abrams, CNM, MSN, FACNM
Molly Altman, CNM, PhD, MPH, FACNM
Elizabeth Arnold-Leahy, CNM, LM, DM, FACNM
L. Kim Baraona CNM, DNP, CNE FACNM
Donna Barisich, CNM, MS, FACNM
Julie Blumenfeld, CNM, DNP, IBCLC, FACNM
Carolyn Bottone-Post, CNM, DNP, FACNM
Suzanne M. Carrington, CNM, DNP, FACNM
Linda Karen Church, CNM, MSN, FACNM
Emma Clark, CNM, MSN, MHS, FACNM
Lee S. Clay, CNM, MS, FACNM
Susanna R. Cohen, CNM, DNP, CHSE, FAAN, FACNM
Lastascia Coleman, CNM, MSN, ARNP, FACNM
Joan L. Combellick, CNM, PhD, MPH, MSN, FACNM
Susanrachel Balber-Condon, CNM, LM, DM, FACNM
Elizabeth Cook, CNM, DNP, WHNP-BC, CNL, CPM, FACNM
Jeanann Sousou Coppola, CNM, DNP, CNE, C-EFM, FACNM
Barbara Davenport, CNM, MSN, FACNM
Melissa G. Davis, CNM, FNP, DNP, FACNM
Stephanie DeVane-Johnson, CNM, PhD, FACNM
Meghan Eagen-Torkko, CNM, PhD, FACNM
Jessica Ann Ellis, CNM, PhD, FACNM
Simon Adriane Ellis, CNM, ARNP, MSN, FACNM
Elise N. Erickson, CNM, PhD, FACNM
Melicia Escobar, CNM, WHNP-BC, MSN, FACNM
Christina Felten, CNM, DNP, RNC-OB, PMH-C, FACNM

Karen Johnson Feltham, CNM, PhD, FACNM
Kate T. Finn, MS, CM, CPM, LM, FACNM
Brooke A. Flinders, CNM, DNP, FACNM
Diane Folk, CNM, DNP, MS, FACNM
Gwendolyn A. Foster, CNM, MSN, FACNM
Mary Franklin, CNM, DNP, FACNM
Kimberly Garcia, CNM, WHNP, FACNM
Tamara Joy Gardner, CNM, MSN, FACNM
Ami L. Goldstein, CNM, MSN, FNP, FACNM
Cathy Gordon, CNM, FNP-BC, MS, FACNM
Patricia Hanson CNM, MSN, FACNM
Beth Helme-Smith, CNM, MS, APN, WHNP-BC, FACNM
Susan J. Hernandez, CNM, MSN, FACNM
Kathy S. Higgins, CNM, MS, FACNM
Carol Hirschfield, CNM, MS, FACNM
Donna Jackson-Kohlin, CNM, MSN, FACNM
Ann Konkoly, CNM, MBA, MSN, APRN, FACNM
Theresa Kouadio, CNM, MSN, FACNM
Dianna E. Kristeller, CNM, DNP, APRN, FACNM
Rochelle Lipschutz, CNM, OB/GYN NP, MS, FACNM
Phyllis Lynn, CNM, MS, FACNM
Nancy MacMorris-Adix, CNM, MN, FACNM
Laura Manns-James, CNM, PhD, WHNP-BC, CNE, FACNM
Linda R. McDaniel, CNM, DNP, MSN, RNFA, FACNM
Emily C. McGahey, CNM, DM, MSN, FACNM
Shaunti Meyer, CNM, PhD, FACNM

Alexandra Michel, CNM, PhD, FACNM
 LaVonne M. Moore, CNM, DNP, APRN, BC-WHNP, IBCLC, ICCE, FACNM
 Jeremy L. Neal, CNM, PhD, FACNM
 Emily Neiman, CNM, MS, FACNM
 Nancy A. Niemczyk, CNM, PhD, FACNM
 Robin Page, CNM, PhD, FACNM
 Komkwuan P. Paruchabutr, CNM, WHNP-BC, FNP-BC, DNP, FACNM
 Deborah K. Price, CNM, DrPH
 Krysta Ramirez Henry, CNM, DNP, FACNM
 Gayle L. Riedmann, CNM, MS, FACNM
 Karen Robinson, CNM, PhD, FACNM
 Susan Rooks, CNM, MPH, Capt. (ret.) USPHS, FACNM
 Lee Roosevelt, CNM, PhD, MPH, FACNM
 Tonja M. A. Santos, CNM, MSN, FACNM

Ann M. Schaeffer, CNM, DNP, M.Ed., CNE, FACNM
 Judith Schlaeger, CNM, Lac, PhD, FAAN, FACNM
 Nicole L. Sczekan, CNM, MSN, CARN-AP, FACNM
 Roseanne Seminara, CNM, MS, FACNM
 Amanda McPherson Shafton, CNM, DNP, FACNM
 Denise C. Smith, CNM, PhD, FACNM
 Venus Standard, CNM, MSN, LCCE, FACNM
 Kristin Stovern, CNM, MSN, APRN-C
 Margaret C. Taylor, CNM, DNP, FACNM
 Joanne S. Tennyson, CNM, WHNP-BC, MSN, FACNM
 E. Brie Thumm, CNM, PhD, MBA, FACNM
 Stephanie Tillman, CNM, MSN, FACNM
 Kim Updegrove, CNM, MSN, MPH, APRN, FACNM
 Shaughanasee Vines, CNM, DNP, CNE, FACNM

Our Partner Organizations

The A.C.N.M. Foundation, Inc.

The A.C.N.M. Foundation, Inc. ('the Foundation') is a 501 (c)(3) nonprofit organization established in 1967 with the charitable purpose of advancing public knowledge and understanding of midwifery and supporting the strategic priorities of American College of Nurse-Midwives (ACNM). Its mission, which is to promote excellent health outcomes for all people and communities through the support of midwifery, is accomplished by awarding scholarships for students in midwifery programs and midwives in doctoral education; advancing the work of midwifery researchers; providing fellowships to develop business and leadership skills for practice administration; enhancing global health experiences for midwives; funding small, impactful community-based projects around the world; and advancing wide-ranging initiatives that support diversity, equity, and inclusion within midwifery.

In 2021 the Foundation awarded close to \$300,000 to individual midwives as scholarships, awards, and grants, and to ACNM in support of their strategic goals and priorities. Numerous challenges were overcome again in 2021, as they were in 2020, owing to the many pandemic-related restrictions in travel and in-person meetings. We continued to shift funding toward strategic priorities that maintain our mission-oriented focus, especially on diversity, equity, and inclusion, as follows:

To Individuals:

- \$64,750 to support students enrolled in basic midwifery education programs, with over 60% going to students of color.
- \$20,000 to support midwives in doctoral education, with 75% to midwives of color.
- \$17,000 to support global leadership development for midwives of color.
- \$11,000 to support special projects, including the new Wayachi Seed Grant, established by the ACNM Midwives of Color Committee to support projects led by Black, Indigenous, and People of Color; as well as the ongoing Thacher Community Grants, focused again on Covid-19, Health Equity, and Racial Disparities.
- \$8,000 to support practice and research leadership development for midwives.

To ACNM:

- \$30,000 in direct support for initiatives that aim to reduce state-based regulatory barriers for midwives and meetings sponsorship and support that advances diversity, equity, and inclusion within the midwifery profession.
- \$142,250 through a sub-award to ACNM for a grant to support ACNM strategic priorities; with the Foundation serving as fiscal agent.

In addition to our expanded support of midwives and ACNM, we also focused on strategic actions that will ensure our ongoing strength and impact, well into the future, including: Prioritize resource development and fundraising; Maximize organizational and operational efficiency; Enhance and promote diversity, equity, and inclusion (DEI) in everything we do; and expand understanding of our mission, programs, and impact.

Our generous donors enabled us to maintain strong mission-oriented support amid the global pandemic, which threatened the very existence of organizations like ours. We are deeply grateful to those who — with their generosity — boosted our impact and helped us actualize our vision to change lives ‘one gift at a time.’ We are especially grateful to donors who provided specific support for our strategic activities related to DEI, as well as those who fully endowed key restricted funds. See summary of 2021 donors on page 33.

2021-2022 Board of Trustees:

Holly Powell Kennedy, PhD, CNM, FACNM, FAAN, *President*
 Mary Kaye Collins, MN, JD, LLM, FACNM, *Vice President*
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 Michael McCann, CNM, MS, FACNM
 Patricia Olenick, CNM, PhD, FACNM
 Jo-Anna Rorie, CNM, MPH, PhD, FACNM
 Andrew Youmans, CNM, MSN

Management Team:

Lisa Paine, CNM, DrPH, FACNM, *Chief Executive Officer*
 Maria Valentin-Welch, CNM, MPH, DNP, CDP, FACNM, *Chief Programs & DEI Officer*
 Deacon Economos, *Director, Office of Information Technology*

For more information about the Foundation or to donate, visit: www.midwife.org/ACNM-Foundation

Audited Statement of Financial Position 2021

ASSETS

Year	2021	2020
Current	\$185,418	\$250,722
Investments	\$1,366,729	\$1,275,902
Other	\$38,414	\$44,423
Total	\$1,590,561	\$1,571,047

LIABILITIES AND NET ASSETS

Year	2021	2020
Current Liabilities	\$18,216	\$19,650
Net Assets – No Restrictions	\$121,584	\$29,412
Net Assets – With Restrictions	\$1,450,761	\$1,521,985
Total (Liabilities And Net Assets)	\$1,590,561	\$1,571,047

2021 A.C.N.M. Foundation Awards & Scholarships

Awards and Scholarships to CNMs/CMs and other Midwives

Dorothea M. Lang Pioneer Awards

Pandora Hardtman, DNP, CNM, RN, FACNM (Georgia)
Elizabeth Hill-Karbowski, PhD, CNM, FACNM (Wisconsin)
Pamela Reis, PhD, CNM, NNP-BC, FACNM (North Carolina)

Wayachi Seed Grant – Special Projects from the Midwives of Color Committee

Jeanine Valrie-Logan, CNM, MSN, MPH (Illinois) – Inaugural winner

Jeanne Raisler Award for International Midwifery

Carolyn Curtis, CNM, MSN, FACNM, Project in Ethiopia (Washington DC)
Kimberly Garcia, DNP, CNM, FACNM, Project in Guatemala (Utah)

Carrington-Hsia-Nieves Doctoral Scholarship for Midwives of Color

Amy Goh, CNM, WHNP, MSN, PhD candidate (Boston College)
Nichele Salazar, MSH, CNM, DNP candidate (University of New Mexico)
Nichole Wardlaw, MEd, MSN, CNM, FACNM, DNP candidate (Old Dominion University)

Fellowship for Graduate Education

Col. Gwendolyn Foster, CNM, MSN, DrPH(c) (Illinois)

Dianne S. Moore Midwifery Research Scholarship

Heather Bradford, CNM, MSN, FACNM, PhD student (Vanderbilt University)

W. Newton Long Award for the Advancement of Midwifery

Jennifer Vanderlaan, PhD, MPH, CNM, FNP (Nevada)
Alexandria 'AlexAnn' Westlake, MSN, CNM, FNP student (Oregon)

Thacher Community Grants focused on COVID-19, Race Disparities, Health Equity

Amy Ginn, CNM, MSN (Colorado)
Maria Ramos Bracamontes, CNM (California)

Marian Vanita Lott, CNM, MSN (Georgia)
Michelle Collins, PhD, CNM, FACNM (Louisiana)
Sharon Offley, CNM & Colleen Bass, CNM (Hawaii)
Bube Mwamba, RM, (Zambia)

Lang Global Leadership Scholarship to attend and be mentored at ICM Triennial Meeting

Kathryn Ault, CNM, MSN, APRN (Alaska)
Charlotte Chiang, CNM, MPH (Minnesota)
Michelle Clausen, CNM, MSN (Washington DC)
Courtney Gustin, CNM, MS, DrPH (Maryland)
Jane Houston, CNM, MSN, DNP, ARNP, FACNM (Florida)
Anjali Madeira, CNM, MPH, MN, DNP (Alaska)
Margaret McCanna, CNM, ARNP, MSN, DNP (Kansas)
Jennifer Neczypor, CNM, MSN, FNP-C (Massachusetts)
Arielle Skalisky, CNM, DNP (Minnesota)
Kellie Thiessen, RM, MSN, PhD (Manitoba, Canada)

ACNM Annual Meeting Scholarships (grant to ACNM)

First-Time Attendees:

Rebekah Bhansali, CNM, MSN, MN, DNP (Texas)
Vanessa Wright, CNM, WHNP-BC (California)
Margaret McCanna, CNM, APRN, MSN, DNP (Kansas)

Retired Members:

Sharon Bond, PhD, CNM, FACNM (South Carolina)
Judith Fullerton, PhD, CNM (ret), FACNM (California)
Annette Manant, PhD, APRN, CNM (Hawaii)

Awards and Scholarships to Student Midwives:

Basic Midwifery Scholarships

GlaxoSmithKline Health Care Consumer Scholarship (Highest Scoring Applicant)
Mayra Lizzette Yñiguez, MPH, SNM (University of California, San Francisco)

Midwives of Color-Watson Scholarship

Lori Leslie, BSN, SNM (Texas Tech University Health Sciences Center)
Amber Roman, BSN, SNM (Frontier Nursing University)
Jordan Smith, MSN, SNM (UCSF, San Francisco)
Essence Williams, MSN, SNM (Baystate Medical Center Midwifery Program)



The Edith B. Wonnell CNM Scholarship

Neelu Shruti, BA, SNM (Yale University)

Teresa Marsico CNM Memorial Scholarship

Roxanne Winston, MSN, MPH, SNM (Columbia University)

Frances T. Thacher CNM Memorial Scholarship

Evelise Alicea, BSN, SNM (Baystate Medical Center Midwifery Program)
Joseph Piper, BSN, SNM (University of New Mexico)

Dorothea M. Lang CNM Memorial Scholarship

Triana Boggs, BSN, SNM (Frontier Nursing University)
Hannah Crement, BSN, SNM (Texas Tech University Health Sciences Center)
Emily Marantz, BSN, SNM (Baystate Medical Center Midwifery Program)
Ilene ‘Ellie’ Miller, BSN, SNM (SUNY Downstate)
Sarah Mullen, BSN, SNM (University of Illinois at Chicago)
Ellen Sidles, BS, SM (SUNY Downstate)

Colorado Affiliate BIPOC Scholarship

Shakeeka Misher, DNP, MSN, SNM (Frontier Nursing University)

Texas Midwifery Creation Scholarships (in honor of midwife Mercy “Titi” Otunla Airewele)

Nakia Dumas, SNM (Texas Tech Univ Health Sciences Center)
Shelby Shelton, SNM (Texas Tech Univ Health Sciences Center)
Tori Herbert, SNM (Texas Tech Univ Health Sciences Center)

A.C.N.M. Foundation Varney Leadership Award

Cheyenne Conway, SNM (Baylor University)

Carolyn ‘Cat’ Dymond, SNM (Emory University)
Cherisse Howell, SNM (Georgia College & State University)
Lisa Marie Morgan, SNM (Bethel University)
Chiquita Reid, SNM, MSN (Shenandoah University)
Morgan Clark-Youngblood, SNM (Emory University)

Midwifery Legacies Project 20th Century Student Interview Awards

1st Place: Lisa Marie Morgan, SNM (Bethel University)
2nd Place: Mariah Wharton-Behnia, SNM (Oregon Health Sciences University)
3rd Place: Reid Bondurant, SNM (Oregon Health Sciences University)
Honorable: Julie Andrzejczak, SNM (Bethel University)
Hilary Korabik, SNM (Vanderbilt University)
Emma Marsden, SNM (Vanderbilt University)
Anna McCracken, SNM (University of Pennsylvania)

Awards and Grants to ACNM Partners

The A.C.N.M. Foundation Staff Appreciation Award

Lakesia Pitts, CPA, CFE, ACNM Grants Manager (Maryland)

Grant to ACNM for Justice and Equity in Maternity Care

Support for California Affiliate Advocacy to Eliminate Practice Barriers

Meeting Sponsorship support to ACNM:

ACNM Virtual Annual Meeting, May 2021
Midwifery Works and LEAD Conference, October 2021
Virtual Health Policy Summit, November 2021

2021 Donations to The A.C.N.M. Foundation, Inc.

The Trustees of The A.C.N.M. Foundation, Inc. express their sincere gratitude for the generosity of our donors – including individuals, foundations, corporations, and businesses – who donated more than \$508,000 in 2021. Listed here are donors of \$250 or more to both restricted and unrestricted funds, totaling more than \$475,000.

\$150,000

Yellow Chair Foundation
(fiscal agency for ACNM)

\$55,000

Sparacio Foundation, Inc.

\$50,000

Susan Shilliday & Elizabeth Herskovitz Grant
HalfMyDAF Grant (Anonymous)

\$20,000

Elaine Moore

\$14,520

Hologic, Inc.

\$10,000

ACNM Midwives of Color Committee–
Wayachi Seed Fund

Founders Pledge: \$10,000 by 2022

Mary Kaye Collins
Susan DeJoy
Laraine Guyette
Timothy R.B. Johnson
Holly Powell Kennedy
Jan Kriebs
Cara Krulewitch
Francie Likis
Lisa Kane Low
Ellen Martin
Kate McHugh
Teresa Marchese
Michael McCann
Denise McLaughlin
Elaine Moore
Lisa Paine
Suzanne & Brian Smith
Susan Stone
Mary Widhalm

\$1,000-4,999

Sally Averson
Colorado Affiliate of ACNM
Dorothea Lorell Erwin
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Gina Grove
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Denise Smith
Heather Clarke
Maria Valentin-Welch

Foundation Level: \$1000+ in 2021

Melissa Avery
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Katie Lavery
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Patricia Aikins Murphy
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Whitney Pinger
Pamela Reis
Mavis Schorn
Letitia Sullivan

Jean Tease
Joyce Thompson
Maria Valentin-Welch
Mary Widhalm

\$500-999

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Ellen Brodrick
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Christina Kocis
Mary Rose Korduner
Kate McHugh
Claire Nelson
Teresa Nicholson
Helene Rippey
Kay Sedler
Mary Sheridan
Sharon Lynn Skouge
Catherine Walker

\$250-499

Jessica Anderson
Tia Andrighetti
Martha Carter
Robyn Churchill
Lee Clay
Elizabeth Cooper
Elois Edge
Mary Franklin

Amy Ginn
Barbara Graves
Katrina Holland
Gerald Horan
Bridget Howard
Carol Howe
Natalie Jacobson-Dunlop
Karen Jefferson
Susan Agard Krause
Theresa Coley-Kouadio
Elaine Purcell
Barbara Sellers

Erin Sing
Joan Slager
Marsha Stalcup
Stephen Thurmond
Karen Watt
Harold Valentin-Welch
Claire Westdahl

Gifts <\$250
Another 471 donors made gifts
<\$250 totaling **\$32,781.**

Sincere thanks to all who supported the A.C.N.M. Foundation in 2021!

For a complete list of 2021 donations, please visit www.acnmf.org

For other information about the A.C.N.M. Foundation, including Financial Reports, please contact Dr. Lisa Paine, CEO, at foundation@acnmf.org

Accreditation Commission for Midwifery Education (ACME)

On the heels of an unprecedented 2020, ACME entered 2021 with new hope and resolve. Like so many other accrediting agencies, “we experienced a new norm” in the way we managed and functioned. Thanks to our talented volunteers we were able to convert operational and strategic challenges into meaningful results. We onboarded a new Board of Review Chair Debora M. Dole, PhD, CNM, FACNM and a new Site Visit Coordinator Mavis Schorn, PhD, CNM, CNE, FACNM, FNAP, FAAN. These individuals, along with our team of volunteers, made significant contributions to advance our mission in countless ways during the year.

It was a demanding, yet promising year for ACME and midwifery education. We held interest meetings with six different groups that are planning to start new midwifery education programs. In addition, nine programs were reviewed for preaccreditation and or accreditation. In 2021, the ACME Board of Review held three meetings, including an off-cycle review and awarded the following:

Preaccreditation

University of Tennessee Health Science Center, College of Nursing, Nurse-Midwifery Program for the Doctor of Nursing Practice (DNP)

Initial Accreditation

Fairfield University, The Marion Peckham Egan School of Nursing and Health Studies, Nurse-Midwifery Program for the Doctor of Nursing Practice (DNP)

Continued Accreditation

New York University, Rory Meyers College of Nursing, Nurse-Midwifery Program, Master of Science and Advanced Certificate (Post Graduate Certificate)

University of California at San Francisco, School of Nursing, Nurse-Midwifery Program, for the Master of Science (MS) and the Post Graduate Certificate (PGC)

University of Minnesota, School of Nursing, Nurse-Midwifery Program, for the Doctor of Nursing Practice (DNP) and Post Graduate Certificate (PGC)

Vanderbilt University, School of Nursing, Nurse-Midwifery Program for the Master of Science in Nursing (MSN) and Post Graduate Certificate (PGC)

Seattle University College of Nursing Nurse-Midwifery Program, Doctor of Nursing Practice (DNP) and Post Graduate Certificate

Coming from a year like never before, we are very proud to say members of our Site Visitor Panel, Board of Commissioners, Board of Review, Advisory Committee, and staff showed an astounding commitment and contributed a myriad of hours and “good cheer” that led to a productive and successful year. They leaned into every opportunity to make sure midwifery education programs provide high quality educational experiences, embody effective administrative policies and procedures, demonstrate continuous growth and improvement, and exhibit a commitment to diversity, equity, and inclusion.

Journal of Midwifery & Women's Health

The year 2021 was one of transition for the editorial team at the Journal of Midwifery & Women's Health (JMWH). Immediate Past Editor-in-Chief, Francie Likis, DrPH, CNM, NP, FACNM, FAAN and her editorial team had announced that they all planned to retire from JMWH in 2021 with transition to a new Senior Editorial Team to begin in January 2022. Melissa Avery, PhD, CNM, FACNM, FAAN was announced as the incoming Editor-in-Chief in Spring 2021. She worked with Francie from September through December 2021 to prepare to take over as Editor-in-Chief in January 2022. Ira Kantrowitz-Gordon, PhD, CNM, FACNM was hired as Deputy Editor for the 1-year transition period January to December 2021, and agreed to join the new team in 2022. Linda Hunter, EdD, CNM, FACNM joined the new team as Deputy Editor in October 2021. Long-time Deputy Editors Patty Aikins Murphy (August) and Tekoa King (December) also retired from the Journal in 2021.



In addition to the editorial transition, a high volume of manuscripts continued to be submitted to and reviewed for publication by JMWH editors and peer reviewers. Continuing Education theme issues were published on Infection and Immunity (May/June 2021) and Gynecologic, Sexual and Reproductive Health (November/December 2021). A new virtual issue, *Health Care for Transgender and Non-Binary Individuals* was published in November 2021. Members also appreciated the 2021 editorial and resource on *language to promote equity* written by Francie Likis. The JMWH online continuing education location transitioned from publisher Wiley's to ACNM's website – the URL remains the familiar, JMWHCE.org. Longtime Managing Editor Brittany Swett also transitioned from her JMWH position in January 2022 after bringing on a very capable replacement in Laura Bolte to join the new team. Congratulations to Francie Likis for being named Editor Emeritus by the ACNM Board of Directors!

Thank you to all who supported ACNM in 2021!

For more information, visit www.midwife.org