



World Health
Organization

Department of
MAKING PREGNANCY SAFER
ANNUAL REPORT 2007

Printed by Imprimerie Nouvelle-Gonnet, France
Compiled by Andrew F. Wilson
Edited by Andrew Y. Gordon
Design by Kate Bowden, Monomo
Executive editors: Marie-Agnes Heine and Eva Prost

© World Health Organization 2008

All rights reserved. Publications of the World Health Organization can be obtained from WHO Press, World Health Organization, 20 Avenue Appia, 1211 Geneva 27, Switzerland (tel.: +41 22 791 3264; fax: +41 22 791 4857; e-mail: bookorders@who.int). Requests for permission to reproduce or translate WHO publications – whether for sale or for noncommercial distribution – should be addressed to WHO Press, at the above address (fax: +41 22 791 4806; e-mail: permissions@who.int).

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement. The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use.



CONTENTS

Foreword	7
In pursuit of coverage and quality	8
The Department	12
Norms and technical support	14
Partnerships and collaborative efforts	20
Monitoring and evaluation	22
Advocacy	24
In the regions	28
Building capacity to improve health systems - Regional Office for Africa (AFRO)	28
Assessing health and health services - Regional Office for the Americas (AMRO)	36
Strengthening maternal health care - Regional Office for South-East Asia (SEARO)	41
Promoting monitoring and evaluation - Regional Office for Europe (EURO)	46
Closing regional gaps in service coverage - Regional Office for the Eastern Mediterranean (EMRO)	50
Reaching out to women in rural areas - Regional Office for the Western Pacific (WPRO)	56
Budget	60
Annex	62

VISION

MPS Vision

Our vision is a world in which skilled care at every birth is ensured for all women and in which mothers and their newborn babies notwithstanding their social, cultural, ethnic or religious background are assured access to comprehensive quality health services throughout all phases of their lives.



MISSION

MPS Mission

Every day, 1500 women and over 10 000 newborn babies die owing to complications in pregnancy and childbirth. 98% of these deaths occur in the developing world. Most of them could be prevented through skilled care during childbirth and the management of life-threatening complications. The Department of Making Pregnancy Safer (MPS), with over 120 staff worldwide aims to reduce maternal, perinatal and newborn morbidity and mortality. MPS is working towards attaining the Millennium Development Goals 4 and 5 by accelerating the countries' implementation of essential interventions to make pregnancy safer. In partnership with key stakeholders, MPS also supports country efforts to strengthen their health systems.

To this end, MPS focuses on four strategic areas, in cooperation with regions and countries:

- Building a conducive social, political and economic environment to support timely country actions;
- Responding to country needs and providing technical support to achieve universal coverage of essential interventions that will ensure skilled care at every birth within the context of a continuum of care;
- Building effective partnerships across relevant programmes and partners for coordinated actions in countries;
- Strengthening assessment, monitoring and evaluation for better decision-making by policy-makers and planners in countries.

Pregnancy is special. MPS is helping to make it safer.



Photo credits, clockwise from top left: WHO /Pallava Bagla, WHO / Marie-Agnes Heine, WHO / Christopher Black, WHO / Marie-Agnes Heine, WHO / Pallava Bagla, WHO / Marie-Agnes Heine.

FOREWORD

by Daisy Mafubelu
Assistant Director-General
Family and Community Health

The past year has been a busy one, with a great deal of solid work accomplished in the field of maternal and newborn health.

And yet, I must be frank, the year has featured a number of “downs” alongside the “ups”. The biggest down relates to the Millennium Development Goals 4 and 5, which aim to reduce child mortality and maternal mortality respectively. Some countries are on track to meet the targets related to these Goals but many, particularly in Africa but also in other regions, are not. A few countries, mainly in conflict areas, are actually going backwards in terms of key indicators such as coverage by skilled birth attendants and access to essential obstetric care.

One of the ups was the Women Deliver Conference in October. There was a great deal of energy and optimism expressed at the conference and I got a sense of real commitment to making pregnancy safer for millions of women in priority countries. More ups are evident to me every time I visit one of our country offices and see the dedication of staff doing the work on the ground. I think that their professionalism in technical assistance, capacity building, data collection, and other key tasks are all crucial in order to make progress.

Certainly, achieving the Millennium Development Goals depends not just on the work we do in our “own” field but on progress in broader areas such as improving health systems and securing health-care financing. However, we should take heart as all the evidence shows that maternal and newborn services are powerful justifications for public health approaches. The demonstrable fact is that more and better-trained skilled birth attendants, strong referral systems, improved antenatal and postnatal services are among the most cost-effective uses of public funding that exist.

In 2008, we must continue to get that message out. I am sure that, in doing so, the ups will eventually outweigh the downs in all regions and for all women.



Photo credit: WHO.

IN PURSUIT OF COVERAGE AND QUALITY

By Monir Islam
Director
Making Pregnancy Safer



A few months ago, in the run-up to the Women Deliver Conference in London, I was struck by a comment in the leading medical journal The Lancet. The conference was one of the most high-profile events that MPS was involved with in the past year, and a great deal was written about it, both before and after it was held. Yet in a very few words, the comment seemed to zero in on an important issue that bears thinking about: “Generally, we know what to do to save the lives of women and mothers – and, in 2007, we do not need another technical conference to debate the issue of basic strategy.”¹

As it happened, Women Deliver was far from being just another technical conference (see page 24). But The Lancet provided a timely reminder of an important fact: the Making Pregnancy Safer agenda is a pretty simple and clear one, backed by a high degree of consensus among practitioners and researchers. In essence, organizations that care about maternal and newborn care need to concentrate on the three “pillars” of the agenda:

These pillars get even better results if they are accompanied by good antenatal and postnatal care.

From the services point of view, that’s basically it. As the teenagers say, “It isn’t rocket science”. The equipment and medicines required are not “high-tech”, the training is rigorous but not complicated, and the costs are predictable and manageable.

■ Gaps in coverage and quality

So why, 20 years after the landmark Safe Motherhood Conference in Nairobi, are so many countries in danger of missing the targets set by the Millennium Development Goals for reducing maternal and infant mortality? Why are there 75 million unwanted pregnancies each year, and 536 000 deaths from complications during childbirth? And why is it that a rising proportion – currently 40% – of child deaths are newborns?²

A large part of the answer is contained

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_29457

