

Association of Ontario **Midwives**
Delivering what matters.

UPDATE TO EMCM WORK GROUP

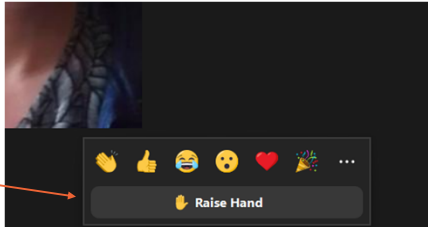
April 14, 2022
 Mary-K Dunn, Manager, Policy & Communications
 (Acting)

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Meeting Format

- To facilitate discussion, we're using meeting format. Participants can mute / unmute themselves, turn cameras on or off.
- Today's meeting will be recorded and may be made available on the AOM's member's only website
- Place questions in the chat or use the 'raise hand' feature if you wish to speak.

To raise hand, go to 'reactions' and select 'raise hand'



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NEGOTIATIONS



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JOINT COMPENSATION STUDY / GENDER BASED ANALYSIS UPDATE



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Overview of the Tribunal's Orders

Feb 2020, Tribunal issued **concrete and specific orders** to government to end discrimination in its compensation setting practices against midwives:

1. Injury to Dignity
2. Retroactive compensation
3. Interest
4. **Joint Compensation Study**
5. **Gender Based Analysis+ (GBA+)**
6. **Post JCS and GBA negotiations**



Tribunals Ontario

Human Rights Tribunal of Ontario



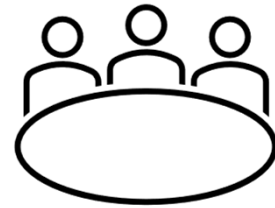
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Joint Compensation Study (JCS)

Tribunal ordered MOH to fund the study:

- **3 separate studies:** course of care midwife; salaried midwives; Indigenous midwives
- Covers 2014 to 2020; will serve as a **baseline for reinstating compensation benchmarks**
- To respect **Indigenous sovereignty**, a distinct and Indigenous-led process is being negotiated



Compensation Benchmarks:

Compensation principles, evidence based compensation methodologies, and comparators AOM & MOH maintained 1993-2005

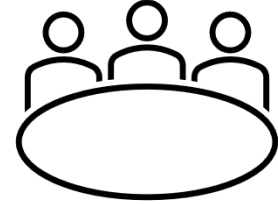
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JCS

- JCS is 'non-binding' but key to understanding gender wage gap in midwifery compensation and **informing negotiations in future**
- Was to have "commenced no later than 3 months from decision, completed within 4 months of start date."
- JCS will be updated **prior to the start of negotiations for each contract**. Cost of compensation expert paid for by the MOH (AOM paying for own compensation experts and legal team)



Status: In Progress – expected complete November 2022

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JCS

Study to include:

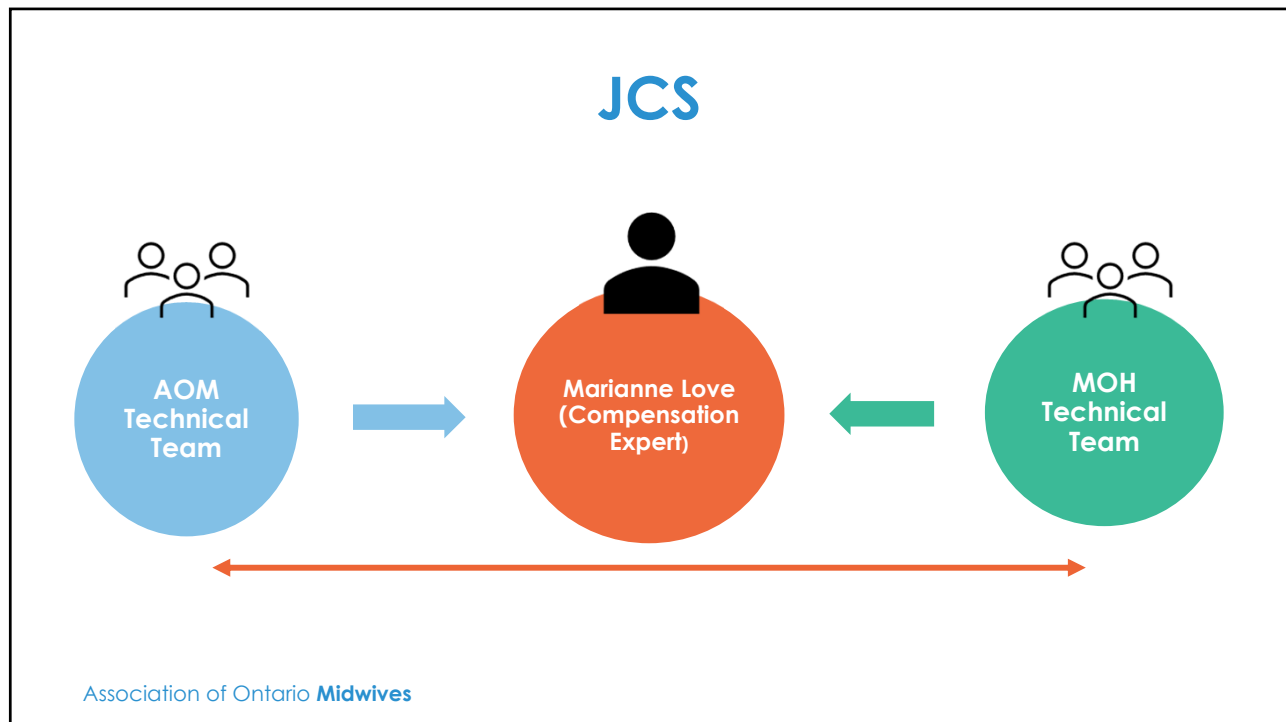
- **"Gender sensitive"** lens
- **SERW** (skills, efforts, responsibilities and working conditions) analysis
- Account **for specialized nature** of midwifery work
- Onerous **on-call duties**
- 1993 principles, methodology including **male comparator**
- Courtyard comparators (NPs, OBs, CHC Family Physicians)

**AOM CONTINUED
ADVOCACY IS
ESSENTIAL**

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JCS – Work Profiles

- AOM and MOH teams developing midwifery and comparator work profiles
- Includes Nurse Practitioners, **CHC Family Physicians**, Obstetricians
- Includes **skills, effort, responsibility** and **working conditions (SERW)** for each



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JCS – Work Profiles

- AOM & MOH jointly working on profiles – **will not** come to consensus on all elements
- Teams send 'final' version of profiles to Compensation Expert for **review, assessment, job element weighting**
- Will also assess other relevant considerations & to ensure profiles **free of gender bias**
- Results are **non-binding**



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JCS – Salaried Models

- Includes EMCM, OBWC, TBC birth centre midwife employees
- AOM engaging midwives to highlight differences / similarities in course of care midwifery profile
- To be completed once course of care profile finalized



DISCUSSION:
What are your hopes & fears for the JCS process?

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JCS – AOM concerns



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JCS Challenges

- Lack of **evidence-based** information
- Use of **anonymous sources**
- **Systemic gender bias** in the description of the work, e.g.:
 - Making work invisible
 - Under-describing female work; over-describing male work
- Process as ordered is non-binding – should an additional gap be identified, the MOH **may not implement**

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GBA+

Three main findings:

- **Power, privilege & oppression dynamics** in government, ministry relationship with midwives (policy negotiation, compensation system);
- **Lack of intersectional gendered lens** applied to policies, practices, decision-making;
- **Lack of clarity, defined compensation priorities** in Ontario maternal and newborn care sector.



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GBA+

Eight recommendations:

Strategic Framework

1. Gender equity action plan for midwives
2. Maternal/newborn care strategy

Tools for Implementation

3. Develop/apply GBA+ lens/tool
4. Adopt gender budgeting
5. Adopt gender impact assessment

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GBA+

A supportive enabling environment

6. Collection of intersectional diversity disaggregated data
7. Increase accessibility, transparency of midwifery compensation policies
8. Integrate GBA+ lens into the JCS

Particular focus on
Indigenous
Midwives

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GBA+ full report

- **Purpose:** “to provide actionable recommendations to **align its practices with [the MOH’s] obligations under the [Code]**”
- Full GBA+ report does not provide details on specific MOH or TBS policies or procedures regarding midwifery compensation – likely speaks to the **lack of them**
- Focuses on **lack of transparency** in AOM-MOH negotiated agreements & decision making

“I am satisfied that this is something the MOH ought to do to promote compliance with the Code and align its practices with its obligations under the Code”
[HRTO Remedial Decision, para 192]

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THANK YOU

Questions? Email maryk.dunn@aom.on.ca



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