



REPUBLIC OF ZAMBIA

SPEECH BY

**THE MINISTER OF COMMUNITY DEVELOPMENT AND SOCIAL
WELFARE**

HONOURABLE EMERINE KABANSI, MP

**AT THE OPENING CEREMONY OF THE
PARTNERSHIP FOR MATERNAL NEWBORN AND CHILD HEALTH
BOARD MEETING**

13TH OCTOBER, 2015

INTERCONTINENTAL HOTEL

SALUTATIONS

The Minister of Health, Honourable Joseph Kasonde

The Board Chair of the Partnership for Maternal Newborn and Child Health

Mrs. Gracia Machel

The UN Secretary General's Special Advisor Dr. Amina Mohammed

The Executive Director for the PMNCH

The Permanent Secretary MoH

The Permanent Secretary MCDSW

The Permanent Secretary Ministry of Home Affairs

Your Excellences from the United Nations Family

Your Excellences from the Diplomatic Corps

Members and associate members of the PMNCH Board

Senior Government Officials

Members of the Press

Distinguished Ladies and Gentlemen,

May I start by extending a warm welcome to the members of the Partnership for Maternal Newborn and Child Health (PMNCH) and in particular the Board Chairperson, Mrs. Gracia Machel and the Chief Executive, Dr. Robin Gorna. Welcome to our beautiful country Zambia and her warm people. g

I feel greatly honoured that the Partnership decided to have its board meeting here in Zambia. As we move into the post-2015 era of the Sustainable Development Goals that were launched a couple of weeks ago by the United Nations Secretary-General Ban Ki-moon, we all have an important role to play in making sure that the vision from the Millennium Development Goals (MDGs) for the Women and Children, are not sidelined, but further supported to improve women and children's health. The proposed SDG targets for health are a renewed commitment to the women and children of the world.

Ladies and gentlemen

Admittedly, we have scored great success for our women and children over the last couple of decades with accelerated improvement being achieved in the last few years.

Globally the Maternal Mortality Ratio has declined 45 percent over the past 24 years. In 1990 this figure was 380 per 100,000 live births compared to the MMR of 210 maternal deaths per 100,000 live births in 2013. The sad part of such a nice picture is the inequalities hidden; The MMR in developing countries is actually 14 times higher than in developed Countries. The under-five mortality has decreased by 53 percent, from 91 deaths per 1000 live births in 1990 to 43 in 2015. In sub-Saharan Africa, the region with the highest under-five mortality rate in the world, has

registered acceleration in reducing the under-five mortality. The neonatal mortality rate has shown the least decline among the child mortalities. Zambia has reduced the MMR to 398/100,000 which falls short of the MDG5 target of 162 per 100,000 live births. According to the UN child mortality estimates Zambia has attained her MDG4 target of 64 per 1000 live births. Let me take a moment of your time to CONGRATULATE the Zambian community and its valued partners and stakeholders for this achievement. Even though we can give ourselves a pat on the back for this achievement, any death is too much.

Ladies and Gentlemen

The SDGs offer yet another global, regional and national renewed commitment to our women and children. Zambia and the world at large still have a long way to go to meet the proposed SDG target of reducing maternal mortality to 70/100,000 by the year 2030, neonatal mortality to 12 deaths per 1000 live births and under-five mortality to at least 25 deaths per 1000 live births by 2030. It is quite saddening that even though we know what works to make a difference in women and children's health, the coverage of these proven effective interventions has been inadequate and additionally, there are inequalities in access to and utilization of these interventions even within countries. The teenager who gets pregnant has a higher chance of dying during birth and/or delivering a newborn with complications. I note with gladness that during this Board meeting, the Partnership will be endorsing a Youth and Adolescent constituency. Young people must be recognized as a crucial resource for realizing the Post-2015 Agenda. However, the harsh reality today is that millions of them continue to face poverty, unemployment, underemployment, inadequate

access to education and limited access to health, especially to reproductive health services and comprehensive sexuality education. Hearing the voice of the youth is an important and integral part of ensuring that women's and children's health improve in a sustainable manner.

In 2010 the United Nations' Secretary General's Global Strategy for Women's and Children's Health (MDG 4 and 5) was launched. The strategy acknowledged the multiple and specific roles and responsibilities that Governments and their partners play in improving the outcomes of women's and children's health making everyone responsible! To ensure global reporting, oversight and accountability framework which among others include:

- Recognizing that the foundation of accountability is national leadership and country ownership
- Called upon partners to collectively support improvements in national monitoring and evaluation data; using quality data for decision making; as well as supporting community – based surveillance, monitoring and reporting
- Called for improved reporting on global and national progress, donor disbursements and civil society contributions

The Partnership for MNCH offers a unique opportunity of improving collaboration among different stakeholders the UN Secretary-General probably had in mind when launching the Every Woman Every Child movement. The Partnership works across seven constituencies and I believe the eighth constituency will be endorsed in this meeting. These constituencies are from all walks of life including governments, private sector and the non-governmental organizations, donors and foundations,

multilateral organizations, academic, research and training institutions and healthcare professional associations. I believe that the board meeting will usher in a critical and vital constituency that has a great influence on women and children's health – THE YOUTH and ADOLESCENTS.

Ladies and gentlemen,

We should realize that we are shouldered with a great responsibility of making sure that we contribute to the improvement of health. The SDGs seek for a change in the way we implement our programmes. The Transformation Agenda that is being highlighted globally, and even in my own President's Speech as he opened Parliament seeks accountability first to ourselves and the people we serve. We need to change in the way we think and have a positive attitude that embraces diversity and puts people's interest before own. Challenges will always be part of our lives and how we manage these challenges determines the success of our interventions. Inadequate internal and external resources devoted to women and children; weak health systems, persisting inequalities to access and utilization of proven interventions all contribute towards inadequate coverage.

I do believe that with concerted effort, we can do more for our women and children in the SDGs era.....

- We need to maintain and accelerate further the momentum of achieving the new set SDG targets related to health and in particular women and children
- Increase focus on underserved areas e.g. (Adolescent Sexual and Reproductive health, Family planning, Emergency Obstetric Care, Newborn health, Equity, Universal health coverage, Women's and

Children's health in humanitarian settings, Early child development, Nutrition, Non communicable diseases in children)

- Increased actions to tackle underlying risk factors and determinants to improve health outcomes (e.g. education, gender equality, women empowerment, water and sanitation, indoor pollution)

Ladies and gentlemen

There are other opportunities for RMNCAH especially for the African region that we need to be aware of apart from the SDGs. These include:

- Common African Position (CAP) on the Post-2015 Development Agenda endorsed by the African Union Head of States in January 2014 rightly identifies women and children as key to meeting the development goals.
- **The Campaign on Accelerated Reduction Maternal Mortality Africa post 2015 focuses on** achieving the elimination of preventable maternal and child deaths by 2030.
- **WHO and the African Union Commission** commitments on Universal health coverage and ending preventable maternal and child deaths by 2030 (April 2014).
- **Agenda 2063 –The Africa we want** with 7 common aspirations including "An Africa whose development is people-driven, especially relying on the potential offered by its women and youth"

Lastly but not the least Ladies and gentlemen.

I would like to ~~end~~ end by saying something on the ~~eight~~ ^{eight} constituency

which is the constituency of the youth and Adolescents.