

## **STATEMENT FROM THE MINISTERS' FORUM, WOMEN DELIVER CONFERENCE**

London, 19 October 2007

As we celebrate the 20th Anniversary of the Nairobi Safe Motherhood Conference, let us commit to investing more in women because it pays.

We, the participants in the Ministers' Forum of the Women Deliver Conference, once again declare our commitment to invest in women and children and to achieve Millennium Development Goals (MDGs) 4 and 5. All the MDGs will best be achieved within a human rights framework, which incorporates sexual and reproductive health and rights, and by recognizing that health and development are inextricably linked. Without substantial reduction in maternal mortality, there is little hope of achieving the overarching MDG goal of reducing poverty by half.

Investing in women pays off in terms of social and economic benefits to the family, the community and society at large. Gender equality and women's empowerment are central. We recognize that poverty, income inequalities, underdevelopment, gender disparities, discrimination, poor education, conflict, gender-based violence, food and nutrition insecurity all contribute to the poor health of women and children. Therefore, interventions to address maternal and newborn health need to be multisectoral to maximize their impact. Efforts need to include education of women and girls, economic empowerment, including access to microcredit and micro-finance and legal reforms to deepen a woman's power of choice over her reproductive health. Special attention should be paid to the poorest of the poor, particularly women in rural areas, as well as other vulnerable populations such as immigrants, displaced persons and adolescents, and the impact of globalization on the health of these groups.

Since the 1987 Nairobi Safe Motherhood Conference, not enough has been invested in women or in efforts to reduce maternal mortality. We have not yet witnessed a significant decline in the global maternal mortality ratio (MMR), even though several countries have made important strides in this direction. We have learnt much from these successful examples; we now know much more than we did in 1987 about how to save women's lives if we intensify political commitment and accountability and apply sound technical knowledge and sound management to health systems. Global resource mobilization is also needed to enhance the implementation of priority programmes, while recognizing the contributions of many international partners to-date.

Strengthening health systems in general and, in particular, recruitment, training and retention of health workers, is vitally important. The health workers, especially skilled birth attendants, need to be trained to work at all levels from the hospital to the community and to be sensitive to intercultural variations.

Resources, political will and accountability are essential to the implementation of strategies that can quickly and effectively reduce maternal mortality, including family- and community-based interventions. These strategies include the following:

- Access to affordable family planning and reproductive health services to prevent and manage unintended pregnancies and unsafe abortion.
- Reduction of the stigma associated with abortion or adolescent pregnancy.
- Provision of affordable, skilled care, including emergency care, during and after childbirth for all women and newborns.
- Efforts to address other factors that contribute to high maternal mortality, such as poor nutrition.

We are inspired by the knowledge that we know what to do to reach MDGs 4 and 5. Now is the time to intensify our action.

Consequently, WE COMMIT OURSELVES to:

- Ensure that the achievement of MDGs 4 and 5 remain a high priority on the national, regional and international agendas.
- Advocate in our own countries for women's health and rights and for increased commitment of financial and human resources to address the causes of high maternal and neonatal mortality.
- Advocate at all international forums for additional resources for the attainment of all MDGs and in particular, to close the funding gap for programmes that will achieve MDGs 4 and 5.
- Develop or strengthen gender-equitable national action plans, with costs fully estimated, to accelerate the availability of affordable, equitable services for maternal and newborn health.
- Manage health resources effectively.
- Encourage all partners, including Parliamentarians, civil society and the private sector, to intensify and sustain participation.
- Establish accountability through better monitoring and evaluation, for example, expanded use of maternal death audits and/or confidential enquiries.

**The Ministers Forum also calls for creative new solutions:**

- Convene a UN general assembly special session on maternal health that would result in a global plan of action.
- Create a global fund for women's health, focused on maternal health.
- Realize commitments made at various conferences, for example, the 1994 Cairo and 1995 Beijing conferences, the Paris Declaration, the Monterey Consensus and the Johannesburg Plan of Implementation, that encourage donors to expand and align their support for country programs.

All national, regional and international leaders must recognize that the achievement of the MDGs as a whole, and improvement of health systems more broadly, depend largely on achieving MDGs 4 and 5.