



**High-level meeting on saving  
the lives of mothers and children:**

accelerating progress towards achieving MDGs 4 and 5  
in the Eastern Mediterranean Region

29-30 January 2013, Dubai, United Arab Emirates

# GLOBAL PROGRESS TOWARDS MDGs 4 & 5

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# Millennium Development Goals

- **MDG 4: Reduce child mortality**

**Target:** Reduce by two thirds between 1990 and 2015, the under-five mortality rate.

- **MDG 5: Improve maternal health**

**Target:** Reduce by three quarters the maternal mortality ratio

**Target:** Achieve universal access to reproductive health

- **MDG 6: Combat HIV/AIDS, malaria & other diseases**

**Target:** Have halted by 2015 and begun to reverse the spread of HIV/AIDS

**Target:** Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

**Target:** Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases



# The challenge



## EVERY YEAR:

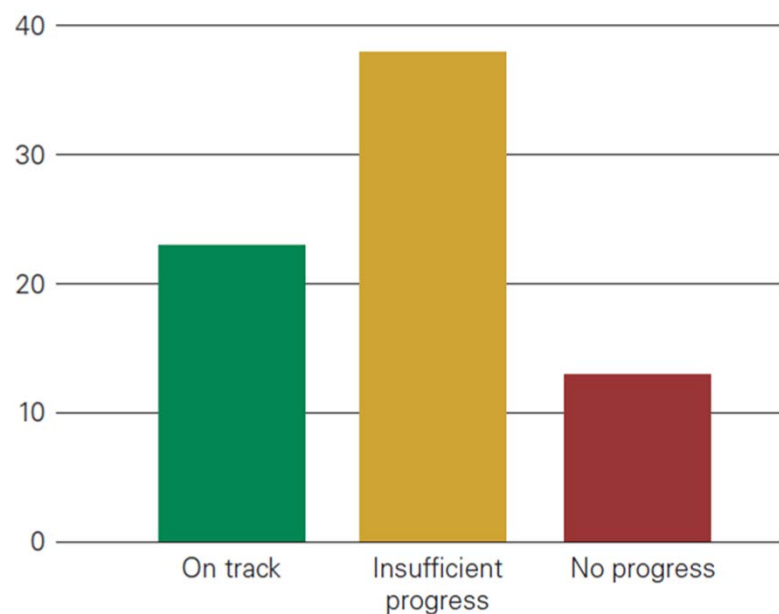
- 6.9 million children die before their 5<sup>th</sup> birthday
  - 3.0 million newborn babies in the first month of life, > 1 million due to prematurity
  - 2.0 million infants aged 1 – 12 months
- 287,000 women die due to complications of pregnancy and childbirth
  - 2.6 million stillbirths

These are silent tragedies  
that have to be prevented

# Where are we now?

## MDG4 for child survival

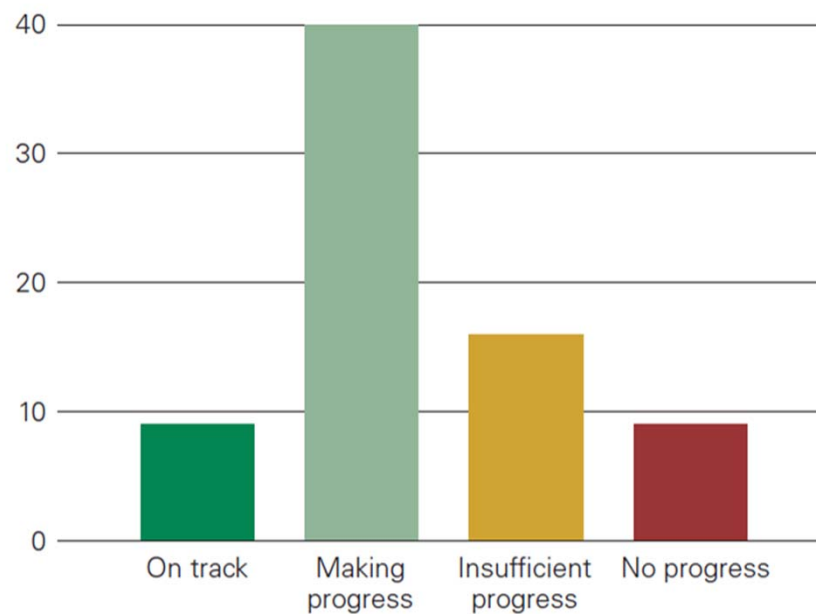
Number of *Countdown* countries



Overall progress as of 2010

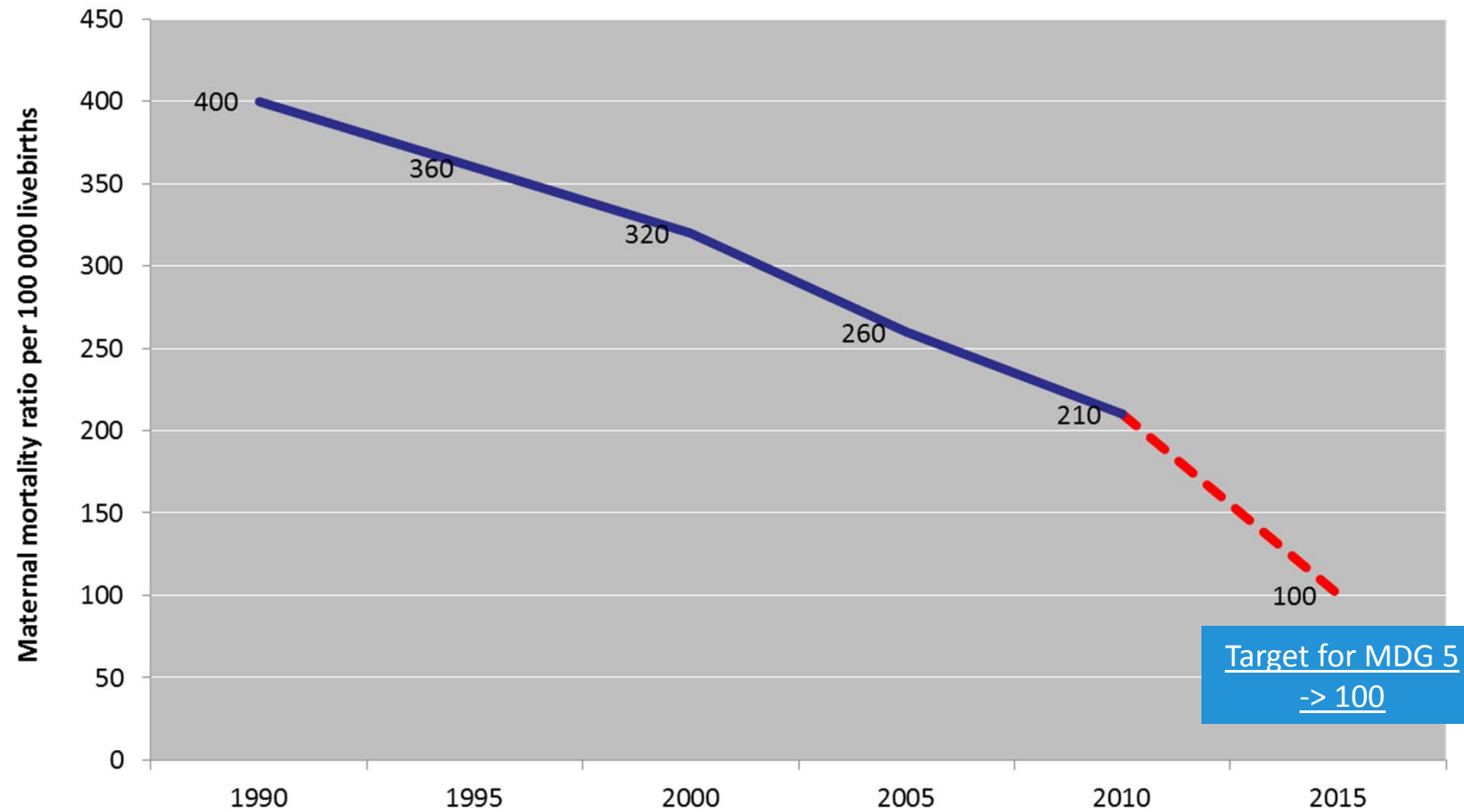
## MDG5 for maternal health

Number of *Countdown* countries



Overall progress as of 2010

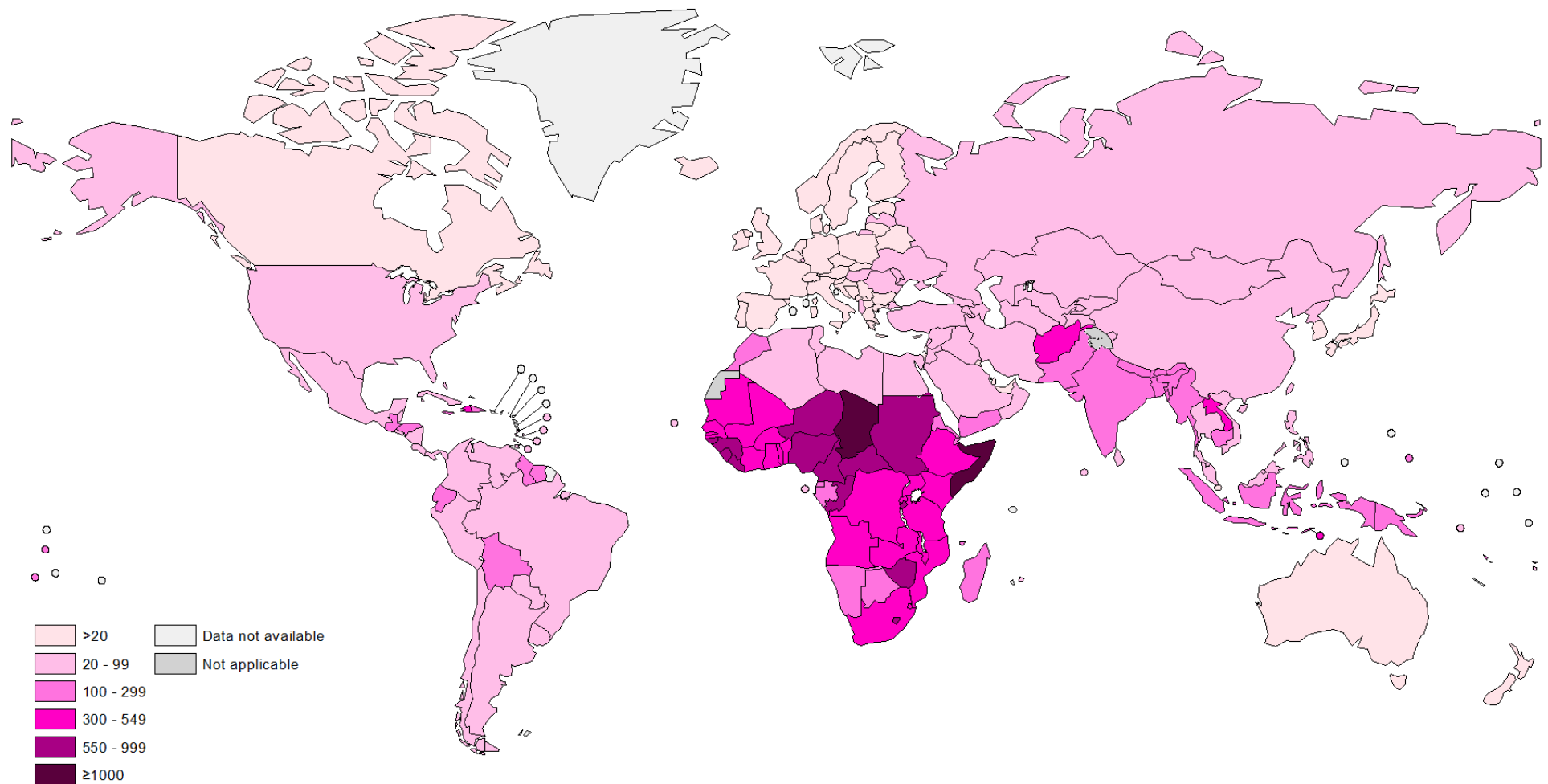
# Trends in maternal mortality



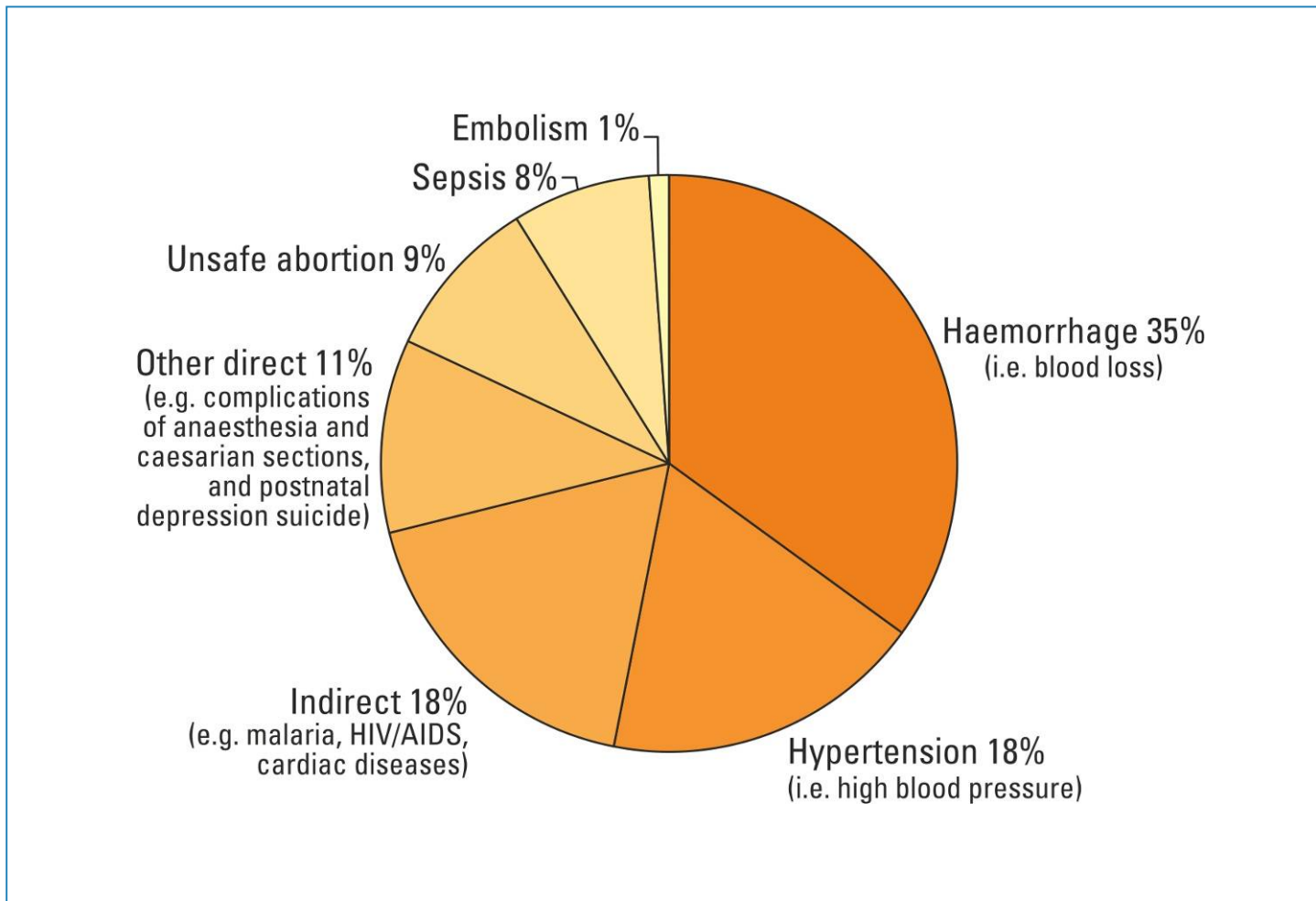
Source: WHO, UNICEF, UNFPA and The World Bank estimates. Trends in maternal mortality 1990-2010

# Where maternal deaths happen

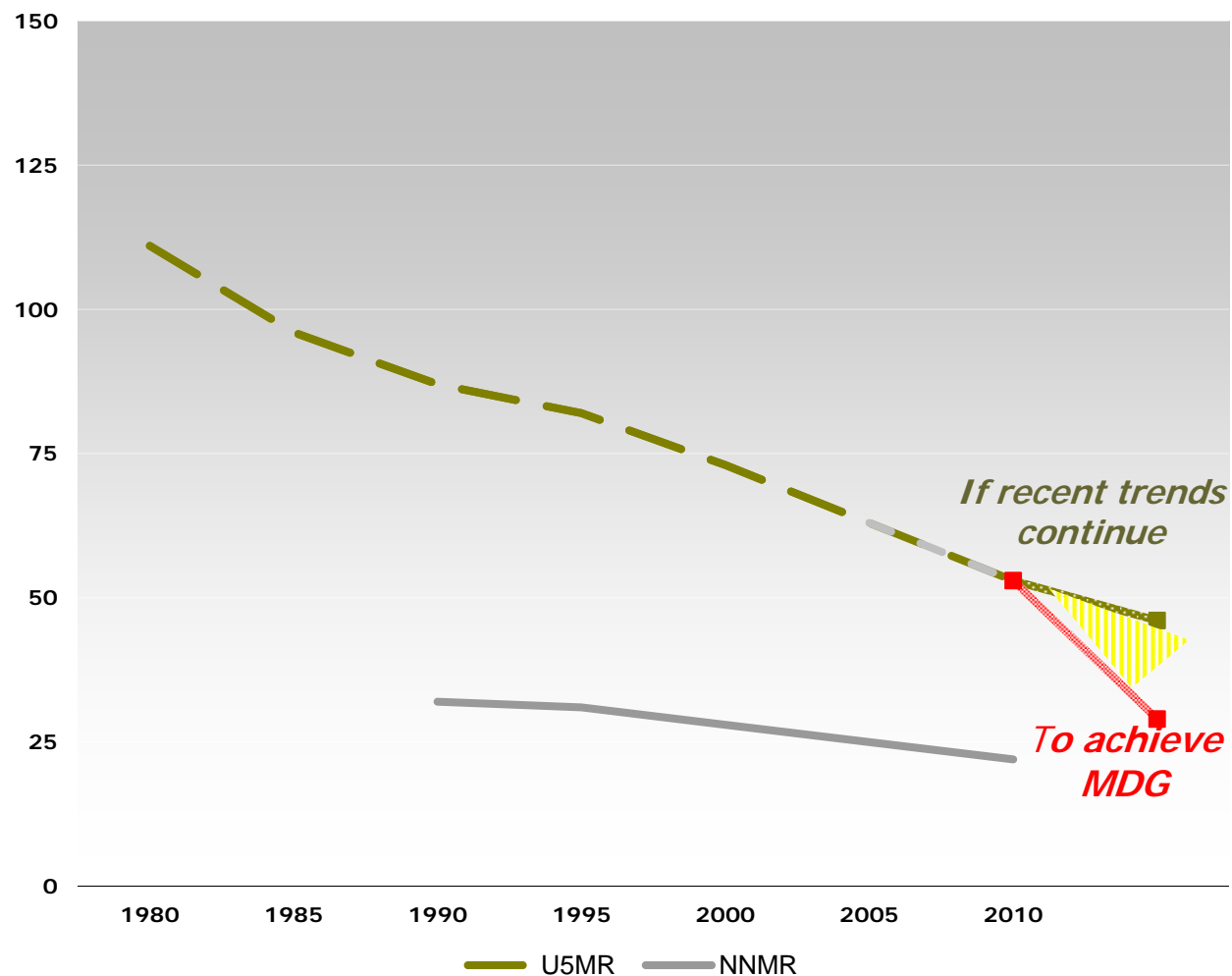
Maternal mortality ratio (per 100 000 live births), 2010



# Causes of maternal deaths



# Trends in under-five and neonatal mortality rates



1980	111
1985	96
1990	87
1995	82
2000	73
2005	63
2010	53
2011	51
2015 Target	29

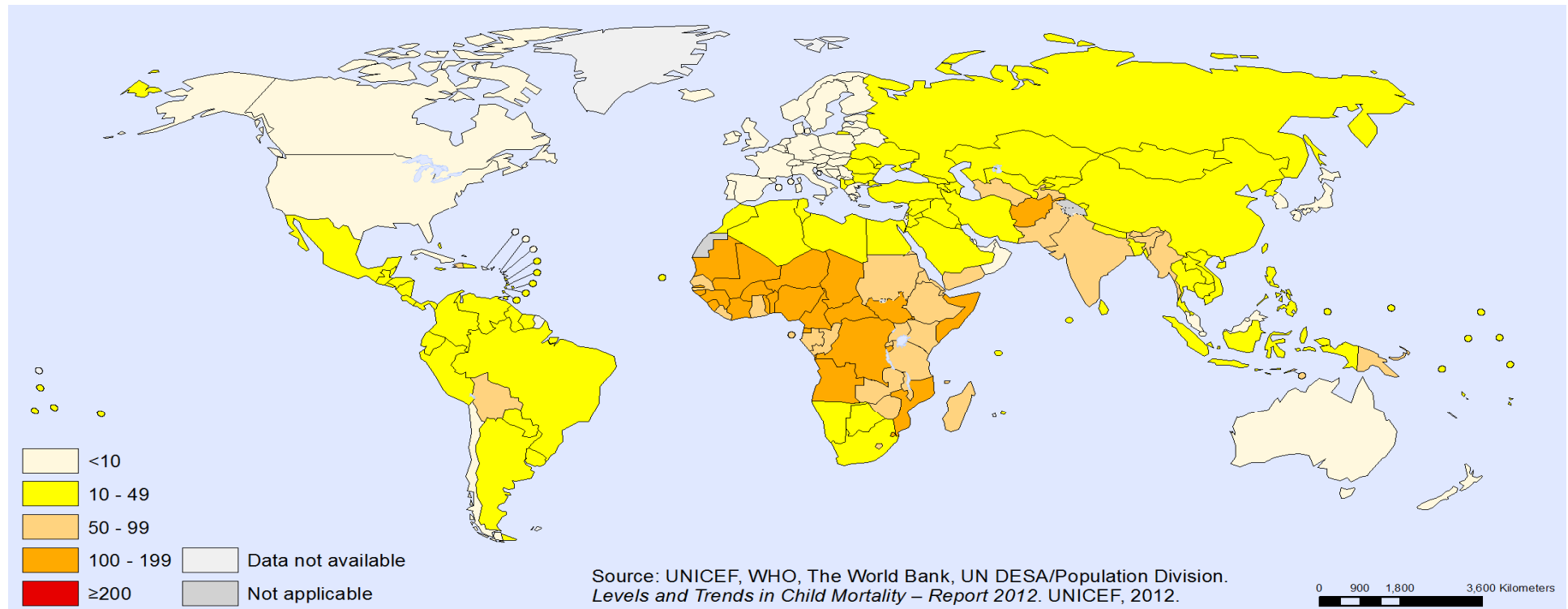
Source: Levels and Trends in Child Mortality, UN-IGME Report 2012

--- U5MR    — NNMR



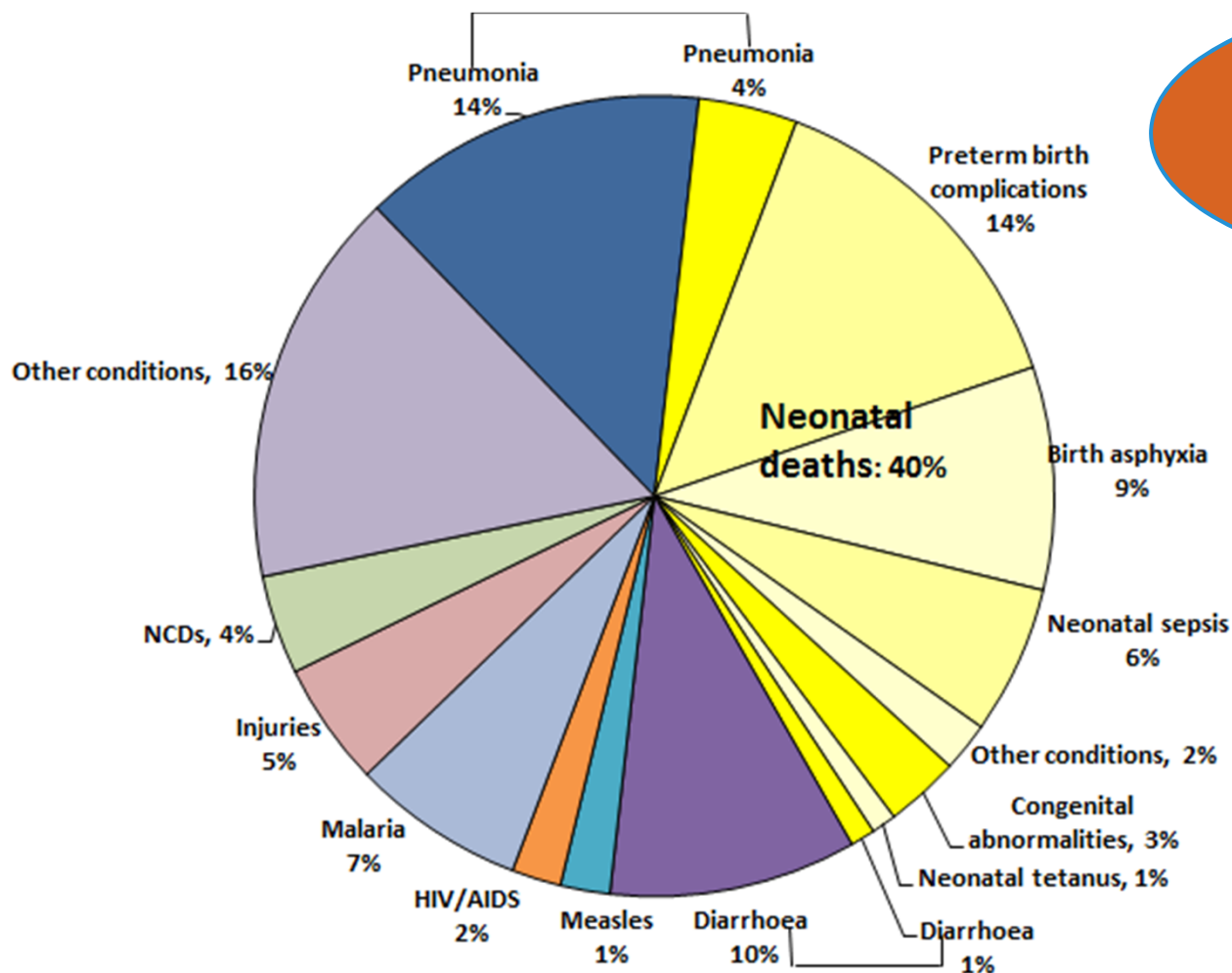
# Where newborn and child deaths happen

Under-five mortality rate (probability of dying by age 5 per 1000 live births), 2011



80% occur in 24 countries  
50% in just 5 countries: India, Nigeria, DR Congo, Pakistan, Ethiopia

# Major causes of death in children under 5



35% of global under-five deaths are associated with undernutrition\*

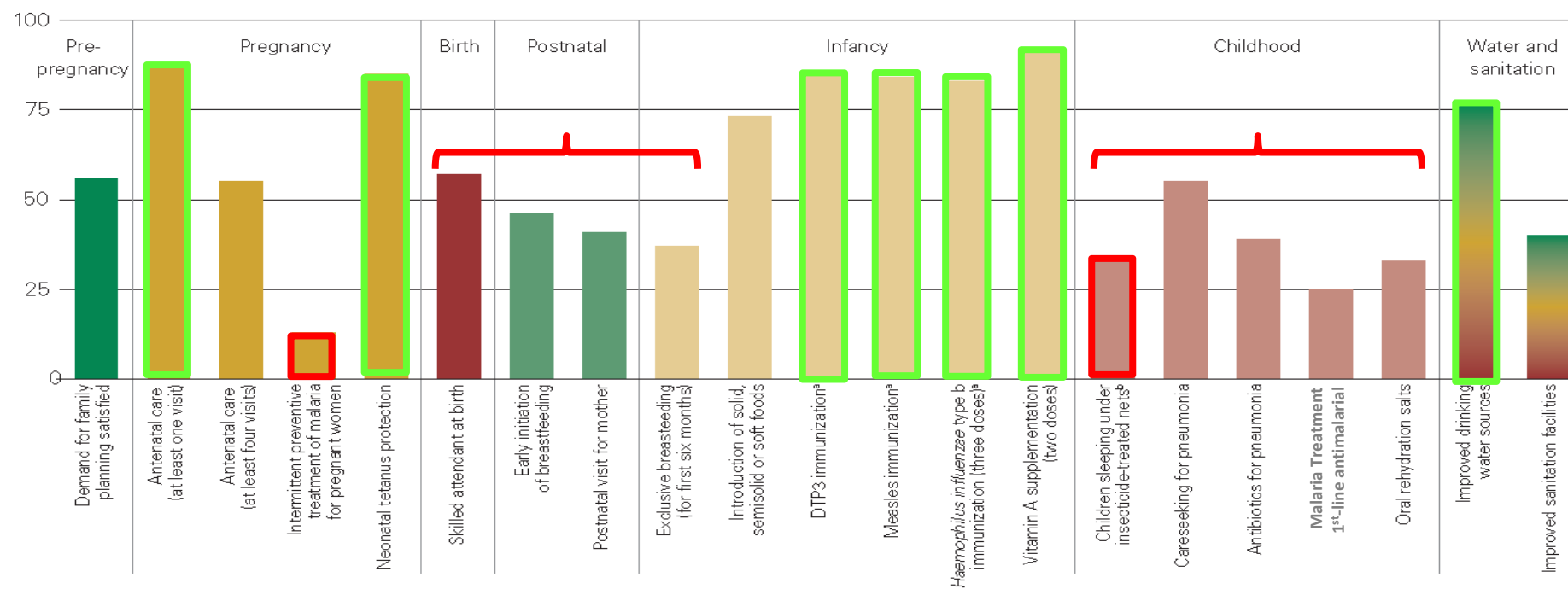
The numbers

Pneumonia:	1 244 000
Diarrhoea:	760 000
Malaria:	484 000
Prematurity:	968 000
Asphyxia:	622 000
Sepsis:	415 000

Sources: (1) WHO. Global Health Observatory ([http://www.who.int/gho/child\\_health/en/index.html](http://www.who.int/gho/child_health/en/index.html))  
 (2) \*For undernutrition: Black et al. Lancet, 2008

# Variable coverage across continuum

Median national coverage of selected *Countdown* interventions, most recent year since 2006 (%)

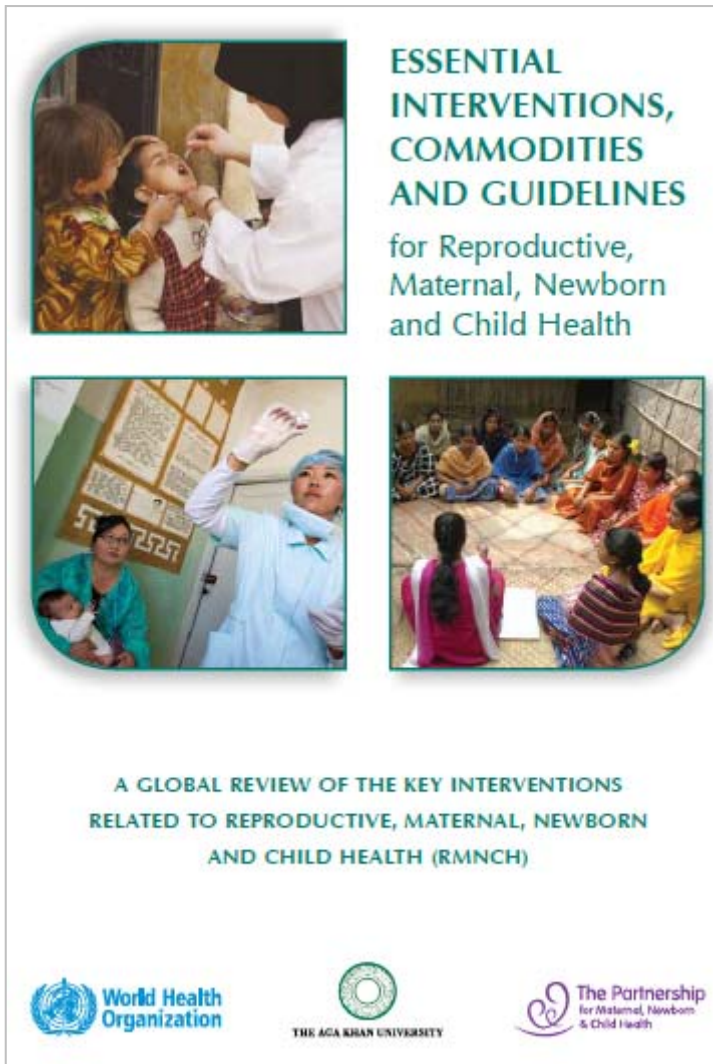


a. Data are for 2010.

b. Analysis is based on countries with 75% or more of the population at risk of *p. falciparum* transmission.

Source: Immunization rates, WHO and UNICEF; postnatal visit for mother, Saving Newborn Lives analysis of Demographic and Health Surveys; improved water and sanitation, WHO and UNICEF Joint Monitoring Programme 2012; all other indicators, UNICEF global databases, April 2012, based on Demographic and Health Surveys, Multiple Indicator Cluster Surveys and other national surveys.

# Effective interventions



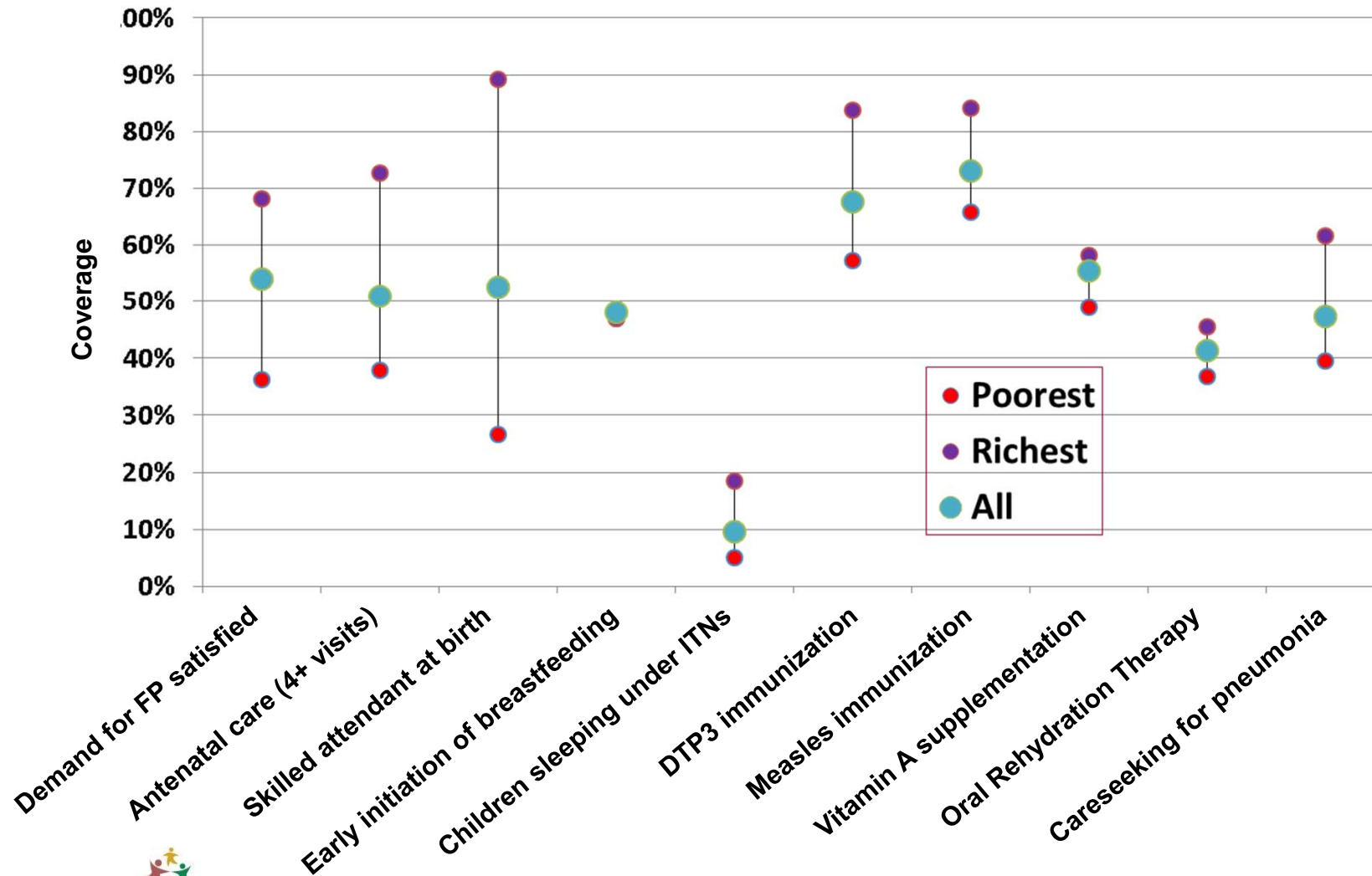
**ESSENTIAL INTERVENTIONS, COMMODITIES AND GUIDELINES**  
for Reproductive, Maternal, Newborn and Child Health

A GLOBAL REVIEW OF THE KEY INTERVENTIONS RELATED TO REPRODUCTIVE, MATERNAL, NEWBORN AND CHILD HEALTH (RMNCH)

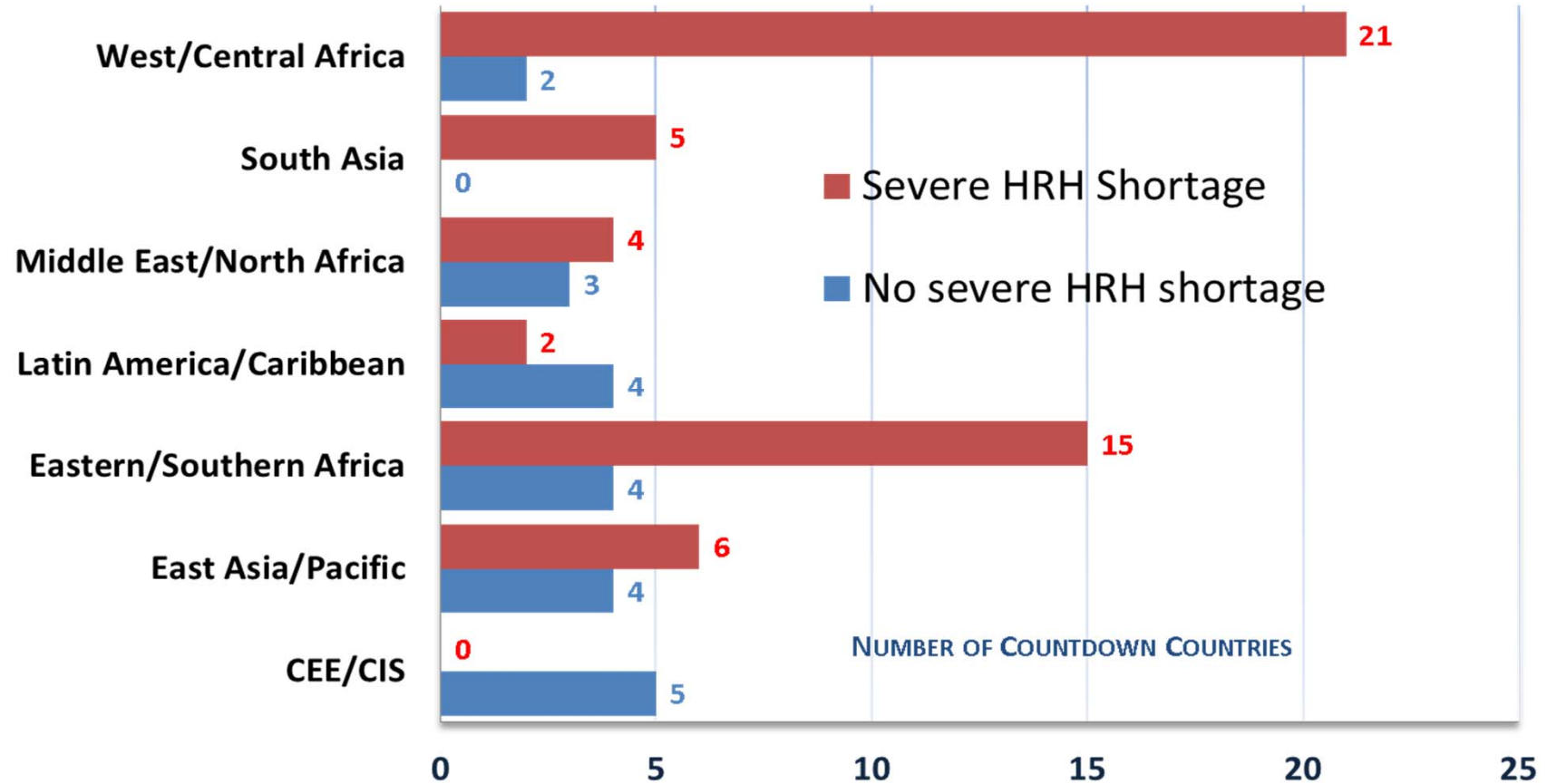
World Health Organization  
THE AGA KHAN UNIVERSITY  
The Partnership for Maternal, Newborn & Child Health

Postnatal (newborn)				
Immediate thermal care	✓	✓	✓	✓
Initiation of exclusive breastfeeding (within first hour)	✓	✓	✓	✓
Hygienic cord and skin care	✓	✓	✓	✓
Neonatal resuscitation with bag and mask (professional health worker)	✓	✓	-	-
Case management of neonatal sepsis, meningitis and pneumonia	✓	✓	-	-
Kangaroo mother care for preterm and for less than 2000g babies	✓	✓	-	-
Management of newborns with jaundice	✓	✓	-	-
Surfactant to prevent respiratory distress syndrome in preterm babies	✓	-	-	-
Continuous positive airway pressure (CPAP) to manage babies with respiratory distress	✓	-	-	-
Childbirth				
Extra support for induction of labour for prolonged pregnancy	✓	-	-	-
Presumptive antibiotic prophylactic uterotonics to prevent postpartum haemorrhage	✓	✓	✓	✓
Exclusive breastfeeding Active management of third stage of labour to prevent postpartum haemorrhage	✓	✓	-	-
Continued breastfeeding Management of postpartum haemorrhage (e.g. uterotonics, uterine massage)	✓	✓	✓	✓
Prevention and control of infection Caesarean section for maternal/foetal indication	✓	-	-	-
Vitamin A supplementation Prophylactic antibiotics for caesarean section	✓	-	-	-
Postnatal (mother)				
Comprehensive contraceptive services Family planning	✓	✓	✓	✓
Routine immunization and rotavirus vaccination Prevent and treat maternal anaemia	✓	✓	-	-
Management of sepsis Detect and manage postpartum sepsis	✓	✓	-	-
Case management of HIV Screen and initiate or continue antiretroviral therapy for HIV	✓	✓	-	-
Case management of malaria	✓	✓	-	-
Postnatal (newborn)				
Home visits for vulnerable newborns Immediate thermal care	✓	✓	✓	✓
Initiation of exclusive breastfeeding (within first hour)	✓	✓	✓	✓
Hygienic cord and skin care	✓	✓	✓	✓
Neonatal resuscitation with bag and mask (professional health worker)	✓	✓	-	-
Case management of neonatal sepsis, meningitis and pneumonia	✓	✓	-	-
Kangaroo mother care for preterm and for less than 2000g babies	✓	✓	-	-
Management of newborns with jaundice	✓	✓	-	-
Surfactant to prevent respiratory distress syndrome in preterm babies	✓	-	-	-
Continuous positive airway pressure (CPAP) to manage babies with respiratory distress syndrome	✓	-	-	-
Extra support for feeding small and preterm babies	✓	✓	-	-
Presumptive antibiotic therapy for newborns at risk of bacterial infections	✓	-	-	-

# Equity matters



# Context matters: health workforce

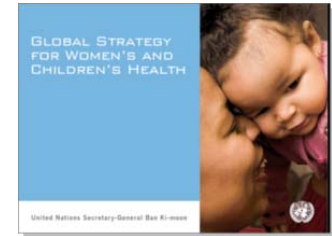
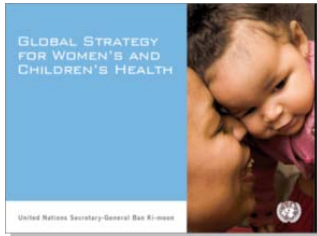


# The Global Strategy: to save ~16 million lives

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Progress in the world's 49 poorest countries if goals are met (2010-15)

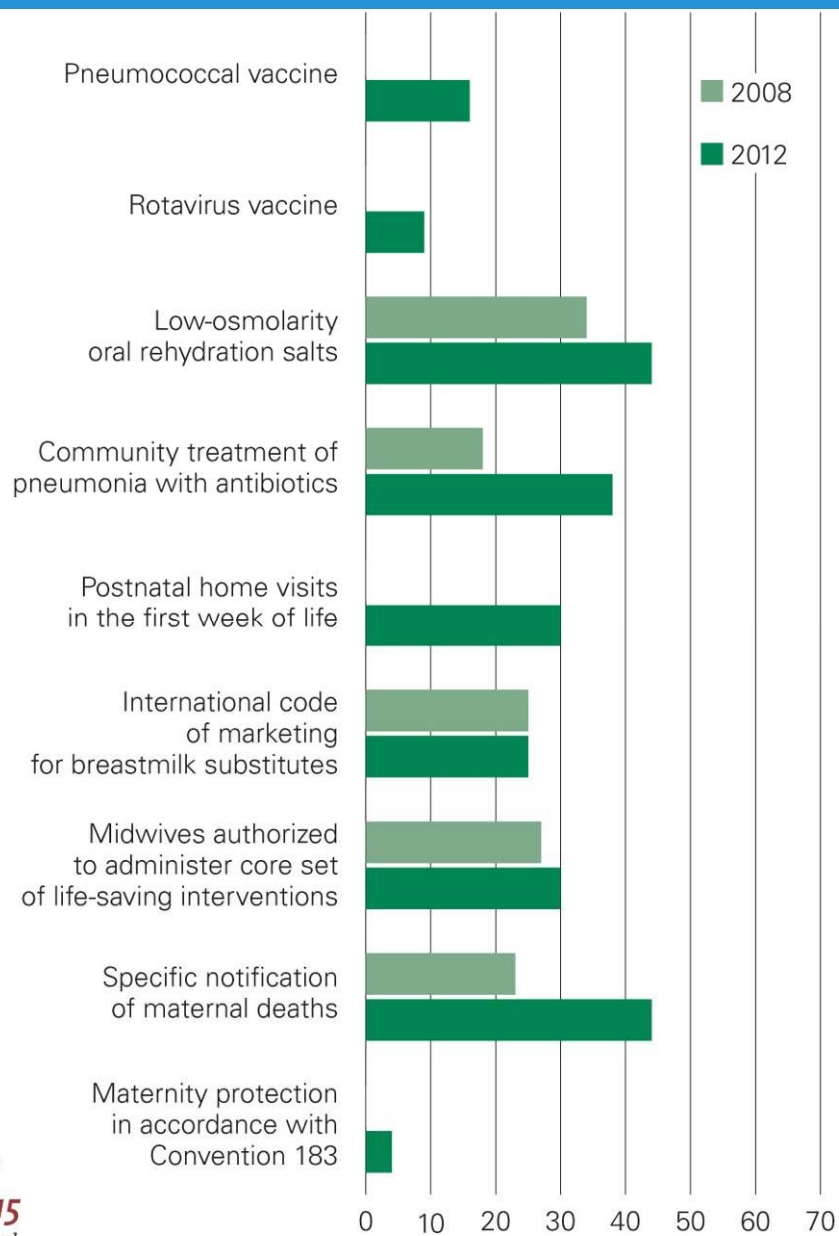
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- Protect 120 million children from contracting pneumonia
  - Prevent 88 million children from stunting
  - Prevent 33 million unwanted pregnancies
- Prevent 15 million deaths of children under the age of 5
- Prevent 570 thousand deaths of pregnancy related complications

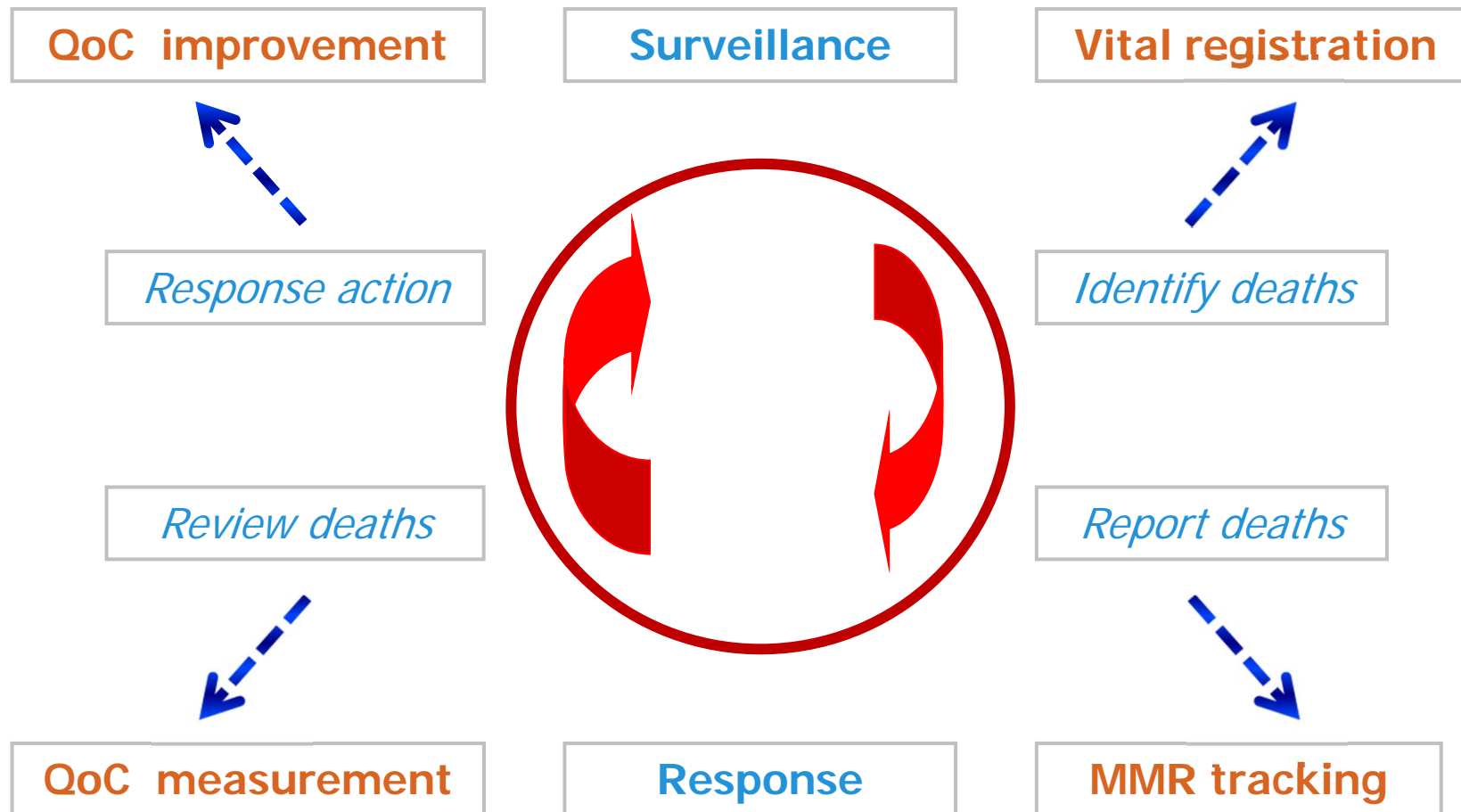
We have the tools and resources and the political will

# Adopting conducive policies





# Surveillance to save women's lives



## Bringing care closer to families

This young mother lives in an area covered by a home-based newborn care program



- **HOME:** She and her family were visited by a CHW during pregnancy, who encouraged ANC and early care-seeking for danger signs
- **HOSPITAL:** When the mother went into premature labour, her husband urged her to go to the hospital, and delivered a LBW infant weighting 1.5 kg
- **HOME:** When discharged from the hospital on day 5, the CHW started home visiting to assist with feeding, ensuring warmth and screen for danger signs

# Improving care at health facilities

At the same time women are encouraged to give birth in health facilities, health facilities need to get ready to provide high quality care

- **EFFECTIVE CARE AND SAFETY:**  
At the health facility she needs to receive the appropriate and timely interventions
- **RESPECT AND SATISFACTION:**  
Care is provided in a respectful environment that generates satisfaction.

These are key components of quality of care and powerful drivers to increase/sustain demand to facility-based care.



# Assessing the quality of maternal & newborn health care


## The WHO Multi-Country Survey: a validated tool to assess QoC and track progress in MNH

- The WHO Multicountry Survey used a validated, facility-based, cross-sectional survey tool to assess key aspects of maternal and newborn care
- Data was collected from 36 participating facilities in the EMRO region in 2010 and 2011: 50,000 women studied

Evaluating the quality of care for severe pregnancy complications

**The WHO near-miss approach for maternal health**





**THE WHO MULTI-COUNTRY SURVEY: A VALIDATED INSTRUMENT TO TRACK PROGRESS IN MATERNAL, NEWBORN AND CHILD HEALTH**

**WHERE MOTHERS AND CHILDREN DIE**

**THE WHO MULTI-COUNTRY SURVEY ON MATERNAL AND NEWBORN HEALTH**

**RESULTS FROM EMRO COUNTRIES**

**MATERNAL INDICATORS**

Country	Total live births	Stillbirths	Maternal deaths	Maternal mortality ratio	Maternal mortality ratio (per 100,000 live births)
Algeria	9	16,146	2,020	244.4	14.7
Libya	3	2,640	4,044	1,534	58.5
Yemen	7	1,107	1,108	162.9	4.2
Occupied Palestinian Territories	1	340	195	195.0	31
Philippines	16	19,175	1,078	66.5	18.4
Total	41	29,868	8,486	205.6	18.6

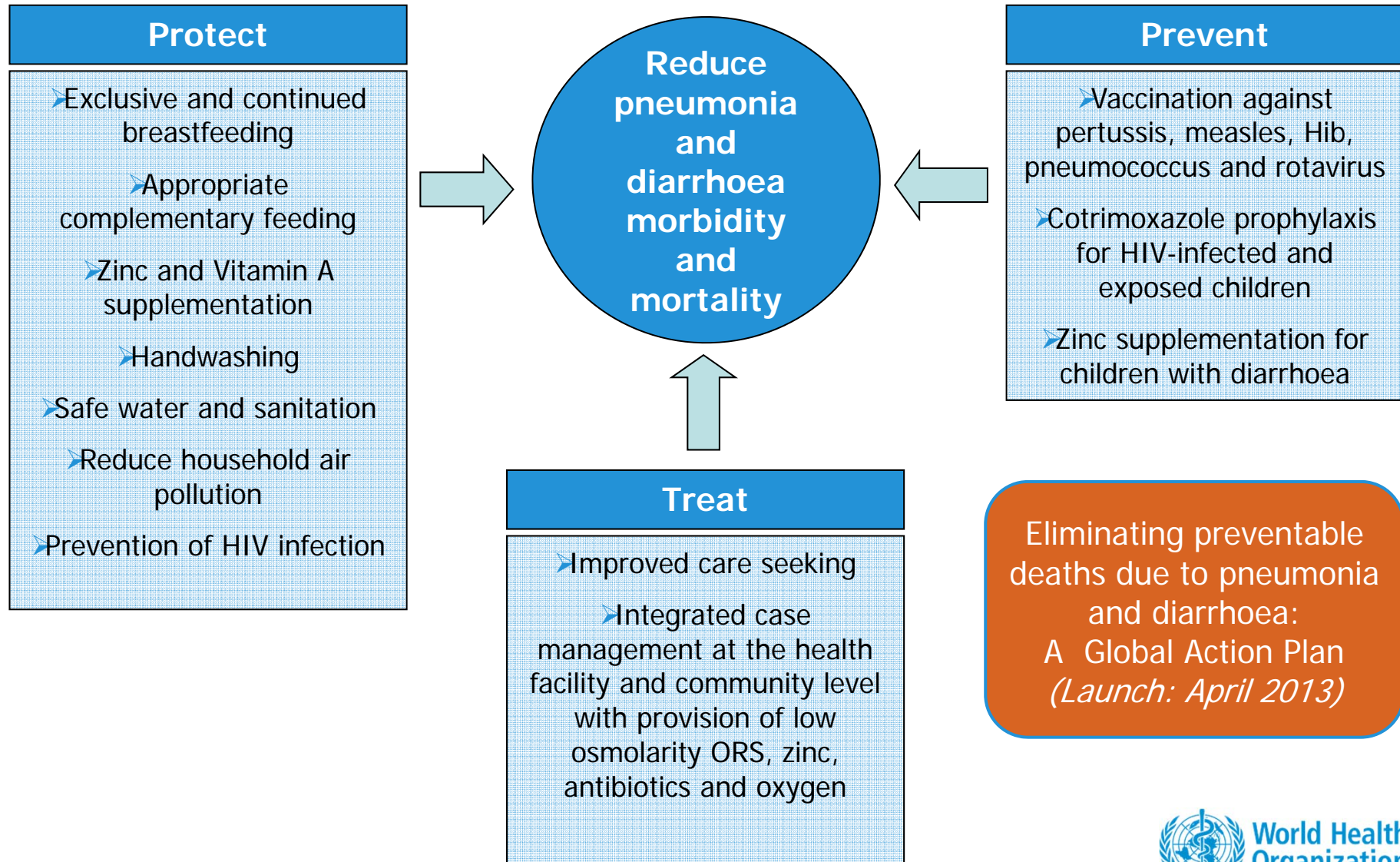
**NEWBORN INDICATORS**

Country	Total live births	Stillbirths	Neonatal deaths	Neonatal mortality rate	Neonatal mortality rate (per 1,000 live births)
Algeria	25,207	19.7	2.3	2.1	1.0
Libya	2,640	8.8	10.5	4.0	1.5
Yemen	1,121	3.4	10.7	9.5	8.6
Occupied Palestinian Territories	391	4.2	17.8	4.6	7.6
Philippines	3,882	4.1	2.3	4.1	2.8
Total	32,043	28.1	33.1	6.0	6.1

**Percentage of facilities providing essential services**

Country	Percentage of facilities providing essential services
Algeria	100%
Libya	100%
Yemen	100%
Occupied Palestinian Territories	100%
Philippines	100%
Total	100%

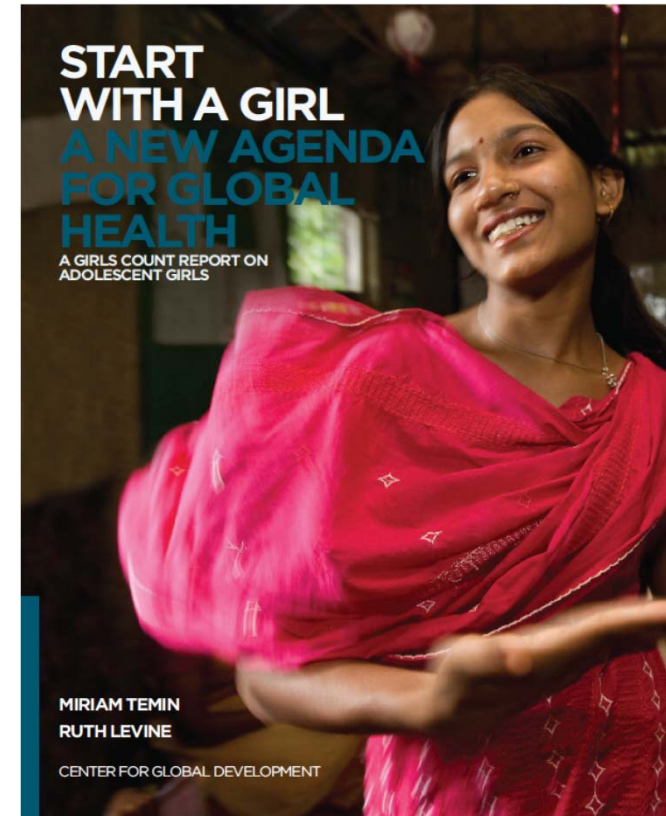
# Maximizing opportunity for coordinated actions



# Adolescence: a time for investment

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- Preventing early pregnancy
  - Prevent early marriage
  - Prevent early pregnancy
  - Increase use of contraception
  - Combat coerced sex
  - Reduce unsafe abortions
  - Increase access to skilled care
- Reaching out before conception
  - Provide folic acid supplementation
  - Reduce harmful behaviors (tobacco, alcohol)
  - Pay attention to mental health



# Using innovation

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- 70% of the public sector linked projects on innovations were based on cell phones or digital platforms
- Others largely included business, social marketing and franchise models
- Few addressed neglected or orphan technologies





EVERY WOMAN  
EVERY CHILD

# Bringing it all together

Visit [www.everywomaneverychild.org](http://www.everywomaneverychild.org)

Global Strategy for Women's and Children's Health - Every Woman Every Child

Country leadership & Implementation

Key advocacy events and catalytic initiatives in support of *Every Woman Every Child*

Born too soon

A Promise Renewed

Family Planning Summit

Decade of Vaccines

Global action plans for: nutrition, pneumonia & diarrhea, newborn

Innovations working group

Commission on Live-saving Commodities

Information & Accountability

CoIA



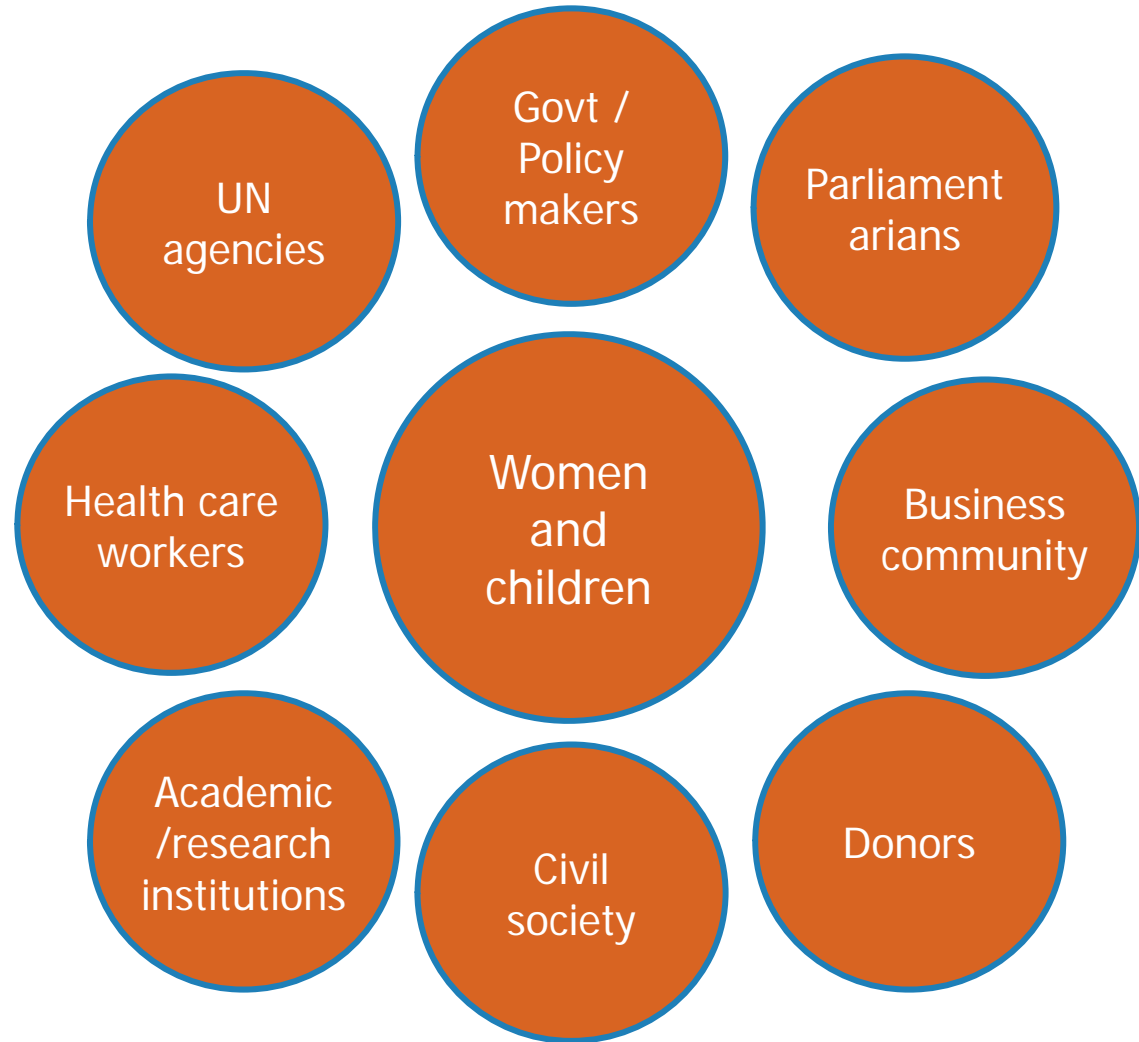
Independent Expert Review Group



World Health Organization



# All have a role to play



Thank you

