

# UNICEF report: Half a million women die from pregnancy complications each year

Oliver Richards  
20 January 2009

A report recently released by the United Nations Children's Fund (UNICEF), *The State of the World's Children 2009*, has found that women living in the least developed countries of the world are 300 times more likely to die as a result of childbirth or pregnancy-related complications than women living in the developed countries.

On the report's release, Ann M. Veneman, UNICEF executive director, stated, "Every year, more than half a million women die as a result of pregnancy or childbirth complications, including about 70,000 girls and young women aged 15 to 19."

Globally, about 10 million women have died since 1990 due to complications arising from pregnancy and childbirth (an average of 1,500 each day), while about 4 million newborns die each year within 28 days of their birth—a rate 14 times higher than those of industrialized countries.

Even as the number of deaths of children under five has been decreasing, dropping from 13 million in 1990 to 9.2 million in 2007, maternal deaths have not seen a comparable decline.

The global maternal mortality ratio was 430 deaths per 100,000 live births in 1990, but in 2005 this ratio had only declined to 400 per 100,000. By comparison, the maternal mortality ratio for industrialized countries remained static at about 8 deaths per 100,000 live births. In order to meet the UN Millennium Development Goals, global maternal mortality would have to decrease by 75 percent between 2005 and 2015.

The most recent figure from a UN inter-agency estimate shows that 536,000 women died in 2005 from complications related to pregnancy and childbirth, although the challenging task of measuring maternal mortality makes it difficult to provide a precise number.

What is more tragic is that about 80 percent of maternal

deaths could be prevented if the women had access to basic healthcare and maternity services.

Data from 2005 shows that maternal deaths are heavily concentrated in the least developed countries, with industrialized countries accounting for less than 1 percent (830 total) of all maternal deaths.

The majority of maternal deaths are concentrated in South Asia (187,000 or 35 percent) and West and Central Africa (162,000 or 30 percent). Eastern and Southern Africa made up 19 percent (103,000) of all maternal deaths.

The elevated rates of maternal deaths in West and Central Africa are partially related to the high fertility rates of the region (5.5 children in 2007), which increase the lifetime risk of maternal mortality.

The report also discusses the constellation of causes that result in maternal mortality.

Direct causes of death are generally due to obstetric complications (e.g., post-partum hemorrhage or eclampsia), which could be prevented if women had access to professional health care personnel, drugs and equipment.

Pregnancy and childbirth may also be exacerbated by a number of indirect factors, such as maternal anemia (affecting 50 percent of all pregnant women), infectious diseases (like malaria or HIV and AIDS), intestinal parasites and poor-quality diets. The latter will only further deteriorate as global food prices continue to rise.

The report notes that many of the women who survive pregnancy and childbirth still suffer from other maladies known as maternal morbidity. "For every woman who dies from causes related to pregnancy or childbirth, it is estimated that there are 20 others who suffer pregnancy-related illness or experience other severe consequences. The number is striking: An estimated 10 million women annually who survive their pregnancies experience such adverse outcomes."

For example, it is estimated that 75,000 women suffer from obstetric fistula each year, but receive no treatment. This condition results when prolonged pressure from the baby's head damages the birth canal where, as the report describes it, "holes open up and there is leakage from the bladder and/or the rectum into the vagina."

This, and other debilitating conditions such as uterine prolapse, depression, anemia, infertility, chronic infection and so on, can result in various domestic problems, including social exclusion and physical and mental abuse.

Neonatal mortality refers to deaths of newborns that occur within 28 days of the birth. The greatest risk to infants is during the first day of birth (between 25 and 45 percent of all neonatal deaths), while about 75 percent of neonatal deaths occur within the first week.

It is estimated that 3.7 million children fell victim to neonatal mortality in 2004. Similar to maternal mortality, neonatal mortality is heavily concentrated in South Asia and West and Central Africa.

Severe infections, asphyxia and preterm births account for 86 percent of all infant deaths globally.

The report points out that trained health care workers can largely prevent asphyxia (responsible for 23 percent of newborn deaths), while infections (36 percent of newborn deaths) can be prevented through clean delivery practices.

Preterm births, births that occur under 37 weeks of gestation, are responsible for 27 percent of newborn deaths, and increase the likelihood of low birth weight. Infants who survive these conditions often go on to suffer from disabilities such as cerebral palsy.

The report notes a number of underlying and basic causes of maternal and neonatal mortality and morbidity. These include "lack of education and knowledge, inadequate maternal and newborn health practices and care seeking, insufficient access to nutritional food and essential micronutrients, poor environmental health facilities and inadequate basic health-care services and limited access to maternity services...."

It identifies other basic causes, including poverty, social exclusion and gender discrimination. All of these causes, it must be noted, have their roots in the capitalist mode of production and the subsequent impoverishment of large proportions of the world's population.

The report also puts forward a number of proposals for decreasing maternal and neo-natal mortality and morbidity. First, is the creation of a supportive environment for women and children, which must include access to education, reducing poverty and gender

discrimination, and increasing participation in household and other decision-making processes.

UNICEF reports that education helps to reduce maternal and neo-natal mortality, because educated women are more likely to space out their births, delay marriage, immunize their children and be more informed about nutrition.

It is also essential, the report urges, to end the abuse, exploitation and violence against women, including the practices of child marriage and genital mutilation. While the practice of genital mutilation has declined, it is still estimated that some 70 million girls and women aged 15 to 49 have undergone the practice in the countries of Africa and the Middle East.

The report further encourages the participation of women in decision-making, the empowerment of women in general, and involving men and adolescent boys in maternal and newborn care.

The implementation of UNICEF's goals would undoubtedly reduce the death and suffering of mothers and children around the world. However, under conditions of growing global social inequality, which will be further exacerbated by the growing world financial crisis, funding and progressive measures to counter child and maternal mortality are highly unlikely to materialize. Governments, NGOs and charitable organizations will be cutting social programs, not expanding them.

In fact, the failure to keep up the pace to meet the UN Millennium Development Goals on a host of social issues indicates that conditions for vast numbers of the world's men, women and children will further deteriorate in the coming years.



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