

Unacceptable lack of progress in reducing maternal mortality

United Nations Day, October 24, 2008, is a fitting date for a global reminder of the importance of achieving the Millennium Development Goals. Although there are many issues of importance covered by the MDGs, we would like to focus on one of them: women and health. One of the most critical issues facing women around the world is the staggering lack of progress in reducing maternal mortality.

This year marks the mid-point in the countdown to the Millennium Development Goals, the goals set up by the United Nations (U.N.) to eradicate poverty and hunger, promote gender equality, and improve health, especially maternal health. When it comes to reaching the health-related goals, the challenges are seemingly insurmountable. Great social, economic, and health inequalities still exist within and between countries. Current trends suggest that many low-income countries will not reach the health related goals. In our position as women leaders, it is our duty and responsibility to collaborate with other leaders, such as Ministers of Health, to identify and support policy actions that will contribute to a reversal of these trends.

We, as women leaders from different countries, have come together to express our deep concern over the lack of progress in reducing maternal mortality in low-income countries. We are committed to supporting the Council of Women World Leaders' Ministerial Consultative Process, which serves in a consultative role to Dr. Margaret Chan, Director-General of the World Health Organization (WHO). When Dr. Chan took office in 2006, she stressed that she wanted the WHO to be judged by the impact it has on the health of the people in Africa and the health of women. We strongly support Dr. Chan's priority and remain committed to using our positions of leadership to play an instrumental role in improving women's health in our countries and at the international level.

We are constantly reminded of the devastating situation facing millions of women worldwide, especially in developing countries. In 2005, more than 500,000 women died of causes related to maternity. As stated in a report by the WHO on the costs of maternal and newborn illness and mortality, the social and economic costs of maternal mortality are staggering, both for families and society. When a mother dies, surviving children are 3-10 times more likely to die within two years than children who live with both parents. In addition, maternal illness prevents women

from participating in society and contributing to its development. Maternal illness and mortality is a great loss to society and hinders economic development.

Women are more likely than men to spend their own income on improving family welfare, through additional food, healthcare, school supplies and clothing for young children.

We, as women leaders, cannot stand idly by and watch this continue to happen in front of our eyes. We urge those at the national level with the power to enact change - Ministers of Health - to rally around this issue and commit to implementing the changes needed to improve women's health in their countries. A unique framework for these Ministers already exists: the Council of Women World Leaders' Network of Women Ministers of Health, along with select male Ministers of Health, has committed to working directly with the office of the Dr. Chan to improve women's health globally. There lies immense collective power within this group of dedicated ministers to make a substantial difference in the lives of women across the world; this power must be harnessed and used optimally for maximum effect.

The causes for ill-health and mortality during pregnancy are, in most cases, unnecessary, and can be avoided. Improving maternal health and reducing the number of maternal deaths is crucial in the restoration of women's rights, status, and empowerment.

What needs to be done? To begin with, we, along with male and female Ministers of Health, must commit to increasing access to sexual and reproductive services, including maternal care such as antibiotics, caesarean section services and blood transfusions, contraceptives for both women and men, and safe abortion. Young men and women must be provided with objective information on sex and reproduction. Men need to be taught to take greater responsibility for sex and avoiding pregnancies. Secondly, we need to scale up measures to fight inequalities between men and women and strengthen the position of women in society. The lack of maternal healthcare and high mortality and morbidity it results in is rooted in and reflects the prevailing discrimination and marginalization of women: women are still denied their basic rights. Girls must be given access to primary education, and women must be allowed to inherit and own land, work, and take part in political initiatives. Here, too, men must be actively engaged. Gender equality is often mistakenly viewed as concerning only women. The truth is that it cannot be achieved without the participation of men; both men and women gain from it.

There are noteworthy examples of Ministers of Health who have and are currently working diligently to turn around the status of women's health in their countries. For example, Liberia's Minister of Health and Social Welfare, Walter Gwenigale, has outlined current policy objectives that reflect a commitment to improving women's health by increasing equitable access for all Liberians to quality health care and social welfare services, and by improving nutrition status of women. Yasmina Baddou, Minister of Health in Morocco, leads the charge for the empowerment of women and protection of children in her country; she has implemented a string of reforms aimed at improving hospital management, utilizing cheaper medicines and reducing infant and maternal mortality rates. In South America, Chilean Minister of Health María Soledad Barría has led a progressive policy implementation increasing women's access to emergency contraception. We must look to these ministers, and their numerous colleagues, to be the change that women need.

To improve women's reproductive and sexual health requires financial resources. Resource mobilization for maternal health has to be taken on as a shared global responsibility, as many of the countries most in need do not have the required resources needed to strengthen the delivery of services. National government budgets and foreign aid funding must be allocated to ensure these challenges are adequately resourced.

Every day we fail millions of women. We have committed to act. We call upon other Ministers of Health and women and men leaders around the world for collective action. Anything else would be a scandal.