

# Achievements of the MDGs: Reflections on the performance of African countries and implications for SDGs

# From the MDGs to SDGs: Challenges and Opportunities for RH/FP

UNFPA





- Pop globally is 7.4 billion
- In SSA, the pop is 949 million
- In SSA, there are 211 million women in reproductive age
- Youth (10-24 yrs) pop is 303 millions

SOURCE: POP Reference Bureau

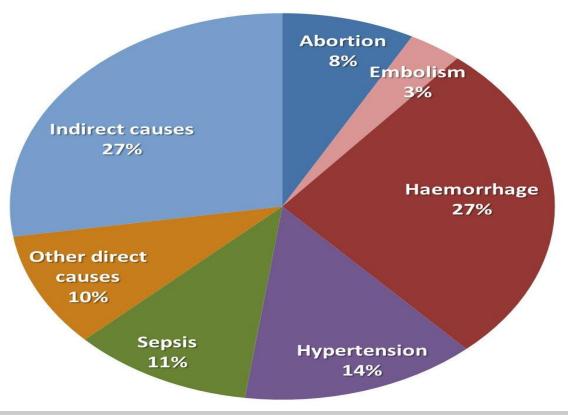




- Maternal survival significantly improved since adoption of MDGs
- MMR dropped by 45% between 1990 2015
- Women in developing countries continue to die in big numbers (over 14 times higher than developed regions) due to pregnancy related complications
- Maternal deaths in sub-Saharan Africa (SSA) and Asia account for 86% of all deaths globally.

# Mortality due to Preventable Causes

#### **Causes of maternal mortality**



Indirect causes include pre-existing conditions in pregnancy like diabetes, HIV, malaria, cardiovascular conditions, and obesity

#### Achievements in last 15 years on MH/FP

#### **Goal 5: Improve maternal health**

# Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

- 5.1 Maternal mortality ratio
- 5.2 Proportion of births attended by skilled health personnel

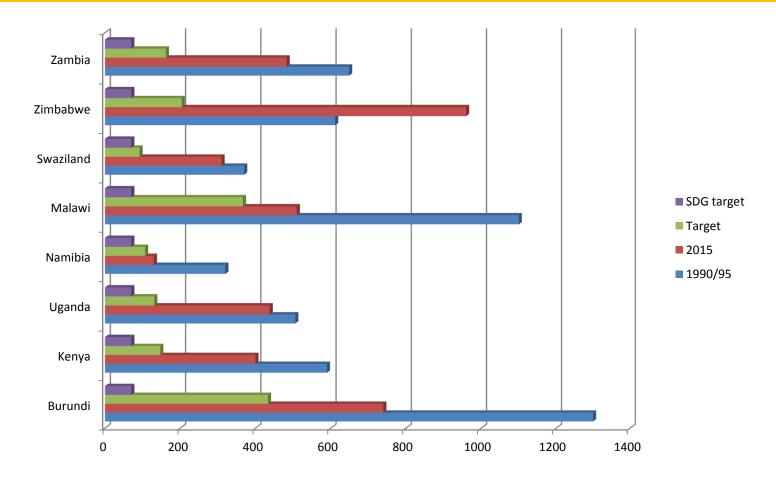
#### Target 5.B: Achieve, by 2015, universal access to reproductive health

- 5.3 Contraceptive prevalence rate
- 5.4 Adolescent birth rate
- 5.5 Antenatal care coverage (at least one visit and at least four visits)
- 5.6 Unmet need for family planning

# Achievements in last 15 years on MH/FPA

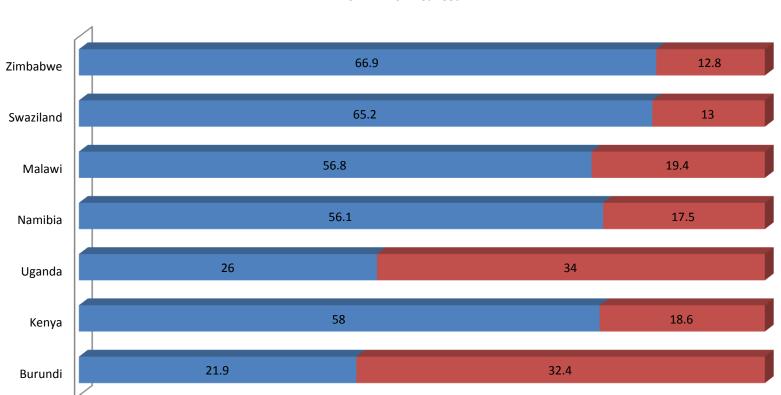
Global	Sub-Saharan Africa
<ul><li>MMR fell</li><li>from 380 to 210 per 100,000 live births</li></ul>	• 990 to 510 per 100,000 live births
Skilled attendance increased • from 59% to 71%	• 43% to 52%
Contraceptive use increased • from 55 to 64%	• 13% to 28% (still low)
Unmet need for FP reduced • from 15% to 12%	• 24%
• 64% of women receive the recommended 4 ANC care visits	• 49% of women receive the recommended 4 ANC care visits
Adolescent birth rate reduced • from 59/1,000 to 51/1,000 births	• 123/1,000 to 116/1,000 births

#### **Progress on MH has been slow for most SSA countries**



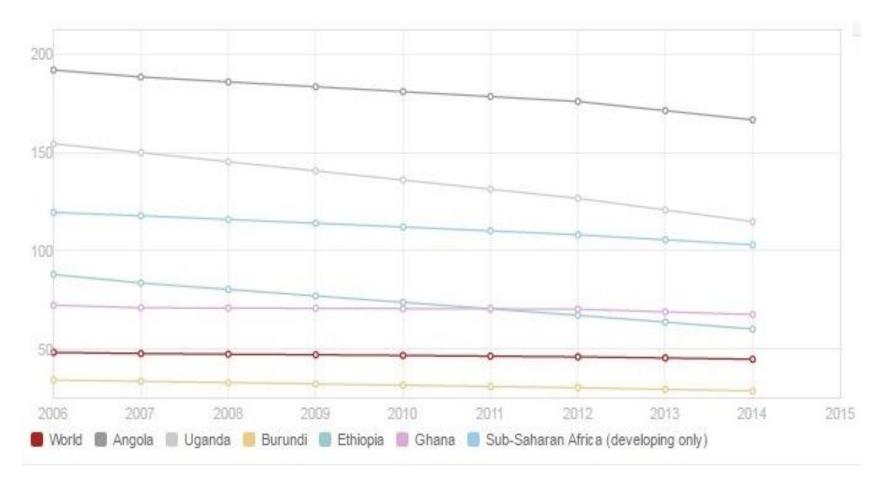
Source: MDG Country Progress reports

#### Contraceptive use is still low with high unmet need for specific countries



CPR Unmet need

#### Adolescent birth rate is still high in Sub Saharan Africa



Source: World Bank data 1990 -2015

#### **Unfinished agenda – MH/FP**



- MMR fell short of the global goal and targets
- Inequality in access to SRH information and services (high unmet need and low CPR)

Adolescent childbearing is still high in SSA:

- Pregnancy complications is the leading cause of death among women aged 15-19 years.
- High in sub-Saharan Africa at 116 per 1,000 adolescent girls in 2015 down from 123 per 1,000 in 1990
- has harmful consequences for health of girls and baby
- Denies girl child opportunity of fulfilling her potentiall e.g. school drop has implications on socio-economic outcomes of women.

# Tasks ahead for countries

- Improve financing of the health sector, health insurance (15% of Gvt of which 25% should go to RH)
- Innovations to reduce MMR and improve CPR
- Strengthen health systems
- Strengthen health information systems for improved monitoring of the SDGs
- Increased involvement of MPs in planning & prioritizing game changers
- Reduce proportion of girls getting married by age 18 yrs & teenage pregnancy which lead to school drop outs

# Tasks ahead...



- Follow up & ensure implementation of commitments at all levels
- Ensure increased HRH particularly Midwives because of their crucial role in MH/FP in most SSA.
- Countries to contribute for RHCS especially FP commodities as it is unfunded priority in most African countries
- Support policies like task sharing for MH/FP
- Invest in young people to harness DD

# UNFPA



#### UNFPA is committed to ensuring that every pregnancy is wanted, every child birth is safe and every young persons potential is full filled.



#### Thank You

#### for listening to me