1 Summary

1. The *State of the World’s Midwifery 2021* (SoWMy2021) will provide an updated evidence base and detailed analysis of the present progress and future challenges to deliver effective coverage and quality of midwives and midwifery services. Publication will coincide with World Health Day in April 2021, to mark the conclusion of the international Year of the Nurse and the Year of the Midwife and the 10th anniversary of the first SoWMy report.

2. The main objectives are to:
   a) Show progress made since SoWMy2011 and SoWMy2014 in relation to the midwifery workforce, midwifery services coverage and quality as well as the education, regulation and professional status of midwives;
   b) Further improve the evidence base to enable stronger policy dialogue within countries to strengthen sexual, reproductive, maternal, newborn and adolescent health (SRMNAH) services;
   c) Support the *Every Woman Every Child* campaign and *Global Strategy on Human Resources for Health* by providing information on the midwifery workforce;
   d) Contribute to the monitoring of progress towards ‘leaving no-one behind’;
   e) Collate and share evidence on the impact of midwives on maternal and newborn health outcomes, and on the return on investment in midwifery.

3. The report will aim to inform evidence-based policy-making. It will begin by describing the state of the present-day midwifery workforce, providing an update since SoWMy2011 and SoWMy2014 in relation to effective workforce coverage, and referring to recent global and regional initiatives which positively influence midwifery policies and programs. Where possible it will include identification of qualified midwives working across the ICM Scope of Practice of a Midwife. Part two will focus on equity in terms of both effective coverage and equity of opportunity for midwives themselves (most of whom are female). Part three will consider the impact of midwives and the return on investment in midwifery. The final part will consist of an online country profile for each of the participating countries, collating key indicators to inform policy and planning for equitable access and effective coverage of midwifery services.

4. Prior to the launch of the main report, two preparatory knowledge products will be produced in 2020, focusing on return on investment in midwifery, and the impact of midwives on mortality and morbidity rates.

5. The target audience consists mainly of senior policy and decision-makers, program managers, health professionals and interested partners at global, regional and country levels. An accompanying advocacy toolkit will guide professional groups, funders and advocacy associations in using the report to drive policy change.

6. The United Nations Population Fund (UNFPA), the World Health Organization (WHO) and the International Confederation of Midwives (ICM) will co-ordinate the development and publication of the report and engage global, regional and national partners. The
governance arrangements include a Partner Coordination Group, a Steering Group and a Core Group.

7. To minimize the burden on participating countries, the report will be based on secondary analysis of data collected through two existing platforms: WHO’s National Health Workforce Accounts (NHWA) and ICM’s Midwife Map survey. Data analysis will be complete by June 2020. A final report will be available for launch in April 2021.

2. Background

The development of the SoWMy series has been led by UNPFA and has involved collaboration between more than 30 international agencies and organizations, including: the United Nations Children’s Fund (UNICEF), the World Health Organization (WHO), the International Confederation of Midwives (ICM), and the International Federation of Gynecology and Obstetrics (FIGO). Two previous global SoWMy reports have been published in 2011 and 2014. Additionally, there have been three regional SoWMy reports and two individual country reports. Dissemination workshops for global and regional reports have taken place in the Asia Pacific, Arab States and East and Southern Africa regions.

The SoWMy series aims to contribute towards progress under the Global Strategy for Women’s, Children’s and Adolescents’ Health and the health-related Sustainable Development Goals (SDGs). The SDGs set ambitious targets for universal coverage of essential health services. These targets are achievable only with a health workforce that is adequate in number, distribution, skills, motivation and performance.

Recent evidence demonstrates the importance and effectiveness of midwives. Investment in midwives is a cost-effective approach to the reduction of maternal and neonatal mortality and stillbirth, and midwife-led models of care result in excellent maternal and neonatal outcomes. Midwives are therefore considered key to the achievement of ambitious global health targets, and their specific role within SRMNAH care means that, operating within a fully functional health system, they are critical to meeting the sexual and reproductive health needs of women and adolescents. The United Nations High-Level Commission on Health Employment and Economic Growth underlined the importance of investing in new jobs in the health and social workforce. The Global Strategy on Human Resources for Health (HRH) sets out the policy agenda for achieving this investment, and calls for an improved evidence base to inform national, regional and global HRH policy.

The 72nd World Health Assembly designated 2020 as the International Year of the Nurse and the Year of the Midwife, in recognition of the pivotal role of midwives and nurses in working towards UHC. UNFPA is prioritizing investment in midwives to help achieve its goals relating to sexual and reproductive health and rights. In their commitment to EWEC and the associated Global Strategy for Women’s, Children’s and Adolescents’ Health, many countries have decided to invest in HRH and in particular in midwives.

The workforce data used in the 2014 SoWMy report date from 2012, so an update on the evidence base is needed to assess recent progress. SoWMy2021 will mark the end of the Year of the Nurse and Midwife and the 10th anniversary of the publication of SoWMy2011. The universal applicability of the SDGs means that it will be appropriate for SoWMy 2021 to consider countries from all regions of the world and all income groups, in contrast to the earlier reports which focused on low- and middle-income countries.
3. **Objectives**

SoWMy2021 will be researched and published in support of five main objectives:

1) Show progress made since SoWMy2011 and SoWMy2014 in relation to the midwifery workforce, midwifery services coverage and quality, and the education, regulation and status of midwives.

2) Further improve the evidence base to enable stronger policy dialogue within countries to strengthen SRMNAH services;

3) Support the EWEC campaign and Global Strategy on HRH by providing readily available information on the midwifery workforce, promoting country actions and partner support to accelerate progress on the SDGs through a stronger focus on access by women to skilled and competent midwives operating in an enabling environment;

4) Contribute to the monitoring of progress towards equity and ‘leaving no-one behind’, both in terms of equity within the workforce (e.g. equitable access to continuing professional development) and equity of access to services between and within countries.

5) Collate and share the evidence on the impact of midwives on maternal and newborn health outcomes and on the subsequent ability of women to transform their families and communities, and on the return on investment in midwifery.

4. **Scope of the publication**

SoWMy2021 will provide a detailed analysis of present progress and future challenges to deliver effective coverage of midwifery services. Midwives can only be fully effective if they operate as part of a team working within an enabling environment, so the report will take into account the importance of teamwork, referral mechanisms and the work environment, rather than focusing exclusively on individual cadres of health worker. As in 2014, therefore, a broad definition of the midwifery workforce will be used, including all health worker cadres making a significant contribution to SRMNAH care. Where possible the workforce of midwives that meet the ICM definition of a Midwife and work across the ICM Scope of Practice, will be identified.

Previous SoWMy reports have included only low- and middle-income countries, but all countries will be eligible for inclusion in SoWMy2021, subject to the submission of validated data. A core focus will be on addressing inequities in access to midwifery services and the resultant adverse pregnancy and newborn related outcomes. Throughout, examples of innovative or impactful workforce initiatives will be featured in panels. Participating countries and technical partners will be invited to submit information for this purpose.

The report will be structured in four parts. Part one will describe the state of midwifery in the present day, focusing on the four dimensions of effective coverage of the midwifery workforce and midwifery services: Availability, Accessibility, Acceptability and Quality (AAAQ). Part two will focus on equity both in terms of the effective coverage and in terms of equity of opportunity and support for midwives and other SRMNAH workers, with a particular focus on gender. Part three will consider the impact of midwives on survival, health and wellbeing, and the return on investment in midwifery. The final part (which will be available as an online annex to the main report) will consist of a country profile for each participating country, graphically presenting the dimensions of effective coverage in the present day and projected forward to 2030. Changes and trends in indicators between the 2011, 2014 and 2021 reports will be highlighted and discussed.
5. **Data collection**

Most of the quantitative data used to compile the report will come from two sources: (1) country submissions to WHO’s National Health Workforce Accounts (NHWA) data platform and (2) responses to ICM’s Midwife survey of its 140+ member associations. Staff in UN country and regional offices will be asked to support national NHWA focal points and midwives’ associations to locate, validate and submit the requested data to NHWA and the Midwife Map platform.

6. **Coordination and management**

The research, publication and launch of SoWMy2021 will be co-coordinated by UNFPA and WHO and ICM, and will engage international, regional and national partners supporting the EWEC campaign. In this respect it will further develop and enhance the collective collaboration and impact of the H6 partnership in support of EWEC. UNFPA will provide oversight on behalf of the H6 partnership.

A **Partner Coordination Group** (PCG) will be established to enable all interested partners to engage in the process. The PCG will receive regular updates and be connected at least once per quarter by teleconference. A **Steering Group** of up to 12 persons will be established with representation from the constituent members of the PCG. The SG will convene once every eight weeks by teleconference in the early stages and with increasing frequency towards the finalization of the report and the launch. UNFPA and WHO (health workforce department) will co-chair the Steering Group. The Steering Group will be regularly informed by a **Core Group**, chaired by UNFPA and comprising a limited number of representatives of the Steering Group members at technical level plus selected technical partners, including ICM and WHO.

Technical Working Groups may be constituted for specific, time-defined tasks. This will be at the initiative of the Steering Group to work on specific issues, e.g. data analysis, reviewing sections of the draft report, communications.

7. **Communications, media and social media**

The publication and launch of SoWMy2021 will coincide with World Health Day. Launch and post-launch activities will be co-ordinated by UNFPA, WHO, ICM and PMNCH. Informing policy dialogue is a core objective and will be supported by national and global advocacy. The strategy will be developed through a Communications Technical Working Group, with support from the communications teams at PMNCH and WHO. The press/media kit for the launch will include greater attention to social media and the continuation of advocacy messages to inform country and global actions.

8. **Calendar of activities**

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<thead>
<tr>
<th>Activity</th>
<th>Main report</th>
<th>Country profiles</th>
<th>Annexes</th>
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<tr>
<td>Preparation of two preliminary knowledge products</td>
<td>August 2019 – April 2020</td>
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<td>Submission of validated data to ICM Midwife Map survey</td>
<td>Complete by December 2019</td>
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<tr>
<td>Submission of validated data to NHWA</td>
<td>Complete by June 2020</td>
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<td>Data analysis and synthesis</td>
<td>July-October 2020</td>
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<td>Detailed report outline agreed</td>
<td>End September 2020</td>
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<td>First draft circulated for review</td>
<td>End November 2020</td>
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<td>Activity</td>
<td>Dates</td>
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<td>Comments received on draft 1</td>
<td>Mid-December 2020</td>
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<td>Second draft circulated for review</td>
<td>Mid-Jan 2021, NA, NA</td>
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<td>Comments received on draft 2</td>
<td>End January, NA, NA</td>
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<td>Third draft circulated for review</td>
<td>Mid-February, NA, NA</td>
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<td>Final sign-off</td>
<td>End February, January, January</td>
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<td>Design, translation and printing</td>
<td>March, February, February</td>
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<td>Launch</td>
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