

THE MATERNAL HEALTH THEMATIC FUND

ANNUAL REPORT 2010



THE MISSION OF UNFPA

UNFPA, the United Nations Population Fund, is an international development agency that promotes the right of every woman, man and child to enjoy a life of health and equal opportunity. UNFPA supports countries in using population data for policies and programmes to reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV, and every girl and woman is treated with dignity and respect.

UNFPA - because everyone counts.

TABLE OF CONTENTS

Acknowledgements	04
Abbreviations	05
Foreword by Werner Haug - Director, Technical Division, UNFPA	06
Executive Summary	07
Introduction	16
Maternal Health Thematic Fund Overall Results	18
Strengthening Midwifery: The Surest Way to Reach MDG 5	46
UNFPA's Leadership of and Contribution to the Campaign to End Fistula	68
Finance	93
Challenges and Ways Forward	100
Annex: Consolidated Results Frameworks of all MHTF Countries	103

ACKNOWLEDGMENTS

UNFPA wishes to acknowledge its partnerships with national governments and donors. We would also like to thank the leadership of the African Union for launching the Campaign to Accelerate Maternal Mortality Reduction in Africa as a specific follow-up to the Maputo Plan of Action.

UNFPA greatly appreciates the multi-donor support that is strengthening reproductive health. In particular, we wish to thank the governments of Austria, Canada, Finland, Iceland, Ireland, Luxembourg, the Netherlands, New Zealand, Norway, Poland, the Republic of Korea, Spain and Sweden. We would also like to express gratitude to our partners from the private sector for their generous assistance in 2010, including Americans for UNFPA; Johnson & Johnson for supporting fistula programmes in Eritrea, Liberia and Côte d'Ivoire; Virgin Unite for funding the fistula programme in Nigeria; and Zonta International for backing the fistula programme in Liberia. We are also grateful for our many individual donors. We express sincere thanks to country, regional and global colleagues in the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), the World Bank, UNAIDS and UNFPA for their invaluable teamwork, jointly supporting countries in the spirit of delivering as one.

We thank our development partners for their collaboration and support in championing reproductive health issues, and for their technical contributions. They comprise the International Confederation of Midwives (ICM); the International Federation of Gynecology and Obstetrics; Columbia University's Averting Maternal Death and Disability Program; the University of Aberdeen; Johns Hopkins University Bloomberg School of Public Health; EngenderHealth; Family Care International; national and regional institutions; and the many members of the Partnership for Maternal, Newborn and Child Health and its Secretariat.

Finally, we thank the hardworking team of the UNFPA Sexual and Reproductive Health Branch and the Commodity Security Branch, other colleagues in the Technical Division, colleagues in the Resource Mobilization Branch and the Media and Communication Branch, and members of the Reproductive Health Inter-divisional Working Group for their commitment, solidarity and teamwork in promoting maternal and newborn health, and for providing inputs to this report.

We look forward to our continued productive collaboration in the future.

LIST OF ABBREVIATIONS AND ACRONYMS

AU	African Union
DHS	Demographic and Health Survey
G8	Group of 8
GPRHCS	Global Programme to Enhance Reproductive Health Commodity Security
H4	“Health Four”: World Health Organization, UNICEF, UNFPA and the World Bank
H4+	“Health Four+”: H4 and UNAIDS
ICM	International Confederation of Midwives
ILO	International Labour Organization
IUD	Intrauterine device
MDG	Millennium Development Goal
MHTF	Maternal Health Thematic Fund
MMR	Maternal mortality ratio
MICS	Multiple Indicator Cluster Survey
NGO	Non-governmental organization
UNAIDS	Joint UN Programme on HIV and AIDS
UNFPA	United Nations Population Fund
UNICEF	United Nations Children’s Fund
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNODC	United Nations Office on Drugs and Crime
WFP	World Food Programme
WHO	World Health Organization

FOREWORD

by Werner Haug – Director, Technical Division, UNFPA

More than 100 countries worldwide have eliminated or nearly eliminated maternal mortality as a public health problem. In spite of this, there are still approximately 350,000 maternal deaths and over 1 million newborn deaths yearly in the world. For every woman who dies in childbirth, at least 20 more suffer injuries, infections or disabilities.

This reality could be averted with highly cost-effective and feasible interventions to prevent maternal and newborn mortality and morbidity. These interventions include general access to reproductive health (including family planning), a skilled birth attendant present at every delivery, access to emergency obstetric and newborn care when needed and HIV prevention. When adopted and scaled up with a rights-based and equity-driven approach, these have led to tremendous gains, proving that rapid progress is indeed possible.

UNFPA supports developing countries that are most in need of assistance —and furthest from achieving MDG 5 and universal access to reproductive health by 2015— through two important initiatives: the Global Programme to Enhance Reproductive Health Commodity Security (GPRHCS) and the Maternal Health Thematic Fund (MHTF).

Both initiatives, working together, are well-positioned to support the UN Secretary-General's Global Strategy for Women's and Children's Health, an unprecedented global-level commitment to advance the well-being of women and children. Their many achievements, outlined in this report, provide ample evidence that strong political commitment, adequate investments and partnerships are critical to achieving MDG5 and universal access to reproductive health.

UNFPA launched the MHTF in early 2008 as a contribution to the Joint United Nations Accelerated Support to Countries to Improve Maternal and Newborn Health Initiative. This endeavor is led by UNFPA, UNICEF, WHO and the World Bank, with the recent addition of the Joint UN Programme on HIV and AIDS (UNAIDS), a group also known as the Health Four Plus (H4+). Since 2009, the UNFPA-ICM Midwifery Programme and the Campaign to End Fistula have come under the MHTF umbrella.

Momentum is building around achieving MDG 5 and we face an unprecedented opportunity to tackle maternal mortality and morbidities head on. While much progress has been made, in many countries there is still far to go. I would like to take this opportunity to thank countries, donors, the H4+, other partner organizations and all colleagues for the continued collaboration to reach our shared goal.



Werner Haug
Director, Technical Division
UNFPA

EXECUTIVE SUMMARY

Over 100 countries have eliminated or nearly eliminated maternal mortality as a public health problem. Most of the remaining 358,000 maternal deaths and over 1 million immediate newborn deaths each year can be averted with highly cost-effective and feasible interventions. Nonetheless, with only a few years left to 2015, the endpoint for the MDGs, achieving Goal 5—to improve maternal health—remains a formidable challenge. It is a challenge that must be embraced, because doing so is vital for global health, as well as social justice and economic development.

Fortunately, momentum to address this long-neglected issue is now building, ushering in an unprecedented opportunity to take renewed actions to reach MDG 5. A number of interventions have been proven to produce tremendous gains, showing that rapid progress is possible. They include ensuring universal access to reproductive health care and family planning; having a skilled birth attendant, like a midwife, present at every delivery; providing access to emergency obstetric and newborn care; and preventing HIV.

UNFPA launched the Maternal Health Thematic Fund (MHTF) in 2008 as a contribution to the Joint United Nations Accelerated Support to Countries to Improve Maternal and Newborn Health initiative. This initiative is led by UNFPA, UNICEF, WHO and the World Bank, or H4, joined recently by the Joint UN Programme on HIV and AIDS (UNAIDS). All five organizations are commonly referred to as the H4+. Since 2009, the UNFPA-ICM Midwifery Programme and the Campaign to End Fistula have come under the MHTF.

Designed as a performance-based and MDG-driven mechanism focused on the poorest countries with the highest maternal mortality ratios, the MHTF is intended to:

- 1 Be strategic by addressing priority bottlenecks that are defined in national health plans and/or included under national commitments to the UN Secretary-General's Strategy on Women's and Children's Health, and that are hampering rapid national scale up of effective interventions and progress in maternal health;
- 2 Be catalytic in boosting ongoing UN country office efforts to strengthen national capacities to achieve universal quality maternal health care; and
- 3 Leverage global, regional, and national awareness and resources, and foster further national commitment and action.

The countries supported by the MHTF were selected on the basis of high levels of maternal mortality, agreement by the H4, the possibilities for synergies with the UNFPA Global Programme to Enhance Reproductive Health Commodity Security (GPRHCS), and the potential for leveraging additional resources.

To identify bottlenecks in maternal health care, UNFPA relies upon information from a variety of sources, such as the H4 mapping exercise to define which countries have the greatest need to reduce maternal mortality. Other sources of information include inception missions, country health indicators, population-based surveys (DHS, MICS), emergency obstetric and newborn care needs assessments, midwifery desk reviews and obstetric fistula needs assessments. Among the factors underlying high maternal mortality and morbidity are very low access to and uptake of family planning and/or emergency obstetric care, and weak overall health systems generally characterized by inadequate midwifery skills, poor service delivery, weak supply chains and limited financial investment.

Strategies to scale up maternal health in priority countries

Towards optimizing support to save and improve the lives of women and newborns, the MHTF fosters strategic and catalytic initiatives to bolster national health systems, and aims for rapidly expanding coverage of cost-effective interventions. These comprise:

- Family planning, in partnership with the GPRHCS, to increase capacities for expansion and address all aspects of a comprehensive national family planning programme, including policies and financing, service delivery, community mobilization and communication for social change;
- Skilled care during pregnancy, at delivery, and postpartum with special focus on midwifery through policies and regulations, education and strengthening of professional associations;
- Emergency obstetric and newborn care; and
- The Campaign to End Fistula, supporting prevention, treatment and reintegration for fistula patients.

The MHTF also focuses on improving the measurement of results through enhanced national health management information systems, and close monitoring and evaluation. It addresses the wider social and cultural determinants of maternal mortality and morbidity, such as child marriage, adolescent pregnancy and the low status of women. At the local and global levels, the MHTF emphasizes communication and advocacy to increase awareness, raise funds and spur action on all levels. It presents the voices of women affected by poor maternal health in forums where they can be heard by decision-makers.

UNFPA offices in MHTF-supported countries prepare draft annual work plans in collaboration with the Ministry of Health and other partners. The plans are peer-reviewed during annual meetings to add optimal value to national, H4+, other partners' and UNFPA's core contributions. Once approved, funds are provided and technical assistance requirements are identified. When required, staff posts are used to strengthen UNFPA country office capacities. Regular communications among country offices, regional offices and headquarters foster coaching; the meeting of technical assistance needs, including through South-South mechanisms; and the monitoring of programmatic and financial progress. Overall, a combination of modest, but well-focused financial resources, strengthened capacities, technical support, close coaching and partnerships, and monitoring enhances MHTF donor investments.

Key contributions and results in countries

During 2010, its second full year of operation, the MHTF had an operating budget of US \$27 million and expenditures of \$21M. It provided support to 30 countries (**Afghanistan, Bangladesh, Benin,**

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_20386

