



The 3rd OECD World Forum on “Statistics, Knowledge and Policy”

Charting Progress, Building Visions, Improving Life

Busan, Korea - 27-30 October 2009

GLOBAL ADVOCACY AND ACCOUNTABILITY FOR MATERNAL, NEWBORN AND CHILD HEALTH: A NEEDED LINK TO PROGRESS TOWARDS MDGs 4&5.¹

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Progress towards MDG 5 has been up-to-now slow. However, some countries in particular in the Asian and Latin American regions have made substantial progress. While replicable interventions exist, political support for global and national programmes is essential.

There is a recent surge of political advocacy and interest in MDGs 4&5. Evidence on stagnant indicators for MDG 5 have triggered action. A High Level Task Force (HLTF) was set up in 2008 to propose innovative financing mechanisms to strengthen health systems to contribute to reach MDGs 4&5. A Global MNCH consensus was developed and positioned in the G8 communiqué in 2009. This was launched at a HLTF event at the UN General Assembly on Sept 23, 2009 and led to pledges for MNCH Programmes. Other initiatives include a Global Network of Leaders and the Maternal Mortality Campaign by Sarah Brown, and the H4 (WHO, UNFPA, UNICEF and the WB) . The Inter Parliamentary Union discussed MDGs 4&5 in 2008 and will do so at their 122nd Assembly in Bangkok in 2010.

The Partnership for Maternal, Newborn and Child Health has been central to these advocacy activities. It is, in addition, working through partners to promote two flows of action: (i) A Knowledge Management System on the *continuum of care*; and (ii) An Accountability Mechanism to track the use and impact of new funds for maternal, newborn and child health.