

Saving the lives of women and children

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UNICEF Australia and AusAID have entered a new four-year partnership aimed at reducing the number of women and children who die in poverty.

In Australia there is hope, if not informed optimism, that we will evade most of the pain of the global recession. At the least, it is appearing that our economy is better placed than most to weather the storm.

The reverse is true in some of the world's poorest nations. Already rocked by food and fuel prices late last year, the crisis has brewed a perfect economic storm that has hit investment, trade, tourism, remittances and possibly even aid.

There are now fears the crisis will create new poverty traps that will ensnare people not just for an economic cycle but for generations.

A discussion paper focusing on the impact of the financial crisis on children commissioned by UNICEF warns that developing nations must sustain, or even increase, social spending and funding for child protection in order not to condemn several future generations to poverty.

It also says that dampened economic growth could lead to falls in agricultural investment and productivity, triggering a new spike in food prices. Sharp rises in food and fuel prices in late 2008 forced an estimated 100 million people into hunger.

Forecasts suggest there could be over 50 million more people unemployed globally in 2009. The ranks of the "working poor"—people working and living on less than US\$2 a day—could also swell by well over 200 million.

The reality is that unless governments act now, more children



will drop out of school and be forced into work, rates of malnutrition will rise, neo-natal and child health will decline and a new "lost generation" will be created.

It is why the recent move by G20 leaders to earmark US\$50 billion for low income countries is heartening.

It was also heartening that unlike past international forums that have had poverty high on their agenda—in which the likes of Bono and Sir Bob Geldof have hectored world leaders—this time Australia played a leading role.

Historically Australia has been a laggard in terms of the percentage of gross national income that it allocated to overseas aid. And this is despite the fact that the greatest number of poor—people living on less than \$1.25 a

ABOVE: An infant is weighed as part of a routine medical examination at the main hospital in the coastal town of Vilanculos, Mozambique. The hospital was severely damaged by Cyclone Favio and tents bearing the UNICEF logo were used as temporary wards. Cyclone Favio pounded the coast with drenching rains and winds of over 200 km per hour. While few deaths or injuries were reported, an estimated 150,000 people were affected in nearby provinces and 50,000 people were left homeless. The disaster came on the heels of severe flooding that had already displaced as many as 140,000 people—half of them children—along the Zambezi River. AusAID recently signed a four-year, \$93.6 million partnership with UNICEF to support its global role in advancing the Millennium Development Goals, particularly related to saving the lives of women and children. Photo: © UNICEF/NYHQ2007-0215/Delvigne-Jean

day—are in the Asia–Pacific region. Our poor aid contribution historically meant Australia’s ability to play a significant leadership role in the global response to poverty had been greatly diminished. Our road to redemption was actually started by the former Prime Minister, John Howard, in 2005 while he attended the UN World Summit in New York. Mr Howard announced a \$1 billion increase in our aid budget over five years.

The Rudd Government built upon this with its commitment to boost overseas aid to 0.5 per cent of gross national income by 2015. More importantly, amid the financial meltdown, the government has recommitted itself to this pledge as recently as May this year in the 2009–10 Budget.

Under a Partnership Framework signed with UNICEF, AusAID will provide \$93.6 million over four years to advance its global role in achieving the Millennium Development Goals and particularly those relating to women and children.

UNICEF Australia and AusAID conducted a joint briefing of parliamentarians in March to highlight some of the challenges to improving maternal and child health. This is the one Millennium Development Goal which is lagging the most.

UNICEF’s flagship report, *State of the World’s Children 2009*, revealed that women in developing nations are 300 times more likely to die during pregnancy or childbirth than women in Australia and other developed countries. This alarming disparity represents one of the greatest indicators of the gulf between rich and poor in our world today.

Alarming, a mother in Timor-Leste has a one in 35 chance of dying in childbirth or from pregnancy-related complications compared to Australian women who face a one in 13,300 risk.

Every year more than half a million women die as a result of pregnancy or childbirth complications. For every death, another 20 women suffer illnesses or injury, often with severe and

lasting consequences. A child born into poverty is almost 14 times more likely to die in their first month than if they were born in a developed economy.

Most maternal deaths are caused by obstetric complications, anaemia (exacerbated by malaria), HIV and other conditions that increase the risk of haemorrhage. Yet most of these conditions are preventable or treatable. Up to 80 per cent of maternal deaths could be averted if women had access to maternity and basic healthcare services.

That the conditions women face are confronting is highlighted by a medical clinic in Papua New Guinea which has no running water. Not only do women in labour have to walk several miles to get to the clinic but they are also required to carry with them two buckets of water.

UNICEF projects aim to deliver a “continuum of care”, a concept that transcends the traditional emphasis on single, disease-specific interventions. This holistic approach seeks to foster a model of primary health care that embraces every stage of maternal, newborn and child health.

Saving the lives of mothers and their newborns requires more than just medical intervention. Educating girls is pivotal to improving maternal and neonatal health and also benefits families and societies. And often other basic life essentials such as clean water and adequate nutrition are critical factors in improving the health of mothers and children.

Yet this work can only be done through donations from both governments and individuals. At a time when aid funding has never been more critical it is heartening to see the Australian government playing an important role in combating poverty.

Our leaders and decision-makers must not only be conscious of the economic pain at home but the plight of our neighbours in the region. For the poorest, the economic crisis looms as a matter of life and death.



ABOVE: A woman carries her baby in a sling pouch on her back in the Dorti camp on the outskirts of El Geneina, capital of West Darfur. About 8,000 displaced people live in the UNICEF-supported camp. UNICEF, in collaboration with other relief groups and with government and local authorities, is providing shelter materials, emergency health services, expanded access to safe water and sanitation, support for education, and protection services for traumatised children and victims of gender-based violence. Photo: © UNICEF/NYHQ2004-0897/Noorani



TOP RIGHT: Bindu Modi sleeps in bed with her newborn twins at her home in Purulia District in West Bengal State. She delivered the babies at a primary health centre, but her delivery was complicated due to pre-eclamptic toxæmia and post-partum haemorrhage. Referred to the district hospital, she returned home instead, and is now suffering from anaemia and swelling of the extremities. Photo:

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ABOVE RIGHT: Shiela Uibey, 25, who is nine months pregnant, walks to collect water in Pathadeori Village in Seoni District in Madhya Pradesh State. She fetches water up to ten times a day and seldom has time to rest. Proper rest is essential for optimal weight gain during pregnancy, as well as for healthy infant birth weight. Photo:

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In India, maternal health remains perilous. The high maternal mortality ratio (an estimated 450 per 100,000 live births) reflects continued discrimination against women, also evidenced by limited antenatal and safe delivery services. Only one third of deliveries take place in health institutions and only 43 per cent of births are attended by health professionals.

Child survival and welfare are intimately tied to women's health. India's infant mortality rate is 56 per 1,000 live births, with almost half of infant deaths occurring in the first week of life. Some 30 per cent of babies are born underweight (below 2,500 grams), putting them at higher risk of mortality and disease.

Most women cannot choose when and how many children they will bear, and pressure to

have sons often drives repeated pregnancies. Early pregnancy, pregnancies that are too close together and large family size also contribute to high maternal and infant deaths. While some states have made significant progress, at least 117,000 women die needlessly every year during childbirth, while many more deaths, at home or en route to care facilities, go unrecorded.

Globally, 536,000 women die annually from pregnancy and childbirth complications. Most of these deaths are in the developing world, especially in South Asia and sub-Saharan Africa.

In India, UNICEF supports government community outreach and education programs on maternal health issues, trains female health providers, provides access to ante- and post-natal care and ensures access to contraceptives.