



2010 United Nations Private Sector Forum on the Millennium Development Goals Thematic Discussion Briefing Note: Maternal and Child Health (MCH) and HIV/AIDS

Introduction:

Every year, between 350,000 and 500,000 women die from causes related to pregnancy and childbirth, with over 99 percent of all cases occurring in developing countries. Further, almost half of all child deaths occur within the first days of life, underlining the inextricable relationship between maternal and newborn health. The presence of a skilled attendant during child birth is proven to save lives of both women and newborns — yet over half of all births are not attended by a skilled health worker. HIV/AIDS further compounds the risks to women and children. One in five maternal deaths are linked to HIV, and each year over a million newborns are at risk of contracting HIV through mother-to-child transmission. HIV is the leading cause of death of women of reproductive age (15–49) worldwide, contributing to maternal orphaning and decreasing the survival rates of children in families without mothers.

However, progress has been made towards achieving the targets of MDGs 4, 5 and 6 — which aim to combat HIV/AIDS and reduce child and maternal mortality by 2015. At the global level, important new models of private sector engagement can help increase momentum and bring to scale key interventions in maternal and child health (MCH) and HIV/AIDS. **New thinking in the way health interventions are manufactured, packaged and appropriately marketed; provision of financial resources; use of innovative technologies; and leveraging core competencies to improve supply chain management and build capacity are examples of contributions from the private sector that can positively impact the lives of millions each year and bring about significant advances in achieving the relevant MDGs by 2015.**

Key challenges:

- *Increasing access to key maternal and child health interventions:* Major gaps remain in provision of 24/7 medical care, which is critical to safe and healthy delivery of babies and treatment of common diseases like diarrhea, pneumonia and malaria. This gap is even wider in hard-to-reach areas and among marginalized populations.
- *Weak health systems:* Key components of the health care system, such as health information, supplies, logistics and human resources, remain weak in many countries with a high burden of maternal mortality and HIV/AIDS. Unless facilities are equipped to service the needs of the beneficiaries, they will lack credibility, which will impact negatively on demand for these services.
- *Monitoring and measurement of progress:* The emphasis on reaching the MDGs has resulted in more systematic monitoring of MCH indicators. However, MDG 5 (improving maternal health) has seen the least progress of all, and maternal deaths remain difficult to measure.
- *Preventing mother-to-child transmission (PMTCT):* Support for PMTCT interventions could avert more than two million child HIV infections over the next five years, leading to elimination of mother-to-child transmission of HIV. However, more funding is needed, especially to expand services aimed at prevention of HIV among women of reproductive age, prevention of unwanted pregnancies among women living with HIV, and early infant diagnosis, care and treatment — all key pillars of PMTCT.
- *Unmet family planning and contraception needs:* At least half a million women die each year of pregnancy-related causes. However, more than 100 million women in less developed countries — or about 17 percent of all married women — would prefer to avoid a pregnancy but are not using any form of family planning. Even without any improvement in obstetric care, a 10 percent reduction in the number of pregnancies will produce a 10 percent (or greater) reduction in the number of maternal deaths. Additionally, the potential contribution of contraception in preventing HIV-positive births is well established.

Solutions:

- Improve access to health services, particularly among the poor and underserved, by training facility- and community-based health workers, ensuring the availability of essential drugs and commodities, and providing access and coverage of emergency obstetrical care for all women. Public–private partnerships are key to expanding access to these services, particularly in hard-to-reach areas.
- There is a need for advocacy and political commitment at the country level to address weak integration among health information systems, laboratory, pharmacy and supply chain logistics to reach the most underserved populations. Public–private partnerships can contribute to ensuring that health facilities are fully functional in terms of appropriate supplies and resources.
- Public–private partnerships can contribute to creating demand for health services through innovative approaches towards health communication among beneficiaries.
- Improved mechanisms are needed to track progress and measure impact. Public–private partnerships can play a major role in supporting the use of new technologies and approaches to address gaps in health information and reporting.

Discussion question:

What are the key incentives and benefits for businesses in public–private partnerships to improve MCH and fight HIV/AIDS, and how can such collaborations be replicated and expanded to ensure high and equitable coverage of interventions and, therefore, greater impact on the MDGs by 2015?

UN–business partnerships and initiatives that advance these issues:

In September 2010, UN Secretary-General Ban Ki-moon will launch a new Global Strategy for Women and Children’s Health. The Global Strategy aims to accelerate progress on women and children’s health through collective action and strategic partnerships, including the following:

1. **Unite for Children, Unite Against AIDS:** Innovations for private sector contributions to the virtual elimination of MTCT of HIV. (www.uniteforchildren.org)
2. **Maternal and Neonatal Tetanus Elimination Initiative:** A UNICEF and WHO partnership with the goal of eliminating maternal and neonatal tetanus (MNT) from the 58 countries where it was still a public health problem as of 1999 through advocacy, fundraising, procurement and technical assistance. (http://www.unicef.org/health/index_43509.html); www.who.int/immunization_monitoring/diseases/MNTE_initiative/en/index1.html)
3. **Addressing Sexual Violence Against Girls:** This joint initiative of UNICEF, UNAIDS, UNFPA, UNIFEM, WHO, the Centers for Disease Control and Prevention (CDC), CDC Foundation, Nduna Foundation, and Group ABC seeks to address the rights violations and health impacts of sexual violence against girls by providing funding to expand surveillance of sexual violence, developing a technical package of interventions to reduce the incidence of sexual violence against girls, and launching a major media campaign to elevate awareness of the problem. (www.unicef.org/media/media_51217.html); www.unifem.org/news_events/story_detail.php?StoryID=934)
4. **Global Partnership on HIV & Mobile Workers in the Maritime Sector:** A joint initiative of UNAIDS, IOM, the International Committee On Seafarers' Welfare (ICSW), ILO, the International Maritime Health Association (IMHA), the International Shipping Federation (ISF), and the International Transport Workers’ Federation (ITF) that aims to reduce new HIV cases among seafarers through: 1) generating and disseminating evidence; 2) reducing high-risk behaviour; 3) increasing access to HIV services; 4) promoting best practice in medical screening and HIV testing; and 5) broadening ownership in HIV prevention efforts. (www.iom.int/jahia/Jahia/media/press-briefing-notes/pbnAS/cache/offonce;jsessionid=DCE08435E7CF8D8123753C7DB266A635.worker01?entryId=26320); www.enewsbuilder.net/focalpoint/e_article001514125.cfm?x=b11.0.w; business.un.org/en/needs/772)

5. **HIV Prevention Awareness Campaign through Posts:** A UNAIDS, ILO, UNI Global Union and Universal Postal Union campaign in which post offices in participating countries display HIV prevention information in order to raise awareness among the general public and postal employees.
(www.unaids.org/en/KnowledgeCentre/Resources/FeatureStories/archive/2009/20090702_UPU.asp)

Further information on these and other UN–business partnerships that could benefit from additional corporate engagement and support can be found at business.un.org.