

AFRICA, MDGs AND THE ICPD: IMPACTS AND IMPRESSIONS

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ICPD AND THE MDGs GOALS

ICPD (1994)

- Watershed moment in global health
- First global recognition of sexual and reproductive health and rights
- First acknowledgement of women and youth as central to development
- Set goal to reduce maternal mortality by half by 2000, and then a further half by 2015



ICPD AND THE MDGs GOALS

MDGs (2000)

- Brought various issues and objectives under one “development tent”
- Set global targets for development by 2015
- Eradicate extreme poverty and hunger
- Achieve universal primary education
- Promote gender equality and empower women
- Reduce child mortality
- Improve maternal health
- Combat HIV/AIDS, malaria and other
- Ensure environmental sustainability
- Create a global partnership for development with targets for aid, trade & debt relief
- **MDG 5 -reduction of all maternal mortality by 75% . No mention of family planning**



ICPD - IMPACTS AND GAPS

Reviews found progress, but ongoing challenges

	1990	2008	MDG target	ICPD target
MMR (per 100,000 live births)	870	640	218	217

1999 ICPD Review:

- Countries increased reproductive health emphasis, and plea for attention to unsafe abortion
- Called for more focus on:
 - HIV/AIDS
 - Sexually transmitted infections (STIs)
 - Involvement of NGOs and the private sector

2004 ICPD Review:

- Progress was made in addressing youth needs and developing partnerships
- Still a strong need for:
 - Youth involvement
 - Culturally-sensitive approaches
 - Improved data collection



THE ROAD TO REACHING ICPD AND MDG GOALS

- MDG 5 is at the heart of all MDGs
- When women and children survive, families and nations thrive
- Key issues to focus on:
 - Population growth and family planning
 - Youth dynamics
 - Access to skilled care
 - Political will



NAVIGATING A GROWING WORLD

- Population in Africa will **more than double** in the next four decades to **nearly two billion by 2050**
- Sub-Saharan Africa is **growing at a faster rate (2.3%)** than many other regions of the Global South
- With **greater access to family planning**, we can decrease maternal deaths, newborn deaths and unsafe abortions



ENGAGING AND PRIORITIZING YOUTH

- Youth under age 30 constitute about 70% of the total regional population
- Youth under age 15 are 40% of the total regional population
- Health information and services should be youth-friendly, accessible and stigma-free
- Need to involve youth in the policies and programs that affect them



ENSURING ACCESS TO SKILLED CARE

- 48% of global maternal deaths occur in sub-Saharan Africa
- According to ICPD Review, only a small number of babies are delivered in health facilities or with the assistance of skilled health personnel
- Postnatal care is extremely low
- Rural women are most vulnerable



STRENGTHENING OUR SYSTEMS

- Adequate training for health workers
- Focus on emerging, life-saving technologies, including mHealth
- Commodity security
- Accessible information



COMMITTING TO ACTION

- **Maputo Plan of Action (2006)** – Accelerated action towards reaching MDG 5
- **Campaign on Accelerated Reduction of Maternal Mortality (CARRMA) (2009)** – Reinforced and amplified Maputo commitments
- **Every Woman Every Child (2010)** – Developed by the UNSG to address major global health challenges
- **Commission on Information & Accountability for Women's & Children's Health (2011)** – Developed by the UNSG to track progress & funding



MOVING FORWARD

- Prioritize women's **education and employment**
- Scale up **health systems**
- Make **skilled personnel and resources** available
- Address **sexual and reproductive health needs** of all women and men
- Strengthen **partnerships**





Thank you!

