

SPECIAL EVENT ON PHILANTHROPY AND THE GLOBAL PUBLIC HEALTH AGENDA

23 February 2009, United Nations, New York
Trusteeship Chamber,
3:00 p.m. – 6:00 p.m.

Ms. Ann Starrs, President, Family Care International and Co-Chair of the
Partnership for Maternal, Newborn and Child Health (PMNCH)

- The UNICEF and UNFPA speakers have provided an excellent overview of the global context for progress on women's and girls' health (and specifically maternal health). I'm going to address the broader context on what is being done now and what needs to be done about maternal health, and share ideas on how corporate/private philanthropy can play more of a role in bringing about solutions. (*Ad lib, based on previous speakers' comments.*)
- First, a bit of background on the problem. (*Ad lib, depending on how much of this is already covered by previous speakers. Be sure to highlight:*)
 - A discussion of "health outcomes of women and girls" *is* a discussion of maternal health – because complications of pregnancy/childbirth are the leading cause of death and disability for women in the developing world.
 - Scale of problem: half million women and girls every year, or one every minute; 4 million newborns, 3.3 million stillbirths. And, women's poor health and poverty is linked to many of the 9.7 million children who die each year.
 - These numbers illustrate the essential linkages between mothers (or future mothers), newborns, and their children – the "continuum of care" that is at the center of PMNCH's mission and work. There are a number – and the number is growing – of partnerships addressing health issues today; but PMNCH is the **only** one that focuses specifically on mothers and children.
 - Turning back to the focus of our discussion today, women and girls – I want to remind people that pregnancy is **not** a disease. Unlike many of the other causes of death and disability that consume the world's attention and gain the world's sympathy, pregnancy is something that women often want, even long for with all their being –and women's ability and willingness to go through pregnancy and childbirth is, in fact, essential to the human race. It is, therefore, even more of an obligation for society to do whatever it can to make that process a safe one.
- So what is or are the solutions?
 - First, technologies and interventions to prevent or treat the major causes of death during pregnancy and childbirth exist – and they are low-cost and, for the most part, simple to administer. Even very poor countries, such as Sri Lanka and Honduras, have brought down their maternal mortality rates dramatically by making these simple interventions widely available to pregnant women.

- So what is the problem? Why are women in the poorest countries in Africa up to 7,000 times more likely to die than their more fortunate sisters? On the most fundamental level, because those basic technologies and interventions aren't available to them, for a range of reasons – because health facilities don't have the staff and supplies they need, because women can't get to the health facilities on time, and because families and communities don't understand the risks of pregnancy and childbirth – and what needs to be done to address those risks. When those problems are addressed, and simple medicines, from contraceptives to iron tablets to antibiotics, can be provided to the women who need them, millions of lives can be saved.
- Achieving MDG 5 is not just a question of justice and equity – although those principles are more than enough reason to invest in achieving the goal. But saving women's lives is compelling also from a hard-nosed economic perspective – because globally, investing the \$5-7 billion that it will take to save the lives of mothers and their newborns returns \$15 billion in economic productivity. That is a rate of return that any corporate CEO would be proud of.
- So where does this leave the role of corporate and private philanthropy in solving the problem? I would argue that it has – should have, must have – an absolutely crucial role. I head an NGO – Family Care International – whose work focuses on maternal health, both on advocacy for greater global investment and on field work that helps health ministries build the national and local capacity to deliver those essential services. But I'm here today in my role as co-chair of the PMNCH. This unique partnership brings together 270 member organizations spanning the full range of the MNCH community – not just the governments of target and donor countries, but UN agencies, health care provider associations, academic/research institutions, leading foundations, and a broad range of international, national and local NGOs – behind advocacy and coordinated action to support progress on maternal, newborn, and child health. Government action is the key, but governments cannot solve this problem alone.
- You'll note that our Partnership's membership brings government and multilateral actors together with virtually all elements of civil society, with the notable exception of one – the private sector. And I think it's high time for that to change. We in the Partnership need to open ourselves up to the corporate world, and invite you in; and corporations – in their philanthropic work and as part of their efforts to connect responsibly to society and the communities in which they work – need to engage with this important issue. But why, and how?
- The 'why' is easy:
 - Because corporations have an interest in a healthy, stable society
 - Because the world that corporations work in is global, and increasingly flat – the problems of sub-Saharan Africa, of South Asia, of Latin America, are all of our problems
 - Because developing countries represent a potentially enormous market – but the ongoing loss of stability and productivity from maternal, newborn and child death prevents that potential from being realized
 - Because women are your customers, your clients, your workers.
 - Because your engagement will have a real impact.

- So... how can you most effectively engage on this issue? That is a bit more complicated, but only because every corporation, every philanthropy, has a unique set of concerns, interests, and resources to bring to the table. A company whose products or services focus on women or children has a natural connection to maternal and child health, and can help engage its customers, employees, and constituents with the problem as well. A company that produces its products, procures its raw materials, has affiliates or subsidiaries, or sells to markets in countries where women, infants and children are dying has a local platform for partnering with NGOs on work that can have a profound impact. Companies with local presence can partner with governments to help build capacity for health care delivery. But the key is to engage, and an important first step is to connect with us at the Partnership – because our reason for being is to create connections that enable cooperative, effective, high-impact action. Please stop by our theme table during the cocktail hour this evening and begin a dialogue with us.