



IMPROVING MATERNAL HEALTH THROUGH EDUCATION

Safe Motherhood Is a Necessity

BY RITA LUTHRA

Education improves health, while health improves learning potential. Education and health complement, enhance and support each other; together, they serve as the foundation for a better world. To be able to read, write and calculate has been acknowledged as a human right. However, more than 100 million children are still deprived of access to primary education and fewer than half of all children worldwide participate in early childhood programmes.

Gender equality, including in education, is a condition for development. Schooling in itself has been a powerful tool to influence health, and its impact is clearly seen in maternal and child health benefits. Literate women tend to marry later and are more likely to use family planning methods. Mothers with primary education tend to take better care of their children and are more likely to seek medical care, such as immunization, than those who lack schooling. The connection between education, health and earning capacity is better understood. Ensuring that our surroundings are conducive to good health means directing efforts at all levels, within and between all sectors of society. In so doing, we can make healthier choices and lay the foundations for true social and economic development.

Every year, 529,000 girls and women die at childbirth. Over 300 million women worldwide suffer from either short- or long-term complications arising from pregnancy or childbirth, with around 20 million new cases every year. Most of these deaths and disabilities are preventable. The Millennium Development Goals (MDGs), which are very simple yet powerful, could change the world. The MDGs have become the yardstick for progress among Governments and international organizations, to measure progress, shift budget priorities and institute reforms to improve human development worldwide. The United Nations is mobilizing its resources with partners in an unprecedented manner in support of the MDGs, which set the terms of a globalization driven not by the interests of the strong, but managed in the interests of the poor. These Goals are attainable, provided countries of the North and the South work together. "Health for All" and "Education for All" are expressions of the UN

commitment to health and education.

The healthy future of society depends on the health of today's children and their mothers, who are guardians of that future. Because the MDGs are inseparably linked, they must be achieved concurrently. Poor diet impairs learning and development. Young people need to be healthy in order to attend school regularly and take advantage of the opportunities provided by schools. Global partnership in women's health care is therefore a necessity, not a luxury. Unwanted and teen pregnancies are challenging issues for both industrialized and developing countries. Risks in every pregnancy and childbirth exist, and lifetime risks depend on how many times a woman gets pregnant. In addition, an unwanted or unplanned pregnancy may take place at the wrong time. From a health and social point of view, it may occur at the least optimal period for the mother and child.

Health-promoting schools. If we consider what it takes to create health, the school becomes an ideal setting for action. Schools can help young people acquire the basic skills needed to create health. These so-called life skills include decision-making, problem-solving, critical-thinking, communication, self-assessment and coping strategies. People with such skills are more likely to adopt a healthy lifestyle. Each new generation of children faces health challenges, but those being dealt with by today's youth seem particularly daunting. Children at an early age are confronted by situations that require decision-making skills for preventive action.

Adolescents find themselves under strong peer pressure to engage in highly risky behaviour, which can have serious implications on their lives. The spread of HIV/AIDS among adolescents is a more recent but growing phenomenon, while the traditional problem of sexually transmitted diseases (STDs) continues to increase. Some of the most important concepts in the area of reproductive and sexual health include: respect for others, especially the opposite sex; self-esteem; the possibility of family planning and understanding that children are ideally born of a conscious decision by loving and

*Ibanda hospital, Uganda, August 2007.
A mother holds her child who is suffering from malaria.*



Yei, Sudan, September 2005.
Children study English in school.

UNHCR PHOTO: M. PEARSON

responsible parents; the importance of postponing the first pregnancy; and the ability to withstand peer pressure.

Just as physical health creates an image of strength and vitality, mental health should be associated with strength of the mind and vitality in human interaction when dealing with the challenges of everyday life. As witnessed by the extent of mental health problems shared by children and adults alike, the “how to” of life is often a rather weak component of human competence. Education in life skills enables children to protect and promote their own health and well-being. Teaching methods therefore need to be interactive for learning these skills rather than just acquiring knowledge. When schools are health-promoting, a major improvement is anticipated in the mental health status of children and the adults that they will become. In those circumstances, “mental health” should lose its negative connotation, and the real significance of mental well-being for human societies will be acknowledged.

The road to safe motherhood. Women die in the prime of life, at a time when they should be experiencing fulfilment and joy. They have a right to safe motherhood. Midwives and obstetricians have an indispensable role to play in making motherhood safe. Maternal mortality is not an academic subject of numbers and words; it is about people in deep distress. Women should be provided with access to community-based maternity services during pregnancy, as well as during and after delivery. Immediate and effective professional care during and after labour and delivery can make a life-and-death difference for mothers and their newborn children. Each and every mother or newborn needs skilled maternal and neonatal care—care that is close to where and how people live and to their birthing culture, but at the same time safe and administered by a skilled professional able to act immediately when unpredictable complications occur. The challenge that remains is therefore not technological but strategic and organizational.

because of cultural practices, such as seclusion, or because decision-making is the responsibility of other family members. Lack of access to and use of essential obstetric services is a crucial factor that contributes to high maternal mortality.

Skilled attendants mean successful outcomes. A focus on maternal and newborn health, including psychosocial support, should be the centre of policy and action. A strong and vital health workforce is an investment in health for today and the future. The ultimate goal is to have a workforce that can guarantee universal access to health care for all citizens in every country. Continuing medical education in women’s health and health care is beneficial to both donor and recipient countries and can engage public and private stakeholders towards common goals. Internet classrooms in obstetrics and gynecology have potential to manage knowledge and can create an environment in which knowledge flows easily and is readily available, thus reducing the chasm between what is known and what is done in health, the so-called “know-do gap”. These continuing medical education initiatives in women’s health strengthen and reflect sustained high-level political involvement and can support the scale-up of programmes within and across sectors. Decisions made in one sphere affect those in the other. ❖

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