

## 2014 US MERA Meeting: A Summary Report

The US Midwifery Education, Regulation, and Association (US MERA) workgroup came together April 10-13, 2014, at the Bolger Center in Potomac, MD, to continue discussions on how to advance the vision of expanding access to high quality midwifery care and physiologic birth for all women in all birth settings in the United States.

US MERA is comprised of representatives of the seven national midwifery organizations: American College of Nurse-Midwives (ACNM), Accreditation Commission for Midwifery Education (ACME), American Midwifery Certification Board (AMCB), Midwifery Education Accreditation Council (MEAC), Midwives Alliance of North America (MANA), National Association of Certified Professional Midwives (NACPM), and North American Registry of Midwives (NARM). For nearly three years, these organizations have been working together to envision and work toward a more cohesive US midwifery presence inspired and informed by global midwifery standards and competencies adopted by the International Confederation of Midwives in 2011.

For this, our second, professionally facilitated face-to-face meeting, we came together with intentionality toward collaborative consensus-building to create forward movement. We engaged in a respectful process to understand our differing midwifery histories and cultures. We were inspired by several invited guest speakers, as well as a Ted Talk video, "[The Walk from No to Yes](#)," presented by William Ury, co-founder of Harvard's Program on Negotiation and a current Senior Fellow of the Harvard Negotiation Project.

US MERA was successful in identifying and holding on to our core values, which include:

- All women and families should have access to physiologic birth care, in the setting of their choice.
- We must work to create a larger, more robust, diverse, high-quality maternity care workforce.
- We seek to maintain and further promote innovation, flexibility and accessibility in midwifery education through multiple education pathways.
- We acknowledge the value of accreditation of midwifery education by agencies recognized by the US Department of Education (ACME and MEAC).
- Licensure for all nationally certified midwives in all 50 states is critical to providing the best care for women and babies and protecting public health and safety.
- Midwives must be able to practice to the full extent of their education and training.
- Midwifery care must be integrated seamlessly into the US health care system.

Therefore, the US MERA workgroup has committed to:

1. Support development and implementation of MEAC- and/or ACME-accredited direct assessment<sup>i</sup> midwifery education programs by 2020.
2. Effective immediately, support legislative language stating that, by 2020, all new applicants for midwifery licensure must have successfully completed an education process accredited by ACME or MEAC that qualifies them to take the AMCB or NARM national certification exam. Provisions related to other key elements of licensure will be collaboratively discussed on a state-by-state basis.
3. Craft a multi-stakeholder consensus statement describing various other core principles of model midwifery legislation, utilizing a [Delphi process](#).
4. Engage in conversations with each other prior to issuing significant communications to our constituents and stakeholders related to critical issues in midwifery education, regulation, and association.
5. Create a memorandum of understanding among our organizations that articulates how we will work together to achieve our collaborative vision.

We encourage all who wish to work collaboratively to improve maternity care in the US to recognize the historic nature of these multi-organizational commitments and support our efforts to achieve these goals. We recognize that this initial statement will generate many questions about state legislative and policy implications and how we will achieve these commitments. We appreciate your patience while we work together to address these questions over time and will provide additional clarity as it becomes available. We welcome your questions and input, which can be sent to one or more of the professional midwifery associations (ACNM, MANA, and NACPM) at [leadership@acnm.org](mailto:leadership@acnm.org), [info@mana.org](mailto:info@mana.org), or [executivedirector@nacpm.org](mailto:executivedirector@nacpm.org).

Signed,

### **US MERA Representatives**

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<sup>i</sup> Federal Definition of Direct Assessment Competency-based Programs: A direct assessment program is an instructional program that, in lieu of credit hours or clock hours as a measure of student learning, utilizes direct assessment of student learning, or recognizes the direct assessment of student learning by others. The assessment must be consistent with the accreditation of the institution or program utilizing the results of the assessment.

Direct assessment of student learning means a measure by the institution of what a student knows and can do in terms of the body of knowledge making up the educational program. These measures provide evidence that a student has command of a specific subject, content area, or skill or that the student demonstrates a specific quality such as creativity, analysis or synthesis associated with the subject matter of the program. Examples of direct measures include projects, papers, examinations, presentations, performances, and portfolios.