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WORLD HEALTH ORGANIZATION



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PANEL ON SAFE MOTHERHOOD AND UNIVERSAL ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH

Background

1. Despite the progress made over the past 20 years in reducing maternal mortality in the Region of the Americas, the figures remain high in many countries, and access to reproductive health is still limited and full of obstacles. In 2010, the Pan American Health Organization (PAHO) estimated that: 9,200 women in the Region die in pregnancy and childbirth, for a maternal mortality ratio of 88.9 per 100,000 live births; 3,240,000 pregnant women in the Region have no access to modern contraceptive methods; 748,000 receive no medical care in a health institution during pregnancy; and 1,122,000 do not have access to care in childbirth from skilled health personnel. This situation disproportionately affects poor, indigenous, and illiterate women living in rural areas or marginal conditions (1).

2. In 2000, world leaders representing different countries approved the Millennium Declaration, which stated their commitment to creating a global alliance to reduce extreme poverty and laid the foundation for the Millennium Development Goals (2), with 2015 established as the target year for their attainment. One year ago, PAHO and several other institutions called on the countries of the Region of the Americas through the Safe Motherhood Initiative to redouble their efforts to meeting the targets of Millennium Development Goal 5: reduce by 75% the maternal mortality ratio between 1990 and 2015 and achieve universal access to reproductive health by 2015, the indicators of which are the maternal mortality ratio, the proportion of births attended by skilled personnel, the adolescent birth rate, prenatal care coverage, the unmet need for family planning, and the contraceptive prevalence rate (3).

3. The Region has made great progress in the area of reproductive health, but nevertheless, 50% of pregnancies are unplanned, 22% end in abortion, and 20% of all births in the Region occur in adolescents 15 to 19 years of age. Some 66% of women aged 15-48 in a couples relationship use modern contraceptive methods, with wide disparities between income quintiles, and unmet contraceptive needs stand at approximately 40%, with even higher figures for poor adolescent girls living in rural areas (4-5).

4. Family planning is a human rights and social development issue, since investing in the health of women and children results in the best quality of life and personal development of women, fewer unplanned pregnancies, lower maternal mortality, greater household savings, higher productivity, better education and children's health, a stronger economy, and better stewardship of natural resources.

5. International assistance for the family planning component of activities aimed at the population in the Region has fallen: in 1997, the figure was US\$ 100 million, dropping to US\$ 40 million in 2007 (5). In 1997, 49% of the international assistance for the population was allocated to family planning services, a figure that was only 9% in 2007 (5). The real challenge is ensuring sustainable resources and supplies for reproductive health and related services.

6. The Member States of the World Health Organization (WHO) have stated their intent in the WHO Constitution and other international and regional treaties to protect the right to enjoyment of the highest attainable standard of health (the "right to health") and other human rights of women, including girls and adolescents. In May 2004, The Member States of WHO adopted the *Reproductive Health Strategy to Accelerate Progress towards the Attainment of International Development Goals and Targets* during the 57th World Health Assembly (6-7). The guiding principle for meeting its objectives (which include reducing maternal mortality from unsafe abortions and other practices) is to ensure the exercise of the basic human rights of women and girls recognized in the international summits held in Cairo and Beijing:

- the right to enjoyment of the highest attainable standard of health;
- the right to decide freely and responsibly on the number and spacing of their children;
- the right to have access to relevant information on health (including sexual and reproductive health);
- women's right to have control over issues related to their sexuality;
- the right to decide freely and without coercion on matters related to their sexual and reproductive health;
- the right not to be subjected to discrimination or violence;
- the right of every person to enjoy the benefits of scientific advances and their applications.

7. PAHO and the Regional Working Group for the Reduction of Maternal Mortality, together with other institutions, support efforts to guarantee and enhance social protection, especially for young and adolescent girls, and marginalized women; train and empower women in their efforts to secure access to reproductive health services and exercise the right to make their own decisions about their reproductive life; make comprehensive health sexual and reproductive services available to women; improve the quality of prenatal and postpartum care; reduce unsafe abortions; prevent gender violence and provide care for its victims; and promote the participation of fathers and men in general, as well as families and communities, in all these efforts.

8. In view of the challenges that the Region faces in meeting Millennium Development Goal 5 (MDG 5), a panel discussion on these issues will be held during the 51st Directing Council. Its purpose will be to examine the progress made toward universal access to reproductive health, lessons learned, and best practices with the ministries of health of the Region, the academic community, political leaders, and strategic partners.

Objectives

- (a) To know the current status of the individual countries and Region as a whole in terms of the achievement of MDG 5 and universal access to reproductive health, as well as the progress made, lessons learned, and the countries' commitment to these issues.
- (b) To describe the current status of access to contraceptive methods and family planning, maternity and prenatal care services, as well as abortion complications.
- (c) To reaffirm the commitment of United Nations agencies to work jointly, maximize their impact, and carry out comprehensive, sustainable intersectoral interventions at the national level.
- (d) To identify opportunities to find strategic partners and funding sources that will ensure the execution of current strategies and plans for universal access to sexual and reproductive health services and the reduction of maternal morbidity and mortality.

Proposal for the discussions

9. Put the issue on the political agenda of the Organization's Member States and improve the delivery of family planning services.

10. Study the barriers to universal access to family planning, create multinational mechanisms for the procurement of reproductive health supplies, and take steps to protect

budget allocation for the provision of contraceptives and access to emergency contraception.

11. Use South-South cooperation to share experiences, promote joint research, and move forward with collaborative efforts.

Program for the discussions

- The panel moderator welcomes the participants and introduces the panel members (5 minutes).
- One of the guests presents the challenges on safe motherhood and safe births and the role of civil society to ensure healthy women and children (10 minutes).
- Another guest presents the item on the achievement of the MDG 5 target of universal access to sexual and reproductive health and the empowerment of women (10 minutes).
- A representative from the United Nations Population Fund (UNFPA) presents the item on universal access to family planning and the challenges in Latin America and the Caribbean (10 minutes).
- A member of the Latin American Federation of Obstetrics and Gynecology Societies (FLASOG) presents the consequences of unsafe abortion in the Region (10 minutes).
- One of the panelists presents the final comments including: the challenges of safe motherhood and universal access to sexual and reproductive health; the implementation of the Global Strategy for Women's and Children's Health; and the implementation of the recommendations made by the Commission on Information and Accountability (10 minutes).

Structure of the panel

| Element | Contents | Suggested presenter |
|---|--|--|
| Introduction (5 minutes) | Welcome and introduction | Dr. Mirta Roses, Director, PAHO |
| Presentation: “Safe motherhood and safe births - Everyone’s commitment” (10 minutes) | Challenges for safe motherhood and safe births: Everyone’s commitment The role of civil society to ensure healthy women and children. | HRH the Infanta Cristina of Spain, Director of the International Area of “la Caixa” Foundation and President of the Global Health Institute of Barcelona (ISGlobal) |
| Presentation: “Achievement of MDG 5: Universal access to sexual and reproductive health and the empowerment of women (10 minutes) | Achievement of MDG 5: Emphasis on the necessity to train and empower women | Dr. Michelle Bachelet, UN Women |
| Presentation: “Universal Access to Family Planning - Challenges for the Decade” (10 minutes) | Analysis of the current situation | Dr. Marcela Suazo, United Nations Population Fund (UNFPA) |
| Presentation: “Prevention of unsafe abortion and its consequences” (10 minutes) | Analysis of the consequences of unsafe abortion in Latin America and the Caribbean | Dr. Aníbal Faúndes, Coordinator for the Working Group to Prevent Unsafe Abortions and its Consequences, Latin American Federation of Obstetrics and Gynecology Societies (FLASOG) |
| Final comments (10 minutes) | Challenges of safe motherhood and universal access to sexual and reproductive health | Dr. Margaret Chan, Director General, WHO |

Participants and guests

- Ministers of health and other representatives of the Member States
- Representatives of the Federal Government of the United States of America and the Government of the District of Columbia
- Directors of cooperation agencies
- Directors of banks and donor organizations
- Members of the diplomatic corps
- Ambassadors to the OAS
- Members of the Washington, D.C. academic community
- Groups of nongovernmental organizations and grassroots organizations

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