

Demands for Quality Reproductive and WOMEN WANT Maternal Stealthcare from Nomen and Girls

No judgments for my decisions. More affordable health products. To always be treated with dignity. No insults from doctors and nurses. Increased pay for health workers. More health centers. Respect. Information about pregnancy and birth. To be involved in my own care. More midwives. Hospitals should have supplies. Contraceptive services for adolescent girls. LISTEN AND ACT ON THE 1.2 MILLION DEMANDS.

Introduction

A letter from Kristy Kade and Aparajita Gogoi, co-chairs of the *What Women Want* Steering Committee

Making women's voices heard through the *What Women Want* campaign has been an unprecedented, deep, onewoman-at-a-time enquiry into what a million experts want for their own maternal and reproductive healthcare. It has also been an enquiry into values: how women value themselves, how women are valued, how we value the evidence supplied by their voices. To be asked "what do you want?" is to be valued. To be listened to is to feel valued. To value ourselves is essential to demanding our rights.

For some women, the simple act of being asked for their views has been a first.

The conversations that followed sparked new awareness in women and girls—that their individual experiences of healthcare are important, that the expression of their views is the precursor to change, that they have the right to quality, safe and decent care.

This is a game changer because only when women know we have rights, can we demand them.

Who does the asking—and why—is also important. Many women are fed up with being studied and expressed irritation that people get paid to ask questions while nothing changes. What Women Want mobilizers often had to convince women that this time things would be different, explaining that women's demands would be taken to those perceived as having the power to make change happen.

This is why the question "what do you want?" is radical: it implies that women and girls have an innate power that begins with their knowledge and experiences; it lives on when they demand their rights and define the change they want to see. What Women Want nurtures women's and girls' individual power while also leveraging the power of the collective.

Those who asked women and girls what they wanted sometimes found it difficult to move the conversation from the negatives to the positives. We know the negatives: lack of supplies, shortages of staff, high costs, long distances to health centers. Our goal was to hear what women and girls wanted most: dignity and respect, clean and equipped facilities that are within reach physically and financially, choices, information—and much more. This campaign called on women to make a statement of hope about how each and every one of us believes that things should rightly be.

What Women Want has also yielded a unique commentary on the uses and abuses of power.

It's not so much that women lack power, as that power is systematically taken away.









But answers show that women want that power back; back from those who make decisions on our behalf; back from those who design and implement health policies and programs without consulting us.

Whether the women asked are from low, middle or high-income countries, for many of us it remains a struggle to articulate what "I" want as an individual. When asked "what do YOU want?" colleagues in the healthcare field often responded with their organizational line—Universal Health Coverage, an end to gender-based violence-valid expressions of their professional aims but not necessarily the same as their personal ask. Making that shift to "what I want" requires imagination and identification with all other women. It prompts a shift in how we see ourselves, not as "the doers" or "the done to," but as women whose experience is universal.

All who now listen to these demands from women must ask ourselves: how can I better help women to get the quality healthcare they so much want and to which they have a right?

How can we make women's demands the basis for our actions?

Policy makers, we call on you to value theses voices. They may not be appearing in a peer reviewed journal, but they are evidence. Funders, we call on you to place value on what women want when making your spending investments. More than a million women have told you what they want; now fund that. As proposals and plans are created in the world's capitals, we must stop and check how we have fully incorporated the solutions proposed by the women many set out to support.

This global campaign has mobilized women and girls and engaged policy makers, program implementers, officials and political representatives, so that quality, equity and dignity in healthcare is no longer a distant dream for the women of the world. At its deepest level it is a challenge to the power structures which hinder women's maternal and reproductive health, but most immediately and urgently...

What Women Want is a resounding call for better quality health services.

Together let us take this unprecedented and powerful collection of 1.2 million individual voices and make sure that it becomes the driving force behind sustained local, national and global change.





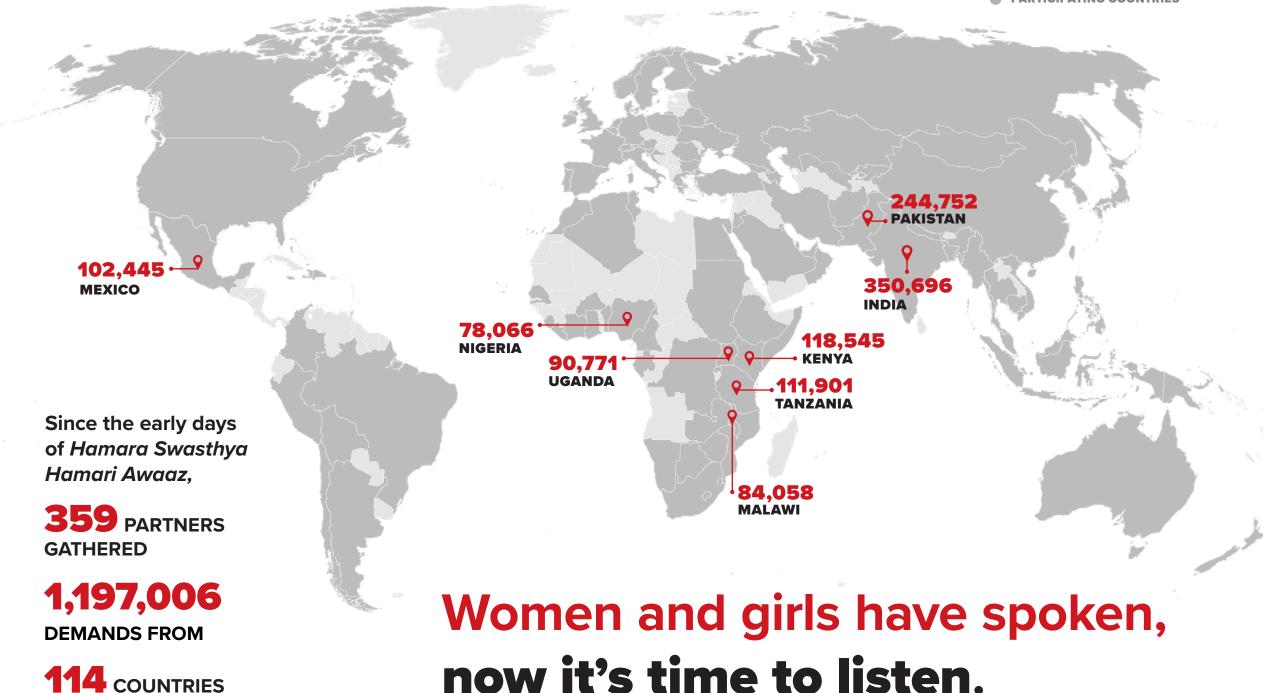
Listening to women is a radical act. But acting on what we hear is revolutionary.

In solidarity,

Aparajita Gogoi Kristy Kade

Co-chairs, What Women Want: Demands for Quality Healthcare for Women and Girls

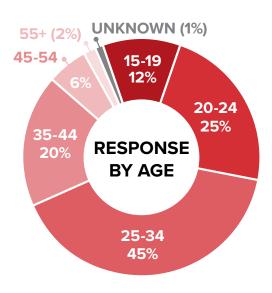




114 COUNTRIES

359 PARTNERS

1,197,006 DEMANDS



The top twenty demands for quality reproductive and maternal healthcare from women and girls globally are presented, as are the results disaggregated by age group.* Many women and girls provided more than one demand, which are reflected in the results. The 143,556 responses from the original *Hamara Swasthya Hamai Awaaz* campaign are not included.

TOP TWENTY DEMANDS:

- 1. Respectful and dignified care: 103,584
- 2. Water, sanitation and hygiene: **90,625**
- **3.** Medicines and supplies: **82,805**
- Increased, competent, and better supported midwives and nurses:65,028
- Increased, fully functional and closer health facilities: 59,388
- **6.** Increased, competent and better supported doctors: **59,015**
- 7. Free and affordable services and supplies: **58,268**
- **8.** Antenatal information, personnel, services and supplies: **53,668**
- Labor and delivery information, personnel, services and supplies:45,323
- 10. Timely and attentive care: 43,290
- **11.** Transportation infrastructure: **39,557**

- 12. Improved health, well-being, maternal, reproductive and/or general health services: 37,076
- **13.** Family planning information, personnel, services and supplies: **36,121**
- **14.** Ethical, lawful, non-abusive and secure care: **34,081**
- **15.** Food and nutrition information, personnel, services and supplies: **31,688**
- Child health and welfare information, personnel, services and supplies:
 30,601
- 17. More female providers: 26,267
- 18. Increased, competent and better supported health providers (general):21,873
- Counseling and awareness on maternal, reproductive and general health and services: 20,840
- **20.** Menstrual health: **17,729**

^{*}Demands from those with unknown ages are in included in the global totals, but disaggregated data is not provided for this group.

15-19 demographic

- **1.** Respectful and dignified care: **12,449**
- 2. Medicines and supplies: 9,164
- **3.** Water, sanitation and hygiene: **8,507**
- 4. Menstrual health: 8,281
- 5. Increased, competent, and better supported midwives and nurses: **5,814**
- 6. Improved health, well-being, maternal, reproductive and/or general health services: **5,282**
- Increased, fully functional and closer health facilities: 5.095
- **8.** Timely and attentive care: **4,826**
- Increased, competent and better supported doctors: 4,341
- **10.** Antenatal information, personnel, services and supplies: **4,331**
- **11.** Free and affordable services and supplies: **3,881**

DEMAND: More timely and quality attention

Francisca, 15 years old, Mexico

- **12.** Adolescent and youth focused information, personnel, services and supplies: **3,802**
- **13.** Family planning information, personnel, services and supplies: **3,729**
- **14.** Labor and delivery information, personnel, services and supplies: **3,551**
- **15.** Ethical, lawful, non-abusive and secure care: **3,332**
- **16.** Transportation infrastructure: **3,014**
- **17.** Counseling and awareness on maternal, reproductive and general health and services: **2,608**
- **18.** Food and nutrition information, personnel services, and supplies: **2,535**
- 19. Confidentiality and privacy: 2,398
- **20.** Increased, competent and better supported health providers (general): **2,210**

20-24 demographic

- **1.** Respectful and dignified care: **26,506**
- 2. Water, sanitation and hygiene: 22,524
- Increased, competent, and better supported midwives and nurses: **18,661**
- 4. Medicines and supplies: 17,985
- Increased, competent and better supported doctors: 16,764
- **6.** Free and affordable services and supplies: **14,959**
- Increased, fully functional and closer health facilities: 12.241
- **3.** Timely and attentive care: **10,385**
- Labor and delivery information, personnel, services and supplies: 10,340
- **10.** Antenatal information, personnel, services and supplies: **9,836**
- **11.** Ethical, lawful, non-abusive and secure care: **8,878**

DEMAND: Do a lot more sex education campaigns and provide HIV testing services at community level

Ruth, 24 years old, Kenya

- **12.** Improved health, well-being, maternal, reproductive and/or general health services: **8,618**
- **13.** Family planning information, personnel, services and supplies: **8,005**
- **14.** Transportation infrastructure: **7,813**
- **15.** Food and nutrition information, personnel, services and supplies: **6,383**
- **16.** Increased, competent and better supported health providers (general): **5,672**
- **17.** Counseling and awareness on maternal, reproductive and general health and services: **5,472**
- **18.** Child health and welfare information, personnel, services and supplies: **4,946**
- 19. Confidentiality and privacy: 4,039
- 20. Beds and bedding: 3,964

25-34 demographic

- 1. Respectful and dignified care: **40,074**
- 2. Water, sanitation and hygiene: 38,438
- 3. Medicines and supplies: 31,674
- Increased, competent, and better supported midwives and nurses: 26,670
- Increased, competent and better supported doctors: 25,439
- **6.** Free and affordable services and supplies: **25,220**
- 7. Increased, fully functional and closer health facilities: **24.877**
- 8. Antenatal information, personnel, services and supplies: 22,289
- Labor and delivery information, personnel, services and supplies: 19,813
- 10. Timely and attentive care: 16,847
- **11.** Transportation infrastructure: **16,588**

DEMAND: Clean toilet and bathroom

Laxmi, 28 years old, India

- **12.** Family planning information, personnel, services and supplies: **14,705**
- **13.** Child health and welfare information, personnel, services and supplies: **14,200**
- **14.** Ethical, lawful, non-abusive and secure care: **13,955**
- **15.** Food and nutrition information, personnel, services and supplies: **13,849**
- **16.** Improved health, well-being, maternal, reproductive and/or general health services: **13,484**
- **17.** More female providers: **12,118**
- **18.** Increased, competent and better supported health providers (general): **8,579**
- **19.** Counseling and awareness on maternal, reproductive and general health and services: **7,784**
- **20.** Post-partum, stillbirth, newborn and infant information, personnel, services and supplies: **7,126**

35-44 demographic

- **1.** Respectful and dignified care: **17,097**
- 2. Medicines and supplies: 16,345
- **3.** Water, sanitation and hygiene: **14,898**
- Increased, fully functional and closer health facilities: 12,759
- **5.** Antenatal information, personnel, services and supplies: **12,514**
- **6.** Free and affordable services and supplies: **9,730**
- 7. Increased, competent, and better supported midwives and nurses: 9,286
- **8.** Labor and delivery information, personnel, services and supplies: **8,638**
- **9.** Transportation infrastructure: **8,560**
- **10.** Child health and welfare information, personnel, services and supplies: **8,188**
- **11.** Increased, competent and better supported doctors: **8,064**

DEMAND: We need enough drugs at our hospital so that we will not be sent back without treatment

Mabimiwaji, 39 years old, Malawi

- **12.** Timely and attentive care: **7,558**
- **13.** Family planning information, personnel, services and supplies: **7,320**
- **14.** Improved health, well-being, maternal, reproductive and/or general health services: **6,658**
- **15.** Food and nutrition information, personnel, services and supplies: **6,519**
- **16.** More female providers: **5,867**
- 17. Ethical, lawful, non-abusive and secure care: 5,198
- **18.** Schools and educational opportunities: **3,751**
- 19. Increased, competent and better supported health providers (general): 3,666
- **20.** Counseling and awareness on maternal, reproductive and general health and services: **3,314**

45-54 demographic

- **1.** Medicines and supplies: **5,302**
- 2. Respectful and dignified care: **5,072**
- **3.** Water, sanitation and hygiene: **3,716**
- 4. Antenatal information, personnel, services and supplies: 3,496
- Increased, fully functional and closer health facilities: 3,233
- 6. Increased, competent, and better supported midwives and nurses: **3,224**
- **7.** Free and affordable services and supplies: **2,838**
- **8.** Timely and attentive care: **2,677**
- Increased, competent and better supported doctors: 2.640
- Transportation infrastructure: **2,504**
- **11.** Labor and delivery information, personnel, services and supplies: **2,070**

DEMAND: Government support for traditional midwives

Francisca, 47 years old, Mexico

- **12.** Improved health, well-being, maternal, reproductive and/or general health services: **1,843**
- **13.** Ethical, lawful, non-abusive and secure care: **1,736**
- **14.** Family planning information, personnel, services and supplies: **1,669**
- **15.** Food and nutrition information, personnel, services and supplies: **1,548**
- **16.** Child health and welfare information, personnel, services and supplies: **1,508**
- 17. Increased, competent and better supported health providers (general): 1,221
- **18.** Beds and bedding: **1,042**
- **19.** More female providers: **1,010**
- **20.** Counseling and awareness on maternal, reproductive and general health and services: **1,004**

55+ demographic

- **1.** Medicines and supplies: **1,703**
- 2. Respectful and dignified care: 1,530
- **3.** Water, sanitation and hygiene: **1,244**
- 4. Free and affordable services and supplies: 995
- Increased, competent and better supported doctors: 899
- Antenatal information, personnel, services and supplies: 837
- **7.** Transportation infrastructure: **800**
- Increased, fully functional and closer health facilities: **778**
- Increased, competent, and better supported midwives and nurses: 701
- **10.** Improved health, well-being, maternal, reproductive and/or general health services: **649**
- 11. Timely and attentive care: 638

DEMAND: Equal treatment not because someone rich deserves better treatment, we are all women who need help equally

Edna, 72 years old, Malawi

- **12.** Labor and delivery information, personnel, services and supplies: **548**
- **13.** Ethical, lawful, non-abusive and secure care: **513**
- **14.** Food and nutrition information, personnel, services and supplies: **508**
- 15. Beds and bedding: 488
- **16.** Counseling and awareness on maternal, reproductive and general health and services: **430**
- **17.** Family planning information, personnel, services and supplies: **377**
- **18.** Increased, competent and better supported health providers (general): **345**
- **19.** Post-partum, stillbirth, newborn and infant information, personnel, services and supplies: **271**
- **20.** Child health and welfare information, personnel, services and supplies: **236**

ALL DEMANDS

Categories with at least 200 unique responses are listed below. Previous categories that are now consolidated are listed next to the category that now includes them.

- Abortion information, personnel, services and supplies
- 2. Administration and record-keeping
- Adolescent and youth-focused information, personnel, services and supplies
- 4. Antenatal information, personnel, services and supplies
- 5. Beds and bedding
- 6. Breast and cervical cancer information, personnel, services and supplies
- Child health and welfare information, personnel, services and supplies
- 8. Community engagement and accountability
- 9. Complete and understandable communication
- 10. Confidentiality and privacy
- 11. Continuity of care
- 12. Counseling and awareness on maternal, reproductive and general health and services

- 13. Disability information, personnel, services and supplies
- 14. Electricity
- 15. Economic opportunity and financial support (housing support; poverty reduction)
- 16. Empowerment and rights (women's leadership)
- 17. End violence and harmful practices against women and girls
- 18. Environmental health and agricultural support
- 19. Equitable care (Universal Health Coverage)
- 20. Ethical, lawful non-abusive and secure care (no abuse, misconduct or negligence; no corruption; no discrimination; no fear of detainment, arrest or threat to self and family; security)
- 21. Evidence, research, innovation and technology
- 22. Family planning information, personnel, services and supplies
- 23. Fitness and recreation

- 24. Food and nutrition information, personnel, services and supplies
- 25. Free and affordable services and supplies (access to entitlements and insurance)
- 26. HIV, hepatitis, STI and TB information, personnel, services and supplies
- 27. Improved health, well-being and maternal, reproductive or general health services
- 28. Increased, competent and better supported doctors
- 29. Increased, competent and better supported health providers (general)
- 30. Increased competent and better supported midwives and nurses
- 31. Increased, full-functioning and close health facilities (operating and surgical theaters)
- 32. Infertility information, personnel, services and supplies



Around the world girls and women are standing up, speaking out and demanding change. What Women Want is an unprecedented call to action for sexual, reproductive and maternal healthcare. If we do not listen and act on these demands we have only ourselves to blame for stalled progress."

Betsy McCallon, CEO of White Ribbon Alliance

- 33. Labor and delivery information, personnel, services and supplies (maternity wards and waiting rooms; birth companion of choice; alternative birthing practices)
- 34. Laboratories
- 35. LGBTQ information, personnel, services and supplies
- 36. Malaria and vector-borne disease information, personnel, services and supplies
- 37. Male engagement and shifts in family/partner dynamics
- 38. Male health providers
- 39. Medicines and supplies (blood)
- 40. Menstrual health information, personnel, services and supplies
- 41. Miscarriage information, personnel, services and supplies
- 42. More female health providers
- 43. NCDs information, personnel, services and supplies
- 44. No demand
- 45. Peace, no conflict
- 46. Policy and political change
- 47. Post-menopausal and elderly information, personnel, services and supplies

- 48. Post-partum, stillbirth, newborn and infant information, personnel, services and supplies (fistula care; mental health/postpartum depression; family leave)
- 49. Other
- 50. Other specific services (e.g. dentistry, eye care)
- 51. Reduced medicalization or do not want service (e.g. no c-section, family planning, abortion)
- 52. Referral system
- 53. Religious support
- 54. Respectful and dignified care (to feel heard; respect for individual decisions; no judgement; friendly, kind and polite health workers; informed consent)
- 55. Schools and educational opportunity
- 56. Specialists
- 57. Support for traditional, mobile and community health workers
- 58. Timely and attentive care (24X7 availability; reduced waiting times; no abandonment or rushed out)
- 59. Transportation infrastructure
- 60. Water, sanitation and hygiene
- 61. Want children

The campaign directly benefits women but also the leaders in charge of making politics, for they can see and read that women are giving good ideas, not only to improve quality. There are many other ideas that will serve politicians."

María Luisa Becerril Strafor, What Women Want champion, Mexico

