

Protecting women's and children's health

Women's and children's health are linked

Child mortality and maternal mortality are inextricably linked. Countries with the highest child mortality rates also have a high burden of maternal deaths. Integrated programmes combining maternal, newborn, child and reproductive health services, as well as interventions against HIV/AIDS, malaria and other diseases can accelerate progress to achieving the Millennium Development Goals.

Immunisation accelerates progress towards reaching the Millennium Development Goals

With the direct support of the GAVI Alliance and its partners, 326 million additional children have been immunised and over five and a half million future deaths prevented.

The economic and social benefits of healthy, immunised children accrue across all the MDGs. Families are freed from the crippling costs of ill health, allowing them to break out of a cycle of poverty. Children are able to attend school more regularly. Immunisation improves their ability to learn, their physical strength and educational achievements. Women are relieved of the responsibility of caring for sick or disabled children, freeing their time for other activities. A mother confident that her children have a good chance of survival may be more likely to adopt family planning, which in turn exposes her to less risk of maternal death. And when mothers are healthy and thrive, children stand a better chance of survival, of getting schooling and health care.

Vaccines benefit the health of women and mothers

Since the launch of GAVI in 2000, the Alliance has helped countries to prevent more than five and a half million future deaths from hepatitis B, *Haemophilus influenzae* type b (Hib), measles, pertussis, pneumococcal disease, polio, rotavirus diarrhoea and yellow fever.

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Every Woman Every Child

With less than five years left to achieve the Millennium Development Goals, many countries are not on track to reach MDGs 4 and 5. The United Nations Secretary-General's Global Strategy for Women's and Children's Health calls for bold, coordinated action to accelerate progress. The GAVI Alliance has committed its support through the power of innovation: new vaccines against the leading childhood killers, pneumonia and diarrhoea, and HPV vaccines to protect women against cervical cancer; public-private partnerships to provide vaccines at affordable prices; and financing mechanisms that provide more money for health.

GAVI has also helped UNICEF support 33 countries in reaching more than 40 million women of reproductive age with two doses of vaccines that protect against maternal and neonatal tetanus.

GAVI is taking first steps to introduce human papillomavirus (HPV) and rubella vaccines that will bring more important benefits to women's and children's health.

80%
of congenital
rubella syndrome
cases occur
in GAVI eligible
countries.²

Human Papillomavirus vaccines

HPV vaccines are the first that protect against a women's cancer. Every year, more than 500,000 women develop cervical cancer and about 275,000 women die from the disease.¹ Over 85% of those deaths occur in developing countries where women often lack access to cancer screening and treatment services. Safe and effective HPV vaccines protect against the two HPV types (types 16 and 18) which cause about 70% of cervical cancer cases.

GAVI will invite eligible countries to apply for vaccine support once acceptable price commitments from manufacturers are secured. Countries which can show their ability to deliver HPV vaccines through successful demonstration projects, can apply for funding to support national introduction. Other countries can apply for funding to deploy demonstration projects. Nine countries are expected to apply for national introduction by 2015.

Rubella vaccines

Every year, 90,000 babies are born in GAVI countries with severe birth defects known as congenital rubella syndrome (CRS) because their mothers were infected with rubella during pregnancy. In November 2011, the GAVI Board decided to offer eligible countries rubella vaccine support. Following WHO guidelines, GAVI will build on the success of the accelerated measles control activities, by supporting the combined measles-rubella (MR) vaccine. Beginning in 2012, GAVI will fund catch-up campaigns of measles-rubella for countries which will then be required to immediately introduce MR vaccines into routine immunisation programmes.

Immunisation opens the door to integrated maternal and child health services

When a woman brings her child to a health facility for immunisation, she comes into contact with a health worker who performs a range of tasks including family planning and antenatal care, and is often a referral point for skilled birth attendance. The high coverage of routine immunisation services provides an important entry point for women to access an integrated package of maternal and child health services.

Girls and boys enjoy similar rates of immunisation

Overcoming the barriers that hinder women's access to health services is of critical importance to reaching the millions of children who remain unimmunised. Some of these barriers are related to social norms and cultural beliefs. As part of its gender policy, GAVI supported a review of gender-related barriers to immunisation. The study – conducted by WHO in collaboration with PATH – found no significant differences in immunisation coverage between girls and boys. However, the low status of women, especially the poor, negatively impacts access to immunisation services for their children. GAVI continues to work with countries to overcome gender and wealth inequities. Guidelines on country proposals call attention to the need to address social and gender-related barriers to access and delivery of health services. Countries are encouraged to disaggregate immunisation coverage data based on sex, as well as income and geographic differences, to help identify areas of separately low coverage.

Well-functioning health systems are critical to achieving the MDGs

A critical barrier to achieving the health MDGs is the underlying weakness of health systems. GAVI is responding to this challenge by supporting health system strengthening (HSS) so that countries are better geared to deliver immunisation and other health services. Through the Health Systems Funding Platform, GAVI's support to HSS is aligned to national health strategies and budgets of developing countries, with a particular focus on resolving constraints to delivering immunisation. The platform helps to lower transaction costs and better enables governments to deliver an integrated package of services across the health MDGs – maternal, newborn and child health as well as HIV/AIDS prevention and treatment, TB and malaria control.

¹ GLOBOCAN 2008, CANCER Incidence and Mortality Worldwide: IARC CancerBase No.10. Lyon, France: International Agency for Research on Cancer: 2010. Globocan.iarc.fr

² World Health Organization: WHO position paper, Rubella 2011

Information current as of February 2012

