

Asking Different Questions: A Call to Action for Research to Improve the Quality of Care for Every Woman, Every Child ¹

Short commentary for co-publication in JMWH

Despite decades of considerable economic investment in improving the health of families and newborns world-wide, maternal and newborn health outcomes have yet to be attained in many regions (1). This may be explained in part by the fact that only an estimated 7% of the investment has been invested in women and girls (2). The global turn towards recognizing the importance of prevention and the emphasis on positive experiences of pregnancy, intrapartum, postnatal care, and care in the first weeks of life, while minimizing adverse outcomes signal a critical change in the maternal and newborn health care conversation and research prioritization.

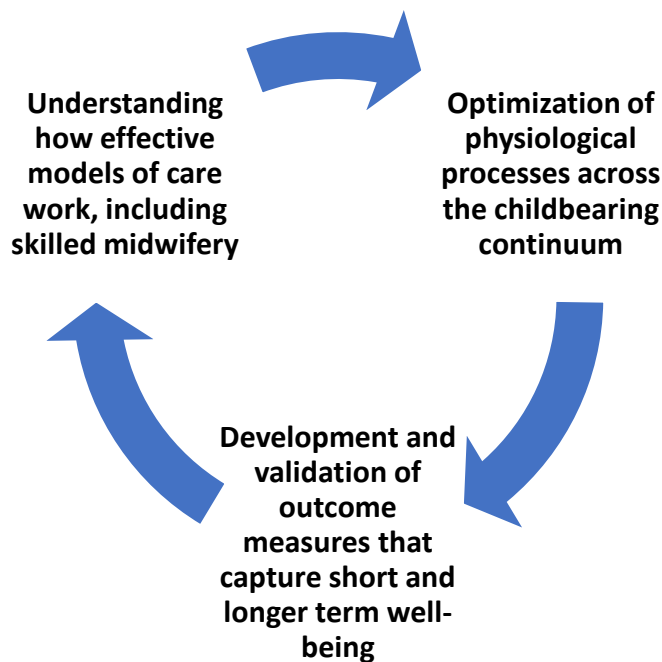
Our aim is to improve and expand the knowledge base to support the global UN/WHO ‘survive, thrive, and transform’ agenda (3). The promotion of sustainable, context-specific, high-quality care holds potential for optimal physical, psychological, and social well-being for women babies and families in both the short and long term. This brief commentary presents a series “different research questions” drawn from the evidence presented in the 2014 Lancet Series on midwifery (4-7) and a research prioritization study conducted with the World Health Organization (8) as a means to address global maternal and newborn health in different ways (Figure 1). The research priorities for future focus are:

- A. *Evaluate the effectiveness of midwifery care as defined by the QMNC framework and the contribution of its components, when compared to other models of care across various settings, particularly on rates of maternal/fetal/infant death, preterm birth, and low birth weight; and on access to and acceptability of family planning services.*

¹ This commentary is a shortened version of a longer paper published in BIRTH (add reference as of 6/22/2018).

- B. *Identify and describe aspects of care that optimize, and those that disturb, the biological/physiological processes for healthy childbearing women and fetus/newborn infants and for those who experience complications.*
- C. *Determine which indicators, measures, and benchmarks are most valuable in assessing quality maternal and newborn care across settings, including the views of women; and develop new ones to address identified gaps.*

Figure 1. Interconnection of the future research priorities to improve the quality of care for every woman, every child



Future research investment in maternal and newborn health should be focused on ‘right care’ - that is, care tailored to individuals, weighs benefits and harms, be woman-centered, work across the whole continuum of care, be committed to advancing equity, and informed by evidence, including cost-effectiveness (9). Future programs of research should include physiologic, psychosocial, economic, and life course approaches across all care settings. Along with using well established research methods, we also need to evolve new, transformative approaches that take into account the underlying social and political-economic mechanisms that function to enhance or constrain the well-being of women, newborns, families and societies

within a complex global network of maternity and newborn care heavily marked by resource inequity. Investment in research capacity and capability building is needed across all settings, but especially in those low to middle income countries that bear the greatest burden of poor outcomes. This call to action for investment in the three research priorities identified has the potential to achieve these benefits and to realize the ambitions of Sustainable Development Goal Three of good health and well-being for all (10).

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