



## Presenting the upcoming *The State of the World's Midwifery 2011* report

The health of women and their newborns took centre stage in global development discussions in 2010, when the United Nations Secretary-General launched the 'Global Strategy for Women's and Children's Health'. While millions of women, newborn and children still die needlessly and the closely linked Millennium Development Goal 5 (improve maternal health) and Millennium Development Goal 4 (reduce child mortality) remain the least advanced of the MDGs, progress is finally underway and the world has gathered to accelerate action and save lives.

The role of skilled birth attendants, in particular midwives and others with midwifery competencies, is widely acknowledged as being crucial to addressing maternal and newborn mortality and morbidity, and to promoting women's and children's health. In addition to evidence accumulated over time from Sweden, the United Kingdom, Australia, New Zealand, the Netherlands and France, quality midwifery is a well-documented component of success in saving the lives of women and newborns, promoting their health and spurring development in countries like Sri Lanka, Malaysia, Tunisia and Thailand.

However, recent analyses show that both midwifery personnel and services are unequally distributed – between countries as well as within countries. Hence, it is time to take stock and document the situation in countries with high maternal and newborn mortality. This will be presented in a new publication entitled *The State of the World's Midwifery 2011: delivering health, saving lives*.

The report, which will be the first of its kind, is intended to promote midwifery strengthening around the world. It will provide new information and data gathered from 58 countries in all regions of the world, to:

- examine the number and distribution of health professionals involved in the delivery of midwifery services;
- explore emerging issues related to education, regulation, professional associations, policies and external aid;
- analyse global issues regarding health personnel with midwifery skills, most of whom are women, and the constraints and challenges that they face in their lives and work; and
- call for accelerating investments for scaling up midwifery services, as well as "skilling up" the respective providers.

The report will include statistical tables and applicable global standards, collating relevant midwifery information into one reference document.

Behind *The State of the World's Midwifery 2011* stand some of the key international partners involved in maternal and reproductive health, with a specific focus on midwifery. This initiative builds on earlier collaboration and engagement including the 'Global Call to Action' issued at the Symposium on Strengthening Midwifery in Washington DC in June 2010.

The report will be released at the Triennial Congress of the International Confederation of Midwives in Durban, South Africa, 20 June 2011. Ministers of Health gathered at the World Health Assembly in Geneva, 17 May 2011 will be invited to attend a briefing prior to its publication and launch. The report is aimed at policy-makers and programme managers (including ministers, advisers and local champions) development partners, aid organizations and all midwifery service providers.

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### **Accompanying Notes:**

**CONTEXT:** The report builds on prior initiatives that have been undertaken in support of strengthening midwifery worldwide. These include the joint statement by WHO, ICM and FIGO on Making pregnancy safer (2004); the New York and Hammamet Midwifery Workshops (2006); the joint ICM-UNFPA Midwifery Programme launched in 2008; regional workshops on midwifery in Africa, South Asia, the Caribbean and Arab States (2009), and; the Global Call to Action (2010).

**PUBLICATION:** The report is scheduled for release at the Triennial Congress of the International Confederation of Midwives in Durban, South Africa, 20 June 2011. It will be made available in English, French and Spanish.

**COUNTRIES:** The countries which are the intended focus of the 2011 report include those identified in the UNSG's Global Strategy for Women's and Children's Health and others with high maternal and newborn mortality:

Afghanistan, Bangladesh, Benin, Bhutan, Bolivia (Plurinational State of), Botswana, Burkina Faso, Burundi, Cambodia, Cameroon, Central African Republic, Chad, Comoros, Côte D'Ivoire, Democratic Republic of the Congo, Djibouti, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea Bissau, Guyana, Haiti, India, Indonesia, Kenya, Lao People's Democratic Republic, Liberia, Madagascar, Malawi, Mali, Mauritania, Morocco, Mozambique, Myanmar, Nepal, Nicaragua, Niger, Nigeria, Pakistan, Papua New Guinea, Rwanda, Senegal, Sierra Leone, Somalia, South Africa, Sudan, Tajikistan, Timor-Leste, Togo, Uganda, United Republic of Tanzania, Uzbekistan, Viet Nam, Yemen, Zambia, Zimbabwe

**NEW DATA:** Is being gathered through a country survey available in English, French, Spanish and Portuguese. Returns are being coordinated via UN and partner representatives (UNFPA, WHO, UNICEF etc) in each country. The survey is split into 6 modules to facilitate the engagement of key ministerial, education, regulatory, professional and development stakeholders as relevant to each section:

1. Statistics and organization of the health system (i.e. from Directorate of Human Resources or Maternal Health at the Ministry of Health)
2. Education (i.e. from Ministry of Education and Heads of professional schools)
3. Regulation (i.e. from President of Council or Board)
4. Professional Association (i.e. from President, Executive Director)
5. Policies (i.e. from Ministry of Health or equivalent)
6. External Support (i.e. from Department of External Relations at MoH or at Ministry of Foreign Affairs or equivalent)

The survey presents an opportunity for rich and collaborative discussion within countries to ensure that all available data is collated and returned. Organisations and individuals are encouraged to engage through their national coordination mechanisms and to return the completed survey in January 2011. Individuals who wish to contribute in producing detailed reports of the country context should contact the Coordinator, Dr. Vincent Fauveau.

**GREY LITERATURE:** Those resident or working in the focus countries are invited to share available grey literature that documents the midwifery context and challenges.

**RESEARCHERS:** International journals have expressed interest in receiving manuscripts on the subject of midwifery for potential publication in the editions that coincide with the launch of the report in June 2011. This includes the *International Journal of Obstetrics and Gynecology* and *The Lancet*. Interested researchers and research organisations are encouraged to prepare and submit manuscripts to the journal of their choice.