

Our Mission

From its inception, the SOGC has had a strong sense of purpose. In its inaugural meeting in 1944, that purpose was reflected through the adoption of the SOGC's first mission statement that read:

"the promotion, cultivation, and encouragement of the Art and Science of Obstetrics and Gynaecology in Canada."

Through the years that sense of purpose has remained but the mission statement has evolved. The statement adopted in 2000 read as follows:

"to promote optimal women's health through leadership, collaboration, education, research and advocacy in the practice of obstetrics and gynaecology."

The most recent statement, adopted in 2006, reads as follows:

"to promote excellence in the practice of obstetrics and gynaecology and to advance the health of women through leadership, advocacy, collaboration, outreach and education."

Under the banner of this mission statement, the SOGC subscribes to the following tenets:

- Every woman should have equitable access to optimal, comprehensive health care, provided with integrity and compassion.
- Information should be made available to women that will allow the appropriate and relevant choices about their health.
- SOGC members have the right to practice in a safe and supportive environment.
- Obstetrics and gynaecology are practices that must be based on the best scientific evidence available.
- The Society of Obstetricians and Gynaecologists of Canada has a responsibility to facilitate change in relation to health system issues that affect the practice of obstetrics and gynaecology.

Our History

The foundation of the SOGC in 1944 reflected the need to promote physician education, research and excellence in care - including an unmatched Continuing Medical Education program and the Journal for Obstetrics and Gynaecology. Over the last decade, the SOGC has broadened this purpose to include international women's health and public education and has opened its doors to other professions such as nursing and midwifery.

Public education has been at the core of physicians' practices since time immemorial. The SOGC, animated by the desire for transparency, decided in the mid-1980s to make its evidence-based guidelines available to the Canadian public, enabling women to make informed choices about their health. By providing the public with current scientific information, we work toward better health outcomes for all Canadians.

The 1995 and 2000 Strategic Plans included priorities for sustainable initiatives in international women's health in order to reduce maternal mortality and morbidity around the world. The SOGC could not stand idle while half a million women die annually from pregnancy related complications that require simple, effective and known treatments for illnesses such as pre-eclampsia, post partum hemorrhage, dystocia and septic abortion.

Women have assumed leadership positions in all aspects of the association and at the Executive level, including Drs. Shaw, Schuurmans, Smith, Christilaw and Fedorkow. Nationally and internationally, these women continue to push forward the women's health agenda.

The SOGC is entering a new phase in risk management. The MORE^{OB} / AMPRO^{OB} programs in obstetric risk management are second to none. This is due in great part to the tremendous devotion and expertise of Dr. Milne (Past President and Associate EVP), who has developed and implemented this program in Canada. The SOGC's public education campaign, specifically "www.sexualityandu.ca", has made tremendous progress and we will continue to develop other web-based public education resources on obstetrics and gynaecology. Finally, the SOGC is entering a new partnership with Health Canada to look at collaborative practice, as this will be the single most important issue for the SOGC in the years to come. This partnership is a result of a mutual understanding that specialists cannot solely deliver obstetrical care that Canadian women need; rather we must work in collaboration with other allied health professionals to share expertise and experiences. The SOGC's diversity is reinforced through the policy of ensuring representation from a variety of disciplines in obstetrics and gynaecology on Committees and in the general membership.

Internationally, the SOGC continues to successfully cultivate varied partnerships with universities, professional associations, governments and multilateral organizations in low resource countries and countries in transition. Together, we can help reduce the tremendous burden of maternal mortality and morbidity. The ALARM International Program has been delivered to over 1000 health professionals in over 16 countries in less than three years, and the SOGC Partnership Program, funded by the Canadian International Development Agency, yields continuous positive results.