

A Call for Engagement for Maternal, Newborn and Child Survival

Media Backgrounder, November 2009

What's Going On?

In the developed world, the arrival of a new baby is most often an occasion for celebration, a happy milestone for growing families. But elsewhere in the world, women literally risk their lives to give birth, and many newborns die within minutes or days. Many of the children who are lucky enough to survive their early days will not celebrate their fifth birthday. Recent reports estimate that in 2008, more than nine million children died before they reached five years of age; 536,000 women died from causes related to pregnancy and childbirth. Many of these deaths could be prevented every year through affordable, known solutions such as simple medical procedures (such as ability to carry out a c-section in case of obstructed labour), medications and well-trained planned health care support.

The social and economic impact of this continuing tragedy costs the world in terms of its economic productivity and its very humanity. USAID estimates that global economic impact of maternal and newborn mortality alone is US \$15 billion in lost potential production each year. Maternal and child mortality and morbidity rates are highest among the poorest countries and communities. It is also an issue of equity and human rights. The Human Rights Council adopted last June a landmark resolution on 'Preventable maternal mortality and morbidity and human rights' in which governments express grave concern for the unacceptably high rates of maternal mortality and morbidity¹, and commit to enhance their efforts at the national and international level to protect the lives of women and girls worldwide.

In recent years, world action has been channeled through The **Partnership for Maternal, Newborn & Child Health (PMNCH)**, a global health partnership established in 2005 and hosted by the World Health Organization (WHO). The Partnership's mission is to support the global health community to work successfully towards achieving the Millennium Development Goals (MDGs) established by the United Nations. MDG #4 aims to reduce child mortality by three quarters and MDG #5 sets a target to reduce maternal mortality by two-thirds by 2015. A cornerstone of the Partnership's work is promoting the concept and reality of "continuum of care" so that the health care needs of women and their children are addressed from pre-pregnancy through the early years of a child's life. To do this, the Partnership, through its nearly 300 members is creating opportunities for knowledge sharing and skills development, and helps countries and non-profit organizations leverage existing resources to improve health care systems, programs and policies so they better serve the needs of mothers and children. The Partnership is also focused on generating political will and leadership around this critical international problem.

¹ http://www.who.int/pmnch/topics/maternal/20090617_humanrightsresolution/en/

Recently, WHO Director General, Dr. Margaret Chan, launched a **Global Consensus for Maternal, Newborn and Child Health (MNCH)** at a high-level event during the UN General Assembly. The Global Consensus - spearheaded by the PMNCH and first agreed to by G8 leaders in July 2009 - recognizes the need to align current momentum in politics, advocacy and finance behind a commonly agreed set of policies and agreed interventions to accelerate progress on the ground.

The **specific needs of mothers**, particularly those in poor developing countries, are situated in the broader MNCH agenda. The International Federation of Gynecology and Obstetrics (FIGO), highlights that there is a need for strong efforts to promote safe motherhood and the improvement of maternal health within the efforts for improved continuum of care. Lack of attention to these issues result in the unacceptable burden of maternal deaths and disability caused by lack of quality care. FIGO estimates that there are approximately two million women who suffer from obstetric fistula around the world, with more added every day. This horrific condition, which causes internal tearing during labour or birth, causes incontinence, pain and usually social ostracization. In the western world, it is easily treated through surgical intervention.

The Partnership jointly with partners launched a **Countdown to 2015** Initiative to track country-level progress towards high, sustained and equitable coverage with health interventions to save women and children. A key component of this initiative is the engagement of Parliamentarians world-wide via the Inter-Parliamentary Union (IPU) and Parliamentarians in both developed and developing countries.

Canada's Story

Over the past decades, many of today's developed countries had very high maternal and child mortality rates. Canada's historical decline of maternal mortality is a success story that can be shared with countries that are struggling today with these very same issues. Over the period 1938-1953, the Canadian maternal mortality rate fell 82%. The role of Canada's government in improving the quality of care in facilities and increasing effective coverage of delivery care equitably is an example that can be useful to other countries that find themselves with a high maternal mortality burden today.

Today, the Canadian government, Canadian health agencies and not-for-profits are actively engaged both at home and around the world. Many Canadian physicians, health care professionals and public policy advocates, for example, have assumed leadership roles in the international groups that are tackling MNCH issues.

Canada is the 4th largest donor for MNCH overall among the 22 OECD donor countries. However, the disaggregated data by area of investment (maternal and newborn versus child) during the same period, shows that the spending is mostly occurring on child health. The Global Consensus for Maternal, Newborn and Child Health calls for emphasized attention to maternal and newborn health, while addressing major gaps in child survival - because women and infants are at greatest risk of death in the first few hours and days around birth.

A Call to Engage Canadian Parliamentarians

The MDGs for health have focused efforts to save women's and children's lives, but rapid progress towards these **requires the world to more than double its current annual health spending**, from US \$31 billion in 2008, to US \$67–76 billion in 2015. Notwithstanding the devastating number of mother and infant deaths reported by the Partnership, fighting maternal/newborn mortality is not receiving the resources it needs to diminish the number of needless deaths every year.

On December 3, 2009, for the first time ever, the PMNCH will hold its **Annual Board meeting** in Ottawa, Canada, and will bring its message of concern about the world's mothers and children to Canadian parliamentarians. Parliamentarians will learn of continued efforts to ensure that MNCH is on the **agenda for the G8/G20 leaders** meeting in Canada in the summer of 2010 and the need for on-going commitments to funding for an array of initiatives that could support, and even fast track, the achievement of MDGs 4 & 5.

During its visit to Ottawa, PMNCH delegates will issue a call for engagement to Canadian parliamentarians. Specifically, the Partnership will ask MPs and Senators to:

- Help ensure that Millennium Development Goals #4 and #5 are on the Agenda at the upcoming G8/G20 meetings in Canada in June, 2010.
- Focus on the global picture for MNCH presented from some of the world's top experts in this field at a Parliamentary Breakfast Briefing on December 3.
- Legislate to ensure universal access to essential care, and oversee government accountability to implement policies and legislation
- Support MNCH motions to be put before both the House of Commons and Senate which will call for increased investment in MNCH internationally, renewing a previous commitment made with the passing of a resolution(*) in June of this year.
- Become advocates for mothers, newborns and children.
- Share information about this devastating issue with their constituents and with media.
- Help ensure that Millennium Development Goals #4 and #5 are on the Agenda at the upcoming G8/G20 meetings in Canada in June, 2010.

(*) *"That this House renews its commitment to reducing maternal and newborn morbidity and mortality both at home and abroad and supports Canadian leadership within government and civil society to work within the G8 and as partners with UN agencies and appropriate global initiatives to achieve this goal."* - All Party Resolution unanimously passed in the House of Commons, June 2, 2009.

For more information about maternal, newborn and child health initiatives visit the following web sites:

- Partnership for Maternal, Newborn & Child Health (PMNCH) web site:
www.pmnch.org
- Countdown to 2015 for Maternal, Newborn & Child Survival web site:
<http://www.countdown2015mnch.org>
- SOGC website: www.sogc.org
- Federation of Gynecology and Obstetrics (FIGO) web site:
<http://www.figo.org>
- Birth Atlas video:
<http://www.youtube.com/whiteribbonalliance#p/a/1/v1InwsiGS0>

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About PMNC

The Partnership for Maternal, Newborn & Child Health is an international alliance of some 280 governments, donors, non-governmental organizations, health care professionals, academics, and multilateral agencies. Its mission is to support the global health community to work successfully towards achieving MDGs 4 and 5 by advocating for national, regional and global political commitments, and by raising funds to reduce maternal and child mortality. It enhances partners' interactions and uses their comparative advantages to: (1) build consensus on and promote evidence-based, high-impact interventions and deliver them through harmonization; (2) contribute to raising US\$ 30 billion (for 2009-2015) to improve maternal, newborn and child health through advocacy; and (3) track partners' commitments and measurement of progress for accountability.