

# FRANCE & THE MUSKOKA COMMITMENTS ON WOMEN'S AND CHILDREN'S HEALTH

Among the Millennium Development Goals (MDGs), the 4th (reduce child mortality) and 5th (reduce maternal mortality and improve access to reproductive health) are those for which results are the least advanced, despite progress made thanks to priority interventions with recognized effectiveness, including the presence of qualified personnel during childbirth, availability of and access to emergency obstetric care, access to family planning, and more generally, women empowerment and girls' education.

Each year, approximately 10 million children under five year-old die, out of 133 million live births. There are between 350,000 and 500,000 maternal deaths per year worldwide, 99% of which occur in poor countries.

France is highly committed to supporting children's and women's access to health and promoting sexual and reproductive rights. Millennium Development Goals 4 and 5 are central to its cooperation strategy.

During the Muskoka G8 Summit, the President of France announced an additional contribution of €500 million over the period 2011-2015 for MDGs 4 and 5, in addition to its annual commitment of €300 million. This contribution is implemented by the AFD (the French agency for development) and through international organizations working in the maternal and child health sectors.



## The context of the commitments on mothers and children

■ During the Muskoka Summit in June 2010, the G8 countries and their partners pledged €7 billion by 2015 to meet Millennium Development Goals 4 and 5. France will contribute €500 million over 5 years, in addition to its annual contribution of €300 million.

■ In September 2010, the United Nations Secretary-General launched the Global Strategy for Women's and Children's health, a political advocacy instrument to mobilize additional resources and countries, international organizations, the private sector, civil society, philanthropists and academics. The Strategy highlights the taking into account not only of maternal health but also of women's health as a whole.

■ In February 2011 during the Ouagadougou conference, France, its partners and nine West African countries (Benin, Burkina Faso, Côte d'Ivoire, Guinea, Mali, Mauritania, Niger, Senegal and Togo) called for enhanced action to support reproductive health and family planning in these countries.

The Muskoka Initiative constitutes a platform for best practices and exchange between different French and francophone operators on the ground, striving for complementarity and synergy.

## HEALTH: A FRENCH PRIORITY

Health is one of France's five priority sectors for development aid.

Assistance is geographically focused, and 60% of budget effort for French official development aid (ODA) is allocated to Africa.

## The method of following-up the commitments

■ For a better transparency, commitment follow-up will be based on the methodology drawn up during the G8 in consultation with the Organization for Economic Co-operation and Development (OECD) and the World Health Organization (WHO). The latter collates direct interventions for maternal and

child health, as well as contributions from targeted health programmes (particularly HIV/AIDS, malaria, and tuberculosis) and cross-cutting programmes (basic health services, human resources), but also interventions which indirectly contribute to improving health (i.e. water and sanitation, education).

■ In parallel and at the request of the United Nations Secretary-General, WHO set up a Commission on Information and Accountability for Women's and Children's Health, which has made a series of methodological recommendations to facilitate follow-up of commitments and measurement of progress whilst encouraging, in particular, the use of new information technology to improve health information systems in the southern countries.



## Implementing France's commitments

Sixteen African countries are considered priorities: Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Comoros, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Guinea, Madagascar, Mali, Mauritania, Niger, Senegal and Togo. Two crisis countries, Afghanistan and Haiti, are also included.

These commitments are fulfilled through different channels.

### The bilateral channel: 48 million euros per year



■ France is working in the interests of women's and children's health in the cross-border regions of Afghanistan, Pakistan and Tajikistan through a programme financed by the **Priority Solidarity Fund (PSF)** under the partnership with the **Aga Khan Development Network (AKDN)** agreed with the French Ministry of Foreign and European Affairs (MAEE). The commitment amounts up to **500,000 euros per year over four years, beginning in 2012.**

■ The AFD (the French agency for development) provides support for maternal, child and reproductive health. This funding must correspond fully to interventions aimed at improving the health of mothers and children on the basis of mutual accountability of all partners.

■ Thus, for example, in the Islamic Republic of Mauritania, a grant of 2.5 million euros is allocated to a project supporting extension and consolidation of the obstetrical package. As a major instrument of the Mauritanian obstetric health risk coverage policy, this micro insurance project aims to facilitate financial access to maternal and neonatal healthcare through the creation of a package cutting the cost for women by two thirds. It is also aimed at improving the quality of the maternal health offer with medical equipment, ambulances and training of personnel specialized in maternal health, including anaesthetist technicians and midwives.

### The multilateral channel

■ **Additional effort granted to the Global Fund and GAVI Alliance: €32.5 million per year.**

France is increasing its additional contribution to the Global Fund to Fight AIDS, Tuberculosis and Malaria (€60 million more per year; increase from €300 to €360 million). According to the method chosen by the G8 to follow up commitments, 46% of the Fund's budget contributes directly to achieving MDGs 4 and 5, i.e. **€27 million per year.**

A project funded by the PSF will allow the Global Alliance for Vaccines and Immunization (GAVI) to increase its work in priority countries: **€6 million in 2011, then €5.5 million per year from 2012 to 2015.**

### AFD IN MALI, WITH THE AGA KHAN FOUNDATION: THE EQUINUT PROJECT

The goal of this project is to reduce the prevalence of malnutrition in under-five children, by developing a new nutritional product based on improved traditional foods. Once developed in Mali, the Equinut product, free from intellectual property restrictions, is intended for wide use in the Sahel.

■ **A joint project with four United Nations agencies, financed from the PSF: €19 million per year.**

In this framework, France provides direct annual support of €19 million to four agencies: WHO, United Nations Population Fund (UNFPA), United Nations Children's Fund (UNICEF), and UN Women.

Partnership with the four United Nations agencies, through the choice of its actions and the involvement of UN Women, demonstrates France's commitment to the rights of women and children and the importance of girls' education.

The four agencies develop their programmes within a joint framework of coordinated activities: integrated treatment of childhood diseases, vaccination, mother-child nutrition, follow-up of pregnancies, births and the postnatal period, birthing intervals and prevention of unwanted pregnancies.

**WHO** has a PSF of a total sum of **€4.5 million** per year for health professionals and medicines policy, to develop the regulatory aspects of family planning, and for care of mothers and integrated care for children.

**UNFPA** receives **€5 million** per year, with actions particularly targeted at reproductive health.

**€1 million** is allocated to **UN Women**, which focuses on the themes of gender for this whole partnership and plays a cross-cutting role in the promotion of women's rights.

The budget allocated to **UNICEF** is of **€8.5 million**, €800,000 of which is allocated to a support component of the Harmonization for Health in Africa (HHA) group.

### FOR FURTHER INFORMATION

WHO

[www.who.int/eng](http://www.who.int/eng)

UNFPA

[www.unfpa.org](http://www.unfpa.org)

UNICEF

[www.unicef.fr](http://www.unicef.fr)

AFD

(French agency for development)

[www.afd.fr/lang/en/home](http://www.afd.fr/lang/en/home)

French Ministry of Foreign and European Affairs

[www.diplomatie.gouv.fr/fr/enjeux-internationaux/aide-au-developpement-et/sante](http://www.diplomatie.gouv.fr/fr/enjeux-internationaux/aide-au-developpement-et/sante)

GAVI Alliance

[www.gavialliance.org](http://www.gavialliance.org)

Global Fund

[www.theglobalfund.org](http://www.theglobalfund.org)