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GLOBAL HEALTH DECISION-MAKERS URGED TO STEP UP COMMITMENT TO PUTTING MATERNAL AND CHILD HEALTH GOALS ON TRACK FOR 2015

30 MAY 2007 | WASHINGTON DC--Global health decision-makers are urged to step up their commitment to reducing vast disparities in maternal and child health that see more than 10 million women and children dying each year, almost all in low-income countries. "At midway to 2015 -- the target of the Millennium Development Goals (MDGs) -- maternal, newborn and child health need to take a center stage on the global health agenda," said Dr Francisco Songane, Director of The Partnership for Maternal, Newborn & Child Health, at a press briefing today at the 34th International Conference on Global Health, organized by the Global Health Council.

"Decision-makers -- both from donor countries and developing countries -- need to determine whether to save or ignore the lives of more than 10 million mothers, babies and children that will be lost in 2007," he said. A dramatic increase in global funding for maternal, newborn and child health is required urgently to meet the MDGs and to ensure that maternal mortality is reduced by three-quarters and child mortality is reduced by two-thirds by 2015. Presently, global resources for maternal and child health stand at \$2 billion -- a far cry from the \$9 billion per year required to meet the MDG 4 & 5.

The annual global health conference will highlight the theme of "Partnerships Working Together in Global Health".

According to Andrew Barrer, Executive Director of the U.S. Coalition for Child Survival, "over the last 10 years, the U.S. commitment to child survival and maternal health programs has decreased as global health needs have increased. Recently, the 2007 Global Child Survival Act was introduced in Congress to address the tragedy of nearly 30,000 children dying every day from primarily treatable causes and to place the issue at the top of the global health agenda". He said, "Americans want to once again be world leaders in doing more for children and their families. In partnership with many organizations, we have generated nearly 100,000 letters to Congress in less than two weeks. We have the means and the technical know how to save millions of lives. All we need now is the willpower to make it happen."

Improving maternal, newborn and child health has been slow and uneven, due mainly to the lack of political attention and the resources required to scale-up the coverage of essential interventions. Two-thirds of newborn deaths, for instance, could be prevented by extending the availability and use of existing, cost-effective technologies.

Momentum is starting to gather on this issue. At the opening of the 60th World Health Assembly in May, the Prime Minister of Norway, Jens Stoltenberg, announced the development of a "Global Business Plan" to accelerate progress towards MDGs 4 and 5. "The Global Business Plan is to mobilize the international community to provide a unified support to a single plan -- the country's own health plan -- and aims to provide the political impetus for support and resources needed in reducing maternal and child mortality," the Prime Minister stated. The Partnership for Maternal,

Newborn & Child Health is acting for the platform for the development of the Global Business Plan. "The role that Norway and partners are playing in setting up this groundbreaking initiative is an example of how partnerships are necessary to accelerate global action," noted Dr Francisco Songane.

Another landmark event in 2007 will be the global conference "Women Deliver", to be held in London, 18-20 October 2007. More than 3,000 participants from around the world will gather to discuss the importance of investing in maternal, newborn and child health to accelerate progress in reducing mortality and promoting development. "Women Deliver" marks the 20th anniversary of the Safe Motherhood movement, which began with a major conference in Nairobi in 1987.

Note to media:

Established in 2005, The Partnership consists of more than 120 members representing partner countries, UN agencies such as WHO, UNICEF, UNFPA and the World Bank, non-governmental organizations, health professional associations, bilateral donors, foundations, and academic and research institutions from around the world, working together to enable unified and effective approaches that promise greater progress in achieving Millennium Development Goals 4 and 5 to reduce child mortality by two thirds and maternal mortality by three quarters between 1990 and 2015. Please visit our website www.who.int/pmnch for full information.

The US Coalition for Child Survival, which was established in 2000, is a coalition of organizations and individuals united to strengthen U.S. and global commitment to improve the survival and health of children in developing countries. Presently, our nearly 30 members collaborate to increase awareness and understanding of child survival and health, to mobilize commitment and action to achieve the MDGs 4 & 5, and to promote increased funding for critical programs to save the lives of newborns, children, and mothers. To learn more about the US Coalition, visit us at www.child-survival.org.

The Global Health Council is the world's largest membership alliance dedicated to saving lives by improving health throughout the world. The Council serves and represents thousands of public health professionals from over 100 countries. www.globalhealth.org

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