

SAFE MATERNITY

Every day around the world, almost 1,000 women die in pregnancy or childbirth. Each and every mother lost devastates her family and threatens the well-being and even survival of the baby and children she leaves behind. Evidence shows that infants whose mothers die are more likely to die before reaching their second birthday than infants whose mothers survive. For every woman who dies, 20 or more experience serious complications.

Maternal death and disability rates mirror the huge discrepancies that exist between the haves and the have-nots both within and between countries.

Ninety per cent of maternal deaths that occur each day around the world take place in Africa, Asia and Pacific Island Countries.

Enormous disparities remain within countries. Impoverished and rural women of all countries are far less likely than their urban or wealthier counterparts to receive skilled care during childbirth. In rural areas health clinics and hospitals are often spread out over vast distances, with often rudimentary transportation systems linking them to local populations. As a consequence, women must either be separated from their families when giving birth, or receive suboptimal care at home.

Working for the survival of mothers is a human rights imperative, with enormous socio-economic ramifications. The Millennium Development Goals seek a 75 per cent reduction in maternal mortality between 1990 and 2015. This is to be achieved by:

- All women having access to contraception to avoid unintended pregnancies
- All pregnant women having access to skilled care at the time of birth
- All women with complications receiving timely access to quality emergency obstetric care

No woman should die giving birth.

A new global consensus has been agreed on the key evidence-based interventions that will sharply reduce the 358,000 women who still die each year during pregnancy and childbirth and the 7.6 million children who die before the age of five. The findings are published in the *World Health Organisation: Essential Interventions, Commodities and Guidelines for Reproductive, Maternal, Newborn and Child Health* which documents an evidence-based path to help women before, during and after birth, and their children.

The document is designed to facilitate decision-making about how to allocate limited resources for maximum impact on the health of women and children. The document gives policy makers a way to make informed choices on how to set priorities and where to put funds and resources, guided by a list of absolutely critical interventions.

There are 56 essential interventions.

The interventions are classified according to three levels:

- care that can be provided at the community level by community health workers, outreach workers, and volunteers with limited training;
- primary care, also delivered in the community at a clinic by professionals – nurses, midwives, community health workers—with more training;
- referral care provided by physicians and skilled nurses and midwives in a hospital able to do Caesarean sections and provide emergency care.

The interventions are also classified according to six target groups:

- adolescent and pre-pregnancy
- pregnancy (before birth)
- childbirth
- postnatal (mother)
- postnatal (newborn)
- infancy and childhood.

Safe Motherhood for All calls for the implementation of the recommendations contained in the World Health Organisation report as the basic level of maternity care and is working actively to achieve this.

Sources

The White Ribbon Alliance - <http://www.whiteribbonalliance.org/>

United Nations Population Fund - <http://www.unfpa.org/public/mothers>

State of the World Midwifery Report - International Confederation of Midwives <http://www.internationalmidwives.org/Whoware/Partners/StateoftheWorldMidwiferyReport/tabid/933/Default.aspx>

The Safe Motherhood Initiative - <http://www.womendeliver.org/>

Safe Motherhood for All, now and into the future, because healthy women make healthy babies make healthy nations.