

## International experts laud Canadian child and maternal health plan

Published at [www.cmaj.ca](http://www.cmaj.ca) on Apr. 29

Canada's proposed G8 child and maternal health plan may have ignited a Parliamentary brouhaha over its failure to support funding for abortion but it is also drawing favourable reviews from international health and academic experts.

In fact, researchers and health leaders in the field of child and maternal health in developing nations say that the rough outline for a Canadian strategy unveiled at the G8 meeting of development ministers in Halifax, Nova Scotia, amounts to a highly promising boost for evidence-based international health programs.

Canadian International Development Minister Bev Oda pledged at the conclusion of the G8 ministers meeting yesterday to promote a wide range of interventions across the continuum of care for both mothers and children, including training and support for frontline health workers; better nutrition and provision of micronutrients; treatment and prevention of diseases such as pneumonia, diarrhea, malaria and sepsis; screening and treatment for sexually transmitted diseases, including HIV/AIDS; proper medication; family planning; immunization; clean water and sanitation.

The G8 ministers agreed to a provisional framework within which to tackle these objectives, according to a summary of the Halifax meeting ([http://g8.gc.ca/wp-content/uploads/2010/04/G8-DEV-MINISTERIAL-CHAIR\\_S-SUMMARY-28-APRIL-2010-EN.pdf](http://g8.gc.ca/wp-content/uploads/2010/04/G8-DEV-MINISTERIAL-CHAIR_S-SUMMARY-28-APRIL-2010-EN.pdf)).

Although details on program implementation and funding are sparse, researchers addressing child and maternal health in poor countries, where an estimated 400 000 mothers and nine million children die annually from easily preventable causes, say that the framework sounds like a promising approach toward helping to achieve the Millennium Development Goal of sig-



Reuters/Edgard Garrido

A mother lies on the floor with her baby after giving birth at the Hospital Escuela in Tegucigalpa, Honduras.

nificantly reducing child and maternal deaths by the year 2015.

"The list of interventions is good, and relates well" to Millennium Development Goals, says Sue Horton, chair of global health economics at the University of Waterloo in Ontario.

Jean Chamberlain, executive director of Save the Mothers, a medical education program focused on maternal and child survival in Mukono, Uganda, concurs. "I applaud the focus on child and maternal health, which are inseparable," she says.

Dr. Henry B. Perry, an associate in the department of international health at the Johns Hopkins Bloomberg School of Public Health, in Baltimore, Maryland, says the Canadian strategy appears well grounded.

"The evidence indicates that health systems need to develop the capacity to work with communities to carry out routine home visits, to hold participatory women's groups, to provide community case management of serious childhood illness, and to provide out-

reach services from peripheral health facilities," Perry says. "These same approaches will greatly expand the effectiveness of programs to detect and treat HIV and tuberculosis and to expand access to family planning."

Caroline Riseboro, maternal health spokeswoman for World Vision, notes that an estimated 10 000 children died from pneumonia during the G8 ministers meeting "and that is only 19% of the total 50 000 that died while the development ministers met here in Halifax. We can no longer tolerate sacrificing women and children's lives while we debate ideologies. We're glad to see the side debates fizzling down, consensus growing and an understanding of the importance of such a long overdue rescue package for the world's most vulnerable."

Venkatesh Mannar, president of the Ottawa, Ontario-based Micronutrient Initiative, says the framework's focus on nutrition, and the integrated approach advocated by Canadian officials, is "the right way to go."

“We think the focus on vitamin A coverage that Canada leads with for 200–300 million kids is contributing to falling mortality,” Mannar says, adding that Canada now needs to continue working with the G8 to shape approaches to implementing its emerging strategy (*CMAJ* 2010. DOI:10.1503/cmaj.109-3246).

Mannar also recommends that Canada support *Scaling up Nutrition: A Framework for Action*, a plan developed by the Center for Global Development, the European Commission and the International Conference on Nutrition, the United Nations Standing Committee on Nutrition, USAID, UNICEF, the World Health Organization and the World Bank ([www.inffoundation.org/publications/policy-brief.htm](http://www.inffoundation.org/publications/policy-brief.htm)).

Chamberlain says it’s vital that the framework addresses a range of issues, and advocates that Canada should add

emergency obstetrical care to the framework’s list of interventions, as well involve a range of organizations in the delivery of programs.

“We want to move away from vertical programs which are not cost-effective and which cause duplication,” Horton advises. “A lot of work is being done by international agencies on cost-effective packages of services. These may require investment in primary care-level personnel. Delivery can involve both government and NGOs [nongovernmental organizations].”

Ron Labonte, research chair in globalization/health equity at the University of Ottawa, says that Canada must also respect commitments made in 2007 to implement the Paris Declaration on AID Effectiveness. “Key to this is increasing and making more predictable and long-term health aid to government budgets in ways that

respect recipient countries’ needs and planning, and that build its public systems rather than multiply the already bewildering number of competing and confusing individual health projects,” Labonte wrote in an email.

According to the summary of the Halifax meeting, the G8 ministers will request guidance from the World Health Organization, the United Nations Children’s Fund, the United Nations Population Fund, the World Food Programme and the World Bank to “develop a common set of concrete goals and associated indicators” and a “common methodology to determine the most effective and affordable basket of integrated interventions based on and adaptable to country-specific needs.” — Paul Christopher Webster, Toronto, Ont.

DOI:10.1503/cmaj.109-3250