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**Follow-up to the Fourth World Conference on Women
and to the twenty-third special session of the General Assembly
entitled “Women 2000: gender equality, development and peace
for the twenty-first century”: implementation of strategic
objectives and action in critical areas of concern and further
actions and initiatives**

Statement submitted by Mouvement mondial des mères international, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.



Statement

Much progress has been achieved on the eight Millennium Development Goals and Mouvement mondial des mères international welcomes the efforts made by all nations. However progress on one goal, Goal 5, to “improve maternal health”, has been slow, in particular the achievement of the stated objective of “reducing by three quarters the maternal mortality ratio and achieving universal access to reproductive health”. While, according to the United Nations, the maternal mortality rate worldwide has been halved since 1990, it is disturbing that there has been limited progress in reducing maternal mortality in the developing world.

Eastern Asia, northern Africa and southeast Asia have achieved notable progress, yet there are other regions of the world, for example sub-Saharan Africa, where the reduction in maternal mortality has been only marginal. A United Nations Development Programme (UNDP) report of July 2013 clearly states that millions of deaths have been averted in the fight against malaria, tuberculosis and HIV, and that many of the Goals are actually achievable within the next two years. But the report also adds that “meeting the Millennium Development Goal target of reducing the ratio of maternal deaths by three-quarters will require accelerated interventions and stronger political backing for women and children”.

Furthermore, for every maternal death there are approximately 30 times as many cases of pregnancy-related illness or disability. A typical example of such maternal morbidity is obstetric fistula, a preventable ailment that has tragic consequences for mothers, who, in addition to their physical suffering, are often stigmatized by their communities and left abandoned and isolated. This fact is not always evident in statistics.

The lack of progress in maternal health clearly points to a dramatic shortage of funding and political will. It is unconscionable that maternal mortality, which in most cases is preventable, affects 15 times more women in the developing world compared to women in the developed world, pointing to the exorbitant price of motherhood in the poorest areas of the world. It is a price that not only women pay with their lives; their motherless children and their families particularly, as well as their communities, also pay an unfathomable price, bearing the risks, inter alia, of further morbidity and mortality, increased poverty, unsettled households and academic failure which, globally, put the social development of entire societies at stake. Maternal mortality provides not only a harsh illustration of the lack of basic human rights for a great number of women, it is a violation of children’s rights.

Moreover, Governments and all stakeholders cannot promote “social equality, human rights and social justice for all” if they are not serious about efforts to eradicating preventable maternal mortality for all women. They cannot turn a blind eye if the worst life decision a woman can make is to have a child. Women in poor countries cannot be punished and lose their lives for performing the very task that everyone agrees is essential to human development.

Mouvement mondial des mères international therefore urges Governments to:

- Seriously tackle the two targets set for Millennium Development Goal 5 by prioritizing and allocating adequate human and financial resources to that end;
- Facilitate the chances of survival for mothers and infants by helping poorer countries to provide access to appropriate health-care services that will enable

women to have safe pregnancies and child deliveries, including the training of enough committed nurses, midwives and doctors, and to ensure their geographical distribution;

- Demonstrate their commitment to gender equality and justice for all by committing to a concerted effort to decrease the disparity in the childbirth mortality rate in the developing world versus the developed world. Such preventable inequality is not acceptable and can be easily corrected;
- Focus on the alarming increasing trend of adolescent pregnancies in some parts of the world, particularly in sub-Saharan Africa, as noted in the Secretary-General's 2010 Millennium Development Goals report. In this respect, the fight against forced and early marriage is particularly relevant;
- Develop and implement information and training programmes for young girls and women on family planning, health education and preventive medicine, facilitate their access to these programmes and enhance their chances for a safer, more responsible motherhood and reduce the risks of maternal mortality.

Failure to do so will make a reality of the recent statement by UN-Women that "Goal 5 is the Millennium Development Goal least likely to be achieved as currently decreases in maternal mortality are far from the 2015 target". The fight against maternal mortality must continue and be part of the post-2015 development agenda. Reducing ratios is not enough: as a matter of basic human rights, eradicating preventable maternal mortality and morbidity should be on top of international and national agendas.
