



Global Health

The Issue

According to the World Health Organization (WHO) social determinants of health are the conditions in which people are born, grow, live, work and age and are shaped by the distribution of money, power, and resources at global, national and local levels. Much of the burden of maternal and child mortality and ill health, therefore, is concentrated in the poorest populations with the highest mortalities observed among the marginalized poor living in remote and rural areas with limited access to health care services. The largest numbers and highest rates of maternal, neonatal and child deaths are in sub-Saharan Africa and South Asia, a total of ten countries accounting for almost two thirds of the global burden of maternal and newborn deaths as well as stillbirths.

The Research

The Child Health Epidemiology Reference Group estimated 40.3% of 7.6 million deaths among children under 5 years of age in 2010 occurred in neonates (~ 3.1 million deaths). Major causes of deaths in newborns included complications of premature birth (14.1% or 1.1 million deaths), intrapartum-related complications, previously labeled as birth asphyxia (9.4% or 0.7 million deaths), and sepsis or meningitis (5.2% or 0.4 million deaths). Stillbirth is an unrecognized and unaddressed burden globally and is not included in Global Burden of Death (GBD) 2010 estimates, but rather has been reported separately and therefore has not received adequate policy attention.

Every day approximately 830 women die from preventable causes related to pregnancy and childbirth. Almost all of these deaths occurred in low-resource settings and most could have been prevented with skilled care before, during, and after childbirth. The major complications that account for nearly 75% of all maternal deaths are:

- Severe bleeding (mostly bleeding after childbirth)
- Infections (usually after childbirth)
- High blood pressure during pregnancy (pre-eclampsia and eclampsia)
- Complications from delivery
- Unsafe abortions

Current Legislation

In September of 2000, the largest group of world leaders in history gathered in New York for the Millennium Summit at the United Nations, resulting in a set of 8 developmental goals, the Millennium Developmental Goals (MDGs), with a target completion date of 2015. MDG 4 was aimed at reducing child mortality by two-thirds of 1990 rates, from 87 children of every 1,000 dying before age five in 1990 to 29 of every 1,000 in 2015. MDG 5 was aimed at reducing the maternal mortality rate by three fourths of 1990 rates by 2015. As December 2015 drew to a close, the child mortality rate had decreased 48% from 1990 rates, and the maternal mortality rate had decreased by 43% from 1990 rates. The sobering realization, however, is that many countries still have high numbers of deaths with much room for improvement.

Moving forward into 2016-2030, the Sustainable Developmental Goals or Global Goals, build on the MDGs but with a broader sustainability and capacity building agenda. The new SDGs, and the broader sustainability agenda, go much further than the MDGs, addressing the root causes of poverty and the universal need for development that works for all people.

Recommendations

Prevention of unnecessary neonatal, newborn, and maternal mortality can be achieved by quality care around the time of childbirth with simple, affordable steps such as:

- Ensuring early skin-to-skin contact
- Exclusive breastfeeding
- Extra care for small and sick babies
- Global vaccination targets
- Embedding universal health coverage

References

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