

Nyovani Madise
Session III: Health, Mortality and Older
Persons

UN Expert Group Meeting for Review of
ICPDPoA and Review of the 2030 Agenda
1-2 November, New York

Assignment

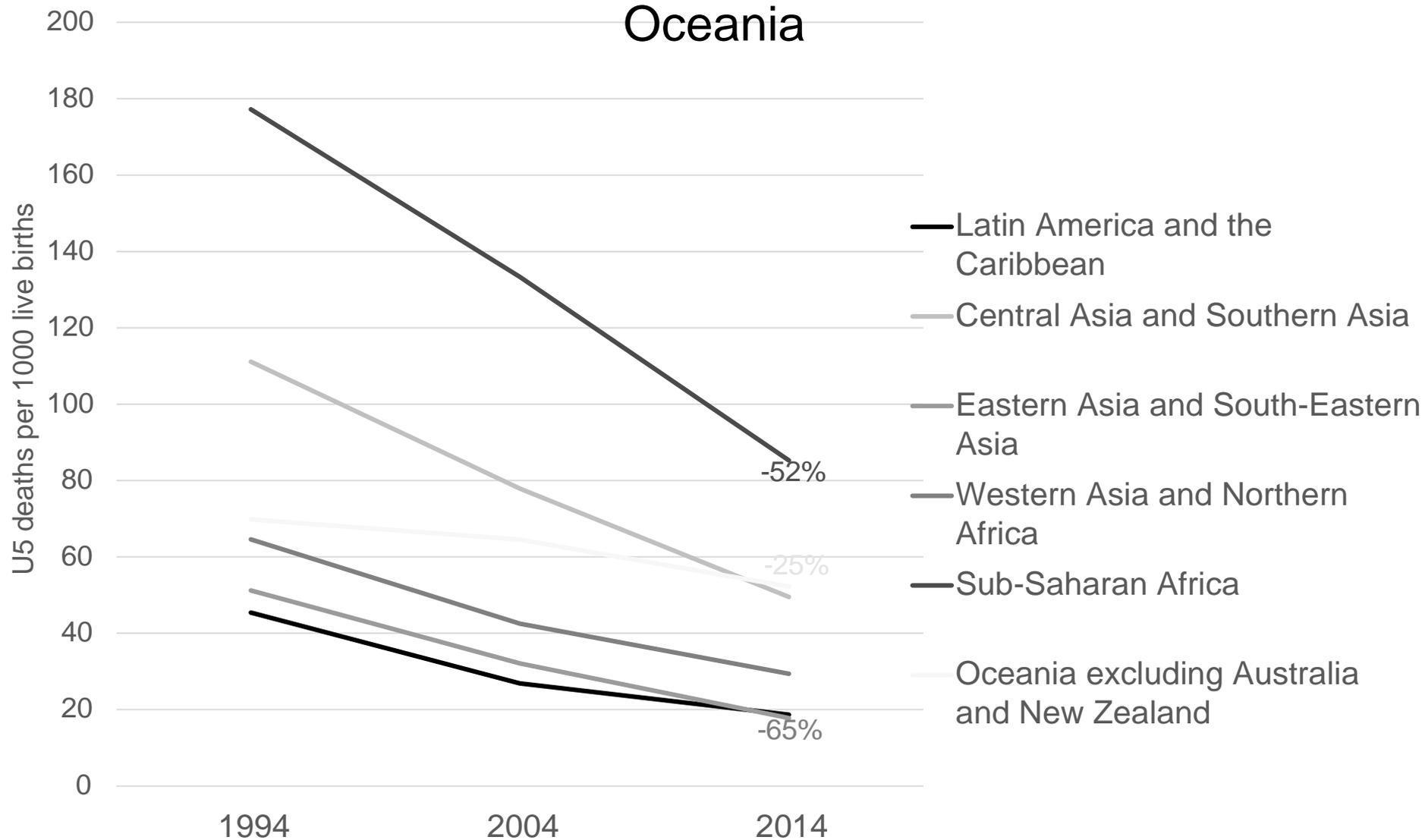
- Progress since ICPD in selected health areas
- Future challenges
- Knowledge gaps
- Practical recommendations

Preamble

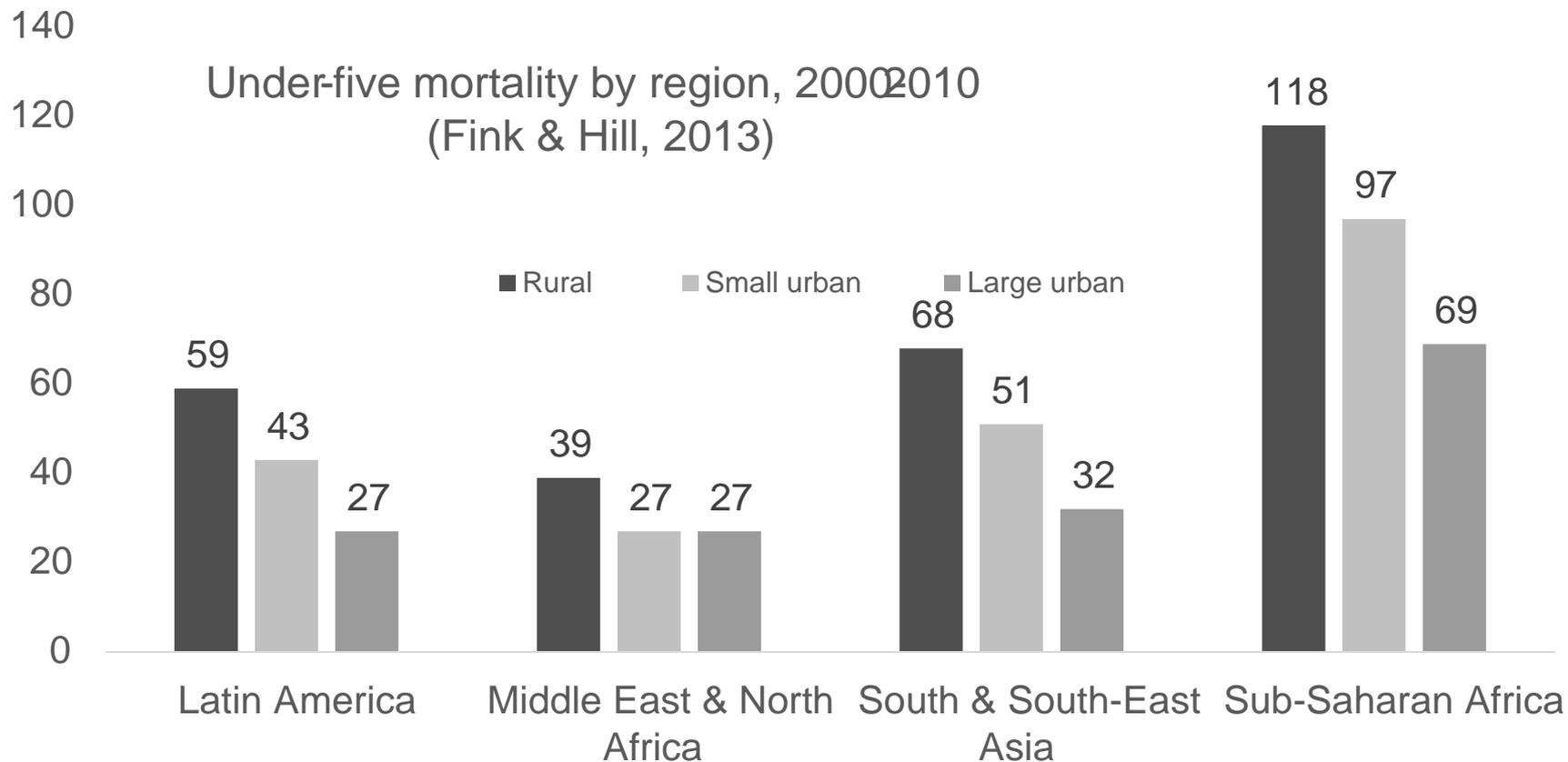
- Extreme poverty will be concentrated in the Africa region
- Urban poverty: Growth of large cities in Asia, Africa
- Population growth mismatched with growth of healthcare and other services

Challenge 1: Child Survival

Under-five mortality has fallen steadily between 1994-2014, with reductions of 50% or more except in Oceania



Strong urban-rural differentials in under-five mortality still persist



We make research evidence matter in African-driven development

Gaps

- Interventions to reduce neonatal mortality
Address low birth weight,
Pre-conception and pregnancy nutrition,
- Unfinished agenda to increase access to skilled birth attendants
- Urban-urban differentials— urban poor often neglected

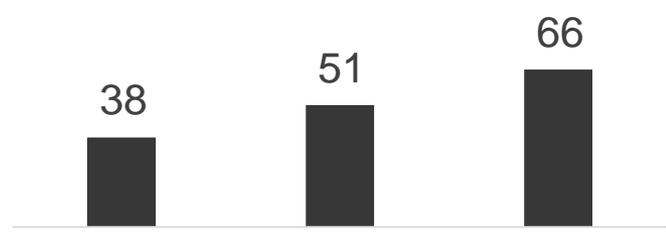
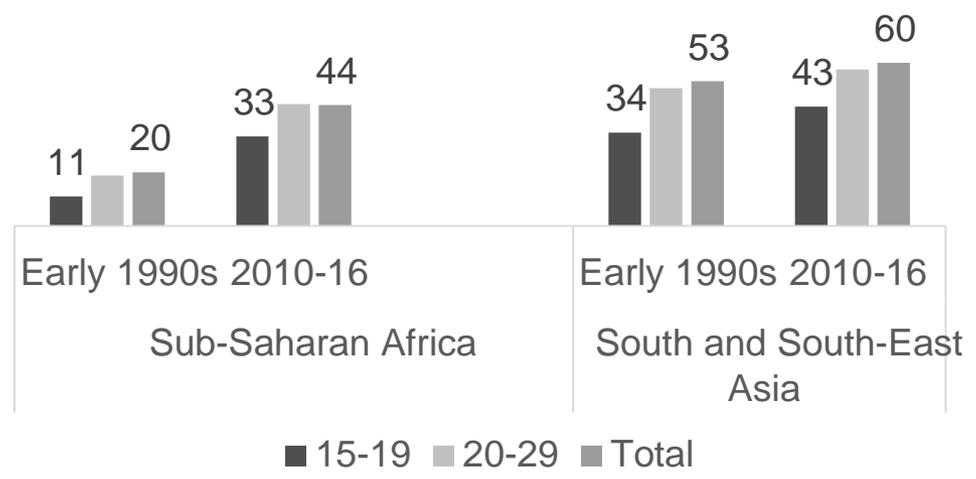
If we improve healthcare and economic prospects, we can eliminate urban-urban and urban-rural differentials in child survival

(Bocquieret al. 2011)

Challenge 2: Reproductive Health and Family planning

We make research evidence matter in African-

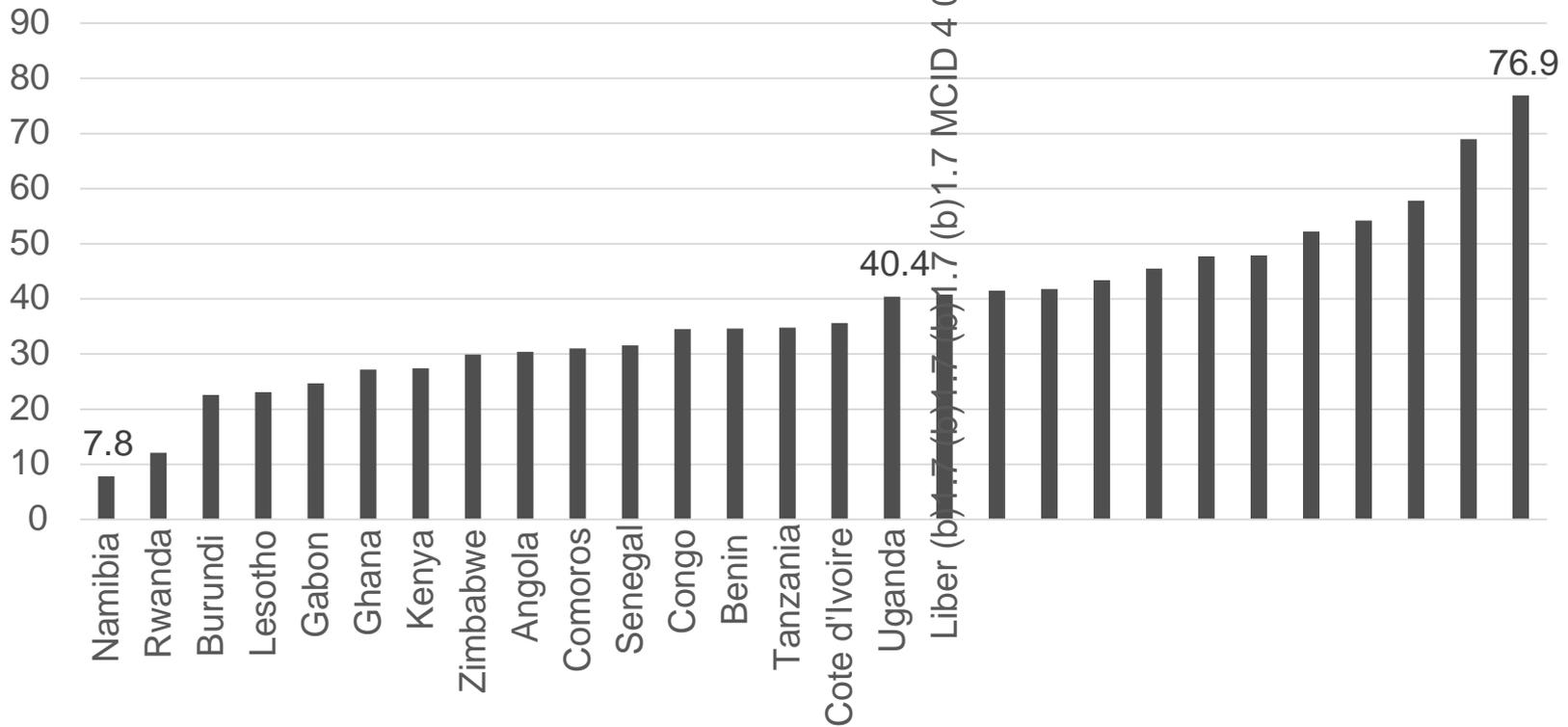
Percentage demand satisfied by modern methods of contraception among young women by time period



Africa's youthful population demand for SRHR services including family planning will increase. But benefit will outweigh costs.

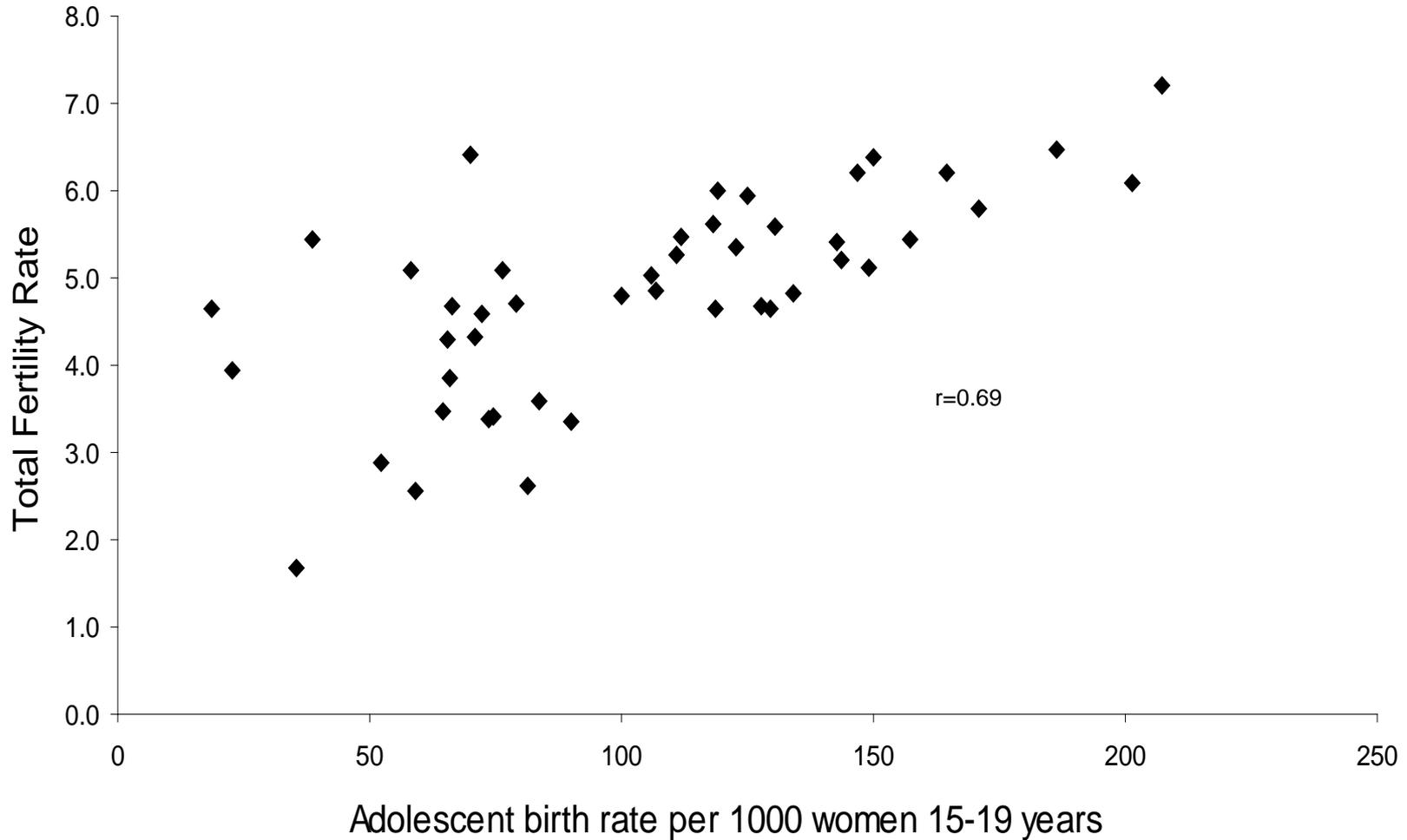
Challenge 3: Harmful, unethical practices affecting gender equality and SRHR

High rates of child marriages in LMIC



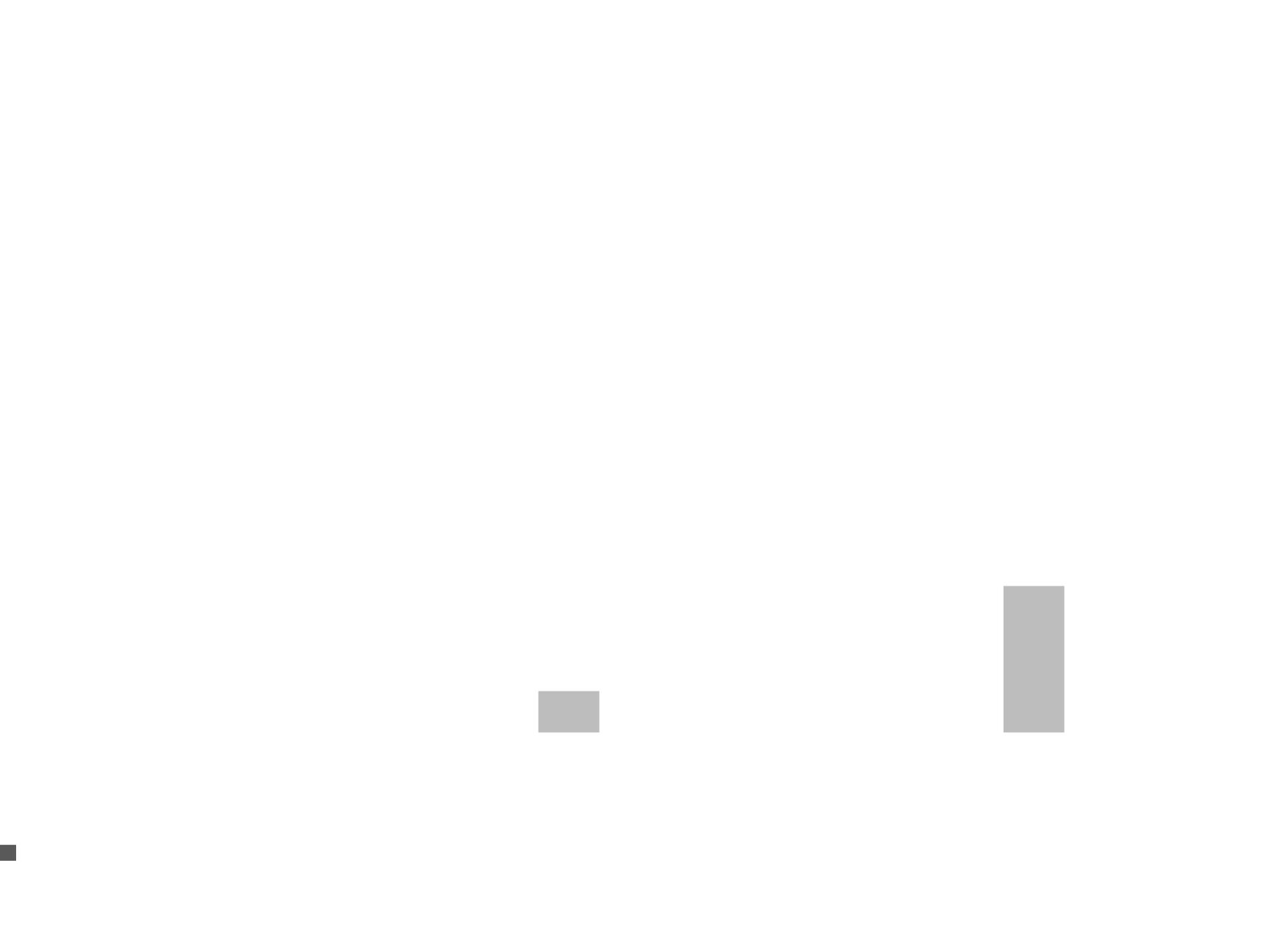
We make research evidence matter in African

Clear link between early childbearing and high achieved fertility in Africa



We make research evidence matter in African-driven development

HIV prevalence much higher in urban slums than other areas
Example, Kenya (2000-2008).



Concluding remarks

- Political commitment to SRHR and family planning is donor dependent
- Progress in SRHR least among adolescents and sexually unmarried
- Growth or urban poverty erosion of gains in child survival, SRHR
- Harmful practices still persist effects on gender equality and health
- Breaking cultural and religious barriers

Thank you