THE MATERNAL HEALTH THEMATIC FUND

Towards the 2030 Agenda: Leaving no one behind in the drive for maternal health

Annual Report 2015







DELIVERING A WORLD WHERE EVERY PREGNANCY IS WANTED, EVERY CHILDBIRTH IS SAFE, AND EVERY YOUNG PERSON'S POTENTIAL IS FULFILLED.

Cover photo:

© Evelyn Matsamura Kiapi, UNFPA. Winner MHTF Annual Report 2015 photo competition

OVERJOYED: Twenty-year-old Betty Nachu was one of the expectant mothers found waiting to deliver her baby at Rengen Health Centre II in Uganda's Kotido district. She had travelled from Nakwakwa, a 10-kilometre journey, to wait for her labour to start. She was expecting her second child any time and chose to deliver at the health centre on the advice of a midwife. Only 19 per cent of women in Karamoja, a north-eastern region of Uganda, deliver at a health centre. Traditionally, the majority of pregnant women deliver at home; Nachu was not an exception at her first delivery. When two UNFPA-supported bonded midwives visited her village during a community outreach session, they convinced Nachu that giving birth at a health centre was safer. The bonded midwives sensitize expectant mothers about the benefits of delivering at the health centre under skilled care.

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ACKNOWLEDGEMENTS

UNFPA acknowledges the collective vision and commitment of all those contributing to the Maternal Health Thematic Fund (MHTF). Our partnerships with national governments and donors, and with other UN agencies, deserve special mention.

We acknowledge, with gratitude, the support of donor countries in strengthening sexual and reproductive health and rights. In particular, we would like to thank the governments of Germany, Iceland, Luxembourg and Sweden.

Our nurturing partnership with the private sector and civil society also needs special mention. We thank Friends of UNFPA, Johnson & Johnson, the Laerdal Foundation and the UNFCU Foundation for their generous support. A special note of thanks goes to many individual donors, UN trust funds and foundations.

Our sincere thanks to our UN colleagues around the globe at the Joint United Nations Programme on HIV/AIDS (UNAIDS), the United Nations Children's Fund (UNICEF), UN Women, the World Bank Group and the World Health Organization (WHO), which in collaborating with UNFPA are making a stronger partnership as H4+ and now H6.

Our results in this report, across our headquarters, regional and country offices, reflect UNFPA's vision and mission for maternal health as an integral part of sexual and reproductive health. Significant contributions come from our programme partners, which include the International Confederation of Midwives, the International Federation of Gynecology and Obstetrics, the Maternal and Child Survival Program of the United States Agency for International Development (USAID), AMREF Health Africa, the International Society of Obstetric Fistula Surgeons, Columbia University's Averting Maternal Death and Disability Program, Johns Hopkins University, Jhpiego, the Alan Guttmacher Institute, the University of Aberdeen, the Wilson Centre, Women Deliver, EngenderHealth, Family Care International, Integrare, and national and regional partners listed in Annex 1 for the Campaign to End Fistula. We value their significant roles as champions and technical experts in sexual and reproductive health and rights.

UNFPA looks forward to continued productive collaborations and valued partnerships in achieving the Sustainable Development Goals (SDGs).

ACRONYMS

ANC	Antenatal Care
EmONC	. Emergency Obstetric Newborn Care
FGM/C	Female Genital Mutilation/cutting
GIS	. Geographic Information System
GNI	. Gross National Income
FTYM	First-Time Young Mothers
H6 (formerly H4+)	. UNAIDS, UNFPA, UNICEF, UN Women, World Bank Group and WHO
HRH	Human Resources for Health
ICM	International Confederation of Midwives
Jhpiego	. Johns Hopkins Program for International Education in Gynecology and Obstetrics
MDG	Millennium Development Goal
MDSR	Maternal Death Surveillance and Response
MHTF	Maternal Health Thematic Fund
MMR	Maternal Mortality Ratio
NGO	Non-Governmental Organization
PPP	Purchasing Power Parity
RMNCAH	Reproductive, Maternal, Newborn, Child and Adolescent Health
SDG	Sustainable Development Goal
SIDA	Swedish International Development and Cooperation Agency
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UN Women	. United Nations Entity for Gender Equality and the Empowerment of Women
USAID	United States Agency for International Development
WHO	. World Health Organization



FOREWORD

By Dr. Babatunde Osotimehin Executive Director, UNFPA

In 2015, the global community embraced a far-reaching and ambitious sustainable development agenda. This historic, universal and inclusive agenda provides a vision and springboard with the commitment to leave no one behind and reach the furthest behind first.

UNFPA is at the forefront in supporting countries to translate the vision and goals of the 2030 Agenda for Sustainable Development into tangible deliverables that can make a sizeable difference in people's lives, particularly women and girls. We are committed to accelerating global efforts to end preventable maternal deaths and ensure access to quality

sexual and reproductive health services by 2030 with the goal of improving the health and quality of life of women and girls, especially those most marginalized, disadvantaged and underserved.

Our flagship Maternal Health Thematic Fund (MHTF) is on the frontline in contributing to this goal – a unique programme in the UN system that utilizes an innovative and integrated results-based approach to improve maternal health with key interventions in 39 countries with some of the highest maternal mortality and morbidity in the world.

The MHTF works with and complements our UNFPA supplies programme, which aims to strengthen access to a wide range of quality and reliable contraceptive and maternal health supplies. Together these two UNFPA flagship programmes are increasing women's and girls' access to comprehensive quality sexual and reproductive health services when and where they need them.

The MHTF facilitates a targeted and effective response to maternal mortality and morbidity across several dimensions. This includes strengthening health systems; ensuring the availability of quality emergency obstetric and newborn health services; improving access to skilled birth attendance with a strong emphasis on midwifery; and reaching first-time young mothers with an approach tailored to their specific needs.

The MHTF mobilizes to support countries to effectively address childbirth complications; strengthen accountability at all levels of the health system by both registering and addressing the causes of maternal deaths of women and girls; and increase the availability of quality surgery and rehabilitation for survivors who live with obstetric fistula.

This annual report highlights the critical contribution of the MHTF programme to improving maternal health in 2015, with results that include support to 265 midwifery schools with the potential to train more than 12,800 midwives; the facilitation of 13,000 surgical fistula repairs; support to the training of more than 900 fistula survivors in income-generating activities; and more broadly strengthening health systems to deliver quality maternal health services through targeted interventions addressing emergency obstetric and newborn care, and maternal death surveillance and response. Collectively in the 39 countries supported by the MHTF, maternal deaths have fallen from 223,274 in 2010 to 205,214 in 2015. Such results would not be possible without the support and dedication of all our partners at all levels – national governments, civil society organizations, UN agencies, and development and private sector partners. This includes the essential role our country partners have played at the national and sub-national level in working to make a positive difference in the lives of women and girls, alongside our key regional and global partners, which include the UN Secretary-General's Every Woman, Every Child initiative, the Campaign on Accelerated Reduction of Maternal Mortality in Africa, the H6 partnership (UNAIDS, UNICEF, UN Women, World Bank Group, WHO and UNFPA), Columbia University's Averting Maternal Death and Disability programme and others.

Let me also extend my sincere thanks and appreciation to our donors – Germany, Iceland, Luxembourg, Friends of UNFPA, Johnson and Johnson, and Sweden, the main donor of the MHTF.

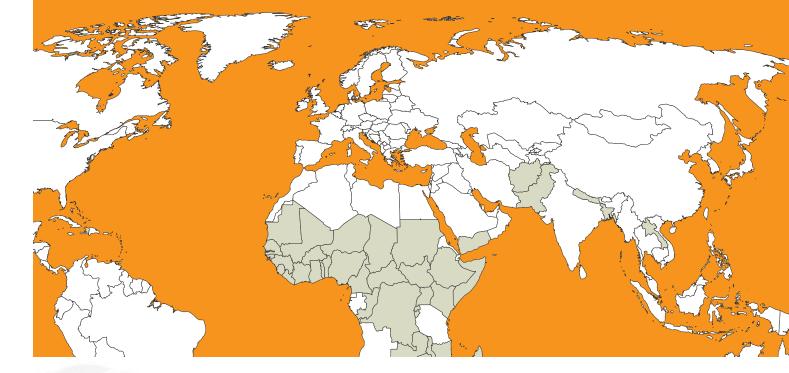
Every preventable maternal death is unacceptable and deeply heart-breaking. Notwithstanding the significant strides that the world has made to reduce the annual number of maternal deaths from approximately 532,000 in 1990 to 303,000 in 2015, we need to do more and better by accelerating and increasing investments in such proven and effective solutions as demonstrated by the MHTF – interventions grounded in human rights and upholding the principles of gender equality and equity.

At UNFPA we are committed to the achievement of universal access to sexual and reproductive health and the protection of reproductive rights so that every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. We believe that such investments are not only right, they are essential if we as a global community are to realize our commitments to the 2030 Agenda for Sustainable Development and deliver for women and girls.

But the Later

39 MHTF-SUPPORTED COUNTRIES

Afghanistan Bangladesh Benin Burkina Faso Burundi Cameroon Central African Republic Chad Congo Côte d'Ivoire Democratic Republic of the Congo Ethiopia Ghana Guinea Guinea-Bissau Haiti Kenya Lao People's Democratic Republic Liberia Madagascar Malawi Mali Mauritania Mozambique Nepal Nigeria Pakistan Rwanda Senegal Sierra Leone Somalia South Sudan Sudan Timor-Leste Togo Uganda Yemen Zambia



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