Kampala conference and maternal mortality

AGAINT the backdrop of increased maternal deaths in Nigeria, mention must be made of the importance of risk reduction and the identification of basic interventions necessary to improve maternal health and redress the number of women who die from pregnancy-related complications. The government’s commitment to maternal care, adequate emergency obstetric care, trained attendants at birth, and high-quality family planning programmes. If these are adopted and implemented judiciously, maternal deaths, especially among disadvantaged populations, can be reduced.

At a recently concluded international conference on family planning held in Kampala, Uganda, organized and sponsored by the Bill and Melinda Gates Foundation for Population and Reproductive Health, the Johns Hopkins Bloomberg School of Public Health, and Makerere University, family planning was, however, identified as the best documented practice for reduction of maternal deaths, prevention of unwanted pregnancies, and their complications, as well as the reduction of the rate of transmission of HIV.

Speaking at the opening ceremony of the conference, Mrs. Janet Museveni, wife of the President of Uganda, who gave the keynote address, attributed high maternal deaths to inadequate health care facilities, saying the situation in Africa was a major cause of concern.

She lamented that in sub-Saharan Africa, a woman’s risk of dying from treatable or preventable complications of pregnancy and child birth was high compared to her counterparts in developed countries.

She agreed that one of the most effective, low-cost technologies for prevention of maternal mortality is family planning.

This is because the first thing that is being canvassed as a major factor for checking maternal deaths. At the 1987 Safe Motherhood International Conference in Nairobi, Kenya, the Convention on the Rights of the Child was adopted in Cairo, Egypt, in 1994, and the World Health Organization (WHO) estimate for Nigeria, for instance, is 1,100 per 100,000 live births.

This is because proper pre-natal care is still a dream in Nigeria. More than 40 per cent of women giving birth do not receive pre-natal care from trained health care providers, while more than 60 per cent of maternal deaths take place in the period following delivery, with many women dying of complications.

This is disturbing as pregnancy is identified as the major cause of deaths among women and girls of childbearing age. While pregnancy is a thing of joy in other countries of the world, it has become a death sentence for many women in Nigeria. This is unacceptable. Sadly, the causes of these deaths are treatable and preventable, but still occur in spite of existing, cost-effective technologies that have been developed to reduce deaths about themselves and their families. Governments must take the lead in ensuring that public health care facilities are adequately funded and equipped with the latest technology to prevent these deaths.

Maternal mortality rates are major indicators of the state of the health systems of nations. Poor ratios reflect inadequate health care infrastructure, improper planning and lack of sustainable programs. Government must, more committed to upgrading the healthcare delivery system, providing adequate resources, training providers, and supplying up-to-date equipment. We also urge health authorities in the country to popularise the African Union’s call for health care. While NGOs and civil rights groups should double their efforts in the area of public enlightenment to create awareness, especially in rural communities and urban slums where there is lack of basic knowledge and education.

Education of the girl child is equally a key empowerment tool that will help the girl child and eventually all women to take informed decisions about their health care. We hereby call on all the stakeholders to work together to ensure the right of every child to live and grow up in good health like their counterparts in other countries.

Championworld

Ekwunife and Anamba gubernatorial poll

T he Anambra State governorship election scheduled for February 6, 2010 has thrown up many issues. This is not entirely unexpected, given the proclivity of the politicians to "play out" their candidates in the public eye, especially in their campaigns and timing of their children. But 15 years after, despite increase in the use of contraceptives, the need for family planning services is still not imminent, leading to high maternal death in Nigeria.

There is one of the highest maternal mortality rates in the world and the highest in Africa. The World Health Organization (WHO) estimate for Nigeria, for instance, is 1,100 per 100,000 live births. This is because proper pre-natal care is still a dream in Nigeria. More than 40 percent of women giving birth do not receive pre-natal care from trained health care providers, while more than 60 percent of maternal deaths take place in the period following delivery, with many women dying of complications. This is disturbing as pregnancy is identified as the major cause of deaths among women and girls of childbearing age. While pregnancy is a thing of joy in other countries of the world, it has become a death sentence for many women in Nigeria. This is unacceptable. Sadly, the causes of these deaths are treatable and preventable, but still occur in spite of existing, cost-effective technologies that have been developed to reduce deaths about themselves and their families. Governments must take the lead in ensuring that public health care facilities are adequately funded and equipped with the latest technology to prevent these deaths.

Maternal mortality rates are major indicators of the state of the health systems of nations. Poor ratios reflect inadequate health care infrastructure, improper planning and lack of sustainable programs. Government must, more committed to upgrading the healthcare delivery system, providing adequate resources, training providers, and supplying up-to-date equipment. We also urge health authorities in the country to popularise the African Union’s call for health care. While NGOs and civil rights groups should double their efforts in the area of public enlightenment to create awareness, especially in rural communities and urban slums where there is lack of basic knowledge and education.

Education of the girl child is equally a key empowerment tool that will help the girl child and eventually all women to take informed decisions about their health care. We hereby call on all the stakeholders to work together to ensure the right of every child to live and grow up in good health like their counterparts in other countries.