



Germany's contribution to the G8 Muskoka Initiative on Maternal, Newborn and Child Health

Progress report 2011 – 2015

1. Background: Achieving the international targets for maternal and child health required greater efforts

Between 1990 and 2015, maternal and child mortality fell by almost half globally. By 2010, however, it had become clear that the international community was not going to meet the targets set in the Millennium Development Goals (MDGs) for improving maternal and child health.

This is why in 2010 at Muskoka in Canada, the G8 heads of state and government agreed to make an additional five billion US dollars available for the period from 2011 to 2015. Germany made its main contribution to meeting its Muskoka obligation through the Initiative on Rights-based Family Planning and Maternal Health launched by the German Federal Ministry for Economic Cooperation and Development (BMZ).

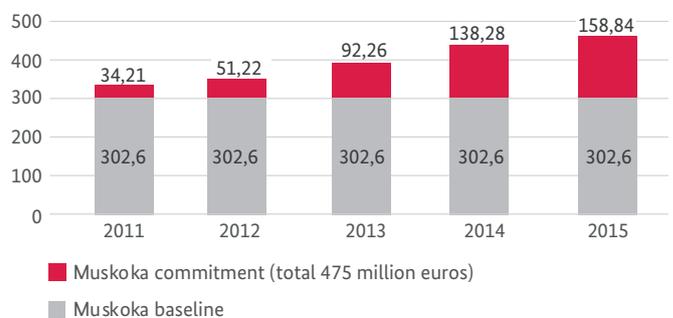
When the Muskoka Initiative ended in 2015, the international community agreed to continue pressing ahead with the unfinished business of ensuring maternal and child health through the Sustainable Development Goals (SDG). At the G7 Elmau Summit that same year, Germany reaffirmed its vital role as a partner for achieving these goals, indicating that it would continue to make at least 380 million euros a year available in the future.

2. Germany's contributions to the Muskoka Initiative

In Muskoka, Germany guaranteed that it would continue funding maternal and child health at the 2008 level. Germany's disbursement of 302.6 million euros in that year has served as a baseline. Germany also pledged to make available an additional amount of at least 400 million euros between 2011 and 2015.

Actual contributions exceeded the Muskoka pledge and Germany provided a total of 475 million euros in addition to baseline funds for maternal and child health (see Chart 1).

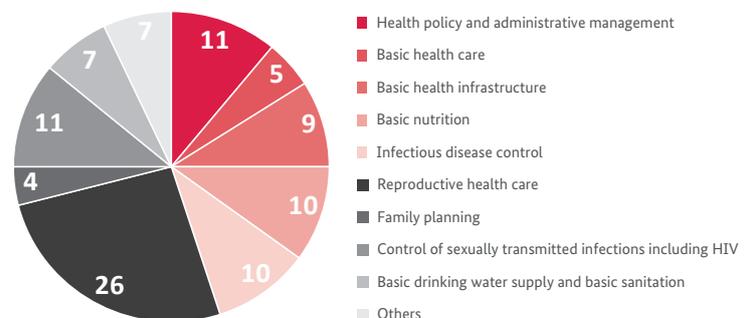
Chart 1: German disbursements for maternal and child health in development cooperation (in million euros)



From 2011 to 2015, German investment in maternal and child health amounted to a total of two billion euros. Fifty-six per cent of this involved bilateral funding, and 44 per cent was multilateral.

According to a method developed by the G8 states, investments in the health sector and in sectors beneficial to health, such as water, sanitation and food, are wholly or partially eligible as a contribution towards meeting the Muskoka commitments to improve maternal and child health. Chart 2 shows the distribution of Germany's eligible bilateral contributions by sub-sector.

Chart 2: German bilateral Muskoka disbursements by sub-sector, 2011-2015 (in per cent; total of 1.1 billion euros)



The largest share of eligible multilateral funding went to the Global Fund to Fight AIDS, Tuberculosis and Malaria (56 per cent), the World Bank Group (17 per cent), Gavi, the Vaccine Alliance (10 per cent) and the United Nations Population Fund (7 per cent).

3. The BMZ Initiative on Family Planning and Maternal Health

In 2011, the BMZ launched the Initiative on Rights-based Family Planning and Maternal Health to deliver on Germany's Muskoka commitments at the bilateral level. To implement this Initiative, the BMZ commissions primarily the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH and the KfW Development Bank (KfW).

The BMZ Initiative contributes to every pregnancy being wanted and every birth being attended by a skilled health professional in its partner countries. Access to modern contraceptives, comprehensive sexuality education, gender equality and access to professional health services are important strategies here. To date, the BMZ Initiative has supported 34 countries through bilateral or regional projects.

Focus I: Offering family planning choices for women, girls and couples

Germany works with partner countries to enable as many people as possible to choose freely how many children they have, and when they have them.

As one of the largest bilateral donors in sexual and reproductive health, the BMZ – through the KfW Development Bank – supplies its partner countries with products for family planning and for preventing sexually transmitted infections. German development cooperation thus helps women, girls and couples gain reliable access to a broad range of contraceptives, as well as education on how to use them.

During the period from 2011 to 2016, for example, the contraceptives distributed through German financial cooperation enabled more than 19 million couples in 20 partner countries to protect themselves against unintended pregnancy for one year.

The example of West Africa – Improved access to contraceptives

The member countries of the Economic Community of West African States are among those with the highest rates of population growth and maternal mortality worldwide. People here use considerably fewer modern means of contraception than is the case in northern or eastern Africa.



This is why a KfW-supported programme is assisting the West African Health Organisation (WAHO) in addressing financing gaps for family planning products. Health ministries submit national funding requests for contraceptives and family planning activities to WAHO. This way, WAHO enables central medical stores and non-governmental actors to procure and distribute additional contraceptives. This has contributed to an increase in modern contraceptive use among women in Benin, Guinea-Bissau and Niger, where rates of use more than doubled between 2010 and 2015.

Focus II: More expectant mothers are supported by a health professional when giving birth

The health of women and their newborns is largely dependent on the quality of obstetric care. This is why strengthening health services for mothers and newborns is a focus of the BMZ Initiative.

During the period from 2011 to 2016, the GIZ trained over 16,000 health professionals worldwide in midwifery skills through pre- or in-service training and mentoring programmes. From 2012 to 2016, the GIZ thus made a contribution to the more than 3.3 million professionally attended births in project regions in 19 partner countries.

Here the GIZ cooperates closely with partner governments, training institutions, associations of the health professions, the United Nations and other development partners.

The example of Tanzania – Lower neonatal mortality

In Tanzania, one third of deaths among children below five years of age occur among newborns in their first 28 days of life. This is mainly due to the fact that complications during birth are recognised and treated either too late, or not at all.

German development cooperation is therefore supporting the Tanzanian government in training over 1,700 birth attendants in treating newborns and responding to obstetric emergencies. Fourteen neonatal wards were supplied with medical equipment, and their staff trained to use it. As a result the number of newborns dying within the first seven days of life fell by 31 per cent – from 32 deaths per 1,000 live births in 2015 to 22 deaths in 2016.

Thanks to German support, more than 19 million couples were able to protect themselves against unintended pregnancy for one year.

Photo: © KfW-Bildarchiv/photothek.net

The example of Malawi – Improved obstetric care

Thanks to the support of German development cooperation actors and their Norwegian partner, 33 health facilities in Malawi are now well equipped to provide obstetric care. Since the launch of the project in 2012, more than 80,000 women have delivered safely.

Today, skilled birth attendants support all births in the health facilities receiving assistance. This improvement in the quality of health services guarantees a safe environment in which to give birth. Thanks to the financial support provided through German development cooperation, almost 90 per cent of the women who give birth at these health facilities now remain there for longer than 48 hours after delivery – a significant improvement on the few hours that used to be the norm. This greatly reduces the risk that complications for mother and child may result in loss of life.

These efforts appear to be producing results. Current data indicate that perinatal deaths at health facilities are declining.

Fokus III: Greater equality and participation for women and girls

In many places, women and girls cannot easily take the steps they need to protect their health.

For instance, women often have less money to access health services than men. At the same time, women and girls have a greater need for health care, in particular with regard to their sexual and reproductive health. This is why one of the priorities of German development cooperation work is to ensure that measures to strengthen universal health coverage also promote gender equality.

Germany is also committed to safeguarding health, social protection and inclusion for persons with disabilities. In its development cooperation with Cambodia, for instance, Germany is supporting the umbrella organisation for persons with disabilities in implementing a sound approach to sexual and reproductive health and rights for this group.

German development cooperation contributed to more than 3.3 million professionally supervised births between 2012 and 2016.

Photo: © GIZ/Smelty (2015)

Working with local authorities in four provinces, the partner organisation provides information on the rights of persons with disabilities and raises awareness on inclusion.

Focus IV: Health in fragile contexts

The health of mothers and children usually deteriorates dramatically in regions affected by violent conflict, displacement or natural disasters. German development cooperation supports projects which ensure that mothers and children also receive care in such settings.

The example of Iraq: Improved health care for refugees and their host communities

Since the onset of the Syrian crisis and the advance of the so-called Islamic State, around one million internally displaced persons and 250,000 Syrian refugees have fled to the autonomous Kurdish region in northern Iraq. This huge influx has overstretched the health care system there.

The GIZ built and equipped delivery rooms in two refugee camps in Dohuk province. Both provide basic emergency obstetric and neonatal care services around the clock for the 45,000 plus displaced persons and the inhabitants of the surrounding communities. Since May 2016, skilled providers have supported the delivery of more than 470 babies here.

Focus V: Global alliances for greater progress

In international forums and processes, Germany actively supports universal access to sexual and reproductive health services, and advocates for related rights. Together with strategic partners, Germany worked to incorporate these goals into the 2030 Agenda.

The BMZ and its partners host events such as the International Dialogue on Population and Sustainable Development. Here representatives from governments, civil society, the research community and the private sector can network and develop joint strategies. The political work of regional civil society networks has also been strengthened.



4. Improved universal health coverage

Germany's contributions under the Muskoka Initiative promote the sexual and reproductive health of women, girls and couples in partner countries. In addition, they strengthen health systems and help to achieve universal health coverage (UHC). In this context, Germany is using its influence to promote human rights in all sectors of cooperation, particularly for the benefit of underserved, marginalised and disadvantaged sections of the population.

The example of Cambodia : Social protection for disadvantaged sections of the population

KfW Development Bank has provided support to the Cambodian Ministry of Health in implementing a voucher system for reproductive health services in six provinces. This is enabling poor and disadvantaged women in particular to receive counselling, use modern means of contraception and access prevention and treatment services for cervical cancer. Since 2013, over 30,000 vouchers have been used for long-term contraceptives such as hormone implants and coils. German development cooperation has thus contributed to Cambodia becoming one of the few countries in the world where access to modern contraceptive methods among the poorest 20 per cent of the population is equal to that of wealthier population groups.

The voucher programme will end in December 2017. In the future, services previously covered by vouchers will be delivered and funded through the health equity fund, Cambodia's social health protection system for the poor. Germany and other donors will continue to support this system.

German development cooperation supports the participation of communities in the design and review of health programmes. Among other things, this can help improve transparency on the use of funds and thus increase accountability in the health sector.

In Kenya, for instance, Germany supported a project that worked closely with local civil society in examining the use of funds in the Kenyan health insurance scheme and county health management structures.

5. More women, children and young people are eating healthy diets

Investment in the health of women, children and youth can only be fully effective when good nutrition is guaranteed. Healthy and adequate nutrition promotes children's cognitive development, their performance at school and thus their career opportunities. Ultimately, this is in the interests of the economic and social development of society as a whole.

This is why German development cooperation supports people in Asia and Africa who are vulnerable to food insecurity. In 11 countries, for instance, one project provided 82,000 people between 2015 and January 2017 with training or counselling on nutritional issues. Emergency assistance measures to combat the effects of drought reached 75,000 people.

6. Improved access to safe water and sanitation

In many countries, contaminated water and poor sanitation adversely affect people's health. This often results in diarrhoeal diseases and malnutrition, which are significant causes of child mortality.

Between 2010 and 2015, the GIZ and KfW improved access to sanitation for 16 million people worldwide; together with their partners, they also provided 45 million people with access to clean water.

Published by Federal Ministry for Economic Cooperation and Development (BMZ)
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As at November 2017