

Countdown to 2015



Maternal, Newborn & Child Survival

HQ/2008/5
16 April 2008

CRITICAL HEALTH CARE FAILS TO REACH MOST WOMEN AND CHILDREN IN HIGH-MORTALITY COUNTRIES

World's health leaders and parliamentarians convene to seek accelerated action to reduce maternal and child deaths

New York / Cape Town, 16 April 2008—Leading global health experts, policymakers and parliamentarians are convening in Cape Town from 17th to 19th April at the *Countdown to 2015 conference* to address the urgent need for accelerated progress to reduce maternal, newborn and child deaths.

According to the 2008 report, *Tracking Progress in Maternal, Newborn & Child Survival*, released today, few of the 68 developing countries that account for 97 per cent of maternal and child deaths worldwide are making adequate progress to provide critical health care needed to save the lives of women, infants and children.

More than 10 million women and children still die each year from causes that are largely preventable and treatable. The majority of maternal and child deaths occur in Africa and South Asia, with sub-Saharan Africa increasingly bearing the global burden of mortality. One in five children are born in sub-Saharan Africa, yet some 50 per cent of all child deaths globally occur in the region, as do half of maternal deaths worldwide. In Niger, for example, women have a 1 in 7 lifetime risk of dying in pregnancy or childbirth.

The report highlights the rapid progress that many of the 68 countries are making in providing vaccinations, vitamin A supplementation coverage and insecticide-treated mosquito nets to prevent major killers, such as measles and malaria.

Nonetheless, treatment for potentially fatal illnesses and other vital health services fail to reach the majority of women and children, according to the findings. Such services depend on strong health systems that can provide 24-hour care within the community, at health clinics, and through a functioning referral system when more serious intervention is necessary. Access to these services is most critical at the time of birth and during the first two weeks of life, which are riskiest for mother and infant.

Tracking Progress in Maternal, Newborn & Child Survival identifies a series of missed opportunities to save lives:

- *Family planning*: The unmet need for contraceptives is high. Only one third of women in the 68 priority countries are using a modern method – a proven means of boosting

maternal and infant survival;

- *Skilled care at birth:* Only around half of women and newborns benefit from a skilled birth attendant at the time of birth, and even fewer receive care in the critical days and weeks after childbirth;
- *Clinical care for sick children:* Only about one third of children with pneumonia – the biggest single killer of children – receive treatment;
- *Nutrition:* Undernutrition is the underlying cause of 3.5 million child deaths annually, and as many as 20 per cent of maternal deaths.

Despite these missed opportunities, the report also notes that a number of countries, including China, Haiti, Turkmenistan and several countries in sub-Saharan Africa, have made demonstrable progress in reducing deaths of children under five in the past three years. Sixteen of the 68 *Countdown* priority countries are now 'on track' to achieve Millennium Development Goal 4, while only three have a low maternal mortality.

To pave the way for a well-functioning 'continuum of care', governments and their partners must address obstacles such as weak health systems, funding shortages, and inequalities in access to care, according to the report. The findings show poor families missing out twice: on skilled care at birth and on care for newborns and children when they are ill. Other barriers include armed conflict and a high HIV prevalence, which together have erased any gains in child survival in at least 12 African countries.

Overall funding from donor governments for maternal, newborn and child health has increased in recent years, with official development assistance rising from \$2.1 billion to almost \$3.5 billion between 2003-2006, a 64 per cent increase. This investment has resulted in significant health gains, notably to boost immunization levels and prevent malaria. Nonetheless, health systems for maternal, newborn and child health remain grossly under-funded compared to the needs of priority countries. Total donor funding for maternal, newborn and child health still represents just 3 per cent of total donor aid disbursements.

Parliamentarians attending the 118th Assembly of the Inter-Parliamentary Union in Cape Town will join global health experts and policy makers at the Countdown to 2015 conference to discuss the role they can play in accelerating action to achieve Millennium Development Goals 4 and 5, on reducing child death and improving maternal health, respectively.

The *Tracking Progress in Maternal, Newborn & Child Survival* findings are also the subject of a special issue of the medical journal *The Lancet*.

End

For more information, please contact:

In Cape Town:

- George Ngwa, UNFPA, mobile: +27 72 627 1032, ngwa@unfpa.org

- Maria Djordjevic, Meropa Communications, mobile: +27 82 334 6192, mariad@meropa.co.za
- Tunga Namjilsuren, The Partnership for Maternal, Newborn & Child Health, mobile: +41 79 477 26 78 , namjilsurent@who.int

In London:

- Cathy Bartley, Bartley Robbs Consultants, mobile: +44 20 869 49138, cathy.bartley@bartleyrobbs.co.uk

In New York:

- Katja Iversen, UNFPA, office: +1 212 297 5016, iversen@unfpa.org

For video b-roll: Visit www.thenewsmarket.com/unicef to access broadcast-quality footage from Nepal ("[Applying Life-Saving Interventions to Save Nepalese Newborns](#)") and Senegal ("[A Rural Healthcare Center Plays Key Role in Reducing Infant and Child Mortality](#)"). Or visit the [UNFPA online channel](#).

Note for editors: Countdown to 2015: Maternal, Newborn and Child Survival is a collaborative effort of United Nations agencies, non-governmental organizations, universities, and other institutions and individuals established to track progress towards Millennium Development Goals 4 and 5, to reduce child death and improve maternal health, respectively. For more information, visit <http://www.countdown2015mnch.org>.