THE STATE OF THE WORLD'S CHILDREN 2009

Maternal and Newborn Health

unite for children unicef

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DEDICATION

The State of the World's Children 2009 is dedicated to Allan Rosenfield, MD, Dean Emeritus, Mailman School of Public Health, Columbia University, who passed away on 12 October 2008. A pioneer in the field of public health, Dr. Rosenfield worked tirelessly to avert maternal deaths and provide care and treatment for women and children affected by HIV and AIDS in resource-poor settings. He lent his energy and intellect to numerous groundbreaking programmes and institutions, and his passion, dedication, courage and commitment to bringing women's health and human rights to the fore of development remain a source of inspiration.

Foreword

Niger has the highest lifetime risk of maternal mortality of any country in the world, 1 in 7. The comparable risk in the developed world is 1 in 8,000. Since 1990, the base year for the Millennium Development Goals, an estimated 10 million women have died from complications related to pregnancy and childbirth, and some 4 million newborns have died each year within the first 28 days of life. Advances in maternal and neonatal health have not matched those of child survival, which registered a 27 per cent reduction in the global under-five mortality rate between 1990 and 2007. Premature pregnancy and motherhood pose considerable risks to the health of girls. The younger a girl is when she becomes pregnant, the greater the health risks for herself and her baby. Maternal deaths related to pregnancy and childbirth are an important cause of mortality for girls aged 15–19 worldwide, accounting for nearly 70,000 deaths each year.

Early marriage and pregnancy, HIV and AIDS, sexual violence and other gender-related abuses also increase

The State of the World's Children 2009 focuses on maternal and neonatal health and identifies the interventions and actions that must be scaled up to save lives. Most maternal and neonatal deaths can be averted through proven interventions - including adequate nutrition, improved hygiene practices, antenatal care, skilled health workers assisting at births, emergency obstetric and newborn care, and post-natal visits for both mothers and newborns - delivered through a continuum of care linking households and communities to health

systems. Research indicates that around 80 per cent of maternal deaths are preventable if women have access to essential maternity and basic health-care services.

A stronger focus on Africa and Asia is imperative to accelerate progress on maternal and newborn health. These two continents present the greatest challenges to the survival and health of women and newborns, accounting for an estimated 95 per cent of maternal deaths and around 90 per cent of neonatal deaths.

Two thirds of all maternal deaths occur in just 10 countries; India and Nigeria together account for one third of maternal deaths worldwide. In 2008, UNICEF, the World Health Organization, the United Nations Population Fund and the World Bank agreed to work together to help accelerate progress on maternal and newborn health in the 25 countries with the highest rates of mortality.



the risk that adolescent girls will drop out of school. This, in turn, entrenches the vicious cycle of gender discrimination, poverty and high rates of maternal and neonatal mortality.

Educating girls and young women is one of the most powerful ways of breaking the poverty trap and creating a supportive environment for maternal and newborn health. Combining efforts to expand coverage of essential services and strengthen health systems with actions to empower and protect girls and women has real potential to accelerate progress.

As the 2015 deadline for the Millennium Development Goals draws closer, the challenge for improving maternal and newborn health goes beyond meeting the goals; it lies in preventing needless human tragedy. Success will be measured in terms of lives saved and lives improved.

Ann M. Veneman Executive Director United Nations Children's Fund

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