

Reducing Maternal Mortality as a Human Right

Submitted by the WFPHA Work Group on Women, Children and Adolescents

Introduction

Every day around the world, approximately 830 women die from complications related to pregnancy and childbirth.¹ Almost all of these deaths occur in low-resource settings and most can be prevented. Maternal death is defined as the death of a woman while pregnant or within 42 days of the end of pregnancy.² The maternal mortality ratio (also referred to as maternal mortality rate) is the number of maternal deaths per 100,000 live births and is compared internationally as an indicator of development and quality of care.^{2, 3, 4}

Global efforts to address maternal mortality started with the Safe Motherhood Initiative in 1987. The problem was further highlighted during the 1994 International Conference on Population and Development and the Women Deliver conferences held during 2007, 2010, and 2013.⁵ Worldwide attention to the problem of maternal mortality has increased dramatically since 2000, when the United Nations included, as one of the eight Millennium Development Goals (MDG 5), the reduction of global maternal mortality by 75% by 2015.^{4, 6, 7, 8} In response to this, the Partnership for Maternal, Neonatal and Child Health was launched in 2005 which created an alliance among the global health community to improve knowledge, alignment, fundraising, and accountability.⁹ The UN Secretary General then launched in September 2010, the “Global Strategy for Women’s and Children’s Health” as well as a high-level UN commission charged with improving global reporting, oversight, accountability, and resources for women’s and children’s health. Numerous major international conferences highlighting global maternal health have also been held including, the Group of Eight (G8) Summit, the African Union Summit on Maternal, Neonatal and Child Health, the Global Maternal Health Conference in India, three Partnership for Maternal, Neonatal and Child Health forums, and the MDG Summit–UN General Assembly.^{10, 11} In addition, the Global Fund to Fight AIDS, Tuberculosis and Malaria, the Global Health Initiative, and many countries have increased efforts to reduce maternal mortality.^{12, 13}

Scope and purpose

Recognizing the Global Strategy for Women, Children, and Adolescent Health (2015) was launched during the Sustainable Development Goals Summit; and considering:

- Approximately 88 to 98% of maternal deaths are preventable.¹⁴
- Sixty-nine of 75 countries, accounting for more than 95% of all maternal, newborn, and child deaths, did not achieve the maternal mortality reductions required to fulfil Millennium Development Goal 5;
- Significant disparities in maternal mortality rates exist between and within countries, especially in Africa and South Asia.¹⁴
- Between 2016 and 2030, as part of the Sustainable Development Agenda, the target is to reduce the global maternal mortality ratio to less than 70 per 100,000 live births.¹⁵

The WFPHA calls for the commitment and involvement of Governments and Civil Societies to reduce maternal mortality. Preventable maternal mortality is a significant human rights issue and

considered to be the main marker of the health of a nation. Discrimination, inequity, and lack of accountability in national health systems are often among the root causes and every woman should be able to realize her highest attainable standard of health.^{16, 17,24} This includes access to sexual and reproductive health care and information, collective action to break down political, economic, social and cultural barriers women face in accessing interventions; the participation of stakeholders in policy and service development; and accountability to ensure significant and sustained reduction in maternal mortality. Moreover, the right to health goes beyond healthcare to embrace social determinants of health, particularly gender equity. Structural changes are needed to promote literacy, educational attainment training, and skills development in order to empower girls and women.

The purpose of the WFPHA policy is to encourage national governments to increase their efforts to reduce maternal mortality. With sustained efforts we hope that maternal mortality will be considerably reduced when governments meet in 2030 to assess whether the Sustainable Development Goals have been achieved.

Fields of applications

The policy aims to:

- Assist public health associations with increasing efforts to assure the reduction of maternal mortality in their countries
- Advocate for ongoing research and policy implementation to assure the most effective interventions to reduce maternal mortality are in place in all locations in a nation
- Continue pressure on the global community to reduce maternal mortality so the Sustainable Development Goals are met
- Assure reducing maternal mortality remains a major focus of human rights and social justice in all nations

Main content

Globally, 80% of all maternal deaths are caused by hemorrhage, hypertensive disorders, infections, unsafe abortion, sepsis, and prolonged or obstructed labor, with important variations by region.¹⁸ Of the remaining maternal deaths, a substantial number are related to HIV/AIDS, malaria, and anemia during pregnancy.^{15, 19}

The global maternal mortality ratio has fallen around 45% over the past two decades, and the number of maternal deaths has dropped from around 523,000 a year to 289,000.²⁰ The progress is notable, but the annual rate of decline was less than half of what was needed to achieve the MDG target of reducing the maternal mortality ratio by 75%.¹

Factors Associated with Maternal Deaths

Preventable maternal mortality is associated with the violation of a variety of human rights, including the mother's right to life, the right to freedom from discrimination, and the right to health and quality health care.^{3,21} According to Mahmoud Fathalla, past president of the International Federation of Obstetricians and Gynecologists, "Women are not dying because of untreatable diseases. They are dying because societies have yet to make the decision that their

lives are worth saving.”²² Furthermore, a 2001 WHO report noted that the failure to tackle preventable maternal death represents one of the greatest social injustices of our times.¹⁴

Vast differences still remain in the risk of maternal deaths according to maternal age, country, income, as well as medical factors, and an examination of these outcomes is important to both understanding risks and designing prevention efforts. About 16 million girls age 15–19 years old (11%) give birth each year worldwide. These girls are twice as likely to die in pregnancy and childbirth compared to those ages 20 to 24—and girls younger than age 15 who become pregnant, are five times more likely to die.²³

Maternal mortality is higher in women living in rural areas and among poorer women. Because unmanaged chronic health conditions, including hypertension, obesity, and diabetes, also increase health risks for pregnant women, effective strategies to promote maternal health should therefore include expanding access to reproductive health services as well as family planning for child spacing.²⁴

Many countries face substantial gaps in access to health care, systemic service delivery problems, and poor linkages to resources. The high prevalence of maternal mortality suffered by many women has been linked to the inability to identify high-risk women, lack of access to and timely referrals to skilled facilities, delay in treatment and response to emergency obstetric situations, lack of postpartum follow-up care, and poor access to obstetric services.¹¹

ACTION

Despite international advocacy for increased political and financial support for global maternal health, and the existence of proven and cost-effective measures, maternal mortality continues to be a serious public health problem throughout the world.^{25, 26} The World Federation of Public Health Associations recommends:

- (1) Increased political commitment to global maternal, neonatal, and child health by all world governments; and
- (2) Increased targeted funding for research, development, implementation, data collection, documentation, and dissemination of effective strategies for improving global maternal health, including targeted per capita funding in countries with higher mortality rates and lower income levels.

Recommended Action Steps are as follows:

1. Support efforts to increase the competencies of health professionals, birth attendants and delivery facilities in developing countries with high rates of maternal mortality;
2. Support the provision of supplies and equipment for emergency obstetrical care, child spacing, and the prevention and treatment of mother-to-child transmission of HIV/AIDS, malaria, and anemia in pregnant women;

3. Encourage governments to strengthen health systems by prioritizing national financing, policy development, policy research, and preventive health programming for maternal, health in vulnerable populations and in countries with high rates of mortality;
4. Promote and support the establishment of vital health statistics systems that identify maternal-related deaths in developing countries with high rates of mortality;
5. Promote and support the development, testing, implementation and scale-up of effective community-based strategies linked to health systems;
6. Support continuous community education and the promotion of home-based maternal health, including child spacing, home identification of complications related to pregnancy, and early care seeking for prevention and treatment.
7. Promote gender equity through legislation, maternal education, income and empowerment.
8. Assure healthy conditions for women at home and work.

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