



International
Confederation
of Midwives

The *mother-midwife*
partnership

Crucial for
breastfeeding!





Disclosure Statement

The author has documented that she has no financial relationships to disclose or Conflicts of Interest (COIs) to declare.





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The evidence!

87

When **educated to international standards** and within a fully functional health system, **midwives can provide 87% of the** essential care for women and newborns.

2/3

Midwives have the potential to **reduce maternal and newborn mortality** by **two thirds**.

25

The Lancet Health Series has stated that even a **25% increase in midwifery in developing countries** would result in a **50% reduction** in maternal deaths.



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*'Midwives are
because
women are'
Ubuntu*





Vision

ICM envisions a world where **every
childbearing woman has access to a
midwife's care** for herself and her
newborn







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Mission

To strengthen Midwives Associations and to advance the profession of midwifery globally by **promoting autonomous midwives as the most appropriate caregivers for childbearing women** and in keeping birth normal, in order to enhance the reproductive health of women, and the health of their newborn and their families.





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BREASTFEEDING | THE GOAL

By 2025, increase to at least 50% the rate of exclusive breastfeeding in the first six months

WHY IT MATTERS

BENEFITS OF BREASTFEEDING

1 2 3 4 5 6

Babies who are fed **nothing but breastmilk** from birth through their first 6 months of life get the **best start**

Exclusive breastfeeding provides babies: **the perfect nutrition** & everything they need for healthy growth and brain development

Protection from respiratory infections, diarrhoeal disease, and other **life-threatening ailments**

Protection against **obesity & non-communicable diseases** such as asthma and diabetes

RECOMMENDED ACTIONS

LIMIT FORMULA MARKETING

WHAT? Significantly limit the marketing of breastmilk substitutes



HOW? Strengthen the monitoring, enforcement and legislation related to the International Code of Marketing of Breastmilk Substitutes

SUPPORT PAID LEAVE

WHAT? Empower women to exclusively breastfeed



HOW? Enact six-months mandatory paid maternity leave and policies that encourage women to breastfeed in the workplace and in public

STRENGTHEN HEALTH SYSTEMS

WHAT? Provide hospital and health facilities-based capacity to support exclusive breastfeeding



HOW? Expand and institutionalize the baby-friendly hospital initiative in health systems

SUPPORT MOTHERS

WHAT? Provide community-based strategies to support exclusive breastfeeding counselling for pregnant and lactating women



HOW? Peer-to-peer and group counselling to improve exclusive breastfeeding rates, including the implementation of communication campaigns tailored to the local context

SCOPE OF THE PROBLEM

Globally, only **38%** of infants are exclusively breastfed



Suboptimal breastfeeding contributes to **800,000** infant deaths



BREASTFEEDING

lowers a woman's risk of:

- ✓ Cardiovascular disease
- ✓ Breast cancer
- ✓ Ovarian cancer
- ✓ Diabetes
- ✓ Stroke
- ✓ Depression

It is estimated that breastfeeding reduces the risk of overweight and obesity by about 10% compared to formula feeding.



#WBW2018

BREASTFEEDING RECOMMENDATIONS

exclusive breastfeeding for the first six months of life. At six months, solid foods, such as mashed fruits and vegetables, should be introduced to complement breastfeeding for up to two years or more. In addition:

- breastfeeding should begin within one hour of birth
- breastfeeding should be "on demand", as often as the child wants day and night; and
- bottles or pacifiers should be avoided.

**Source: WHO Breastfeeding Recommendations*



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5 GENDER EQUALITY



Breastfeeding is the great equaliser, giving every child a fair and best start in life. Breastfeeding is uniquely a right of women and they should be supported by society to breastfeed optimally. The breastfeeding experience can be satisfying and empowering for the mother as she is in control of how she feeds her baby.

www.worldbreastfeedingweek.org



THE GLOBAL GOALS
For Sustainable Development





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Essential Competencies

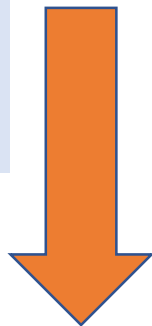
for Midwifery Practice

2018 UPDATE

Final version published January 2019

Competency Framework

The competencies are organised into four inter-related categories as outlined below



1. GENERAL COMPETENCIES

Competencies in this category are about the midwife's autonomy and accountabilities as a health professional, the relationships with women and other care providers and care activities that apply to all aspects of midwifery practice. All General Competencies are intended to be used during any aspect of midwifery care whereas competencies in categories 2, 3, and 4 are each specific to a part of the reproductive process and must be viewed as subsets of the General Competencies, not stand-alone subsets. Educational and/or training providers should ensure that the General competencies are interwoven in any curriculum. Assessment of the competencies in categories 2, 3, and 4 must include assessment of the competencies in category 1.



2. COMPETENCIES SPECIFIC TO PRE-PREGNANCY AND ANTENATAL CARE

Competencies in this category are about health assessment of the woman and fetus, promotion of health and well-being, detection of complications during pregnancy and care of women with an unintended pregnancy.



3. COMPETENCIES SPECIFIC TO CARE DURING LABOUR AND BIRTH

Competencies in this category are about assessment and care of women during labour that facilitates physiological processes and a safe birth, the immediate care of the newborn infant, and detection and management of complications in mother or infant.



4. COMPETENCIES SPECIFIC TO THE ONGOING CARE OF WOMEN AND NEWBORNS

Competencies in this category address the continuing health assessment of mother and infant, health education, support for breast feeding, detection of complications, and provision of family planning services.



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2.f Provide anticipatory guidance related to pregnancy, birth, breastfeeding, parenthood, and change in the family

KNOWLEDGE

- Needs of individuals and families for different information at different times in their respective life cycles
- Methods of providing information to individuals and groups
- Methods of eliciting maternal feelings and expectations for self, infant, and family

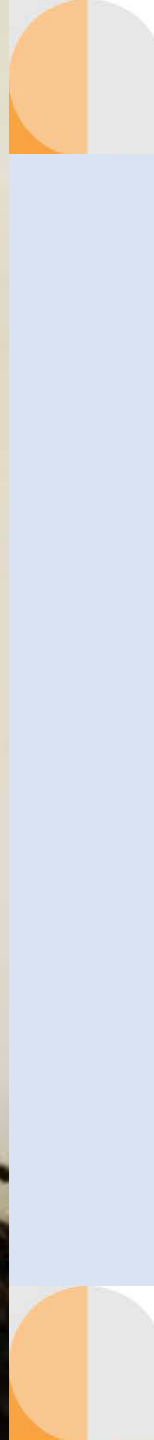
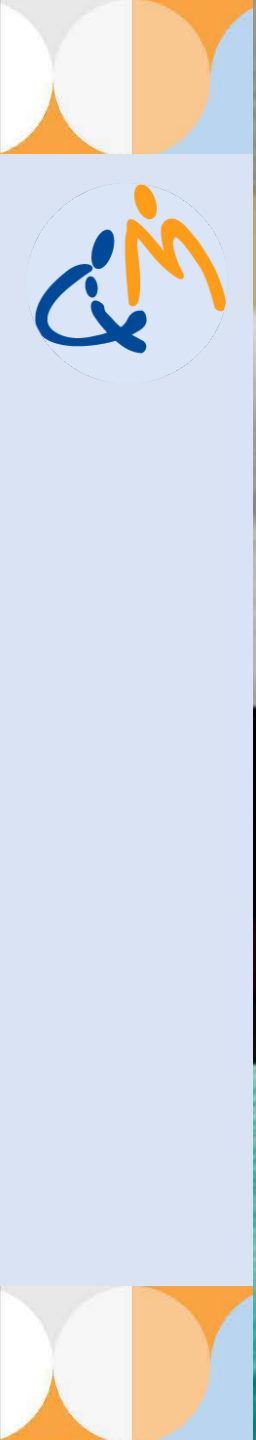
SKILLS & BEHAVIOURS

- Participate in—and refer women and support persons to—childbirth education programs
- Convey information accurately and clearly and respond to needs of individuals
- Prepare the woman, partner, and family to recognize labour onset, when to seek care, and progress of labour
- Provide information about postpartum needs including contraception, care of newborn infants, and the importance of exclusive breast feeding for infant health
- Identify needs or problems requiring further expertise or referral such as excessive fear, and dysfunctional relationships

CATEGORY 2 PRE-PREGNANCY AND ANTENATAL









Tweets Tweets & replies **Media** Likes



ICM President @Franka... · 01/08/2018 ✓
This [#WBW2018](#) I realise the sheer joy and privilege I feel to have [#breastfed](#) my 3 children.

Look at the love & pride in the eyes of my daughter breastfeeding her doll!

I wish for all mothers worldwide to be able to give their babies 🍌🍼👶🏻👶🏻 this best start in life.



Sheena Byrom and 8 others

5 34 96

EasyJet stops furious mum from feeding baby on plane



Interrupted:
Kelly Edgson-Payne with her one-year-old son Lex
PICTURE: SWNS

RULIY HEVRIALNI,
YOUNG MIDWIFERY
LEADER
@RULIYHEVRIALNI07

"Midwives
are the
closest to
women:
friends &
health
workers."



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Strengthening Midwifery Globally

Position Statement

Mother- and Baby-Friendly Employment Policies for Midwives

Background

In many countries difficulties are experienced in providing optimum care for childbearing women and their babies because of shortages of qualified midwives. Meanwhile midwives too often find it difficult to work in the first year of their own babies' lives because of employment policies and conditions. Breastfeeding is particularly hindered by inflexible attitudes to mother-infant contact in the workplace.

Position

ICM urges employers of midwives to provide flexible working conditions and policies so that midwives are enabled to return to work after maternity leave as soon as appropriate; without sacrificing the quality of their relationships with their newborns (and other infants), or the right to breastfeed for the period they believe to be appropriate.

Recommendations

Member Associations are urged to lobby governments to establish legal and employment systems that support and maintain mother- and baby-friendly employment practices by employers.

Other Relevant Documents

Babyfriendly. Creating a mother-friendly workplace.

<http://www.babyfriendly.org.nz/fileadmin/documents/going-babyfriendly/Creating%20a%20mother%20friendly%20workplace%20A33.pdf>

Best Start. How to be a Family-Friendly Workplace. Health nexus, Ontario. (Available to download from www.beststart.org)

Maine General Medical Center. Mother-Friendly Worksite Toolkit. Waterville Maine. (Full toolkit available to order www.maine-general.org)



CATEGORY 3 CARE DURING LABOUR AND BIRTH

3.c Provide care of the newborn immediately after birth

KNOWLEDGE

- Normal transition to extra-uterine environment
- Scoring systems to assess newborn status
- Signs indicating need for immediate actions to assist transition
- Interventions to establish breathing and circulation as covered in training programs such as HBS²⁷
- Appearance and behaviour of healthy newborn infant
- Method of assessing gestational age of newborn infant
- Needs of small for gestational age and low birth weight infants

SKILLS & BEHAVIOURS

- Use standardized method to assess newborn condition in the first minutes of life (Apgar or other); refer if needed
- Institute actions to establish and support breathing and oxygenation, refer for continuing treatment if needed
- Provide a safe warm environment for initiating breastfeeding and attachment (bonding) in the first hour of life
- Conduct a complete physical examination of newborn in presence of mother/family; explain findings and expected changes e.g. colour of extremities, moulding of head. Refer for abnormal findings.
- Institute newborn prophylaxis e.g. ophthalmic infection, and hemorrhagic disease, according to policies and guidelines
- Promote care by mother, frequent feeding and close observation
- Involve partner/support persons in providing newborn care



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#IDM2016







4.c Promote and support breastfeeding

CATEGORY 4 ONGOING CARE OF WOMEN AND NEWBORNS

KNOWLEDGE

- Physiology of lactation
- Nutritional needs of newborn infants, including low birth weight infants
- Social, psychological, and cultural aspects of breastfeeding
- Evidence about benefits of breastfeeding
- Indications and contraindications to use of drugs and substances during lactation
- Awareness of lactation aids

SKILLS & BEHAVIOURS

- Promote early and exclusive breastfeeding while respecting a woman's choice regarding newborn feeding
- Provide information about infant needs, frequency and duration of feedings, and weight gain
- Provide support and information about breastfeeding for a minimum of six months, including combining with work, maintaining milk supply, and storing breast milk
- Identify and manage breastfeeding problems (e.g. mastitis, low milk supply, engorgement, improper latch)
- Provide information to women breastfeeding multiple newborns
- Refer women to breastfeeding support as indicated
- Advocate for breastfeeding in family and community







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OPTIMAL
BREASTFEEDING
HELPS PREVENT
MALNUTRITION IN
ALL ITS FORMS WITH
POSITIVE LIFELONG
EFFECTS ON BOTH
CHILDREN AND
MOTHERS!

#WBW2018







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Midwives:
changing the
world

one family at
a time



Join the 32nd ICM Triennial Congress

BALI, INDONESIA 21-25 JUNE 2020

Registration

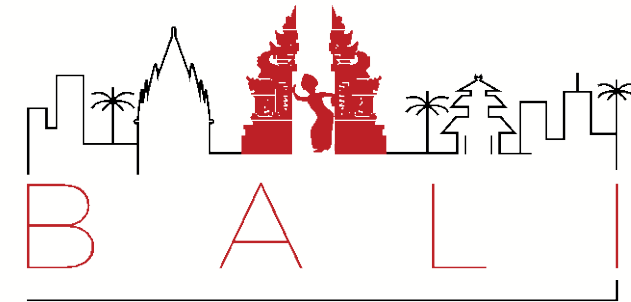
- Register now on www.midwives2020.org to benefit from Bonus Discount starting at \$575

Partners

- We cordially invite all our industry partners to support the 32nd ICM triennial Congress. Contact us on partners@midwives2020.org for more information on partnership opportunities

Abstracts

- Abstract submission will be open in December 2018. Please visit our website www.midwives2020.org for more information on abstract guidelines



32nd ICM Triennial Congress

Indonesia 21-25 June 2020

Midwives of the World: delivering the future



#world_midwives

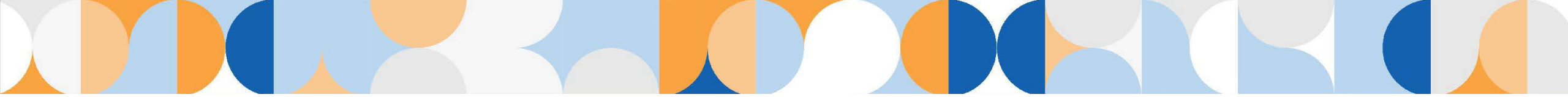


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Thank
You!

