



**The students and faculty of the Maternal Child Health Systems master's degree program
invite you to an open house on Sunday, June 18 from 11:30-12:30
on the Bastyr University Kenmore campus, in the Midwifery Classroom (#138).**

Our 1st graduating cohort of 6 MCHS students will be available to discuss their Independent Projects,
which they have worked on for the entire length of the program.

You can also use this time to find out more about this exciting and unique 12-month accredited graduate degree program designed
especially for professionals who specialize in pregnancy, birth, and the initial postpartum year.

MCHS Independent Master's Projects 2016-17

Inclusion of Licensed Midwives in Federally Qualified Health Centers in Washington State

Elizabeth M. B. Arcese

With shortages of maternity care providers impacting our nation and health disparities in marginalized communities continuing at unacceptable levels, licensed midwives (LMs) seek to respond with changes that improve the lives and safety of childbearing people. Federally Qualified Health Centers (FQHCs) are a system of health clinics, funded in part by the federal government, that provide care to all people despite ability to pay. Direct entry midwifery (DEM) does not currently have a federally recognized credential, but DEM midwives in Washington State practice under their state-specific license (LM) that is recognized by state DSHS/Medicaid authorities. Maternity care by LMs is increasingly popular and affordable, yet is underutilized in Washington State. Barriers and opportunities are explored for integrating LMs into the FQHC system to expand the maternity workforce and offer a model of care known to effectively meet the needs of socially at-risk (and medically low-risk) people.

Development of a Web-based Resource for Promoting Equity in Midwifery Education and Training: Towards Meaningful Diversity and Inclusion

Kristin J. Effland

Increasing the midwifery workforce requires that aspiring midwives complete education and training, but structural racism and microaggressions impact the lives of underrepresented midwifery students and apprentices, adding stressors and disparities to the usual demanding educational challenges. In order to be resilient, students rely on preceptors, faculty, administrators and institutions to promote equity. An equity focus in education means that power and privilege are taken into account so school and clinic climates can better support learning. Equity-focused learning environments improve student experiences and success rates, and better prepare all students to provide culturally humble and sensitive care to diverse childbearing persons. This robust web-based resource, www.equitymidwifery.org, for midwifery educators who train aspiring CNMs, CPMs or CMs is designed to promote equity in midwifery education and training. The website highlights examples and provides tools including original webinar content and encourages visitors to attend virtual strategy and collaboration calls.

Clinician & Administrator Experiences with Evidence-Based Practice Implementation in Intrapartum Care

Saralynn Finn

The process of evidence based practice change in intrapartum maternity care is not well understood. At times clinical practices with little evidence are quickly adopted into practice and other practice changes with the backing of substantial research support are not implemented into practice. Nurses, physicians, and hospital administrators were interviewed about their experiences with evidence based practice change to learn more about the nuanced process of implementing practice change. Six participants from high volume, urban hospitals in the U.S. were interviewed. Interviews were thematically analyzed based on semi-structured interviews. A story that emerged about the attitudes of older clinicians whose training emphasized unquestioningly accepting the practices taught to them by their preceptors. As nursing and medicine have changed to be more collaborative, effective means of practice change require buy-in from all fields involved through the use of a champion and evidence from each respective discipline. Employment/Employer status of physicians appears to impact the ability of clinicians to effectively collaborate on practice change attempts. The lack of large, high quality, clinical studies involving a diversity of settings and populations and lack of knowledge about structuring intrapartum practice change using existing implementation models are barriers to effective evidence based practice. Translational science and the practice change models developed by researchers appear not to be widely known or utilized.

"Break Time for Nursing Mothers" – Facilitators and Barriers for Breastfeeding Success on College Campuses in Thurston County, Washington

Carolee Hall

Background: In 2011 the Affordable Care Act mandated lactation space and break time for nursing mothers in the workplace. There are no similar protections required for students on college campuses. **Objectives:** The purpose of this study is to determine current accommodations and barriers at local colleges in Thurston County, Washington, that affect breastfeeding success. **Methods:** This qualitative study used semi-structured interviews with staff and students. The responses were categorized based on common themes. College web pages were searched for information on lactation support. School administrators were contacted to determine policy, and facilities were toured. **Results:** Nine subjects from two college campuses participated in the interviews. All subjects, who had breastfed an infant within the past 3 years, reported lack of knowledge of college policy regarding lactation on campus. Each subject voiced challenges or confusion in navigating campus lactation facilities. Both employees and students found that managing lactation on their campus was difficult due to similar multifactorial issues. Ultimately, all participants were able to access or create lactation systems on campus that varied from using the inadequate provided spaces, pumping in cars or other undesignated areas, or arranging schedules around feeding times as to not need to pump on campus. Subjects were either neutral or dissatisfied with the accommodations provided on campus with especially negative responses when bathrooms are designated as lactation space. No policies or official communications regarding lactation accommodations on the campuses were discovered. **Conclusion:** A lack of policy and communication about lactation resources on these 2 college campuses resulted in challenges for lactating campus members regardless of their role on campus. Existing designated lactation spaces were considered inadequate by study participants, with bathrooms deemed as particularly inappropriate.

Zika Virus Pregnancy Counseling for Puerto Rican Midwifery Students and Their Educators: An Exploration of Direct Assessment Rubrics

Victoria Hedley

In 2015, the United States Midwifery Education Regulation and Association (US MERA) collaboration developed criteria through which midwifery education can meet standards defined by the International Confederation of Midwives (ICM) (ICM, 2013; US MERA, 2013 & 2015). As a result, US midwifery educators are working to create direct assessment programs (DAP) as one pathway for aspiring and practicing midwives to meet these standards. The purpose of this project was to develop a culturally safe DAP module among a vulnerable population—midwives who serve pregnant people in Puerto Rico, a U.S. territory that has a long and complicated history of colonization and exploitation. Using midwifery counseling on Zika virus infection, prevention, and diagnosis as a case study, a culturally safe DAP employing reciprocal ethnographic methods was co-developed by researchers, midwifery educators, and Puerto Rican student midwives. Participant feedback was given throughout the process, and adjustments were made accordingly. Creating educational modules and assessments using a community based approach offers midwifery educators culturally appropriate methods for meeting standards, including those that have been set outside the culture being served.

International Confederation of Midwives (ICM) Education Standards Gap Analysis: Comparing Curricula from Direct-Entry Midwifery Schools in the U.S. and Brazil

Andrea Maya Johnson

Highly educated midwives are needed around the world to improve maternal and infant health and healthcare outcomes. The purpose of this capstone master's project was to focus on adherence to international educational standards at two midwifery schools in different countries, Brazil and the United States of America, utilizing the International Confederation of Midwives (ICM) Education-Standards. This project aimed to summarize gaps in the midwifery education curricula in order to reduce disparities and give information to midwifery educators to assist them in providing the necessary knowledge and skills to aspiring midwives in order to provide internationally recognized individualized, collaborative, and evidence-based care. Finally, this capstone project proposed a standardized midwifery education according to the ICM recommendations in order to improve midwifery essential competencies and scope of practice in both countries, therefore producing more equitable maternity care to low-risk childbearing families and inspiring other midwifery schools around the world.