



Safe Maternity

Maternal Health Matters supports the implementation of the The WHO: Essential Interventions, Commodities and Guidelines for Reproductive, Maternal, Newborn and Child Health as the basic level of maternity care and is working actively to influence the level of maternity care provided within Australia

Every day around the world, almost 810 women die in pregnancy or childbirth. Every loss of a mother impacts a family and threatens the well-being of surviving children. Evidence shows that infants whose mothers die are more likely to die before reaching their second birthday than infants whose mothers survive. For every woman who dies, 20 to 30 or more experience serious complications.

Maternal death and disability rates mirror the huge discrepancies that exist between the haves and the have-nots both within and between countries. Ninety per cent of maternal deaths occur in Africa, Asia and Pacific Island Countries.

Enormous disparities remain within countries. Impoverished and rural women of all countries are far less likely than their urban or wealthier counterparts to receive skilled care during childbirth. In rural areas health clinics and hospitals are often spread out over vast distances and transportation systems are often rudimentary, as a consequence, women are often separated from their families when birthing, or they are exposed to suboptimal care if they stay at home.

Working for the survival of mothers is a human rights imperative, with enormous socio-economic ramifications. The Sustainable Development seek a reduction in maternal mortality between by 2030. This is to be achieved by:

- All women having access to contraception to avoid unintended pregnancies
- All pregnant women having access to skilled care at the time of birth
- All women with complications receiving timely access to quality emergency obstetric care

No woman should die giving birth

A new global consensus has been agreed on the key evidence-based interventions that will sharply reduce the 303,000 women who still die each year during pregnancy and childbirth and the 5.6 million children who die before the age of 5. The findings are published in the WHO: *Essential Interventions, Commodities and Guidelines for Reproductive, Maternal, Newborn and Child Health* which documents an evidence-based path to help women before, during and after birth, and their children. The document is designed to facilitate decision-making about how to allocate limited resources for maximum impact on the health of women and children. The document gives policy makers a way to make informed choices on how to set priorities and where to put funds and resources, guided by a list of absolutely critical interventions.

There are 56 essential interventions. The interventions are classified according to three levels:



- care that can be provided at the community level by community health workers, outreach workers, and volunteers with limited training;
- primary care, also delivered in the community at a clinic by professionals – nurses, midwives, community health workers—with more training;
- referral care provided by physicians and skilled nurses and midwives in a hospital able to do Caesarean sections and provide emergency care.

The interventions are also classified according to six target groups:

- adolescent and pre-pregnancy
- pregnancy (before birth)
- childbirth
- postnatal (mother)
- postnatal (newborn)
- infancy and childhood.

References

- **The White Ribbon Alliance** - <http://www.whiteribbonalliance.org/>
- **United Nations Population Fund** - <http://www.unfpa.org/public/mothers>
- **State of the World Midwifery Report** - International Confederation of Midwives
<http://www.internationalmidwives.org/Whoweare/Partners/StateoftheWorldMidwiferyReport/tabid/933/Default.aspx>
- **The Safe Motherhood Initiative** - <http://www.womendeliver.org/>