



Tweede Kamer der Staten-Generaal



World Health
Organization



Parliamentarians Take Action for Maternal and Newborn Health

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The Road Map

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Summary

At the crucial halfway point to the 2015 Millennium Development goals (MDGs), members of parliament from 36 countries came together in The Hague, Netherlands, to discuss the role they can play in the achievement of MDG 5 (on Maternal Health), identify key priorities and develop innovative strategies to prevent the needless deaths of mothers and babies.

The parliamentarians' discussion resulted in a road map as a framework for action in countries based on seven priority areas (pillars) including political commitment, legislation, financial resourcing, health systems, education, cultural practices, and partnerships. The participants also identified conditions that have to be met to make progress in these areas and defined specific parliamentary activities to support stakeholders make headway. All parliamentarians agreed that MDG 5 can be achieved and thereby also contribute to MDG 4 (Reduce Child Mortality) if partners work together. At the end of the meeting all members of parliament committed to follow up on at least one of the activities discussed.

The situation

Some important facts have framed the debates from the very beginning.

- The first is that there is an urgent need to act as the current situation is simply unacceptable: every year more than half a million women die, many of them adolescents, due to complications during pregnancy and childbirth; every year 3 million newborn die.
- The second is that no country is exempt from this sad reality. All are concerned, whether they are a developing or a developed country, whether they are located in the north or in the south.
- The third is that existing discrepancies need to be taken into account; there are some countries or populations that need to be targeted specifically. Today, 68 countries account for 97% of maternal, newborn and child deaths, most of them in sub-Saharan Africa and in Asia. There are also discrepancies within the countries themselves, as poor and rural women are often the most affected. The poorest of the poor need to be reached first and foremost.
- The fourth, and maybe the most important, is that all stakeholders agree that it is possible to achieve MDG 5; it will certainly be difficult but it is doable if the political will can be mobilized.

The task may seem overwhelming and there is certainly no single, one, solution to address these challenges and reach these objectives. Rather, there are a variety of approaches, reflecting the diversity of situations and country experiences. The purpose of the meeting was therefore to offer a space to share experiences and concerns, strategize and ultimately create knowledge and build relationships for effective action.

Objectives of the road map

Following an original approach that combined plenary inputs with interactive sessions, the parliamentarians collaborated to create the pillars of MDG 5, work out what conditions need to be in place for every pillar, share success stories and identify appropriate parliamentary action. The interactive approach created strong relationships between parliamentarians and partners, and used the competence and professionalism of all participants to find creative and practicable solutions.

The road map developed collectively aims to provide a framework which should help the parliamentarians to take action individually and collectively in their respective countries to achieve progress and change the lives of women and children. The participants need to keep it alive, build on it and continue to share their experiences and help each other to effect change.

The structure of the road map

During the seminar, seven pillars were identified with a view to building a bridge for achieving MDG 5. The seven pillars consist of: political commitment, legislation, financial resourcing, health systems, education, cultural practices and partnership. Improvements in these priority areas can be achieved once certain conditions identified by the participants are met.

Pillar 1: Political commitment

The conditions for success include:

- Accurate data in order to grasp the situation, give visibility to it and engage others;
- Good governance, including the need for transparency in commitments and action;
- The need to engage the media, build awareness and work with them to harness political commitment;
- Bringing international pressure to bear, engaging political parties and building awareness;
- Building awareness in political parties, as they are often central to political decision-making.

Parliamentary action:

- *Speak out in parliament and publicly for MDG 5;*
- *Champion and identify other parliamentary champions who will lead the way on MDG 5;*
- *Build cross-party coalitions;*
- *Adopt a motion in parliament on MDG 5;*
- *Question government and call ministers to account for their global commitments;*
- *Hold briefings and hearings in parliament to convince and engage MPs and political leaders;*
- *Organize public events to sensitize the wider public and strengthen national commitment;*
- *Liaise regularly with constituents to educate them on MDG 5 and seek training to do that effectively;*
- *Organize field visits to facilities and projects in order to monitor the situation and evaluate initiatives.*

Pillar 2: Legislation

The conditions for success include:

- Support within parliament for safe motherhood;
- Common understanding of the issues and speaking the same language;
- Partnership and coordination with other actors (international organizations, civil society, donors) to enact legislation supporting maternal and child health. For instance, convince partner organizations like WHO, the United Nations and other partners to prioritize funding for projects on developing legislation related to maternal health.

Parliamentary action:

- *Identify one or several parliamentary committees to take the lead in parliament on legislating or reviewing legislation to promote maternal health;*
- *Hold hearings with government, civil society, the private sector and other actors to identify legislative gaps, challenges and solutions;*
- *Undertake a review of existing laws to address gender discrimination and eliminate legal obstacles that limit women's access to health care services;*
- *Work with national audit offices to monitor the implementation of legislation;*
- *Adopt legislation facilitating and supporting the work of midwives;*
- *Ensure that legislation passed complement other existing legal instruments and that MDG 5 concerns are streamlined adequately.*

Pillar 3: Financial Resourcing

The conditions for success include:

- *An adequate health budget: Within the national budget ensure that the health budget receives enough funding. Some mentioned that a minimum should be set, meaning for instance that the health budget should account for at least 6 per cent of the overall budget;*
- *Gender-sensitive budgets: This would facilitate tracking and increasing allocations related to maternal and newborn health, and to primary health care and referral.*
- *Support for micro-finance initiatives;*
- *A good health insurance system;*
- *Free health services for women and children;*
- *Use of taxation for additional resources. One example is the introduction of a 0.1% personal and corporate income tax to be allocated for expenditures aimed at enhancing mother and child care services or a 0.1% tax on advertising to be spent on education for future mothers.*

Parliamentary action:

- *Liaise or work with the budget/finance committee in parliament, paying particular attention to health issues and MDG 5;*
- *Question the government during the budget debate and make MDG 5 a budget priority;*
- *Hold hearings with women and health associations on needs and priorities prior to the budget debate in order to possibly make an impact on the budget;*
- *Request ministers to regularly report to parliament on the use of funds for MDG 5 so as to monitor work done;*
- *Ensure that national budgets are gender-sensitive; sensitize and inform MPs about gender-sensitive parliaments and train parliamentary staff;*
- *Ensure that the national budget process makes use of sex-disaggregated data;*
- *Organize an awareness-raising/media event on MDG 5 to increase pressure during the budget debate.*

Pillar 4: Health system

The conditions for success include:

- *Sufficient human resources: This includes adequate funding support, an appropriate mix of skills, the adoption of measures and initiatives to discourage migration and brain-drain and enhancing the working environment and conditions to retain staff;*
- *Quality care: This includes close parliamentary monitoring of the care services,*
- *availability of timely data and accreditation based on real evidence;*
- *Reproductive health rights: addressing early marriages, gender-based violence and other harmful practices, providing family planning services, and adolescent and youth services;*
- *Access to information and data: building the State's capacity to produce official data, making use of UN data, supporting the development of country-specific data, e.g. national statistics as well as maternal/prenatal reviews;*

- Training for health personnel;
- Availability of services: no or low fees for health services; services at the local level (rural, urban and urban slums) and a functioning infrastructure in order to facilitate access;
- Budget allocation: an adequate percentage of GDP allocated to the health system.

Parliamentary action:

- *Use parliamentary oversight mechanisms (oral and written questions to government, enquiries, hearings, parliamentary committee work) to ensure accountability and meet health objectives;*
- *During the budget process, pay particular attention to health allocations, ask questions and monitor allocated amounts and their effective use;*
- *Support sufficient funding to establish an independent national statistics institute; liaise with the United Nations and other sources to access data;*
- *Review legislation and start a debate in parliament on gender discrimination, and especially harmful traditional practices.*

Pillar 5: Education

The conditions for success include:

- A national strategic plan for education that identifies its means, objectives and targets;
- Budget allocation for education;
- Training of teachers and midwives;
- Cooperation with the mass media.

Parliamentary action:

- *Use parliamentary oversight mechanisms to regularly monitor and evaluate government work on education;*
- *Request sex-disaggregated data to closely monitor the situation of girls;*
- *During the budget process, pay particular attention to the education budget allocations, ask questions and monitor allocated amounts and their effective use;*
- *Organize events with the media to educate the public on maternal health issues;*
- *Engage with communities;*
- *Ensure that human rights and gender equality are part of the school curricula;*
- *Ensure that new members of parliament are educated and briefed on MDG 5; develop mentoring programmes to pass on the knowledge.*

Pillar 6: Cultural Practices

The conditions for success include:

- Media support: this would include using the media to expose harmful practices and launch open debates on cultural practices;
- Linking culture, human rights and legislation;
- Challenging harmful cultural practices; this would include a cultural-based approach through grass-roots organizations working for change;
- Financing grass-roots initiatives.

Parliamentary actions:

- *Raise awareness in constituencies and hold debates on harmful traditional practices;*
- *Debate harmful practices in parliament, within the framework of human rights standards and initiate legislation, if lacking;*
- *Promote the use of community advisers.*

Pillar 7: Partnerships

The conditions for success include:

- Common objectives;
- Mutual respect, including open-mindedness and mutually beneficial relationships;
- Identify the needs of different partners and create links through, for example, a focal point system;
- Adopt an inclusive approach and cross-level cooperation at the national, provincial and district levels;
- Information sharing.

Parliamentary action:

- *Build cross-party coalitions;*
- *Hold regular meetings with various partners (breakfast meetings with ministries; regular sessions with civil society organizations, etc);*
- *Engage male parliamentarians on MDG 5;*
- *Reach out to communities, grass-roots organizations and local partners;*
- *Invest in parliament's technical capacity to bridge the digital divide and facilitate communication.*