

## Maternal Health

Maternal health has received unprecedented global attention in the past year, especially on the issue of maternal mortality. As both a health and human rights issue, maternal health has been an important topic of discussion at international conferences and summits. Below is a look at how maternal health has been integrated into past G8 summits. Use this information to learn about the decisions that have been made in the past, Canada's policies and commitments, as well as the areas for discussion during this year's summits.

- At the 1996 summit in Lyon, France, the G8 leaders discussed the usefulness of setting indicators to measure progress in issues like extreme poverty and infant, child and maternal mortality.
- At the 2005 summit in Gleneagles, the G8 promised \$50 billion in aid to developing countries by 2010, of which \$25 billion would go to Africa. G8 also promised to provide universal access to anti-HIV drugs in Africa by 2010.
- The Infrastructure Consortium of Africa (ICA) was also established during the 2005 summit. ICA's mission is to "help improve the lives and economic well-being of Africa's people through encouraging, supporting and promoting increased investment in infrastructure in Africa."
- At the 2007 G8 summit in Heiligendamm, leaders committed to working to provide universal coverage of the PMTCT (Prevention of Mother-To-Child Transmission) program by 2010 and to meet needed resources for pediatric treatments at a cost of \$1.8 billion, also by 2010.
- The G8, in 2007, also committed to increasing efforts in maternal health care and voluntary family planning, at an estimated \$1.5 billion, which includes providing 100 million mosquito nets to combat malaria.
- Finally, during the most recent G8 summit in 2009 in L'Aquila, Italy, leaders agreed to accelerate progress on maternal health, including sexual and reproductive health care and services and voluntary family planning.

Since then, progress on maternal health has been modest. Below is a look at why Canada has been criticized for its policy on funding maternal health.

- In 2000, 189 countries, including Canada, committed to ending extreme poverty worldwide through the achievement of eight Millennium Development Goals (MDGs). The fifth MDG commitment was to reduce maternal death by three-quarters by 2015.
- Current trends show a global decline in the maternal mortality ratio of less than 1% annually between 1990 and 2005, rather than the expected decline of 5.5% annually.

- According to Demographic and Health Surveys, 201 million women have an unmet need for contraception. Over half of the births in sub-Saharan Africa still occur without health personnel, and there is still no reproductive health coverage in most of the developing world.
- There is a consensus that family planning, including abortion, is crucial to reducing maternal deaths and improving the economic status of women in the poorest parts of the world. Yet, Canada has disclosed that it will not fund abortion in its G8 child and maternal health-care initiative for developing countries.
- Since the 1980s, Canada has failed to provide financial assistance to the International Planned Parenthood Federation (IPPF), one of the key organizations in Africa and other parts of the world. Also, partly due to the loss of Canadian funding, IPPF's branch in Zambia (a country with one of the highest rates of maternal death in the world) will have to cut services and lay off staff. This means that fewer Zambians will have access to contraceptives and maternal health care. It may result in more unsafe abortions, which are a leading cause of death.

Let's tell our leaders that young people care about maternal health, and will hold them accountable for the promises that they make at this year's G8 and G20 summits.

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