

Maternal Mortality: A Silent Genocide

On International Women's Day, Annie Raja, General Secretary of the National Federation of Indian Women and a senior women's movement leader in India, reflects on the status of the fifth Millennium Development Goal.

In September 2000, 189 world leaders committed their nations to the Millennium Declaration and the Millennium Development Goals, which include improving maternal health and thereby bringing down the rate of untimely death of young mothers by three quarters between 1990 and 2015.



In India today, we have a female 'Indian Idol'. For the first time in the history of independent India, we have a woman President. More than a third of the Three Tier Panchayats, the system of governance at the village level, are headed by women. India is world famous in medical tourism. It is the destination of the West and the East for cheaper treatments and surrogate mothers. Yet one woman dies of preventable causes related to pregnancy and child birth every six minutes.

Where does it go wrong and how has it gone wrong? Has the system failed us or have we failed the system? These are some of the questions that should be asked by everyone in this country on International Women's Day.

Paul Hunt, the UN Special Rapporteur on the Right to Health, has said that each preventable maternal death is a fundamental human rights violation. India has experimented with many schemes and announced many policies, from Child Survival and Safe Motherhood in the 1990's to the National Rural Health Mission in 2006, to tackle this issue. Despite all these schemes, only 17% of all deliveries are in a hospital or assisted by a nurse or health worker at home.

Acceptance of neo-liberal economic policies as a one-point formula to solve any issue by successive governments has worsened the already weak health care system. Unfortunately, even the eleventh five-year plan continues to echo the mantra of public- private partnership in this sector. It is a herculean feat for those 80% of the people living on less than a dollar each day to access health care. India recently witnessed an unprecedented number of suicides by farmers and poor people because of indebtedness. It should be noted with utmost seriousness that the major cause of indebtedness of the common person in this country is health care expenditure. Household out-of pocket expenditures in India constitute 69% of overall health care expenditures.

It is interesting to note that delivery in government institutions has now declined by 5.5% to 18.5%. Most surprisingly, it is the women in the more privileged states which have rejected government institutions the most (the decline in the number of women delivering in government institutions in Andhra Pradesh, Kerala, Karnataka, Maharashtra and Tamil Nadu are 9.8%, 28.9%, 10.2 %, 9.1 % and 15.3 %, respectively). This points to a cruel reality that the public health system, which was once the sole source of health care for around 80% of the population, especially for the women of

this country, can no longer provide free or affordable treatment and quality and timely care to needy people.

Access to public health care systems is very minimal. Many women die because of the delay in getting medical assistance. By the time a woman with pregnancy-related or childbirth complications reaches a primary hospital, she will have lost crucial amounts of blood, leaving very little chance for survival. Considering that around 80% of India's population is in villages, many more health centers are needed.

Lack of availability of contraceptives, as well as early marriage, have also added to the high level of maternal mortality in India. Seventy percent of couples who want contraception do not get it. The 2001 census shows that there were around 300,000 married girls who become mothers before the age of 15. But the major reason for the high maternal mortality rate is the widespread prevalence of anaemia among women. According to the recent NFHS-3 study, more than 60% of women aged 18-45 are victims of anaemia. The Janani Suraksha Yojana scheme, which aims to reduce the overall maternal mortality rate and increase institutional deliveries under the National Rural Health Mission, is nothing but crying over spilt milk. Structural adjustments have destroyed the Public Distribution System (PDS) of this country. People were able to get almost every essential commodity through the PDS. It satisfied a major portion of the nutritional needs of poor people. But the withdrawal from this area by the successive Central Governments and the cutting down of the food subsidy at the insistence of international financial institutions snatched away the right of the people to have nutritional food. Uncontrolled price rises and inflation have also created a very grave situation.

What is to be done?

The duty of any government is to ensure at least basic services like health, education and employment for its people. In India, because of the strong preference for sons, girls are being denied their rights. The budgetary allocation for education and health indicates that the Central Government is satisfied with false promises. A country with more than 90% of its working population in the unorganized sector spends just over 1% of its GDP on health care. Reducing the drop-out rates in school, especially amongst girls, will be a big step towards women's empowerment. This will help in solving the issue of high maternal mortality in India to a great extent. Women should be able to assert control over their bodies and have quality lives.

The government should strengthen the quality of the public health system. Accessibility should also be increased. Instead of promoting private accredited hospitals for service delivery, the government should invest adequately in the improvement of infrastructure in government hospitals. It should also increase the budgetary allocation so that doctors and other paramedical staff are paid well, which will in turn encourage them to remain in the public sector.

Transparency and accountability can prevent widespread corruption in service delivery. All-around empowerment of women, especially political empowerment, is the urgent need of the hour. Women's voices and concerns should be reflected in decision making processes and forums. The involvement of genuine civil society organizations with a mass base and commitment is important for the success of any program.

India has succeeded marginally in bringing the issue of maternal mortality, the silent genocide, to the mainstream. But achieving the fifth Millennium Development Goal by 2015 is a distant dream for India. It is a society which does not ponder seriously the death of a young woman because of pregnancy-related or childbirth complications. Many prefer to use god's anger as the reason for death rather than the non-availability or failure of medical care.

Ensuring women's health, education and employment should be treated as non-negotiable if we are to achieve the Millennium Development Goals by 2015.