

Maternal mortality lagging in sub-Saharan Africa

Rates of maternal mortality in sub-Saharan Africa have shown little improvement since 1990, with a ratio around 900 per 100 000 live births – approximately double that of developing countries in general and 100 times greater than the developed countries, according to the World Health Organization's recently released World Health Statistics 2008.

However, the rates also vary markedly across the region, with maternal mortality below 500 in southern Africa (400 in South Africa) but more than double that in several countries in Central, East and West Africa.

Millennium Development Goal (MDG) 5 has the target to reduce the maternal mortality ratio in all countries to one-quarter of its 1990 level by 2015. However, the latest estimate, based on 2005 data, is that 536 000 women died as a result of complications of pregnancy and childbirth, with a maternal mortality ratio of 400 per 100 000 live births. Slightly more than half of these deaths occurred in sub-Saharan Africa.

Conversely, the largest decline was recorded in eastern Asia, with a drop in the maternal mortality ratio by more than 40% between 1990 and 2005.

Meeting the MDG 5 target requires a decline in the maternal mortality ratio of around 5.5% per year, but no region in the world has achieved this result. Globally, the maternal mortality ratio showed a total fall of 5.4% between 1990 and 2005, an average reduction of 0.4% per year.

Another key finding in the World Health Statistics 2008 is that less than a quarter of women aged 50 -

69 years had been screened for breast cancer in the last 3 years, ranging from more than 85% in some European countries to fewer than 5% in most low-income countries.

Source: www.who.int

Research issues in sexual and reproductive health for low- and middle-income countries

Research plays an essential role in identifying and overcoming social and economic inequalities and health system deficiencies, and pragmatic investigations are needed that will lead to significant improvements in the sexual and reproductive health of those who are identified across and within countries as carrying a disproportionately large, and largely avoidable, burden of death, disability, disease and despair due to sexual and reproductive causes.

This is among the conclusions in a new report from the Global Forum for Health Research and the World Health Organization aimed at identifying some of the gaps and issues in sexual and reproductive health as expressed by a variety of players in the field.

The five core aspects of sexual and reproductive health are healthy sexuality, prevention and control of STIs/HIV, contraceptive choice and quality of care, safe abortion, and safe pregnancy, delivery and postpartum care for the mother and newborn.

Recent research has highlighted the prevalence of sexual coercion and sexual abuse within families as well as across class, ethnic and racial lines, and continued efforts to make such violations of sexual rights visible in different settings are needed, especially among

understudied populations such as children and adolescents and migrants and refugees. Research is also needed on the nature and causes of sexual misinformation as well as on the sources to which people turn for information, advice and treatment.

The prevention and management of sexually transmitted infections, including HIV and reproductive tract disorders, also need attention, given their high prevalence and epidemiological complexities.

Research is urgently needed on the interaction between the use of contraceptives and the risk of HIV acquisition and on transmission and disease progression among people living with AIDS, as well as on the interactions between method use and HIV therapies. In addition, investigations are needed to identify interconnections between contraception and physical and mental health and to improve the efficacy, safety, acceptability and convenience of current contraceptive methods among groups such as adolescents, older users and users with chronic diseases.

In maternal health key research questions include the measurement of impact of interventions for safe motherhood, and the ability of the health systems to scale up interventions, as well as of communities to engage to ensure that pregnant women will be able to go safely through pregnancy and delivery.

A rights-based framework is proposed for analysing and filling gaps in our knowledge of sexual and reproductive health problems as they are experienced by men, women and adolescent girls and boys on an individual level, in interpersonal contexts, through the life course.

Source: www.globalforumhealth.org