International Workshop for Junior Fellows:  
Keynote Lecture

FIGO & Women's Health—Transforming strategy into action

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Twelve years ago, the world united around Millennium Development Goal 5 (MDG 5) and committed to improving maternal health and reducing maternal mortality by 2015 to a level just 25% of the 1990 level. The basis for this initiative, recognised by country leaders, is that the health of nations rests upon the health of mothers. Moreover, saving a mother’s life is not only intrinsically valuable; the impact extends to her family, her community and her country as a whole.

Since the launch of MDG 5, dramatic progress has been made in saving women’s lives. By 2010, maternal mortality had declined by 47% from the 1990 baseline. This success reflects the extraordinary dedication shown by numerous stakeholders within countries, from grassroots, NGOs to professional associations and from international donors to political leaders. However, even with this remarkable improvement, more than 780 women around the world still die every day from pregnancy- or childbirth-related complications, even though more than 80% of these deaths are preventable. While admiring the great progress made so far, we have to recognise that the current pace of improvement is insufficient. If it continues unchanged, nearly 90% of countries will fail to meet MDG 5 on time and more than half will probably still fall short in 2040.

Maternal mortality remains one of the most unbalanced health indicators in the world, with 99% of deaths occurring in low- and middle-income countries. But the good news is that the handful of countries that have really transformed their record are drawn from every region of the world and every stage of economic development. In fact, almost half of the countries on track to meet MDG 5 have a per-capita GDP below $1,000.* Of course, their impressive improvement is often due in part to their starting point of very high maternal mortality, but their achievement still shows that a low level of economic development does not represent an insurmountable barrier to saving women’s lives.

The success of individual countries gives us cause for hope. It argues that all countries have the ability—as well as the responsibility—to make real and lasting improvements to maternal health. I shall explore the success factors at work in various countries, so that they can be tried elsewhere. This information will be applicable to countries at all stages of the journey to meet MDG 5—from countries that are just starting to gather momentum for change to countries that are in the “final mile” of optimising maternal health. The information is presented in the following forms: a set of five guiding principles for improving maternal health; a shortlist of critical initiatives; and a checklist of progress-friendly tasks that can be carried out tomorrow.