

ADDING IT UP

Investing in Maternal and Newborn Care in the African Union



In recent decades, most African countries have increased the availability of sexual and reproductive health care, yet many people still lack access to these essential services. This fact sheet presents evidence as of 2019 on the need for, impact of and cost of fully investing in maternal and newborn care among women aged 15–49 in 53 African Union member states.

The content in this fact sheet relates to the Addis Ababa Declaration on Population and Development in Africa Beyond 2014, which addresses the need for improved maternal and newborn health. The declaration recommends that governments commit to eliminating preventable maternal and neonatal mortality, ensuring universal access to antenatal and postnatal care and family planning, and enacting policies that promote the rights of individuals and couples to decide freely the timing and spacing of their births (Articles 37 and 41).

Unmet need for services

- Of the 43 million women in African Union member states who give birth each year, many do not receive the essential components of maternal and newborn care recommended by the World Health Organization.
 - > 48% of these women have fewer than four antenatal care visits.
 - > 40% do not deliver their babies in a health facility.
 - > 68% of those who need care for medical complications during pregnancy and delivery do not receive it.

- In addition, 49% of newborns who need care for complications each year do not get it, and 1.1 million babies die in the first month of life.
- Adolescent women aged 15–19 face similarly large gaps in maternal care: Among those giving birth, 52% have fewer than four antenatal care visits, and 42% do not deliver in a health facility.
- Each year, 208,700 women die from complications of pregnancy and childbirth.
- Most maternal and newborn deaths could be prevented with adequate medical care.

Impact of expanding and improving care

- If all pregnant women and their newborns received care at internationally recommended standards,

the impact on newborn health would be dramatic.

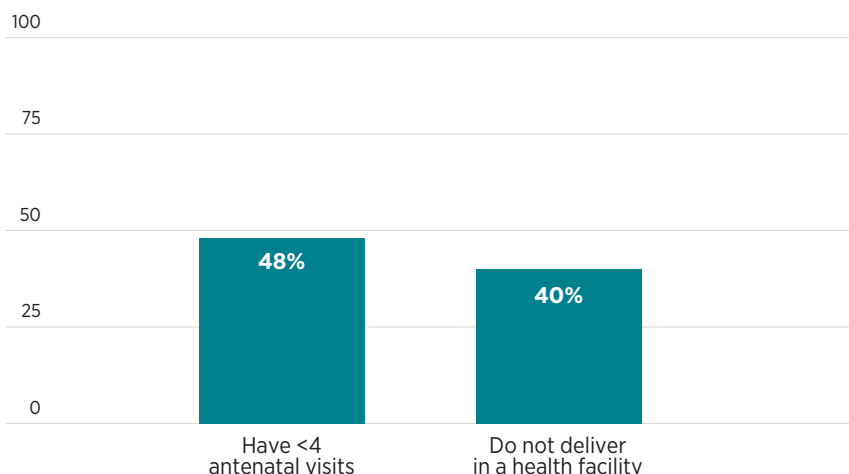
- > Newborn deaths would decline by 71% (from 1.1 million to 300,000) each year.
- > New HIV infections among babies aged six weeks and younger would drop by 87% (from 95,000 to 12,000).
- If all women wanting to avoid a pregnancy used modern contraceptives and received the recommended maternal health care, maternal deaths would decline by 64% (from 208,700 to 74,800).

Actions

African Union member states should mobilize resources—including domestically—for sexual and reproductive health, as well as for newborn, child and adolescent health,

In Africa, too few pregnant women receive the health care they need

% of women giving birth who:



through innovative financing mechanisms. Governments should also establish social protection mechanisms, including laws and policies guaranteeing access to essential maternal and newborn care for those who need it most, particularly adolescents. Member states should use accountability systems, including participation in Voluntary National Reviews as part of the Sustainable Development Goal monitoring process, to track progress on provision of and access to care.

Source

The information in this fact sheet can be found online in the appendix tables accompanying Sully EA et al., *Adding It Up: Investing in Sexual and Reproductive Health 2019*, New York: Guttmacher Institute, 2020, <https://doi.org/10.1363/2020.31593>. Data pertain to all member states of the African Union except Seychelles and the Sahrawi Arab Democratic Republic (Western Sahara).

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Find this fact sheet and related fact sheets in a five-part series, Investing in Sexual and Reproductive Health in the African Union, at <https://www.guttmacher.org/fact-sheet/investing-sexual-and-reproductive-health-african-union>.



Good reproductive health policy starts with credible research

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