



Commitment to Progress for Mothers, Newborns and Children

*A Special Event during the United Nations High-level Meeting
on the Millennium Development Goals*

Thursday, September 25, 2008 – 11:00 a.m. to 12:30 p.m.

Co-hosted by H.E. Ms. Michelle Bachelet, President of the Republic of Chile,
H.E. Mrs. Tarja Halonen, President of the Republic of Finland,
and H.E. Mr. Jakaya Mrisho Kikwete, President of the United Republic of Tanzania

Today as leaders in our respective fields we recognize that only with renewed commitment and collaborative efforts can we accelerate progress towards Millennium Development Goals 4 and 5. We now know it can be done and that maternal, newborn and child health are at the heart of all the Millennium Development Goals. The first step is political will and partnership.

Today we commit to this task and call on all those concerned about the health of women and children to join us.

Specifically we have each made commitments as follows:

CO-HOSTING COUNTRIES

Chile's recent commitment was to launch on September 19th 2008, the regional campaign entitled "Deliver now for women and children", coordinated by the Partnership for Maternal, Newborn and Child Health and in close collaboration with the Network of Global Leaders for MDGs 4 and 5. The launching at a regional level took place in Santiago, and its purpose is to articulate regional cooperation in order to attain MDGs 4 and 5 and thus reduce maternal and child mortality in Latin America and the Caribbean. Chile also supports work towards strengthening the promotion to access to primary health care services for infants under the age of 5 and their mothers and promotes early education as a key element to guarantee learning skills and the development of social abilities.

Finland will strengthen our financial commitment to achieve MDG 4 and MDG 5.

We have joined the International Health Partnership in order to promote more coherent approach to health sector cooperation also at the country level. The Finnish Family Federation works actively with UNFPA to promote its Push for Change campaign. Mobilizing civil society institutions is vital and Finnish Non-governmental organisations have been active in promoting MDGs 4 and 5. Here again, we are ready to do more.

Tanzania has in place a national Road Map Strategic Plan to accelerate Reduction of Maternal, Newborn and Child Death in an integrated manner and addressing continuum of care. Tanzania has already made health care for pregnant women free and is committed to working with our partners and our people to invest in more skilled health workers and help more women and children access the health care that can save their lives.

ATTENDEES

Today, the heads of four UN agencies – **WHO, UNFPA, UNICEF, and the World Bank** – issued a joint statement of commitment to work together to ensure universal access to family planning, skilled attendance at birth, and basic and comprehensive emergency obstetric care.

Amnesty International will launch a global campaign in 2009 against the human rights violations that drive and deepen poverty, including the discrimination and violence against women and girls, and the denial of the right to sexual and reproductive health services and information, that prevent real reductions in maternal mortality.

Australia will spend at least A\$250 million in the next 4 years to improve women's and children's health, with a focus on Asia-Pacific countries where maternal and child mortality remain high. Australia will work with governments, international agencies, faith-based groups and NGOs to ensure universal access to cost-effective life-saving interventions for women and children through strengthened health systems.

Brazil commits to strengthen South South co-operation to improve progress for mothers, newborns and children particularly with UNAIDS, UNFPA and the Portuguese speaking countries. Brazil is committed to stopping the feminisation of HIV and lengthening maternity leave for new mothers from 4 months to 6 months.

Following its 2006 provision of free healthcare for mothers in childbirth and children under five, the Government of **Burundi** commits to extending free healthcare to all pregnant women from 2009. The government will measure its achievements by collaborating in a joint international review process in 2010.

The Catalytic Initiative to Save a Million Lives was launched by **Canada**'s Prime Minister in 2007 with an initial contribution of \$105 million from Canada that was matched by UNICEF. It aims to intensify efforts to reduce child and maternal mortality by supporting concrete action to scale up basic, proven, high impact health services for mothers and children. Since its launch the Catalytic Initiative partners have mobilized \$425 million in funding for maternal and child health. Partners have committed to help build the capacity of country health systems so that they can scale up health services and achieve sustainable improvements in the health of those most at risk. This Initiative will put a particular focus on monitoring and results tracking, in order to demonstrate and share lessons learned.

"I am committed to being a global advocate for the improvement of maternal health." - **Christy Turlington Burns**

Colgate-Palmolive commits to continuing its handwashing with soap public health educational efforts.

Comic Relief's experience of working with communities across Africa confirms time and again that women are most likely to be living in extreme poverty, poorly educated, without work to earn a living, HIV positive and unable to access the healthcare they need and deserve. We are proud to support the White Ribbon Alliance and are committed through our funding to strengthen health systems to help end the unnecessary deaths of women in childbirth. One in eight is a tragedy and a scandal that must stop.

The Danish MDG3 Global Call to Action for gender equality is key to accelerating progress on all MDGs, including maternal and child health. **Denmark** supports countries that wish to provide free health care for the poorest pregnant women and small children. The MDG3 Call has generated 100 new and strong commitments from important actors to "do something extra" to promote gender equality. Denmark will double its assistance focused on gender equality from 2008 to 2010 and in addition will substantially support women's empowerment in Liberia.

ExxonMobil, commits to delivering on the promise of global partnerships for achieving the MDG's and on combining an attack on "vertical" preventable diseases such as malaria with "horizontal" approaches to strengthening health services delivery platforms.

Family Care International and **Women Deliver** are committed to achieving MDG 5 by promoting greater political commitment and advocating for increased financial investment by \$5-6 billion annually in maternal/newborn health and women's well-being. We will promote investment in functioning health systems to ensure family planning and other reproductive health services; skilled care and emergency obstetric care during and after birth; and immediate post-natal care for mothers and newborns as key strategies for the global development agenda.

FIGO is dedicated to the improvement of women's health and rights and to the reduction of disparities in health care available to women and newborns as well as to advancing the science and practice of obstetrics and gynecology. FIGO will accelerate its work in low and middle income countries focused on reduction of maternal newborn mortality and morbidity including initiatives to prevent unsafe abortion. FIGO is recommending to its 113 member societies that they work with other Health Care Professionals, Government Agencies and NGOs and UN Agencies to pursue training in emergency operative obstetrics for all cadres involved in emergency care.

Private foundations in the United States are also committed to MDG#5, both target 1 – reducing maternal mortality – and target 2 – universal access to reproductive health. Together, the **William and Flora Hewlett Foundation**, **David and Lucille Packard Foundation**, and **MacArthur Foundation** are making grants related to MDG #5 of nearly \$100 million in 2008. And we will do more in the future.

"I vow to provide enhance capacity building in emergency obstetric care for Maternal Health and for Integrated Management of Childhood illnesses and increase coverage for vaccination for child health." **Angelique Mgomaa-Minister of Health of Gabon**

The GAVI Alliance fully commits to contribute to the scaling-up of the knowledge and awareness of the different implications that health interventions have on women and men, girls and boys. The Alliance will accelerate the delivery of vaccines and related health services to ensure that women and men, girls and boys in the poorest countries have equal access to new and life saving technologies. More specifically, the GAVI Alliance will fast-track the availability of vaccines to prevent diseases that cause suffering and death for girls and women, such as Human Papilloma Virus (HPV) vaccine against cervical cancer. The GAVI Alliance will work with its partners to exercise leadership, raise awareness and promote coordinated country-level and global efforts towards gender equality in health which will improve the well-being of mothers, newborns and children.

"My commitment to calling for action on MDGs 4 and 5 remains strong. At the level of the European Union we must be at the vanguard of efforts to ensure that pledges are translated into budgetary commitments." **Glenys Kinnock, Member of the European Parliament**

The Global Health Workforce Alliance strongly commits to continue advocating for action to address the health workforce crisis--and thereby improve the health of mothers, babies and children--at the highest political levels and across our vast network of members and partners. Collaboratively, we will work towards achieving the plans set out in the Kampala Declaration and Agenda for Global Action on the health workforce crisis – we will report back on progress in 2010. In the next 2 months we will convene more than 10 international partners and key countries to explore current and planned health worker country activities, and to encourage increased synergy among partner responses. We pledge to keep mothers, babies and children at the heart of our work and our goal for health improvement. Analyzing the impact of increased health workforce action on the areas of maternal, newborn and child health will be a key indicator for progress.

Through its Global Campaign on Social Security and Coverage for All, the **ILO** commits to promoting, as a matter of priority, a basic package of social security benefits or social transfers that consists of universal access to essential health services, child benefits, social assistance for unemployed workers, and basic pensions for older people and those with disabilities. Such a package helps to reduce child mortality and improve maternal health through enhanced access to health services and basic income security. The social security advisory services of the ILO stand ready to support countries that contemplate the introduction of elements of a basic social security package through legal, logistic, social budgeting and fiscal feasibility analyses.

The International Confederation of Midwives (ICM) is committed to strengthening the profession of midwifery in low resource countries in order to create a strong well-educated midwifery workforce to provide skilled attendance for mothers and their newborns. The WHO has identified that the world needs 350,000 more skilled attendants now. The ICM is partnering with funders and governments to work towards addressing this critical lack of human resources and thereby save the lives and improve the healthcare of pregnant women and their newborns - wherever they may live.

The International Center for Research on Women (ICRW) will mobilize support within at least three countries (Kenya, India, and Tanzania) to reduce maternal mortality and morbidity by demonstrating the social and economic

costs to families and communities of maternal ill-health. ICRW will undertake this work in collaboration with Family Care International and local organizations.

IPPF will mobilize our members in 177 countries to accelerate service delivery and to hold governments accountable for translating the global promise of MDG 5 into funding and programmes that save women's lives.

JOICFP will further strengthen its advocacy towards the government of Japan to prioritise MDG 5 in its Overseas Development Assistance policy to achieve universal access to Reproductive Health.

Johnson and Johnson commits to ensuring that our medicines for global health challenges are developed with the active participation of women and girls, particularly fostering new approaches to clinical trials to promote greater involvement of women. We are establishing a new initiative with the UN, women's groups and other healthcare companies to address these gaps, particularly in relation to HIV and TB. Johnson and Johnson further commits to use the power of our voice to encourage other businesses to prioritise the needs of mothers, newborns and children, working with the Global Business Coalition, Family Care International and other stakeholders.

The Lancet commits to making science and knowledge the catalysts for a new social movement for maternal, newborn and child health. We will do this by convening the world's best maternal, newborn and child health researchers to synthesise their discoveries into practical programmes for social change, realising the right to health and equity. We will also support the full range of partners - countries, civil society, UN, private sector - to deliver and disseminate their work on maternal, newborn and child health to policy makers and politicians nationally and globally. These commitments are not bound to 2015; they are long-term and sustained.

Madagascar commits to reinforcing high impact intervention packets at health centre and community level, investing in the health of children and universal access to healthcare for mothers and children.

Healthy Pregnancy is a programme that facilitates the access to health services among pregnant women living in marginalised communities. The Programme Equals Start Up in Life is an initiative that aims to offer health insurance to all newborn children at the national level. **Mexico** makes her commitment to launch a media campaign for hospitals to identify early lesions on newborn children. We are offering day care services for children from ages one to three and a half throughout the country.

Mozambique already provides free services to pregnant women and to children under the age of 5 and allocates 13% of government expenditure to the health sector. The Government of Mozambique has developed a comprehensive Workforce Development Plan for 2008-2015, that will increase the number of health workers from 26,000 to 46,000 by 2015 – giving 1.89 health workers per 1000 population. The total cost of the HR plan from 2009 to 2015 is 1.6 billion dollars, the financing gap that has been identified during this 7 year period is 593 million dollars. The cost per Mozambican of implementing this strategy is \$4 dollars per capita per year. Mozambique would like to provide universal access to health care which is free at the point of use. This will cost Mozambique an additional 8 million dollars per year. We believe introducing this policy would increase access to health services by 30%. An International Health Partnership Compact was signed in Mozambique, on the 16th of September.

National Safe Motherhood Alliance in Yemen commits to building the capacity of health workers in best practices, addressing the early age of marriage, pushing for increased resources for maternal health, and increasing demand for quality services amongst communities.

Investments in MDG5 should not only focus on the health of mother and child, but need to be viewed in the wider context of sexual and reproductive health and rights, including issues like family planning, safe abortions and sexual violence against women. * In order to stress the importance the Netherlands attaches to this, **the Netherlands** has decided to contribute 58.5 million Euros per year to UNFPA, over the coming four years. In addition The Netherlands also intends to contribute 20 million Euros annually to the Global Program on Reproductive Health Commodity Security over the coming four years. The Netherlands is actively supporting the Malinese government to increase effectiveness in achieving health outcomes. Over the coming three years The Netherlands will support the development of sexual and reproductive health services in Mali with an additional budget of 19 million Euros.

Norway has developed a policy focusing particularly on MDGs 4 and 5, and has pledged US\$1 billion over ten years to reduce child and maternal mortality. This is in addition to a pledge of US\$1 billion between 2000 and 2015

for vaccinating children in poor countries. To reduce mortality rates, political advocacy at the highest level is crucial. For this reason, a small number of international leaders have joined together with Prime Minister Jens Stoltenberg in a Network of Global Leaders for MDGs 4 and 5. In New York on 26 September 2007, Norway's Prime Minister, Jens Stoltenberg launched the Global Campaign for the Health Millennium Development Goals. The First Year Report of the Global Campaign will be launched 25 September, and provides an update on the different initiatives, reveal how they are linked, show results that has been achieved, and highlight concrete actions that still is essential to accelerate the necessary progress if we are to reach the health related MDGs by 2015.

Oxfam International pledges to get 6 million people globally to join to fight for Health and Education for All, and to work with others to activate these people to demand health care for all and that more women's lives are saved. We also pledge to invest in advocating for health system strengthening and in working with partners to hold governments to account in poor countries for how aid is spent to reduce child and maternal deaths.

In 2008 the **Partnership for Maternal, Newborn and Child Health** has contributed to raising the profile of and financial resources for maternal, newborn and child health through active high level engagement in countries and regions such as India, Tanzania, Latin America, notably Chile as well as through global drives. The Partnership commits in 2009 to play a more important role in the facilitation of joint action for maternal, newborn and child health and in the creation of increased accountability from its over 250 partners to follow through on their commitment to saving mothers and children.

PATH will work with Save the Children, Johns Hopkins University, and other partners to reduce newborn deaths by developing and distributing enhanced newborn care kits in countries where newborn death rates are high, especially South and Southeast Asia and key countries in Africa.

"I commit to work on the MDGs with disperse populations of the Andean region to obtain the most sustainable results. The commonalities of MDGs 1, 3, 4 and 5 means that treating them together increases the possibilities of success." **Pilar Nores de Garcia, First Lady of Peru**

Physicians for Human Rights commits to mobilizing the skills and voices of health professionals to reduce maternal mortality through research on human rights violations that contribute to the high rate of women dying in pregnancy and childbirth; advocacy for a dramatic increase in skilled birth attendants; and advocacy for reproductive health care that is available, accessible, acceptable and of good quality.

Population Action International will convene and support-- through technical assistance and up to \$150,000 in financial support-- indigenous NGOs and networks in at least 10 African countries to leverage their advocacy skills and activities directly in support of women, maternal health and reproductive rights.

The **Safe Motherhood Network Federation of Nepal** pledges to continue its quest towards ensuring that every Nepali woman has access to skilled care at birth for herself and her newborn - despite barriers of remoteness, poverty, caste, religion or language. We are happy that our advocacy has been successful enough to get safe motherhood a special mention in the budget of Nepal. We pledge to make universal coverage a reality for all women of the world.

Save the Children will build a worldwide movement of 10 million people by 2010 demanding an end to the needless deaths of nearly 10 million children under five every year. We will inspire a global shift in attitudes so that it is no longer politically acceptable for millions of children to die needlessly. By building this movement and through our own life-saving work in countries around the world, we will make this the generation that consigns child mortality to the history books.

UNFPA is committed to working with partners to guarantee universal access to reproductive health. During the next five years, we will enhance support to the countries with the highest maternal mortality and commit to raising \$500 million through the Maternal Health Thematic Fund to support countries and women in need.

The United Kingdom has committed to spend an estimated £450 million over the next three years to support national health plans for 8 IHP countries (Ethiopia, Mozambique, Kenya, Zambia, Burundi, Nigeria, Cambodia and Nepal). Prime Minister Gordon Brown also announced a Taskforce on Innovative Financing for Health Systems to

help save 10 million mothers and newborns. It will help to provide over 1 million new health workers and ensure 400m extra births take place in a good quality facility. This Taskforce will report to the Italian G8 Summit in 2009.

The United States Congress passed and President Bush signed into law on July 30th a bill that renewed and expanded the commitment of the United States authorizing up to \$48 billion to fight global HIV/AIDS, tuberculosis, and malaria over the next five years. This year, the United States also worked to secure a commitment by G8 countries to address the shortage of health workers. The G8 action builds on a joint U.S.-U.K. announcement made during the visit of Prime Minister Brown to Washington in April, in which the United States announced plans to invest at least \$1.2 billion over five years on health workforce development in the four nations of Ethiopia, Kenya, Mozambique, and Zambia through the President's Emergency Plan for AIDS Relief. This represents the U.S. contribution to the G8 initiative. The new U.S. law supports this health workforce initiative, and authorizes expanding it, by establishing a goal to support training of 140,000 new health workers over the next five years.

The **US Coalition for Child Survival** brings together over 40 of the most influential organizations working in child survival and committed individuals who believe it is unacceptable that nearly 10 million children every year die of largely preventable or treatable causes. The Coalition is committed to advocating within the U.S. in support of child survival and health in response to the global crisis facing children and their mothers in developing countries.

The White Ribbon Alliance for Safe Motherhood commits to extending and expanding our Promise to Mothers Lost Campaign to exert pressure for increased investment in maternal health especially in health workers. We will strengthen the global movement to raise awareness and hold governments and leaders to account on the promises made.

The White Ribbon Alliance Burkina commits to raise awareness about commitments made among the decision makers and the community of Burkina Faso.

The White Ribbon Alliance India commits to uniting stakeholders to pursuing a common advocacy agenda in maternal, newborn, and child health in the country.

The White Ribbon Alliance for Safe Motherhood in Tanzania (WRATZ) is committed to advocating with policy and decision-makers for their increased commitment and will in ensuring that all Tanzanian women and newborns get their right for life saving childbirth services. We will advocate for the adequate numbers of trained health personnel including nurses, midwives, clinical officers and doctors to at least be at a ratio of 2.3:1000. We will also advocate that the health budget increases to 15% of the national budget according to Abuja Declaration and reaffirmed by President Kikwete this year.

The World Bank will commit 200 million dollars over the next 3 years to help Ethiopia achieve better health results for its mothers, newborns and children under the aegis of the International Health Partnership (IHP+). This stepped-up World Bank support represents almost a doubling of its health financing to Ethiopia over the previous three years. Along with its partners, the Bank stands ready to help other IHP+ countries fill the financing gaps in their plans to achieve lasting, improved health results for mothers, their newborns, and children as championed in all the health-related MDGs. Over the coming months, we will double the number of Bank health systems experts, and assign them to offices in Africa to join local experts and our partners in helping countries achieve better health results through greatly strengthened health systems.

In 2008, **World Vision** is investing approximately \$150 million in cash towards addressing health in our programme areas and achieving the MDGs, in particular MDGs 4 and 5, and is contributing an additional \$300 million in in-kind contributions for medications and health products.

The commitments made today join a growing worldwide commitment to accelerate progress for mothers, newborns and children. Recent commitments to progress include:

- Within the last two years 41 countries in **Africa** have developed and committed themselves to national Maternal and Newborn Health Road Maps as recommended by the Maputo Plan of Action.
- At the **AU** summit on 30 June 2008, leaders agreed to intensify efforts to reduce maternal, newborn and child mortality.
- In 2008, the Government of **Cambodia** placed reproductive, maternal, child and newborn health as the top priority in their new health sector plan 2008 – 2015 and made a firm commitment to enhance skills and number of midwives. The work has started.
- In **Ethiopia**, the Ministry of Health and Ministry of Education, in collaboration with UNFPA, are promoting a Masters programme and training of mid-level health officers so that they can provide life-saving emergency surgery at rural hospitals, where doctors are scarce. 26 August 2008, Ethiopia signed the first country IHP+ compact, that will accelerate and harmonize all efforts to scale up and achieve MDG 4, 5 and 6.
- The **EU** Council meeting in June 2008, committed to spend an additional E8bn on health by 2010.
- At the **G8** Summit in Japan, leaders agreed a package on health that will help recruit and train 1.5 million health workers in Africa and ensure 80% of mothers are accompanied in childbirth by a trained health worker.
- On 6 May 2008, President John Kufour of **Ghana** announced that pregnant women who attend public hospitals will now receive free medical care.
- In 2007, the First Lady of **Indonesia** called for active participation of men in saving women's lives from pregnancy and delivery complications.
- In September 2008 the **International Confederation of Midwives** and **UNFPA** - with support from **Sweden** and the **Netherlands** - initiated a midwifery programme that will increase the number of skilled birth attendants in 20 countries.
- On the 24th July 2007, the **Kenyan** Government announced that maternity fees would be waived in all the country's public health centres and dispensaries. Professional maternity services are now accessible to those who cannot afford to pay. Anecdotal evidence suggests that the abolition of all charges has had a significant positive impact on the numbers of women delivering in health facilities.
- On 11 July 2008, the Prime Minister of **Pakistan** announced that contraceptives would be freely provided to all couples who wanted them.
- In **Rwanda**, due to strong political will, access to reproductive health services and a staff motivation programme, the use of skilled birth attendants has gone from 39 to 52 per cent, and the use of modern contraception almost tripled since 2005, preventing unwanted pregnancies and saving women's lives.
- **United Nations Secretary General** Ban Ki Moon has made global health a priority of his tenure with maternal mortality a top priority of the UN family as a whole.