

**Forum:** Social Humanitarian and Cultural (GA3)

**Issue:** The issue of maternal mortality in developing countries

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**Position:** Chair

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## INTRODUCTION

Since the beginning of time, pregnancy has been a cherished and respected state in which a woman finds herself. However, it was perceived that its sole purpose was heirship; that was until the early 20th century when women's rights movements began.<sup>1</sup> Although the first wave of feminism focused on the right to vote, the second wave swiftly followed and began exploring concepts like family and its true essence and meaning.

Maternal health and consequently mortality are topics that are rarely ever discussed, leaving women, especially in developing countries at great risk of a pregnancy being fatal. In developing countries, there is minimal information on maternal and reproductive health, marking the great extent of the issue. Maternal mortality is an issue that needs to be tackled with great caution due to the socioeconomic factors that are involved in its complex nature, which have made it extremely difficult to tackle so far in time.

The many factors that affect maternal mortality rates in developing countries need to be assessed on their own, as they each contribute on a different and individual level; sometimes if intertwined, their effect on the statistics can be major and detrimental. Due to the lack of funds and information flow in developing countries, it is difficult for all individuals to gain accurate knowledge on the risks of pregnancy and maternal and prenatal health, leaving them suffering in some situations not knowing why.

## DEFINITION OF KEY-TERMS

### *Eclampsia*

“Condition in which one or more convulsions occur in a pregnant woman suffering from high blood pressure, often followed by coma and posing a threat to the health of mother and baby”.<sup>2</sup>

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<sup>1</sup> Burkett, Elinor. “Women's Rights Movement.” Encyclopedia Britannica, 6 Nov. 2020, [www.britannica.com/event/womens-movement](http://www.britannica.com/event/womens-movement).

<sup>2</sup> Oxford Languages. “Oxford Languages and Google - English - Eclampsia.” Languages.oup.com, 2023, [languages.oup.com/google-dictionary-en](http://languages.oup.com/google-dictionary-en).

## **Heirship**

“The legal right to receive money, property, or possessions from someone who has died”.<sup>3</sup>

## **Prenatal care**

“The health care you get while you are pregnant including checkups and prenatal testing”.<sup>4</sup>

## **Mortality**

“The number of deaths within a particular society and within a particular period of time”.<sup>5</sup>

# **BACKGROUND INFORMATION**

## **Historical Background**

In 1985 ‘The Lancet’ published an article called “Where is the M in MCH?” (MCH stands for Maternal and Child Health), acknowledging the worldwide neglect of such a crucial part of the healthcare system and highlighting that the only way to bring attention to it was through family planning. Maternal mortality was difficult to measure as many deaths occurred post-partum, at home, during labor, and in general not at healthcare facilities rendering the project “invisible”.<sup>6</sup> In 1987, the first real attempt was made to tackle and solve the issue of maternal mortality, called ‘The Safe Motherhood Initiative’.<sup>7</sup> Its sole aim was to shift international attention to addressing the extremely high level of maternal mortality in developing countries, specifically in Asia and the Sub-Saharan Africa region.

However, due to the lack of support and new initiatives from the United Nations (UN), the issue was sidelined. In addition to the lack of support, the specific field was involved with political sensitives like abortion and the preferred term of ‘reproductive health’; this all made this topic one to avoid as it spurred political instability and controversy.

This all went on to continue until the UN’s Millenium Development Goals (MDGs), with goal 5 being “Improving Maternal Health”.<sup>8</sup> This initiated both local and global investments, and in 2013 alone \$1.15 billion was mobilized to support the 4th and 5th MDGs in reducing maternal and child mortalities worldwide putting countries into the position of saving up to 3,000,000 lives

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<sup>3</sup> Cambridge Dictionary. “Heirship.” @CambridgeWords, 10 July 2024, [www.dictionary.cambridge.org/dictionary/english/heirship](http://www.dictionary.cambridge.org/dictionary/english/heirship) Accessed 14 July 2024.

<sup>4</sup> MedlinePlus.gov. “Prenatal Care.” Medlineplus.gov, 2023, [medlineplus.gov/prenatalcare.html#:~:text=Prenatal%20care%20is%20the%20health](http://medlineplus.gov/prenatalcare.html#:~:text=Prenatal%20care%20is%20the%20health).

<sup>5</sup> “MORTALITY | Meaning in the Cambridge English Dictionary.” Dictionary.cambridge.org, [dictionary.cambridge.org/dictionary/english/mortality](http://dictionary.cambridge.org/dictionary/english/mortality).

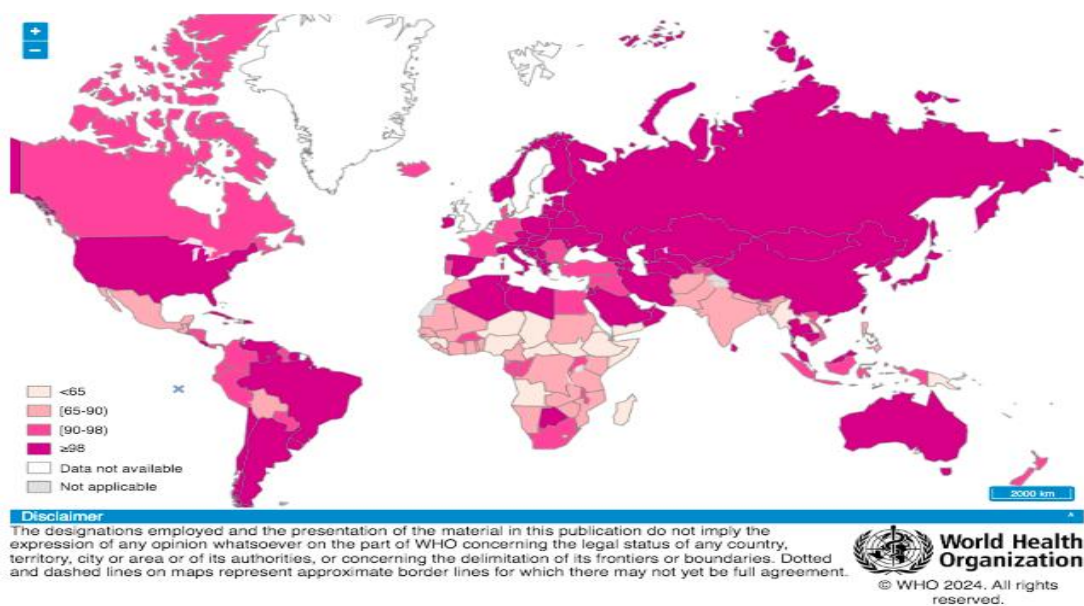
<sup>6</sup> “A History of Maternal Health Initiatives.” Www.futurelearn.com, [www.futurelearn.com/info/courses/women-children-health/0/steps/25862](http://www.futurelearn.com/info/courses/women-children-health/0/steps/25862).

<sup>7</sup> “Safe Motherhood - an Overview | ScienceDirect Topics.” Www.sciencedirect.com, [www.sciencedirect.com/topics/medicine-and-dentistry/safe-motherhood#:~:text=Safe%20motherhood%20is%20an%20initiative](http://www.sciencedirect.com/topics/medicine-and-dentistry/safe-motherhood#:~:text=Safe%20motherhood%20is%20an%20initiative).

<sup>8</sup> United Nations. “United Nations Millennium Development Goals.” Www.un.org, 2015, [www.un.org/millenniumgoals/maternal.shtml](http://www.un.org/millenniumgoals/maternal.shtml).

from services and commodities.<sup>9</sup> After 2015 when the deadline for the MDGs elapsed, the UN set out a new agenda for 2030 - the Sustainable Development Goals (SDGs); SDG target 3.1 is to “Reduce the global maternal mortality ratio to less than 70 per 100,000 live births”.<sup>10</sup>

These two goals have proved to be quite successful so far as from the year 2000 to 2020, the maternal mortality ratio (MMR) dropped by approximately 34% worldwide. However, in 2020, almost 95% of all maternal deaths occurred in low and lower-middle-income countries. Unfortunately, a major cause for this issue was that skilled professionals were not there to care for the baby and mother during childbirth, leaving women to die from preventable causes; in 2020 alone, almost 800 women died from preventable causes according to the World Health Organization (WHO).<sup>11</sup>



**Fig. 1: WHO graph showing the number of births attended by medical professionals in each country<sup>12</sup>**

### ***Causes of maternal mortality in developing countries***

The Sub-Saharan Africa region along with Southern Asia, accounted for about 87% of all maternal deaths worldwide in 2020, while Sub-Saharan Africa accounted for 70% alone which was approximately 202,000 deaths. The extremely high numbers of maternal deaths worldwide reflect a multitude of inequalities in access to quality healthcare services. In 2024, almost 4.5 billion people worldwide do not have access to adequate health care with the majority of people

<sup>9</sup> Office of the UN Secretary-General's Special Envoy for Health in Agenda 2030 and for Malaria. “\$1.15 Billion Mobilized to Support Achieving MDGs 4 and 5.” Wwww.healthenvoy.org, 23 Sept. 2013, [www.healthenvoy.org/1-15-billion-mobilized-to-support-achieving-mdgs-4-and-5/](http://www.healthenvoy.org/1-15-billion-mobilized-to-support-achieving-mdgs-4-and-5/). Accessed 14 July 2024.

<sup>10</sup> WHO. “SDG Target 3.1 Maternal Mortality.” Wwww.who.int, 2023, [www.who.int/data/gho/data/themes/topics/sdg-target-3-1-maternal-mortality](http://www.who.int/data/gho/data/themes/topics/sdg-target-3-1-maternal-mortality).

<sup>11</sup> World Health Organization. “Maternal Mortality.” World Health Organization, World Health Organization: WHO, 26 Apr. 2024, [www.who.int/news-room/fact-sheets/detail/maternal-mortality](http://www.who.int/news-room/fact-sheets/detail/maternal-mortality).

<sup>12</sup> WHO. “SDG Target 3.1 Maternal Mortality.” Wwww.who.int, 2023, [www.who.int/data/gho/data/themes/topics/sdg-target-3-1-maternal-mortality](http://www.who.int/data/gho/data/themes/topics/sdg-target-3-1-maternal-mortality).

being in developing countries.<sup>13</sup> These numbers highlight the bridge between the more economically developed countries (MEDCs) with the developing countries.

One major factor that greatly affects these numbers is conflict and post-conflict settings. Such settings hinder the efforts being made to improve access to health care and pave the way into reducing the MMR in all countries as low as possible. According to the Fragile States Index of 2020, 9 countries: Syria, Yemen, Somalia, Afghanistan, Chad, Sudan, South Sudan, the Central African Republic, and the Democratic Republic of Congo were 'very high alert' or 'high alert' and had an average MMR of 551 per 100,000 which was more than double of the world average.<sup>14</sup>

### ***Pregnancy complications***

Major complications that account for 75% of all complications include:

- severe bleeding mainly after childbirth,
- infections after childbirth due to poor health care services and environments
- pre-eclampsia and eclampsia,
- delivery complications that cannot be attended to due to the absence of healthcare professionals,
- unsafe abortions.<sup>15</sup>

### **Lowering the MMR**

One way of lowering the risk of maternal mortality in developing countries is preventing unintended pregnancies. It is a basic human right for all women and girls to have access to contraception, safe abortion services, and prenatal care that attends to both the baby in the womb and the woman carrying it.

Most maternal deaths that occur are preventable with the simple presence of a professional who is knowledgeable on how to prevent and manage any complications with the well-known methods that are available to us all. Safe healthcare practices such as monitoring, prenatal care, and advice given by professionals are crucial in lowering the MMR.

### ***Impact of maternal mortality***

One long-term impact of maternal mortality in developing countries is financial instability, as mothers in such countries are not only caregivers and do not just stay at home - but they also

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<sup>13</sup> Shyam Bishen, and World Economic Forum. "Davos 2024: What's the State of Health and Healthcare?" World Economic Forum, 26 Jan. 2024, [www.weforum.org/agenda/2024/01/whats-the-state-of-health-and-healthcare-heres-what-we-learned-in-davos/](https://www.weforum.org/agenda/2024/01/whats-the-state-of-health-and-healthcare-heres-what-we-learned-in-davos/).

<sup>14</sup> Fund for Peace. FRAGILE STATES INDEX ANNUAL REPORT 2023. 2023.

<sup>15</sup> World Health Organization. "Maternal Mortality." World Health Organization, World Health Organization: WHO, 26 Apr. 2024, [www.who.int/news-room/fact-sheets/detail/maternal-mortality](https://www.who.int/news-room/fact-sheets/detail/maternal-mortality).

contribute substantially to the household income, sometimes having more than one job at a time. Having this fraction of the income abruptly taken away due to the loss of the mother in addition to funeral fees, can create severe problems in the family's ability to access basic needs like healthcare, shelter, food, and water.

Moreover, in developing countries, when the mother passes away, it is very common practice for the oldest sibling who is a girl to drop out of school and attend to a mother's duties. This leaves them with no choice but to commit to an early marriage to renew the cycle of poverty for the next generation. After these marriages if the young girls get pregnant, they are also at great risk of maternal mortality; the risk for girls aged 15 years old to die from pregnancy causes and complications is 1 in 49 in developing countries.<sup>16</sup>

A research study conducted by Harvard University showed increased mortality amongst children who have lost their mothers, stating that newborns who lost their mothers during childbirth are far less likely to reach their 1st birthday than other children who haven't lost their mothers or who died from other causes. This study also proved that early marriage is linked to higher maternal mortality and therefore higher infant mortality.<sup>17</sup>

## MAJOR COUNTRIES AND ORGANIZATIONS INVOLVED

### *India*

The United Nations Children's Fund (UNICEF) works with the Ministry of Women and Child Development (MWCD), Ministry of Health and Family Welfare (MoHFW), NITI Aayog, and state governments to support planning, budgeting, capacity building, and monitoring of health managers and supervisors to implement and monitor effective maternal healthcare services to those with high-risk pregnancies and those who are in vulnerable and hard to reach disadvantaged communities.

A scheme, named Janani Shishu Suraksha Karyakaram (JSSK) provides free maternity services for women and children, ensures a nationwide scale-up of emergency referral systems and maternal death audits, and vouches for improvements in the governance and management of health services at all levels to ensure that maternal mortality levels are reduced. The Maternal Mortality Ratio (MMR) of India for the period 2018 to 2020, in accordance with the latest report of the national Sample Registration system (SRS), has declined by 33 points to 97/100,000 live births from 130/ 100,000 live births in 2014 to 2016.<sup>18</sup>

### *Nigeria*

Nigeria's 40 million women that are of childbearing age suffer an extremely high level of health issues surrounding birth; in 2019 Nigeria was the country that nearly 20% of all maternal

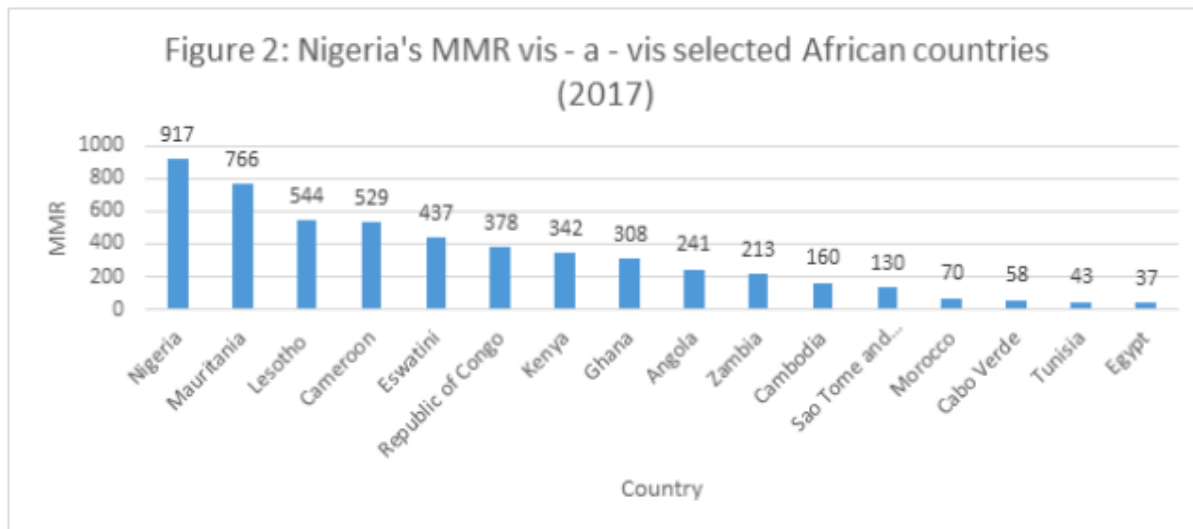
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<sup>16</sup> "Maternal Mortality." World Health Organization, World Health Organization: WHO, 26 Apr. 2024, [www.who.int/news-room/fact-sheets/detail/maternal-mortality](http://www.who.int/news-room/fact-sheets/detail/maternal-mortality).

<sup>17</sup> Tulloch, Tezeta. "Economic and Social Impacts of Maternal Death." FXB Center for Health & Human Rights | Harvard University, 7 May 2015, [fxb.harvard.edu/2015/05/07/economic-and-social-impacts-of-maternal-death/](http://fxb.harvard.edu/2015/05/07/economic-and-social-impacts-of-maternal-death/).

<sup>18</sup> UNICEF. "Maternal Health." Www.unicef.org, 2023, [www.unicef.org/india/what-we-do/maternal-health](http://www.unicef.org/india/what-we-do/maternal-health).

deaths took place.<sup>19</sup> In addition to that, Nigeria has a maternal mortality rate of 576 per 100,000 live births, the fourth highest on Earth.<sup>20</sup>



**Fig. 2: Nigeria’s MMR in comparison to other African Countries.<sup>21</sup>**

The Nigerian government has taken initiatives to improve access to primary healthcare nationwide with the goal of having at least 1 PHC facility in every one of 10,000 administrative wards. However, this goal is far from being reached. In 2020 alone, 28.8% of all maternal deaths were due to obstetric hemorrhage; something which is preventable with the simple presence of a healthcare professional during the birth of the baby.<sup>22</sup>

### **Bill & Melinda Gates’ Foundation**

The Bill and Melinda Gates Foundation’s goal is to “ensure that women and newborns in low- and middle-income countries survive and remain healthy before, during, and after childbirth, by addressing the major drivers of maternal and newborn mortality.”<sup>23</sup> They have a team of individuals who aim to understand both social and biological vulnerabilities in women and babies to develop newly founded tools and strategies that will strengthen healthcare systems, improve access to maternal and reproductive health, and prevent maternal deaths from occurring specifically from preventable causes.

<sup>19</sup> World Health Organization. “Maternal Health in Nigeria: Generating Information for Action.” [www.who.int](http://www.who.int), 25 June 2019, [www.who.int/news/item/25-06-2019-maternal-health-in-nigeria-generating-information-for-action](http://www.who.int/news/item/25-06-2019-maternal-health-in-nigeria-generating-information-for-action).

<sup>20</sup> ---. “Situation of Women and Children in Nigeria.” Unicef.org, 2017, [www.unicef.org/nigeria/situation-women-and-children-nigeria](http://www.unicef.org/nigeria/situation-women-and-children-nigeria).

<sup>21</sup> Dauda, Risikat . “Maternal Mortality in Nigeria: What Is Known and What Needs to Be Done.” The Nigerian Economic Summit Group, Nov. 2023, [nesgroup.org/download\\_resource\\_documents/NRFP%20Policy%20Brief-%20Prof%20Risikat%20Dauda\(MM\)\\_1701236063.pdf](https://nesgroup.org/download_resource_documents/NRFP%20Policy%20Brief-%20Prof%20Risikat%20Dauda(MM)_1701236063.pdf).

<sup>22</sup> World Health Organization. Analytical Fact Sheet Maternal Mortality: The Urgency of a Systemic and Multisectoral Approach in Mitigating Maternal Deaths in Africa Rationale. Mar. 2023.

[https://files.who.afro.who.int/afahobckpcontainer/production/files/iAHO\\_Maternal\\_Mortality\\_Regional\\_Factsheet.pdf](https://files.who.afro.who.int/afahobckpcontainer/production/files/iAHO_Maternal_Mortality_Regional_Factsheet.pdf)

<sup>23</sup> Bill and Melinda Gates Foundation. “Maternal, Newborn, Child Nutrition & Health.” Bill & Melinda Gates Foundation, 2024, [www.gatesfoundation.org/our-work/programs/gender-equality/maternal-newborn-child-nutrition-and-health](http://www.gatesfoundation.org/our-work/programs/gender-equality/maternal-newborn-child-nutrition-and-health).

In the past few years, they have been investing in the development of a large amount of accessible and effective interventions, having assembled a portfolio of products; nine products of those in the portfolio are nearly ready to be available to governments and the market, enabling the foundation to be able to save 2 million lives by 2030.

### **Save the Children**

The Save the Children organization acknowledges the fact that an estimated 218 million women and girls in low- and middle-income countries (LMICs) do not have access to family planning, resulting in approximately 111 million unintended pregnancies every year.<sup>24</sup> Their mission is to promote the use of contraception for all in order to reduce maternal mortality and improve maternal and reproductive health worldwide. They ensure access to postpartum family planning services and integrate it into other health services to increase opportunities for women to access adequate healthcare, even in nomadic populations.

Additionally, they work with governments and local partners in developing countries to strengthen their service delivery platforms both facility and community to create a clean and safe environment for women to give birth. Save the Children works with regional policy makers to ensure maternal health policies and guidelines are met up to global standards. They promote capacity building of health providers allowing them to work in communities to build support to ensure women seek care when needed during pregnancy, labor, and after childbirth to avoid preventable deaths.

## **TIMELINE OF EVENTS**

<b>DATE</b>	<b>DESCRIPTION OF EVENT</b>
1920s-1940s	Countries worldwide begin to recognize the extent of the problem and launch efforts of improving access to midwives and trained birth attendants
April 7th 1948	World Health Organization founded and began including maternal and child health in their efforts

<sup>24</sup> Save the Children. "Maternal and Reproductive Health." Save the Children, 2024, [www.savethechildren.org/us/what-we-do/health/maternal-and-reproductive-health](https://www.savethechildren.org/us/what-we-do/health/maternal-and-reproductive-health).

<p>September 12th 1978</p>	<p>Alma-Ata Declaration:</p> <p>Primary Healthcare becomes a core strategy for the UN and WHO, emphasizing maternal and childcare as key components and goals.</p>
<p>February 10th 1987</p>	<p>Safe Motherhood Initiative:</p> <p>Launched by the WHO, World Bank, and United Nations Population Fund (UNFPA) to reduce maternal mortality rates mainly in developing countries by increasing access to skilled professionals and care</p>
<p>September 8th 2000</p>	<p>Millenium Development Goals:</p> <p>Goal 5 aims to reduce maternal mortality and improve maternal health while reducing the MMR</p>
<p>May 25th 2005</p>	<p>World Health Assembly Resolution:</p> <p>Calls for universal access to reproductive health and services by 2015, aligning with MDG 5</p>
<p>January 30th 2015</p>	<p>Ending Preventable Maternal Mortality (EPMM) Strategy:</p> <p>A framework launched by WHO to guide efforts towards eliminating preventable maternal deaths</p>
<p>September 25th 2015</p>	<p>Sustainable Development Goals:</p> <p>SDG 3 aims to ensure healthy lives and promote well-being for all at all ages, with a specific target to reduce the global maternal mortality ratio to less than 70 per 100,000 live births by 2030</p>

<p>July 13th 2015</p>	<p>Global Financial Facility for Women, Children and Adolescents (GFF):</p> <p>Launched to mobilize and align financing to accelerate progress on maternal and child health</p>
<p>March 11th 2020</p>	<p>COVID-19:</p> <p>The pandemic disrupted maternal healthcare services worldwide, bringing to light the vulnerabilities of the system and had a huge toll on the MMR especially in developing countries</p>
<p>October 13th 2023</p>	<p>A/HRC/RES/54/16:</p> <p>Human Rights Council Resolution called “ Preventable maternal mortality and morbidity and human rights” was adopted</p>

**RELEVANT UN RESOLUTIONS, TREATIES AND EVENTS**

***Preventable maternal mortality and morbidity and human rights (A/HRC/RES/54/16)<sup>25</sup>***

Resolution A/HRC/RES/54/16 was adopted on October 13th, 2023. This resolution aims to promote member states to support programs and initiatives that revolve around maternal and reproductive health. Furthermore, it urges member states to provide equitable healthcare to all individuals in their countries, especially for pregnant women, promoting adequate prenatal and antenatal care to stop maternal deaths from occurring that are easily preventable through methods which are already known. Moreover, it wants to ensure affordable and accessible healthcare and maternal care in all member states. A major problem for many mothers mainly in developing countries is the fact that healthcare facilities are quite far away, or they are too expensive to rely on for proper care before, during, and after pregnancy.

<sup>25</sup> United Nations. "Preventable Maternal Mortality and Morbidity and Human Rights :." *United Nations Digital Library System*, 12 Oct. 2023, [digitallibrary.un.org/record/4025164?ln=en&v=pdf](https://digitallibrary.un.org/record/4025164?ln=en&v=pdf).

## ***Every Woman Every Child Initiative***

Beginning in 2010 and driven by the UN Secretary-General, Every Woman Every Child development points to heighten national and universal commitment and activity by governments, the UN, multi-laterals, private divisions, and gracious society to keep women's, children's and adolescents' well-being and prosperity at the heart of advancement.

As a multi-stakeholder stage to operationalize the Every Woman Every Child Worldwide Procedure for Women's, Children's and Adolescents' well-being, the development mobilizes organizations and facilitated endeavors over segments to guarantee that all women, children and youths not only to survive, but moreover flourish to assist change the world.

Since 2015, 62 nations and around 150 multi-stakeholder commitments have been vowed in the back of the EWEC Worldwide Methodology, totaling about US\$30 billion to provide the guarantees of a maintainable future for all.<sup>26</sup>

## ***International Conference on Population and Development (ICPD) - Cairo, 1994***

In 1994, the International Conference on Population and Development (ICPD), was held in Cairo and managed to transform global thinking on population and development issues and define a bold agenda regarding sustainable development in the future.

At the conference, 179 governments managed to adopt the ICPD Programme of Action. It ensured that “inclusive sustainable development is not possible without prioritizing human rights, including reproductive rights; empowering women and girls; and addressing inequalities as well as the needs, aspirations and rights of individual women and men”.<sup>27</sup>

In the present day, however, 30 years later after the fact, the progress of such initiatives is threatened by crises, threats on the rights and choices of women and girls, the COVID-19 pandemic and the polarization of the sexual and reproductive health and rights agenda.

## ***Alma-Ata Declaration at the International Conference on Primary Healthcare***

The International Conference on Primary Health Care calls for urgent and effective national and international action to develop and implement primary health care throughout the world, especially in developing countries, in the spirit of technical cooperation and in the new international economic order.

The report calls on national governments, WHO, UNICEF and other international organizations, as well as multilateral and bilateral agencies, non-governmental organizations, funding agencies, all health professionals and the international community at large, to support

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<sup>26</sup> United Nations Sustainable Development Goals. “Every Woman Every Child .. Sustainable Development Knowledge Platform.” Sustainabledevelopment.un.org, 2023, [sustainabledevelopment.un.org/sdinaction/everywomaneverychild](https://sustainabledevelopment.un.org/sdinaction/everywomaneverychild).

<sup>27</sup> United Nations Population Fund. “International Conference on Population and Development.” Www.unfpa.org, 2023, [www.unfpa.org/icpd](https://www.unfpa.org/icpd).

national and international efforts on primary health care, strengthen health care, and provide technical and financial support, especially to developing countries.

These aims then go on to focus on maternal and reproductive health, allowing for the universal access to primary healthcare that everyone deserves no matter the country they reside in or their financial situation.<sup>28</sup>

## **PREVIOUS ATTEMPTS TO SOLVE THE ISSUE**

### ***Maternal and Child Health Integrated Program (MCHIP)***

USAID's flagship program for the Bureau of International Health, the Maternal and Child Health Integrated Program (MCHIP), has worked to improve the health of women and their families in more than 50 developing countries in Africa, Asia, Latin America, and the Caribbean.<sup>29</sup> MCHIP supported programs in the areas of maternal and child health, immunization, family planning, nutrition, malaria, HIV/AIDS, and promoted opportunities to integrate programs and services whenever possible. By connecting communities, primary care facilities, and hospitals, MCHIP removed barriers to access and use of important evidence-based interventions at every stage of life, from preconception through age 5. By helping countries identify and focus on life-saving innovations, MCHIP supported the implementation of evidence-based interventions by strengthening government health systems, nongovernmental organizations, and other local partners. In June 2014, USAID announced the successor to MCHIP, the Maternal and Child Survival Program.

### ***Partnership for Maternal, Newborn & Child Health (PMNCH)***

Founded in 2005, PMNCH is the world's largest coalition for women, children and adolescent health and wellbeing, having more than 1,400 partner organizations working together across 10 stakeholder groups, including 4,444 partner governments, donors and foundations, NGOs, youth groups, private sector organizations, professional health associations, academic and research institutes, global funding mechanisms, intergovernmental organizations and UN agencies. PMNCH is hosted by the World Health Organization, and it is based in Geneva. The PMNCH Strategy until 2025 was developed through a consultative process with PMNCH's base. Thus, the strategy is based on three interrelated goals: maternal and child health (MNCH), sexual and reproductive health and rights (SRHR), and adolescent health and wellbeing.<sup>30</sup> A core function of this foundation is advocacy, and it is supported by knowledge synthesis, partner engagement, campaigns and advocacy.

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<sup>28</sup> ---. "Declaration of Alma-Ata." Wwww.who.int, 8 Oct. 2019, [www.who.int/publications/i/item/WHO-EURO-1978-3938-43697-61471](http://www.who.int/publications/i/item/WHO-EURO-1978-3938-43697-61471).

<sup>29</sup> Maternal and Child Health Integrated Program (MCHIP). "Home." MCHIP, 2023, <https://mchip.net/>.

<sup>30</sup> PMNCH Strategy. "PMNCH Strategy, Annual Reports and Workplans." Pmnch.who.int, Jan. 2024, [pmnch.who.int/about-pmnch/strategy-and-workplans](http://pmnch.who.int/about-pmnch/strategy-and-workplans).

## POSSIBLE SOLUTIONS

### *Improving access to quality healthcare*

The UN should prioritize establishing maternal healthcare facilities as individual entities or integrated within pre-existing infrastructure used as healthcare facilities. This focus should be mainly on developing countries and their rural areas that are more cut off from society.

The WHO should not only fund such projects, but it should send over constant missions in partnerships with non-governmental organizations (NGOs), which skilled medical professionals who will take on the jobs of doctors and a sub-group of these people should focus on the maternity aspect of healthcare, making sure that births occur within the facilities at designated areas with the attendance of healthcare professionals to ensure that any unexpected complications are dealt with skillfully to protect both the mother and the baby.

### *Enhancing prenatal care*

This solution involves the collaboration of NGOs and governments. To ensure a healthy and safe pregnancy, prenatal care is vital for maternal and infant health. This will involve adequate funding from the government for the NGOs to be able to send out missions in the countries that the governments partner with and give adequate maternal care to all mothers who visit and require attention. Moreover, sponsorships from pharmaceutical companies that produce prenatal vitamins would be ideal to hand out to mothers in order to ensure that their babies and themselves are gaining the right amount of nutrients needed for a healthy pregnancy. These establishments should acquire the necessary equipment to perform any sort of prenatal checkups and provide testing for diseases or possible complications that a woman or the baby may face during pregnancy.

### *Integrating UNICEF's programmes into government schemes*

UNICEF's programmes along with several other UN-affiliated organizations have agreed to ensure primary healthcare and maternal healthcare for all women. Putting such programmes into the agendas of developing countries' governments will allow for both the smooth induction of PHC and maternal healthcare in society and even in rural areas. Making this compulsory for governments will allow them to allocate the ideal funds for such programmes ensuring the safe pregnancies of many women across the globe.

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