Core Document

International Code of Ethics for Midwives

Preamble
The aim of the International Confederation of Midwives (ICM) is to improve the standard of care provided to women, babies and families throughout the world through the development, education and appropriate utilization of the professional midwife. In keeping with this aim, the ICM sets forth the following code to guide the education, practice and research of the midwife. This code acknowledges women as persons with human rights, seeks justice for all people and equity in access to health care, and is based on mutual relationships of respect, trust and the dignity of all members of society.

The code addresses the midwife’s ethical mandates in keeping with the Mission, the International definition of the Midwife, and standards of ICM to promote the health and well-being of women and newborns within their families and communities. Such care may encompass the reproductive life cycle of the woman from the pre-pregnancy stage right through to the menopause and to the end of life. These mandates include how midwives relate to others; how they practise midwifery; how they uphold professional responsibilities and duties; and how they are to work to assure the integrity of the profession of midwifery.

The Code

I. Midwifery Relationships
   a. Midwives develop a partnership with individual women in which they share relevant information that leads to informed decision-making, consent to an evolving plan of care, and acceptance of responsibility for the outcomes of their choices.
   b. Midwives support the right of women/families to participate actively in decisions about their care.
   c. Midwives empower women/families to speak for themselves on issues affecting the health of women and families within their culture/society.
   d. Midwives, together with women, work with policy and funding agencies to define women’s needs for health services and to ensure that resources are fairly allocated considering priorities and availability.
e. Midwives support and sustain each other in their professional roles, and actively nurture their own and others’ sense of self-worth.

f. Midwives respectfully work with other health professionals, consulting and referring as necessary when the woman’s need for care exceeds the competencies of the midwife.

g. Midwives recognise the human interdependence within their field of practice and actively seek to resolve inherent conflicts.

h. Midwives have responsibilities to themselves as persons of moral worth, including duties of moral self-respect and the preservation of integrity.

II. Practice of Midwifery

a. Midwives provide care for women and childbearing families with respect for cultural diversity while also working to eliminate harmful practices within those same cultures.

b. Midwives encourage the minimum expectation that no woman or girl should be harmed by conception or childbearing.

c. Midwives use up-to-date, evidence-based professional knowledge to maintain competence in safe midwifery practices in all environments and cultures.

d. Midwives respond to the psychological, physical, emotional and spiritual needs of women seeking health care, whatever their circumstances (non-discrimination).

e. Midwives act as effective role models of health promotion for women throughout their life cycle, for families and for other health professionals.

f. Midwives actively seek personal, intellectual and professional growth throughout their midwifery career, integrating this growth into their practice.

III. The Professional Responsibilities of Midwives

a. Midwives hold in confidence client information in order to protect the right to privacy, and use judgment in sharing this information except when mandated by law.

b. Midwives are responsible for their decisions and actions, and are accountable for the related outcomes in their care of women.

c. Midwives may decide not to participate in activities for which they hold deep moral opposition; however, the emphasis on individual conscience should not deprive women of essential health services.
d. Midwives with conscientious objection to a given service request will refer the woman to another provider where such a service can be provided.

e. Midwives understand the adverse consequences that ethical and human rights violations have on the health of women and infants, and will work to eliminate these violations.

f. Midwives participate in the development and implementation of health policies that promote the health of all women and childbearing families.

IV. Advancement of Midwifery Knowledge and Practice

a. Midwives ensure that the advancement of midwifery knowledge is based on activities that protect the rights of women as persons.

b. Midwives develop and share midwifery knowledge through a variety of processes, such as peer review and research.

c. Midwives contribute to the formal education of midwifery students and ongoing education of midwives.

Adopted at Glasgow International Council meeting, 2008

Reviewed and adopted at Prague Council meeting, 2014

Due for next review 2020