



# World Health Day

**Theme: Healthy Mothers and Children: Make Every Mother and Child Count**



## Message from UNFPA Executive Director



Thoraya Ahmed Obaid

## Increased Spending in Reproductive Health Urged

One sure way to Make Every Mother and Child Count, as the slogan for World Health Day urges us to do, is to guarantee universal access to reproductive health, as was agreed at the International Conference on Population and Development. This is particularly important for 1.3 billion young people—the largest youth generation in history.

Reproductive health is critical to the health and well-being of women and children in the developing world. If every woman had access to family planning and high-quality care during pregnancy and delivery, the number of maternal, newborn and child deaths would drop dramatically. If every woman had the knowledge and means to prevent HIV infection, the Aids pandemic would be reversed. Empowering women and involving men is key to success.

Today on World Health Day, I urge governments to increase spending in reproductive health and to target these investments to communities where needs are highest. Providing skilled medical attendance at the time of delivery would reduce maternal deaths by nearly 75 per cent.

Providing family planning alone could reduce maternal mortality by 25 per cent. As contraceptive use rises, maternal and newborn deaths decline. Studies show that, if family planning were made available to women in India who wish to space their births, one in five child deaths could be prevented.

So, let us move from lines in speeches to budget lines. Let us scale up these cost-effective interventions that have been shown to work. Let us make reproductive health a political priority, as UN Secretary-General Kofi Annan and the Commission for Africa and the Millennium Project have all advised. Of the half million maternal deaths each year, 95 per cent occur in Africa and Asia. In her lifetime, a woman in sub-Saharan Africa faces a one in 16 risk of dying during pregnancy or childbirth compared to a 1 in 3,800 for a woman in the developed world.

This is a public health crisis and a moral outrage. Far too many women are deprived of access to basic health services that are fundamental to the fulfilment of their human rights. Currently, more than 200 million women have an unmet need for safe and effective contraception. If these needs were met, unwanted pregnancies and unsafe abortions would plunge. Currently, 42 per cent of women in the developing world give birth without the assistance of a skilled medical professional, which puts their lives and those of their babies at risk. In every region, women face rising rates of HIV/Aids.

UNFPA is committed to developing national capacity for reproductive health and rights and linking these services with HIV prevention. Today on World Health Day, it is time for governments to make every woman and child count by committing the resources that are needed for their health and well-being. If reproductive health services were widely available, maternal death would be as rare in Africa and Asia as it is today in the United States and Europe. The Millennium Development Goals cannot be achieved unless reproductive health is guaranteed.

— Thoraya Ahmed Obaid  
UNFPA Executive Director

## A Common Yet Preventable Tragedy

Today, the world is celebrating Health, which is, the state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. The theme of this year's World Health Day is "Make every Mother and Child count". Health is a basic human right, but for many African women, newborns and children, this is not the case. This theme therefore is a message of hope for all mothers, newborns and children - a promise for a healthier and more productive future - if we truly make every mother, newborn and child count.

Five years into the 21st Century, African women risk death to give life as one in every 16 women dies while giving life. Every minute, one woman somewhere is dying of preventable pregnancy or childbirth-related conditions. Furthermore, for every maternal death, there are at least 20 to 30 women who suffer reproductive disabilities throughout life. Adolescent child-bearing contributes significantly to maternal deaths and disabilities, accounting for almost half in some countries. The death of a mother not only jeopardises the life of her children but also the well-being of the family and society.

Newborns hold every country's promise for a future, yet they are Africa's forgotten children. The death of a newborn is a common-yet preventable-tragedy in many parts of Africa. Every year, 4 million babies are stillborn globally, majority in the African Region. In our Region, 130 newborns die every hour of the day due to preventable causes. One in 6 young children die before they reach their fifth birthday, that is, 4.7 million child deaths per year.

How can we allow this silent emergency situation to continue, when the causes of the deaths and disabilities are largely avoidable?

Recently, the global community declared a commitment to "create an environment - at the national and global levels alike - which is conducive to development and to the elimination of poverty". This declaration led to an agreement on eight goals in key areas of global concern: the Millennium Development Goals (MDGs). Central among those goals are two that aim to reduce maternal and child mortality, goals 4 and 5. Investment in maternal, newborn and child health is not only a priority for saving lives, but is also critical to advancing other goals related to human welfare, equity, and poverty reduction.

At regional level, under the leadership of

## Word from WHO Regional Director



Dr Luis Gomes Sambo

the African Union, the Road Map for accelerating the attainment of the MDGs relating to maternal and newborn health has been developed and adopted by the 46 health ministers. The World Health Organisation and UNICEF have developed the Integrated Management of Childhood Illness (IMCI) - a proven child survival strategy for reducing child morbidity and mortality. Maternal, newborn and child health is a priority of the World Health Organisation in its efforts to support Member States to provide Health-for-All their peoples.

From all indications, including the recent Millennium Project Report, Africa will once again miss the Millennium Development targets, unless we act now and stop doing business as usual!

Today, there is no doubt that the technical knowledge and skills exist to respond to many, if not all, of the critical health problems that affect the health and survival of our mothers, newborns and children - even in poor-resource settings - as is the case in most African countries. Simple interventions like oral rehydration therapy have cut yearly diarrhoea deaths

by half, while iodized salt, vitamin A supplements and breast-feeding have saved countless children from death or disability. The drive for child immunization has dramatically reduced measles deaths and eliminated neonatal tetanus in a number of African countries.

Maternal, newborn and child health can be improved without first achieving high levels of economic development. In fact, persistently high maternal, newborn and child mortality rates themselves constrain economic development because of the severe impact on the family and society in general.

Where do we go from here?

We need a paradigm shift in the way we deliver services in our Region. Most societies support the view that everyone, and mothers, newborns and children in particular, should be able to get the health care they need, when they need it.

We must:

- Reach every country (REC)
- Reach every district (RED)
- and
- Reach every woman,

newborn, and child (REW)

with the proven interventions that will make a definite difference in their lives.

Today, as we launch the World Health Report 2005, I call upon all member states to make every mother, newborn and child count by scaling up the proven interventions to reach every country, district, woman, newborn and child.

Every pregnant woman, without exception, needs skilled care when giving birth to make childbirth optimally safe. Such care can at best be provided by a registered midwife or a health worker with midwifery skills operating in an enabling environment with appropriate policy and regulatory framework, adequate supplies, equipment, infrastructure and communication system. This can avert, contain or solve many of the life-threatening complications that arise during childbirth. All women need care that only a well-manned and equipped hospital can provide, should complications arise.

Postnatal care, often neglected, is not only crucial for the mother but also for her newborn. This continuum of care provided by a skilled health worker from pregnancy to newborn period, and from community to referral level, is critical to survival.

The Integrated Management of Childhood Illness if up-scaled, will ensure the delivery of child health care close to homes and communities, and improvement in referral system and hospital care. The challenge now is to take IMCI to all families with children, and to ensure access whenever such care is needed. Universal access to childhood immunisation must be guaranteed for a healthy start in life for all children.

The scaling-up to Reach every woman, newborn and child requires effective partnership. This can be achieved as governments, households, communities, civil society, private sector, and development partners join forces to strengthen health systems with maternal, newborn and child health at the core of their development strategies. Our health workforce must be trained, motivated, retained and appropriately deployed to serve the most needy.

Every Member State should develop a long-term health care financing scheme that facilitates universal coverage, with affordable services and financial protection for mothers, newborns and children. User fees need to be reviewed or eliminated to ensure access to mothers, newborns and children such that not one of them is denied care due to inability to pay. No Government can provide all the investment required for health. Therefore, community-financing schemes that allow individuals, families and households to contribute to improved access to health care by mothers, newborns and children should be encouraged.

I call upon member states to become investors in health, and especially the health of the mothers, newborns and children of this region. The returns will be worth the investments. It has been estimated that over the next 10 years, if we would scale-up to achieve universal coverage for maternal health alone, we will save at least 500,000 women's lives, avert 10 million disabilities, and save 1.5 million children's lives. Translated into productivity gains, this will mean at least US\$10 billion.

The time to act is now! We must deliver on our promises to our mothers, newborns and children so that together we can achieve a more productive and sustainable development in Africa.

— Dr Luis Gomes Sambo,  
WHO Regional Director

