



From Analysis to Action: Addressing Maternal Morbidity and Mortality on the State and International Level

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🎗️ Every minute, around the world:

- 380 women become pregnant
- 190 women face unplanned or unwanted pregnancies
- 110 women experience pregnancy-related complications
- 40 women have unsafe abortions
- 1 woman dies

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Risking Death To Give Birth

Women in Sweden have a 1 in 17,400 chance of dying from pregnancy-related causes and give birth to an average of 1.7 children in their lifetime

Afghan women have a lifetime risk of 1 in 8 and give birth to an average of 7 children in their lifetime

Lifetime risk of maternal death*



*Lifetime risk is the chance of dying of pregnancy-related causes during a woman's reproductive lifespan

In Peru, poor women are six times more likely to die during pregnancy or childbirth than rich women

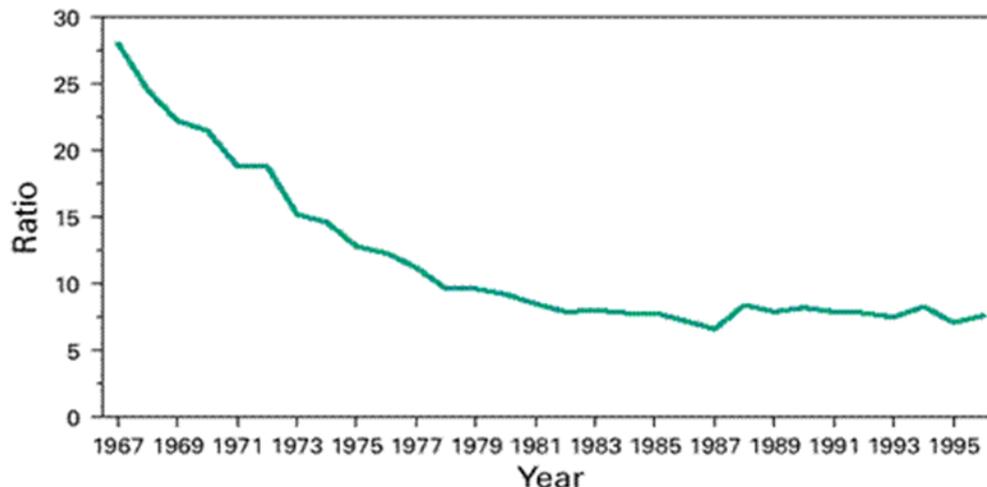
In Niger a woman has a 1 in 7 chance of dying from pregnancy-related causes in her lifetime

India endures nearly a quarter of all maternal deaths in the world: more than 1 every 5 minutes

Maternal Mortality in the United States

- 🎗️ Maternal mortality rates have not improved in 20 yrs.
 - The steady decline from the mid 1960s through 1980 is largely attributed to medical and technological advances
 - Antibiotics
 - Banked blood
 - Safer surgical techniques

FIGURE 1. Maternal mortality ratio*, by year — United States, 1967–1996



*Number of maternal deaths per 100,000 live births. The term "ratio" is used instead of rate because the numerator includes some maternal deaths that were not related to live births and thus were not included in the denominator.



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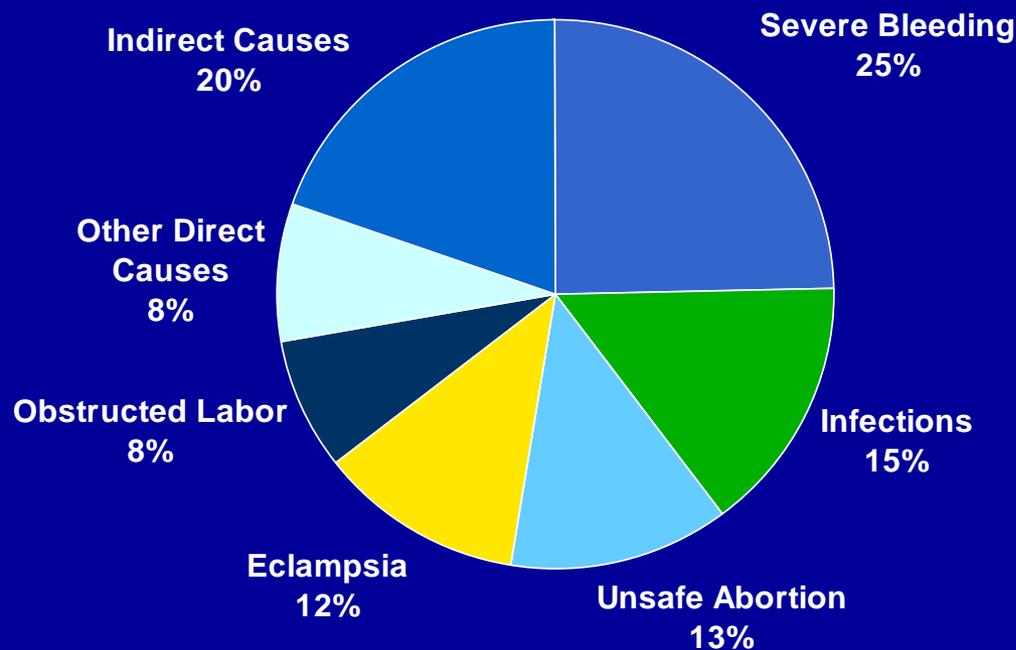
Rank	Country	Lifetime risk
1	Ireland	1 in 47,600
2	Bosnia and Herzegovina	1 in 29,000
3	Italy	1 in 26,600
4	Greece	1 in 25,900
5	Austria	1 in 21,500
6	Germany	1 in 19,200
7	Czech Republic	1 in 18,100
8	Denmark	1 in 17,800
9	Sweden	1 in 17,400
10	Spain	1 in 16,400
11	Slovenia	1 in 14,200
12	Slovakia	1 in 13,800
12	Switzerland	1 in 13,800
14	Australia	1 in 13,300
14	Hungary	1 in 13,300
16	Iceland	1 in 12,700
17	Japan	1 in 11,600
18	Canada	1 in 11,000
19	Poland	1 in 10,600
20	Croatia	1 in 10,500
21	Netherlands	1 in 10,200
22	Kuwait	1 in 9,600

Rank	Country	Lifetime risk
23	Finland	1 in 8,500
23	Latvia	1 in 8,500
25	Malta	1 in 8,300
26	United Kingdom	1 in 8,200
27	Belgium	1 in 7,800
27	Israel	1 in 7,800
27	Lithuania	1 in 7,800
30	Norway	1 in 7,700
31	Bulgaria	1 in 7,400
32	France	1 in 6,900
33	The former Yugoslav Republic of Macedonia	1 in 6,500
34	Cyprus	1 in 6,400
34	Portugal	1 in 6,400
36	Singapore	1 in 6,200
37	Republic of Korea	1 in 6,100
38	New Zealand	1 in 5,900
39	Ukraine	1 in 5,200
40	Luxembourg	1 in 5,000
41	Belarus	1 in 4,800
41	United States of America	1 in 4,800



Causes of Maternal Mortality

Pregnancy and Childbirth-Related Deaths to Women, by Cause



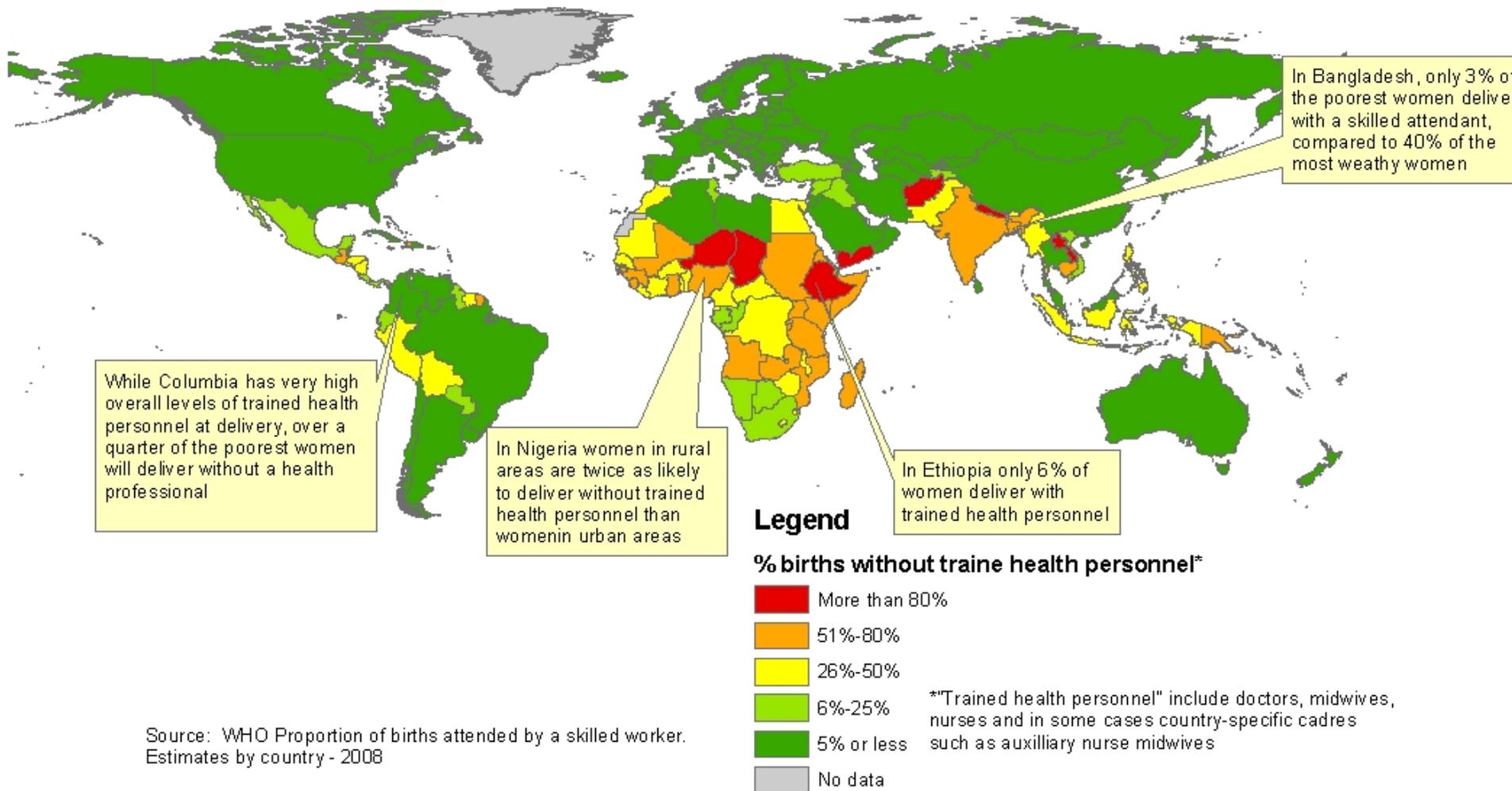
Note: Total Exceeds 100 percent due to rounding

Source: World Health Organization, Reduction of Maternal Mortality: A Joint WHO/UNFPA/UNICEF/World Bank Statement, Geneva
<http://www.prb.org/presenSource: World Health Organization, Reduction of Maternal Mortality: A Joint WHO/UNFPA/UNICEF/World Bank Statement, Geneva>
tations/f_causes-matern-mortality.ppt

The skill gap: percentage of births without trained health personnel

Trained personnel are a key to reducing maternal deaths. But to have an impact, health care personnel need to be effectively trained, deployed, supervised and updated within an enabling environment that appropriately supports and remunerates them. In addition saving women's lives requires a health system that can offer timely emergency care to women experiencing complications.

There is also a mismatch of need and provision: many women who most need professional care at delivery are excluded because of financial or other access barriers



Preventing Maternal Mortality & Morbidity

- ⚔ Reproductive health services
- ⚔ Education
- ⚔ Skilled Birth Attendance
- ⚔ Emergency Obstetric Care and post partum care



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The White Ribbon Alliance

🎗️ The WRA is a grassroots movement that builds alliances, strengthens capacity, influences policies, harnesses resources and inspires action to save the lives of women and newborns around the world.

The WRA amplifies the voices of people suffering from the greatest burden of morbidity and mortality due to complications in pregnancy and childbirth

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WRA National Alliances

🎗 Bangladesh

🎗 Burkina Faso

🎗 India

🎗 Indonesia

🎗 Kenya

🎗 Malawi

🎗 Nepal

🎗 Pakistan

🎗 Rwanda

🎗 South Africa

🎗 Sweden

🎗 Tanzania

🎗 Uganda

🎗 Yemen

🎗 Zambia

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Engaging as an Alliance at All Levels

Grassroots

Individual &
Organizational
Members

National

National Alliances and
national campaigns

Global

Global Maternal
Mortality Campaign



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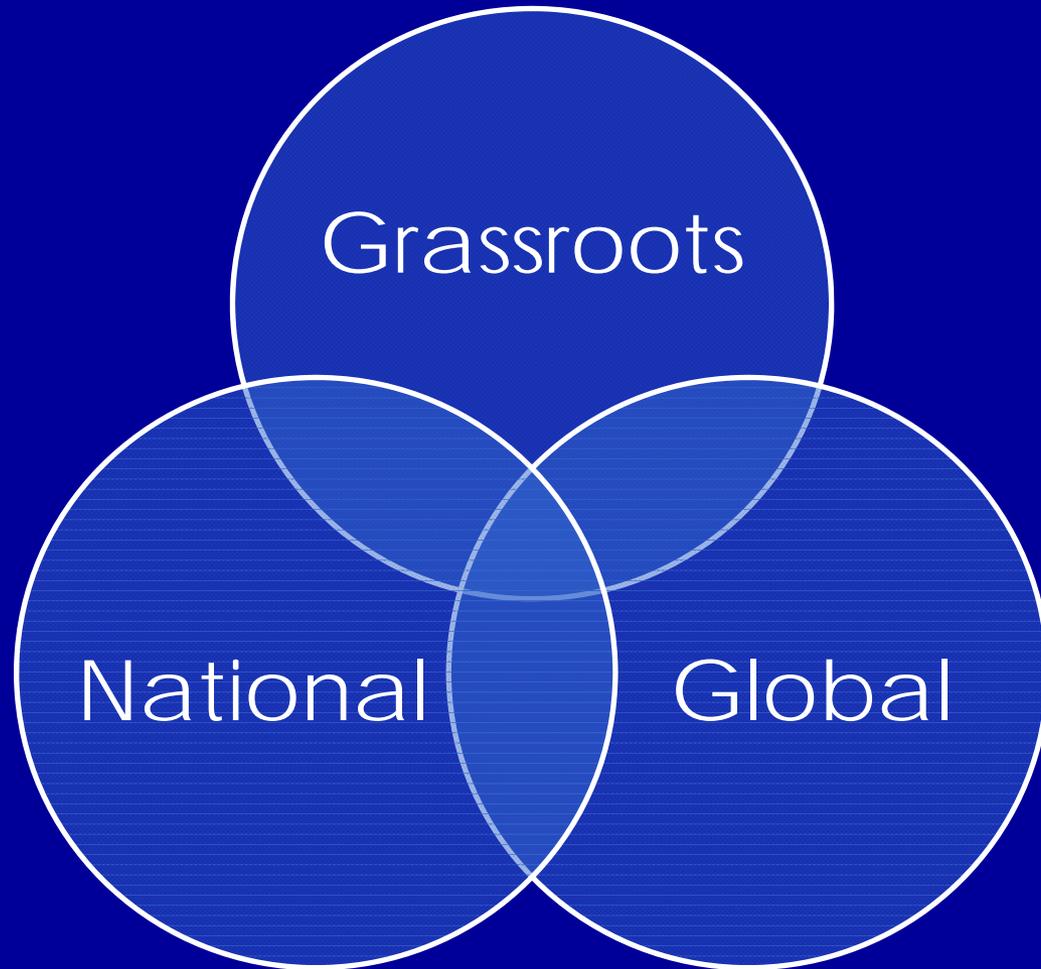
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WRA Advocacy Works



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GRASSROOTS



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Alarming death rate during pregnancy and in delivery
Blue veins joining global campaign to create awareness
year due to pregnancy related causes. It is estimated that 500,000 maternal deaths occur per



* Women task govt on health care delivery

By Lizzy Achuagu
The women of Uroshi community in Igbo-Eze North Local Government Area of Enugu State has called on government to assist them

build a functional health centre in the area as this would help in reducing maternal and child death. The women made the call during a seminar organized by Women Information Network (WINET) and White Ribbon Alliance for

Safe Motherhood held at St. Andrew's premises Igbele/Uroshi in Enugu-Ezike, Igbo-Eze North L.G.A.

go for ante-natal care during pregnancy and after child birth routine immunization. She listed the benefits of

health centre, they should make a move by paying advocacy visit to their councillor who will lead



Sarah Brown & other supporters, Million Mums launch

NATIONAL



Rep. Capps, Mothers Day Every Day launch



President Kikwete at White Ribbon Day, Tanzania



Public hearings, Orissa



Stakeholders meeting, Malawi

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Mothers Day Every Day

- ⌘ **Campaign:** Raise awareness. Advocate for greater US leadership to save women's lives.
- ⌘ **Goal:** Generate political will and action toward MDG 5.
- ⌘ **Objectives:** Support maternal health champions on Capitol Hill and in Administration. Mobilize American people to call for action.
- ⌘ **Advisory Committee:** Unite leaders from all walks of life, co-chaired by Donna Shalala and Ann Veneman.
- ⌘ **WRA Members, Partners, Allies:** Coordinate outreach. Unite movement for change.



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GLOBAL



African First Ladies Health Summit



62nd World Health Assembly



3rd Annual Women's Dinner at Davos



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Consensus for Maternal, Child & Newborn Health

A framework for global action to save the lives of over 10 million women and children by 2015

How?

1. Political leadership, community action
2. Effective health systems
3. Remove barriers to access
4. Skilled health workers, right place, right time
5. Accountability for results



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2010 Global Maternal Mortality Campaign Objectives

- ⌘ More resources for maternal and newborn health
- ⌘ Continue to advocate for maternal mortality to be recognised as a key indicator of a functioning health system.
- ⌘ Training, recruiting and retaining more health-workers
- ⌘ Removing barriers to quality health-care



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Key Moments 2010

🎗️ G8 Summit

🎗️ Africa Union Summit

🎗️ Global Health Initiative/US
Legislation on MNCH

🎗️ United Nations Millennium
Development Goal Review



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