

## UNITED NATIONS NATIONS UNIES

## **U.N. IN ACTION**

Release Date: April 2009 Programme No. 1178 Length: 3'47" Languages: English, French, Spanish, Russian

## ETHIOPIA: DANGER OF HOME BIRTHS

VIDEO	AUDIO
	(NATURAL SOUND)
	NARRATION
PREGNANT WOMAN	Every year, some 20,000 women die while
DELIVERING	giving birth in Ethiopia. (5")
SURGERY ROOM SHOTS	And another 400,000 face life-long disabilities
	from complications during pregnancy in this
	poor African Nation. (8")
SAMUNI AT HER HOUSE	Five weeks ago, 27-year-old Samuni Kitoh gave
WITH FAMILY	birth to a stillborn – her eighth child. She was
	lucky to survive. (8")
	SAMUNI: (Oromiffa) <b>F</b>
SAMUNI ON CAMERA	<i>"My husband thought that the heavy work I was</i>
	doing was the reason for the stillbirth." (5")
	NARRATION
WOMEN CARRYING HEAVY	In Ethiopia, it's common for women like Samuni
LOADS	to fetch heavy loads. (5")
SAMUNI'S HUSBAND	She and her husband are subsistence farmers.
ARRIVING HOME	They depend on their own crops to feed their

COLLECTING GRASS IN CORNFIELD/SORGHUM FIELD

AWASSA HOSPITAL DOCTOR & STAFF WORKING

DR. LULU ON CAMERA

family. Barely surviving off the land, they just can't afford the additional medical costs for a hospital delivery. So they rely on the traditional practice of home births. (17.5")

Dr. Lulu Alibechew, practicing at Awassa Hospital, believes that apart from costs, women resist hospitals because of their safety records. (9.5")

Two years ago, there were massive deaths because of a shortage of a critical drug that prevents hemorrhaging. (6")

<u>DR. LULU</u>: (English) **M** "There was no Oxytocin in the country and we lost a lot of mothers because of the lack of this drug." (5")

## <u>NARRATION</u>

WORKING WITH PREGNANT WOMEN, INJECTING OXYTOCIN IN DRIP BAG Hemorrhaging is the cause of 23 percent of all maternal deaths in Ethiopia. And Oxytocin is a life saving drug. Without it, this woman would have bled to death when her baby was trapped in her birth canal. (13")

SURGERY ROOM SHOTS To improve maternal health, the government of Ethiopia is determined to implement a primary health-care plan by 2010. In addition to providing clinics and hospitals with free drugs, the plan is also pushing for an increase in family planning and contraceptive says Minister of Health, Dr. Tedros Ghebreyesus. (19")

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DR. GHEBREYESUS ON CAMERA

SAMUNI & HUSBAND AT GRAVESITE

<u>GHEBREYESUS</u>: (English) M *"If the contraceptive prevalence increases, then mothers will have less labour and less risk."* (5.5")

Samuni can't get over the death of her last baby. She almost lost her life and is not willing to do it again. (6")

<u>SAMUNI</u>: (Oromiffa) **F** "I thought I was going to die." (2")

SAMUNI ON CAMERA

SAMUNI GOING TO CLINIC

HEALTH EXTENSION WORKERS

WAREHOUSE WITH SUPPLIES She took matters into her own hands by visiting a nearby clinic in Kofale, her hometown. After a demonstration, she finally decided to use contraceptives. This means that she must come every three months for new supplies. (20")

The United Nations Population Fund, UNFPA, and its partners gave 25 million dollars to the government to meet its contraceptive needs in support of maternal health. Dr. Monique Rakotomalala, Resident Representative in Ethiopia. (14.75")

RAKOTOMALALA:(English)FDR. RAKOTOMALALA ON"The coverage is for two years now. We'veCAMERAbought 25 million dollars of contraceptives,<br/>since the programem started in 2004."

NARRATION

NARRATION

	NARRATION
SAMUNI FEEDING	Samuni and others are learning that
CHILDREN OR TAKING	contraceptives and skilled care at a hospital or
CARE OF COWS	clinic could save lives. (7")
PUBLIC MARKET SHOTS	Ethiopia is striving to double its contraceptive
	prevalence rate to 60 percent. But more needs
	to be done to ensure a robust health force and
	adequate supplies are available to handle the
	2.6 million births that occur each year. (15")
UN LOGO	This report was prepared by Mary Ferreira for

the United Nations. (4)

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