PUSH

For Rights • For Women • For Midwives

THE CAMPAIGN FOR WOMAN CENTRED CARE

The PUSH Campaign is the global campaign for woman-centred-care (WCC), advocating for midwives as the way to get us there.

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THE IMPETUS:

In 2023, a groundbreaking survey of over a million women of all ages clearly showed that women are demanding a shift toward a holistic and person-centred approach to health and wellbeing (1). ***We heard them loud and clear - and now, we are building a movement for woman-centred care (WCC) (2).***

Building on the successes of the first phase of the PUSH campaign which advocated for policy changes that would ensure midwives were paid equitably, better resourced, equipped to do their job, and respected, **this next phase (PUSH 2.0) shifts towards centring women** (1) **(and by default, midwives).**

Evidence shows that woman-centred care (WCC) improves health outcomes by fostering respect, dignity, empowerment, consent-based care and informed decision making. Yet, women are less likely than men to receive person-centred care (3).

WCC is embedded in partnership, empowerment, choice, and respect, core principles of the midwifery philosophy. Therefore, **advocating for WCC and midwives are two sides of the same coin.**

INTRODUCING PUSH 2.0:

Guided by the extensive empirical evidence for woman-centred care (2) and millions of demands for a paradigm shift collected by the What Women Want Campaign, this second rendition of the Campaign is grounded in co-creating health, policy, and sustainable development together with women as equal partners.

PUSH 2.0 will operationalise ICM's 2024-26 Strategic Plan: Priority 3 (4), which aims to 'collaborate with partners to grow the movement for midwifery and elevate the role of midwives as competent and respected healthcare providers who put women's voices at the centre'. PUSH will do so by serving as a unifying platform between women, midwives, and stakeholders advocating for centring women.
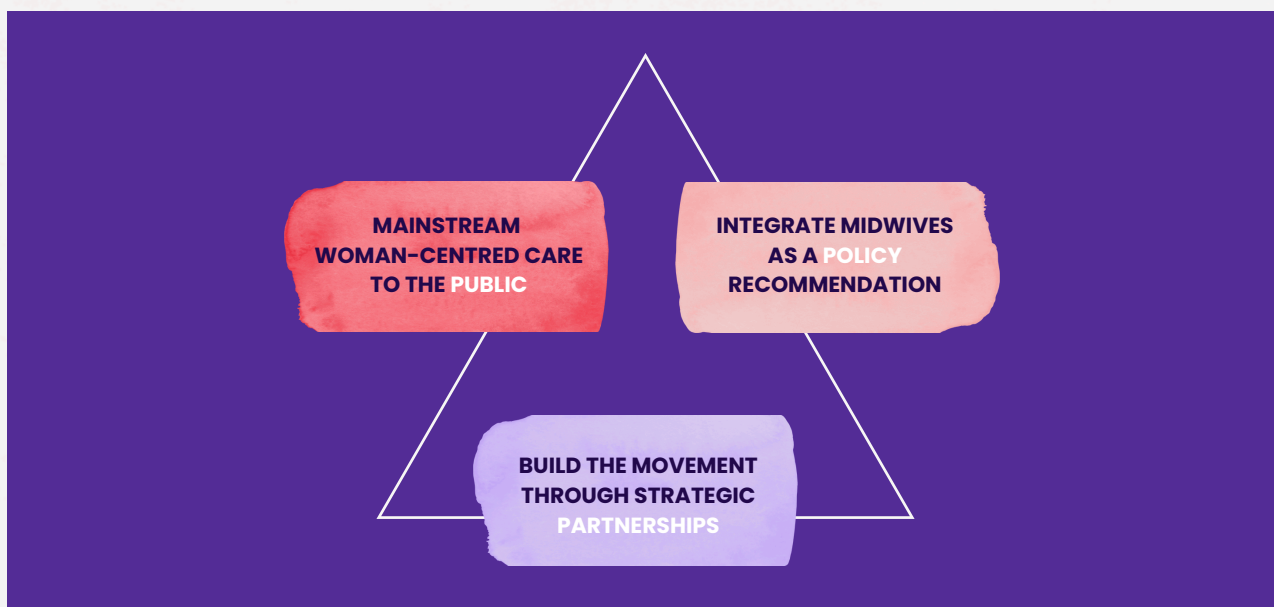
OUR VISION:

The PUSH campaign works to achieve a future where every woman's voice shapes her care.

OUR MISSION:

PUSH is transforming health systems by championing midwives as essential providers of high-quality, respectful sexual and reproductive healthcare. We work to ensure women's voices are heard and their needs, preferences, and rights drive decision-making. Through advocacy, partnerships, and policy change, we enable midwives to deliver woman-centred care and encourage other health professionals to adopt this approach.

OUR STRATEGY:

Over the next two years (2025-2026), the campaign will use a pyramid approach with three pillars focused on public, policy, and partnerships.

	WHAT?	WHO?	HOW?	OUR DREAM
Public	Mainstream WCC	Women, general public, media	Communication Reach	**MORE** awareness around WCC as the standard of practice and **MORE** demand for midwives as the provider of choice
Policy	Integrate midwives in policy	Policymakers	Policy Influence	**MORE** policymakers familiar with and promoting midwives in policy recommendation
Partnership	Build the WCC movement	Gender equality, SRHRJ, feminist, climate, health systems, health workers, men/boys, youth coalitions	Partnership Growth	**MORE** multi-sectoral partners co-owning the WCC movement and the PUSH Campaign for greater advocacy and impact

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PILLAR 1: MAINSTREAM WCC TO THE PUBLIC

THE PROBLEM:

The What Women Want campaign asked more than a million women around the world their priorities for high-quality reproductive and maternal care: the top demand was respect, exposing widespread mistreatment and abuse (5). This same campaign also showed midwives in the top 5, indicating an unmet need (6). Ironically, a recent meta-analysis found midwives as a protective factor against obstetric violence (7). We know the solutions; Now, it's time to deliver.

On the one hand, women's health remains stigmatised and fragmented (1,8). On the other hand, there is public knowledge and awareness about the comprehensive, and high-quality (SRMNAH) services that midwives have the competencies to provide along with a misconception of midwives as a lower-class cadre or a provider of last resort(9).

OUR OBJECTIVE:

PUSH aims to mainstream woman-centred-care as a standard of practice and demonstrate how the midwifery model and philosophy of care can deliver it.

This pillar activates a wider communications reach through an attitude change and awareness raising campaign. The campaign utilises a two-pronged approach: 1) increasing public recognition and understanding of WCC, ultimately empowering women, their partners, communities, and allies, to demand their rights to respect and dignity in all their SRMNAH, and 2) changing public perception around midwives, their competencies, and the types of care they provide, ultimately increasing demand and acceptability for midwives.

OUR APPROACH:

The campaign will be co-created in collaboration with women's groups, midwives, and other advocacy partners.

The empirical evidence around WCC is widespread and inaccessible to non-scientific audiences. We will c**onsolidate the evidence** and propose a drafted operational definition for WCC to serve as the basis for community consultation and collaboration. PUSH aims to **co-create a simple image** showing the characteristics of WCC for public uptake, establishing midwives as partners to women, and promoting their role in providing high-quality, evidence-based, respectful, empowering SRMNAH to all. We aim to co-create infographics, reels/videos, bite-sized sharable content, visuals and stories, and other creative tactics to **rebrand WCC and midwives** to the general public.

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PUSH aims to position midwives as **visible and reliable partners and advocates** aligned with women's groups, their advocacy priorities across the holistic women's health agenda and its eight respective components (1). Guided by the women's health agenda, PUSH will also utilise storytelling, media assets, and positive case studies to showcase the powerful partnership between midwives and WCC advocates.

To engage globally, we will **host a series of virtual consultations** and townhalls in collaboration with networks of women's and community groups to introduce the campaign and its drafted objectives, identify major barriers, and create space for co-production of main messages for various audiences tailored for differing contexts. This will be complemented by two to four national consultations in focus countries to refine the campaign messaging and marketability. Moreover, the 'hook', 'case for' and 'promotability' of WCC and midwives will differ among contexts thus, the purpose of these consultations is to co-create and refine targeted messaging for various stakeholders (women, their partners, their families/communities/other relevant decision makers, media, policymakers). We will **utilise positive images, media influencers, and storytelling** from various community stakeholders to promote WCC and change the misconception of midwives as the provider of last resort and increase demand for the profession. Additionally, a media and influencer mapping will also be conducted at global and regional levels, and in at least 3 focus countries.

In select focus countries, PUSH will leverage ICM's national midwives' associations to roll-out **national consultations** in partnership with women's groups, targeted opponents and allies, and media. These national consultations will be used to identify negative perceptions which must be countered and corrected and co-create tailored communication strategies and plans. In some contexts, targeted opponents or allies may include social media influencers in fashion, women's health or maternity care, comedy and/or nutrition, men and boys, traditional elders, community and religious leaders, health and hospital managers, other service providers (obstetricians, nurses, doulas, lactation consultants, etc...), and policymakers, who must be included and involved in the inception, ownership and implementation of the national campaign. Ideally, targeted groups will create targeted messaging for their constituents to socialise and promote WCC and midwives as providers of choice.

On this basis, a **global communications campaign toolkit** will be launched and widely disseminated among partners. PUSH will work actively to support the implementation of **3 national campaigns in focus countries.** Moreover, as part of the dissemination, we will partner with women's groups and health advocates **to normalise WCC** as a right for every woman and family (guided by the Respectful Maternity Care Charter) and promote the role of midwives in its delivery. We will also work to **equip ICM midwives' associations (MAs) and midwives** to promote their philosophy and advocate for WCC.

OUR AIM:

By end of 2026, PUSH will have:

- Increased engagement with the campaign through 50% increase in followers gained, 50% more subscriptions to the newsletter, and 10,000 more visits to the website.
- Implemented PUSH campaign mobilisations in at least 3 countries

PILLAR 2: INTEGRATE MIDWIVES IN POLICY

THE PROBLEM:

The World Economic Forum recently concluded that closing the women's health gap could benefit 3.9 billion women and add $ 1 trillion annually to the global economy by 2040; midwives are a critical yet missing part of the solution (10).

Midwives could save more than 4.3 million lives per year by 2035 (11). Midwives can also provide about 90% of SRMNAH care needs, however, they account for less than 10% of the global SRMNAH workforce (12). The world currently faces a shortage of at least 1 million midwives, with three-quarters of this shortage coming from low and low-and-middle-income countries (13). These shortages are further exacerbated by health systems challenges like poor compensation, inadequate working conditions, limited leadership opportunities, and lack of access to education. Moreover, 90% of midwives globally are women, often facing gender-based discrimination and violence; similar to the women they serve (11).

Continuity of midwife care (COMC) have been cited as a critical recommendation to saves lives, improve maternal and newborn outcomes, increase access to quality integrated sexual and reproductive health services, achieve universal health coverage, eliminate violence against women, and advance gender equality (14,15). Midwives have been and remain the key to achieving sustainable development; but remain a siloed recommendation among mostly health and some gender policymakers.

OUR OBJECTIVE:

PUSH campaign aims to increase issue salience and awareness among policymakers that midwives are an untapped and underutilised policy intervention.

Policymakers must come to realizeise that WCC and COMC are evidence-based, scalable, accepted/desired, gender-transformative intervention with a compounding value-for-money. The ripple effects and return on investment in midwives expands beyond health, with positive outcomes across economic, social, gender, environmental, educational, and technological systems, among others.

OUR APPROACH:

The **PUSH campaign aims to influence policymaker awareness of WCC and midwives** utilising a three-pronged approach:

Firstly, PUSH will work with its MAs and key advocacy partners to **identify high-level political champions and policy influencers**, including but not limited to ministers of health, finance, gender, climate, labour, and other parliamentarians, who are WCC and midwifery champions. In focus countries rolling out national PUSH campaign, this type of stakeholder (or champion) mapping will be a key deliverable.

Within these countries with high political will, donor-support, and multi-stakeholder working groups for maternal health advocacy (including but not limited to UHC2030, STAGE, EWENE, GMAR, Quality of Care Networks, among others), **PUSH will leverage existing momentum and networks.** Within midwifery deserts, PUSH **will target non-traditional policy influencers,** ranging from media to women's coalitions to community leaders to health and finance policymakers to introduce midwives and promote WCC.

Thirdly, PUSH will **advocate and promote WCC and midwives locally and globally**. At an *individual level*, PUSH will work with its MAs, partners, and allies to **obtain statements of support for WCC and midwives** from high-level political champions. These statements will be promoted widely on the PUSH social media platforms. PUSH will further engage with these political champions and influencers in national campaigns to increase visibility around midwives and WCC. At a *national level* in focus countries, PUSH will support in convening and connecting WCC champions at all levels (from the grassroots to the grass-tops) to **synergizeise advocacy around integrating midwives** as a policy recommendation. To address power asymmetries and optimizeise advocacy for action, PUSH will leverage these individual high-level political champions equipping them with tailored advocacy messages to promote WCC and COMC and in parallel also equip its MAs and community partners to lobby and influence these policymakers and influencers. Within deep engagement countries, PUSH will **align and integrate with advocacy action plans**, to ensure that this community-facing campaign within these health systems policy efforts is crucial to driving demand for midwives and promoting WCC.

PUSH will host policy dialogues with multi-sectoral actors to socialise WCC and midwives and support the integration of midwifery recommendations in national, regional, and global health policy. Moreso, through targeted engagements at high-level political events and convenings (including but not limited to CSW, IPU, WEF, OECD, and COP), PUSH aims to integrate midwifery within dialogues, advocacy events, strategies on climate-financing, humanitarian emergencies/conflict/migration, women's empowerment, gender equality measures, human capital, economic growth, and labour productivity.

OUR AIM:

By end of 2026, PUSH will have:

- 10 governments engaged with PUSH campaigns (including but not limited to: expression of interest, speakers at events, signing the pledge, attending policy dialogues, advocacy events, or others)

PILLAR 3: BUILD THE WCC MOVEMENT THROUGH STRATEGIC PARTNERSHIPS

THE PROBLEM:

The urgency to advocate for woman-centred care and midwives is greater than ever. The gains made in women and maternal health over the last 3 decades are reversing. Rising maternal mortality rates, especially among marginalised groups, highlight systemic inequities; with 4.5 million maternal and newborn deaths (including stillbirths) occurring each year—equating to one loss every seven seconds (15). The rollback of reproductive rights, coupled with healthcare workforce shortages, weak health systems, climate and humanitarian crises, threatens women's health and autonomy. Midwives are at the heart of the solution, delivering compassionate, life-saving care that honours women's choices and rights.

Historically, midwifery advocacy has been spearheaded by those within the profession and other maternal health scholars, donors, and practitioners. To truly build a movement, we need to leverage the power of collective action, with as many voices amplifying a simple message across every sector and discipline. In a radical shift, this campaign aims to build a grassroots movement for WCC and midwives, powered by communities of women and consortia of women's advocacy groups.

OUR OBJECTIVE:

This pillar serves as the base of the triangle and is at the core of PUSH's work moving forward. Through building upon and expanding our strategic partnerships and alliances, PUSH aims to start the movement for WCC.

The PUSH campaign aims to equip as many varied partners as possible with a simple message around the value and quality WCC and midwives offer health systems and communities, causing an influential ripple effect in SRMNAH and beyond. If successful, the PUSH campaign and movement for WCC and midwives become owned and amplified by a multisectoral coalition of advocacy partners.

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OUR APPROACH:

To expand ownership of this WCC movement among strategic and multi-sectoral allies, the PUSH campaign will build a coalition, increase partnership growth, and create a unifying platform to strategise, align, and enhance advocacy efforts.

The first step of building the WCC movement is **defining the unifying principles**. PUSH will work with partners to co-create and validate the "PUSH Principles" outlining the working definitions and key advocacy points of the campaign. PUSH will also create **tailored engagement strategies** to onboard varied partners across sectors to the PUSH coalition. These tiers of engagement will clearly define the expectations and responsibilities of those joining the coalition and improve accountability.

The second step will be to conduct an extensive **partner mapping** to identify strategic allies based on shared values across a wide variety of health, gender, climate, and other adjacent sectors. Building on ICM's strength as a "global convenor, connector, and catalyst for midwives and partners across the landscape", PUSH will leverage ICM's network to strengthen partnerships between midwives, women's groups, communities, and relevant advocacy allies.

PUSH's top priority is to **meaningfully engage women's groups** and communities as the foundational partner and co-convener of this grassroots campaign. PUSH aims to **expand and build effective and equitable relationships** to develop and support the midwifery profession, highlight the partnership between women and midwives, and expand the movement for WCC.

PUSH aims to pitch the coalition and onboard **strategic partners**, starting with the maternal health advocacy space and expanding to the women's health, reproductive justice, gender equality, feminist, youth, climate, and other related sectors as outlined below:

Constituencies to engage	Sectors to Engage
1. UN system, 2. International NGOs and donors, 3. Local NGOs 4. Private sector (including FemTech), 5. Academia, 6. Influencers and Media, 7. Other health care professional groups	1. Humanitarian and migration, 2. Climate action, 3. Indigenous rights, 4. Youth leadership, 5. Food security and nutrition, 6. Economic empowerment, 7. human rights, etc…,

Additionally, PUSH plans to build alliances and leverage the existing advocacy platforms of complementary campaigns and movements working around woman-centred care within their contexts. These include but are not limited to the campaigns for birth and reproductive justice, the movement for respectful maternity care, global campaigns to end maternal and newborn deaths (e.g. Every Woman Every Newborn Everywhere(16); Healthy beginnings, hopeful futures(17); Start with Her(11)), advocacy to improve youth and girls' wellbeing, among others. Building stronger alliances for WCC could benefit from a broader narrative that underscores systemic accountability—illustrating how underfunded health systems, misaligned economic priorities, and governance challenges all contribute to inequalities in women's health. Through **collective action and joining like-minded collectives**, PUSH aims to promote the campaign and invite new partners to join this open-access coalition. PUSH will align and integrate its advocacy for midwives with the global women's health agenda and its components, and ultimately, increase the visibility of midwives within these complementary advocacy initiatives.

On the other hand, PUSH also aims to **engage with unlikely suspects** and historically excluded communities, including men and boys, religious leaders, among others.

The third step is activating PUSH as a **unifying platform** among allies, like-minded partners and WCC advocates to advance the movement and global campaign. In addition to this, PUSH will support **multi-stakeholder convenings** at national and regional levels to promote and support ongoing advocacy efforts related to WCC and midwives.

Finally, PUSH will **equip and unite** ICM's midwifery associations, WCC champions and likeminded partners, **to co-design and co-implement national** and regional campaigns.

OUR AIM:

By end of 2026, PUSH will have:

- 50 new partner organisations joining the coalition by signing the PUSH Pledge
- Expanded geographic representation and diversity of organisations in the coalition to include 4 regions

RESOURCING THE MOVEMENT

To operationalise and drive the campaign, PUSH will be actively fundraising over the next two years. Costed workplans will be developed outlining the activities under each pillar and proposed budgets for regional and national campaigns. For the next two years, the goal of the campaign is to fulfil proof-of-concept and become financially and operationally ready to expand to the next phase. This will be done by fulfilling the objectives outlined in the above strategy, regularly reporting progress against the key indicators, and outlining the vision for the next phase.

IN SUMMARY:

	PUBLIC	POLICY	PARTNERSHIP
Pillar	Mainstream WCC to the public	Integrate midwives in policy	Build the movement through strategic partnerships
Our Target	Women, general public, media	Policymakers	Gender equality, SRHRJ, climate, health systems, men/boys, youth, other
Our Dream	**MORE** awareness around WCC as the standard of practice and **MORE** demand for midwives as the provider of choice	**MORE** policymakers familiar with midwives and promoting midwives as policy recommendation	**MORE** multi-sectoral partners owning the WCC movement, joining PUSH for greater advocacy and impact
Our Objectives	• Increase **women and public understanding** on WCC and the role of midwives • Change **public perception, improve acceptability and increase demand** for midwives.	• Increase **salience and awareness among policymakers** about midwives as a best buy	• Expand **ownership of PUSH campaign** among strategic and multi-sectoral partnerships for advocacy and change • **Equip as many varied partners** as possible with a simple message around the value-add of WCC and midwives in health systems and beyond

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	PUBLIC	POLICY	PARTNERSHIP
Our Approach	• Conceptualise and normalise WCC and demonstrate how the midwifery philosophy of care can deliver it. • Re-brand WCC and midwives using storytelling and positive images. • Reposition midwives are visible partners to women and their advocacy across the holistic women's health agenda. • Empower women to demand WCC and midwives.	• Identify and lobby high-level political champions and non-traditional policy influencers to promote WCC and midwives • Identify midwifery deserts (mapping data from Midwives Hub) • Synthesize evidence and create advocacy and communication assets to recommend midwives as a best-buy among multi-sectoral policymakers. • Leverage momentum of maternal health advocacy partnerships and integrate PUSH within national advocacy in focus countries for scaling and investing midwives • Host and support policy dialogues with multi-sectoral actors to socialise and integrate midwives in policymaking.	• Build a coalition of WCC Champions and defining the unifying principles and tiers of engagement for various partners • Conduct an extensive partner mapping to identify strategic allies based on shared values across adjacent sectors • Support multi-stakeholder convenings at national and regional levels to amplify ongoing WCC advocacy • Align and integrate midwifery advocacy with the global women's health agenda and increase the visibility of midwives within these advocacy initiatives • Unite and equip MAs and women's groups to implement national PUSH campaigns.
By end of 2026, PUSH will have:	• Increased engagement with the campaign through 50% increase in followers gained, 50% more subscriptions to the newsletter, and 10,000 more visits to the website. • Implemented PUSH campaign mobilisations in at least 3 countries	• 10 governments engaged with PUSH campaigns (including but not limited to: expression of interest, speakers at events, signing the pledge, attending policy dialogues or advocacy events, or other)	• 50 new partner organisations joining the coalition by signing the PUSH Pledge • Expanded geographic representation and diversity of organisations in the coalition to include 4 regions

ACKNOWLEDGEMENTS

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