

*A commitment to women and
moms-to-be, their health, and
their holistic well-being.*

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Why We PUSH

FOR WOMEN. FOR MOMS.
FOR FAMILIES.

PUSH BIRTH PARTNERS



Our Cause

PUSH is a 501(c)(3) organization dedicated to building a trusted partnership and support system for all birthing families, with a program design that emphasizes care for underrepresented communities, families at higher risk of pregnancy-related complications, and the medically uninsured population. Through a public health framework and the core competencies of community health workers, we aim to create an environment supportive of women, moms, and families.

In 2020, at the onset of the coronavirus, PUSH was established. Today, we continue our effort towards an integrated approach to collectively PUSH for improved maternal health experiences and outcomes through a person-centered care model.

It Takes a Community

Jacqueline McLeeland founded PUSH in response to the maternal mortality and morbidity rate, particularly among people of color, where women and their families are at significantly higher risk of maternal death or severe maternal morbidity.

As a high-risk patient, Jacqueline had her own challenges during pregnancy including concerns of polyhydramnios (high amniotic fluid) and after pregnancy, a suspected pulmonary embolism within 12 hours of delivery. But she made it through her pregnancies... and so did her babies. One of the key factors to Jacqueline's successful maternal health journey was having a strong support system, information, and timely access to the care she needed for a healthier prenatal experience and postpartum recovery.

PUSH aims to provide an individualized level of support that many women and families do not have, before, during, and after pregnancy.



The Problem

More women die in childbirth in the U.S. compared with other industrialized countries. In recent years, the U.S. maternal mortality rate has more than doubled, with over 80% of these deaths considered preventable. A death is preventable if there was at least some chance of the death being avoided by one or more reasonable changes to the circumstances of the patient, provider, facility, systems or community factors (MMMRC, 2020). Racial disparities are an ongoing concern as Black women are three to four times more likely than white women, despite socioeconomic status, to die from complications in childbirth. With PUSH, we can change the narrative.

WHERE WE STARTED: TEXAS

Texas has one of the highest maternal death rates in the country. There is a need for comprehensive and timely community support even months after childbirth (texasmed.org).

PATHWAYS TO PUSH™

